

Health Promotion Strategies: Taking a best practices approach

Week 2 Decision-making in Health Promotion

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Class agenda

1. Assigning chapters from Glanz et al. (2008)
2. Visual representation of "HP Practice"
3. Decision-making in health promotion practice
4. Preparing for next week's class

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Visual representation of "HP practice"

1. Students' representations
2. What we've learned about
 - The use/value of visual representations
 - HP practice

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Mind map: "HP practice" (Goodstadt: using MS Visio)



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INTEGRATION OF HEALTH PROMOTION PRACTICE

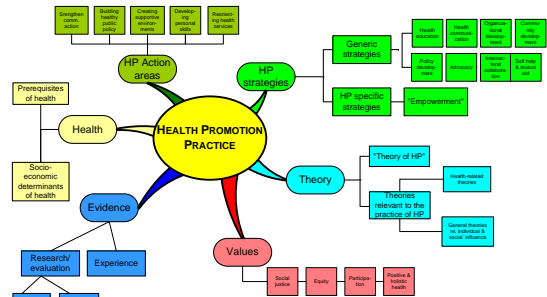


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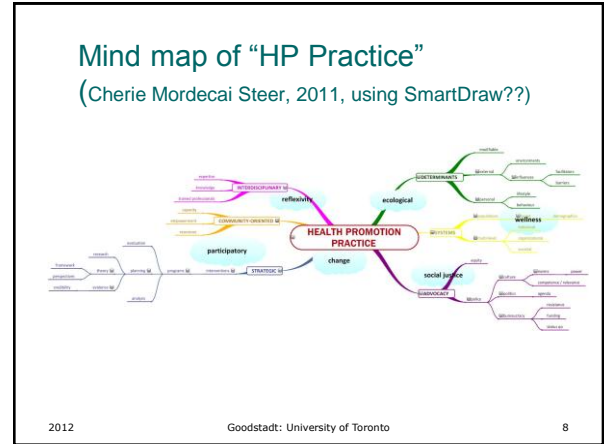
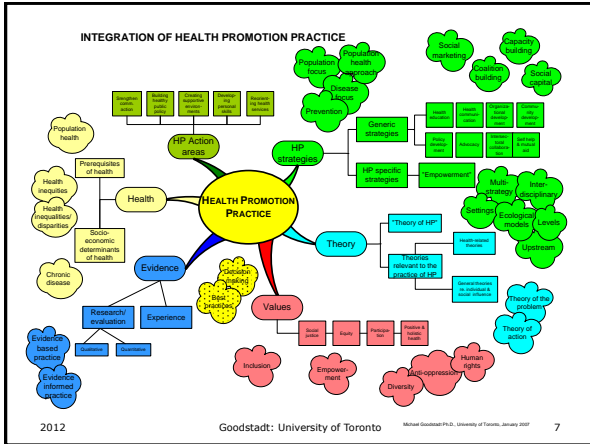
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What did we learn about the uses/value of visual representations?

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The uses of logic models in HP

1. Definition, uses
2. Reviewing general logic models
3. Elaborated logic models
4. Examples of logic models

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Logic models: another form of visual representation
(favoured by the Intervention Mapping Approach)

Definition: A visual representation of how an intervention's components (i.e., inputs, activities, outputs, outcomes & impacts) are related to one another

Uses:

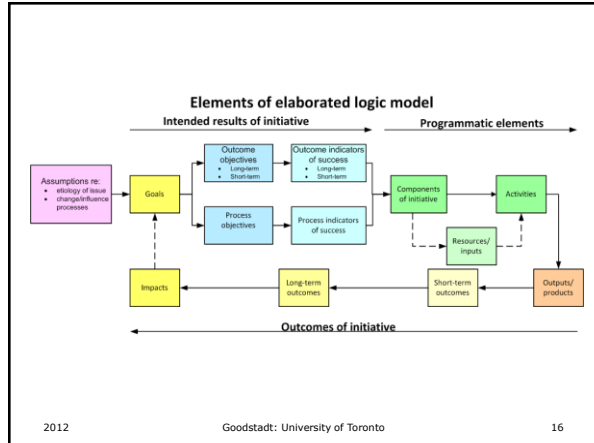
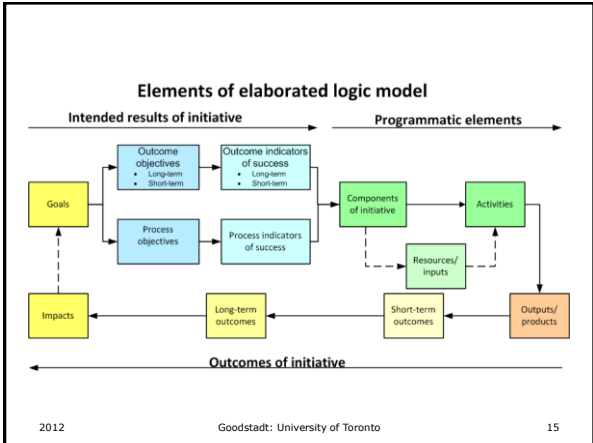
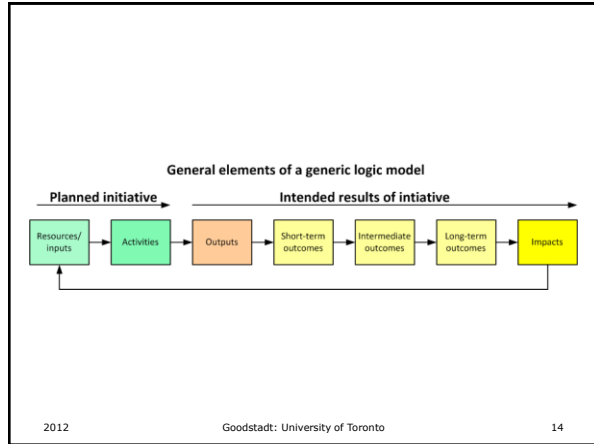
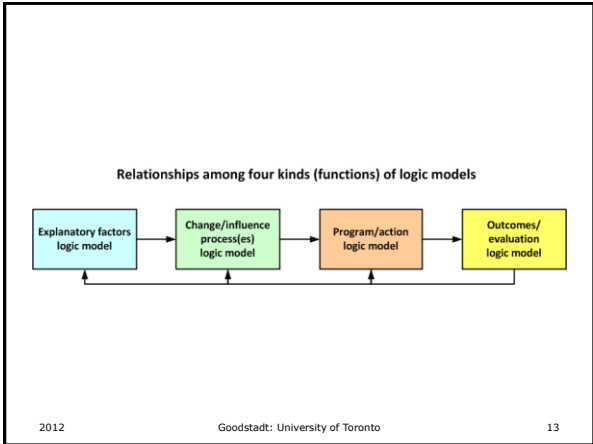
1. Clarifying intentions of the intervention
2. Enhancing communications
3. Managing the project
4. Identifying evaluation questions
5. Designing evaluation
6. Documenting project & how it worked

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Four functions of logic models
(w/ variability in level of detail) (Goodstadt)

1. **Explanatory (causal) factors model** focus on understanding nature & origins of issue/problem
2. **Change/influence process model:** focus on understanding processes of change or influence
3. **Program/action model:** integrates **explanatory factors** model with **change/influence process** model to form the **plan for action** for our initiative.
4. **Outcomes/evaluation model:** focus on initiative's expected outcomes & relationships among objectives.

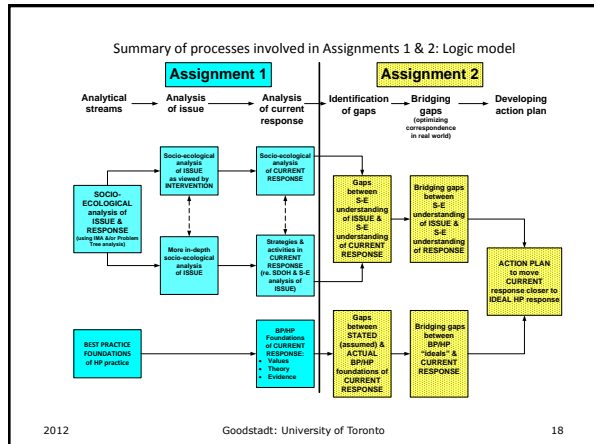
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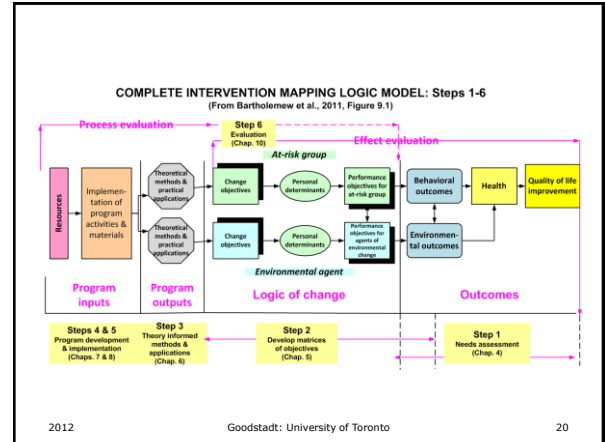
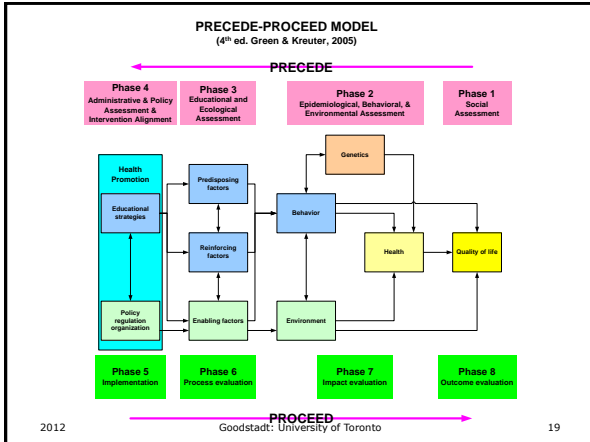


Examples of logic models.....

1. HP Strategies course assignments
2. PRECEDE-PROCEED Model
3. Intervention Mapping Approach

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What did we learn about “HP practice”?

1. Write a twitter of **your** definition/description of “HP Practice”
2. Uncertainty re. the meaning of “HP practice”
 1. Our own uncertainty
 2. Other’s uncertainty
3. Developing a typology of “HP practice”

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Two typologies for defining health promotion

<p>Typology 1:</p> <p>Understanding of HP as:</p> <ul style="list-style-type: none"> ○ goal or objective ○ strategy or activity ○ process 	<p>Typology 2:</p> <p>Understanding HP as a:</p> <ul style="list-style-type: none"> ○ discipline ○ field of practice ○ profession
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Typology 1: defining health promotion

1. **Definitions of HP can include one or more of the following characteristics**
2. HP as a strategy or activity
3. HP as a goal or objective
4. HP as a process

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Consensus re. the defining characteristics of HP

1. Goals
2. Processes or mechanisms
3. Perspectives
4. Foci

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Consensus re. the defining characteristics of health promotion

1. **Goal: "Enhancement of health"**
 - Positive health & enhancement of well-being
 - Achieving health for all
 - Holistic health
2. **Process or mechanism: HP "empowers" individuals & communities**
 - increases their control over decisions that affect their health

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Defining characteristics of HP (cont.)

3. **Perspective: HP takes a socio-cultural perspective**
 - In **understanding** the nature & origins of an issue or problem
 - In **responding** to an issue/problem
4. **Focus: Instrumental actions & processes directed at:**
 - **Environmental factors**
 - Reducing inequities
 - Reducing impact of broader negative determinants of health
 - Shifting balance of resources towards prevention
 - Reorienting health services
 - **Individual factors**

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Typology 2: Defining "HP practice"

1. HP practice as a discipline
2. HP practice as a field of practice
3. HP practice as a profession

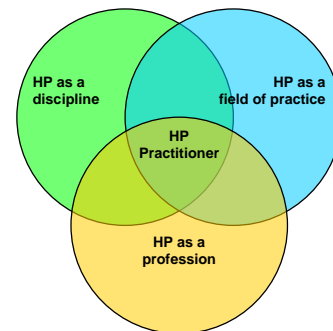
Defining "health promotion practitioner"

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Integrated typology of health promotion practice (Goodstadt, 2010)



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1. HP as a *discipline* (Goodstadt)

Health promotion integrates and employs values, theory, evidence, research methodologies, and practices from a wide range of **disciplines**, including:

- the social sciences (e.g., sociology, psychology, anthropology, political science)
- health sciences (e.g., epidemiology, biostatistics, public health)
- other inter-disciplinary fields (e.g., education, social work, women's studies, international development)

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2. HP as a *field of practice*

"The health promotion **field** is that multidisciplinary **practice** which is concerned with designing, implementing, and evaluating interventions (i.e., program, policies, services) that enable individuals, families, groups, organizations, and communities, to play active roles in achieving, protecting and sustaining health"

(Adapted from Joint Committee on Health Education Terminology, 1991)

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3. HP as a *profession* (Goodstadt)

Health promotion is the **profession** that is committed to employing HP **best practices**, that is:

- processes and activities that are consistent with health promotion values, goals, ethics; theories and beliefs; evidence; and understanding of the environment
- that are most likely to achieve health promotion goals with respect to any health-related issue, in a given context or situation

(Adapted from Kahan & Goodstadt, 2001)

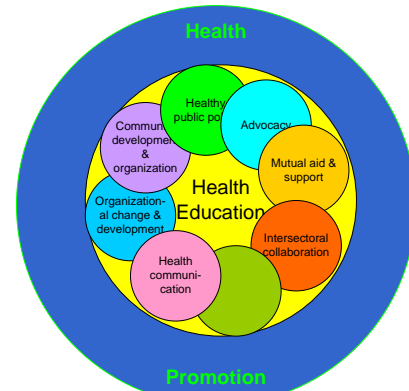
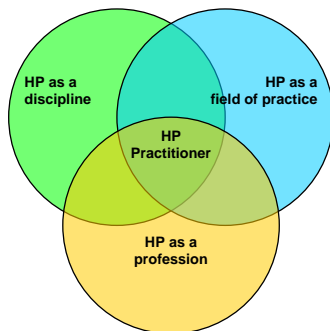
Defining “HP *practitioner*” (Goodstadt)

A health promotion **practitioner** is a person

- who is academically and professionally prepared in the field of health promotion
- who demonstrates competence in both theory and practice and
- who accepts responsibility to support the values, and advance the aims, of the health promotion profession”

(Adapted from Joint Committee on Health Education Terminology, 1991).

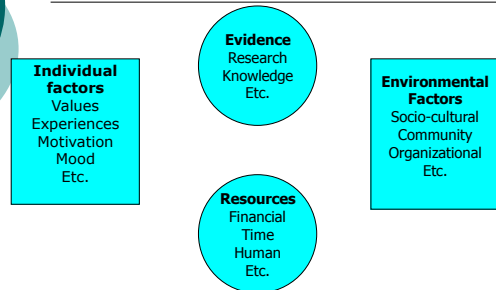
Integrated typology of health promotion practice (Goodstadt, 2010)



Decision-making in HP Practice

1. What factors influence your **professional** decision-making?
2. How do these factors differ from those involved in your **personal** decision-making?

Factors that influence decision making in health promotion practice (from class exercise)



Decision making frameworks

1. Interactive Domain Model (IDM)
2. PHAC Population Health Approach
3. PHAC Canadian Best Practices Initiative
4. Intervention Planning Approach
5. Many more

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The Interactive Domain Model of Best Practices in HP

(Kahan & Goodstadt, 2001)

<http://www.idmbestpractices.ca/idm.php>

1. The IDM
2. IDM Resources (<http://www.idmbestpractices.ca/idm.php>)
3. Transitioning to PHAC's Canadian Best Practices Initiative (including Portal) (<http://cbpp-pcpe.phac-aspc.gc.ca/>)

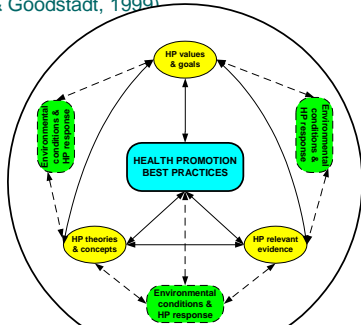
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Factors Influencing HP Best Practices: Model I

(Kahan & Goodstadt, 1999)



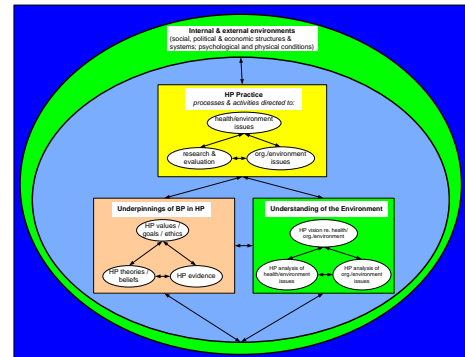
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The Interactive Domain Model of Best Practices in Health Promotion

Kahan & Goodstadt 2001



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IDM Framework (Kahan & Goodstadt, 2001)

	Step 1: Prepare Foundation for Action re. Selected Issue	Step 2: Make Action & Evaluation Plan How do we get to where we want to go? Who does what, when & how?	Step 3: Document implementation of Plan	Step 4: Review
Health promotion criteria & guiding principles	current situation (where are we now?)	picture of ideal situation (where do we want to go?)	specific objectives to achieve ideal	resources
challenges			evaluation plan	activities & processes (what are we doing? how did we do it?)
outcomes of activities & processes (what were the results?)				violations (what do we need to change?)
UNDERPINNINGS				
Values				
Beliefs				
Theories				
Practices				
Methods				
Evidence				
UNDERSTANDING OF ENVIRONMENT				
HP analysis of health/environment				
HP analysis of environment in health promotion				
HP theories of health/environment issues				
HP theories of health/environment issues				
PRACTICE				
Processes/activities				
Response re. health/environment				
Response re. environment				
Response re. organization				
Response re. research & promotion				

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IDM: Definition of Best Practices in Health Promotion

(Kahan and Goodstadt, 2001)

“Best practices in health promotion are those sets of processes and activities that are consistent with health promotion values/goals, theories/beliefs, evidence, and understanding of the environment, and that are most likely to achieve health promotion goals in any given situation.”

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Transition from IDM to PHAC's Best Practices Initiative (& Portal)

1. Development (2002-2006)
2. Phase I (2006)
3. Phase II (2008)
4. Phase III (2010) (Version 2.5)

<http://cbpp-pcpe.phac-aspc.gc.ca/>

What is the CBPI?

- A virtual front door
- Link to effective interventions & resources to help inform decision-making
- Organized around PHAC's *Population Health Approach* (<http://www.phac-aspc.gc.ca/ph-sp/>)

The CBPI Organizing Framework

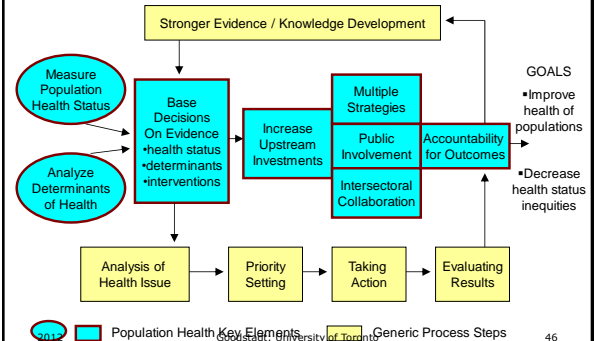
Is

PHAC's
Population
Health
Approach



<http://www.phac-aspc.gc.ca/ph-sp/approach-approche/index-eng.php>

Population Health Approach: Key Elements (PHAC)



Wrap up regarding decision making in health promotion practice

Where does this leave us re.:

1. Understanding "HP practice"?
2. Decision making in health promotion practice?
 1. What is the state of the art/science of HP practice? What needs to be done to move it forward?
 2. Our own personal/professional decision making (e.g., regarding careers, placements, electives, etc.)?
 3. How decisions are made in HP practice

Link to next weeks: Delving into the IMA

Preparing for next week's class

1. Read Bartholomew et al. Chapter 1 very carefully
2. Begin to develop a "Problem and Solution Tree" related to your chosen issue—i.e., focus on Snowden et al. (2008)—be prepared to present your P/S tree

Snowden, W., Schultz, J., & Swinburn, B. (2008). Problem and solution trees: a practical approach for identifying potential interventions to improve population nutrition. *Health Promotion International*, 23(4), 345-353. (<http://heapro.oxfordjournals.org.myaccess.library.utoronto.ca/cgi/reprint/23/4/345>)

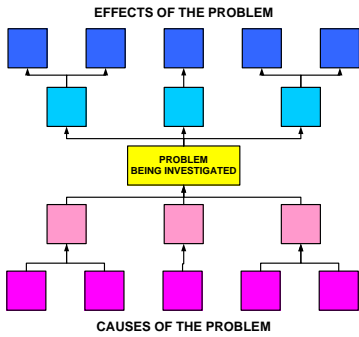
Making intervention planning easier for ourselves

Integrating the IMA and the Problem and Solution Trees approach

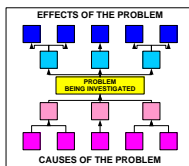
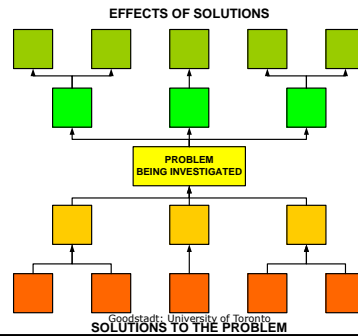
Develop "Problem & Solution Trees" related to your chosen issue

1. **Develop a "problem tree":**
 1. Identify causes & effects of problems
 2. These causes & effects are converted into **objectives** for interventions (re. individual and environmental interventions at all ecological levels)
2. **Develop a "solution tree":**
 1. suggest "solutions/interventions" that will have an effect on your identified "causes & effects of problems" i.e., interventions that will -> achieving your objectives

CLASSIC PROBLEM TREE (Snowden et al., 2008)



CLASSIC SOLUTION TREE (Snowden et al., 2008)



What is the correspondence between effects of solutions & causes of problem?

