Symposium - Being Healthy in an Unhealthy Environment

Presentation B
Giving health away: The value of community based collaborations for improving public health and preventing chronic diseases

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GIVING HEALTH AWAY: THE VALUE OF COMMUNITY BASED COLLABORATIONS FOR IMPROVING PUBLIC HEALTH AND PREVENTING CHRONIC DISEASES

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Psychologists often talk about ‘giving psychology away’ to improve human welfare (Epstein, 2006; Fowler, 1999; Miller, 1969). With the increase in the prevalence of chronic diseases and conditions over the past few years, a critical discourse among psychologists and other health practitioners about ‘giving health away’ to the public also needs to be fostered. This should include recognition of the value of community-based health promotion collaborations for improving public health and preventing chronic diseases. The benefits of community health collaboration include opportunities for critical health education, empowerment and improved health and wellbeing for community members and greater insight into community specific problems and barriers for the health promoter/researcher. A community-based research and health promotion program involving a small group of culturally and linguistically diverse people from the Brimbank region, Melbourne, Australia will be discussed in this symposium. The aim of the program was to empower participants with health promotion knowledge, skills and confidence. This included informing the group about major health concepts including National Health Priority Areas, health status, determinants of health, inequalities and major causes of mortality and hospitalisation; introduce them to a range of internet-based health information resources; explore and strengthen their understandings and interests in personal and community health and involve the community group in the development of a health promotion project that would help to improve health and prevent chronic disease in their community (http://www.adelaide.edu.au/ischp/program/full/)
What’s So Unhealthy About Our Environment Anyway?
A System Wide Problem

Dysfunction & Disease

REACTIVE
Hospital and Medical Practice Based: Treatment & Prevention

Wellness Continuum

Mode

PROACTIVE
Community Based: Health Promotion & Prevention

Wellness
Consequences & Responses

- Increase in Chronic Conditions and Other Public Health Problems
- National Health Priority Areas
  - Arthritis and musculoskeletal conditions
  - Asthma
  - Cancer control
  - Cardiovascular health and stroke
  - Diabetes mellitus
  - Injury prevention and control
  - Mental health
  - Obesity
Giving Health Away

- Psychologists often talk about how to ‘give psychology away’ to the public to improve human welfare (Epstein, 2006; Fowler, 1999; Miller, 1969) but with the increase of chronic diseases and conditions over the past few years, psychologists should also be focusing on how to ‘give health away’ to the public.
Reasons & Issues to Consider

- Many diseases and public health problems are preventable
- Early intervention = prevention
- Economic and emotional burden on society
- People from disadvantaged, Indigenous and ethnic communities may face multiple barriers including insufficient knowledge about the problem and how to prevent it
- Welfare, wellbeing and wellness are ecological concepts that encompass more than mental health
- If not our job, then whose?
Community Health Psychology

“Health psychology should adopt a community or public health perspective rather than an individual disease or individual treatment model”. Training should concentrate on prevention, social psychology, group processes, epidemiology, community dynamics, public health practices, and health policy formation. It would involve links to public health, social work, and preventive medicine and it would need to relate to the local community.

<table>
<thead>
<tr>
<th>Assumptions and practices</th>
<th>Community health psychology</th>
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<tbody>
<tr>
<td><strong>Levels of analysis</strong></td>
<td>Ecological (micro, meso, macro)</td>
</tr>
<tr>
<td><strong>Problem definition</strong></td>
<td>Problems are reframed in terms of social context and cultural diversity</td>
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<tr>
<td><strong>Timing of intervention</strong></td>
<td>Prevention (early)</td>
</tr>
<tr>
<td><strong>Focus of intervention</strong></td>
<td>Competence/strengths</td>
</tr>
<tr>
<td><strong>Goals of intervention</strong></td>
<td>Promotion of competence and well-being</td>
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<tr>
<td><strong>Type of intervention</strong></td>
<td>Self-help/community development/social action</td>
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<tr>
<td><strong>Role of ‘client’</strong></td>
<td>Active participant who exercises choice and self-direction</td>
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<tr>
<td><strong>Role of professional</strong></td>
<td>Resource collaborator (scholar-activist)</td>
</tr>
<tr>
<td><strong>Type of research</strong></td>
<td>Participatory action research based on critical and constructivist assumptions</td>
</tr>
<tr>
<td><strong>Ethics</strong></td>
<td>Emphasis on social ethics, emancipatory values and social change</td>
</tr>
<tr>
<td><strong>Interdisciplinary ties</strong></td>
<td>Critical sociology, health sciences, philosophy, social work, political science, planning and geography</td>
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## Community Health Information Collaboration


<table>
<thead>
<tr>
<th>Research Stage</th>
<th>Methodology</th>
<th>Research Questions</th>
<th>Specific Research Aims</th>
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<tbody>
<tr>
<td>Stage Two: Community Health Information Collaboration (CHIC)</td>
<td>Qualitative: Community based participatory action research through health promotion collaboration with a local community group in the metropolitan Brimbank region of Melbourne, Victoria, Australia. Includes use of the nominal group technique.</td>
<td>2. What are the benefits of community collaboration?</td>
<td>2. To collaborate with a local community group and empower members of the group with health promotion and disease prevention knowledge, skills and confidence including: 2.a. To inform the community group about major health concepts and concerns in Australian society, including National Health Priority Areas, health status, determinants of health, inequalities and major causes of mortality and hospitalisation. 2.b. To introduce the community group and broader community to a range of internet based community health information resources. 2.c. To explore and strengthen community members’ understanding and interests in personal and community health.</td>
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<td>3. What ideas for health promotion action does the community have to offer?</td>
<td>3. To engage the community group in the development of a health promotion idea for action to improve health in the broader community.</td>
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**Week 1: Introductions**  
This first session will involve meeting other community members in the group and introducing our interests in health. Vicky will provide an overview of the project, including the new CHIC website. Some of my favourite health websites/topics will be explored including Body Mass Index and fruit and veggie calculators, personalized healthy food pyramids, healthy living calendar, world’s healthiest foods and healthy recipe sites.

**Week 2: Community Health Evidence Base (CHEB)**  
Vicky will present a power point presentation of the CHEB resource which is an informative summary of public health issues and health statistics in Australia, Victoria and Victorian communities. Issues such as life expectancy, causes of death and illness and differences in health outcomes due to factors such as age, gender and geographical location are presented.

**Week 3: Thinking about health in our community**  
In this session we will focus on the Brimbank community and will discuss some of the community health issues of interest to us as a community. Are some health issues more urgent/important to us? What are some of the reasons for these particular health problems? Is our community healthy?

**Week 4: Good ideas and choosing a manageable task**  
Today, we will ‘brainstorm’ ideas about actions that can be undertaken to improve health in our community. We will list our good ideas on project paper and prioritize and decide on a manageable task using the ‘Nominal Group Technique’.

**Week 5: Planning for success**  
In this session we will develop a plan of action for our chosen idea. What needs to be done? Who will do what? Who can help? Do we need to apply for funding to enable the undertaking of the project? We will have the next 4 weeks to undertake our project or get it to a stage where it could be undertaken (if it is a large project).

**Week 6: Action stage 1**  
**Week 7: Action stage 2**  
**Week 8: Action stage 3**  
**Week 9: Action stage 4**  
**Week 10: Celebrate our achievement**  
Program members will be asked to bring in a small plate of healthy food to share. We will have a chance to reflect on and evaluate our experience and opinions of the program and celebrate our achievements.
CHIC Program Participants

Pictured from left to right:
Standing: Chi - Vietnamese welfare; Tina – Multicultural Coordinator, St Albans East Primary School & Chairperson of Nang Hong Vietnamese Cultural Association; Vicky: Program Coordinator/PhD Researcher.

Sitting: Kim – Vietnamese welfare; Arlene - member of the Filipino community and part time staff member of Good Shepherd Youth and Family Service; Victoria – Founder of Maltese Connections; Tien - Vietnamese welfare. Cecilia – President of the Latino American Women’s Association of Victoria Inc.
A group decision-making tool originally developed by Delbecq and Van de Ven in 1968 (Van De Ven & Delbecq, 1974).

NGT can be summarised as five steps:

1. Generating Ideas
2. Recording Ideas
3. Discussing/Clarifying Ideas
4. Voting/Rating Ideas
5. Summing the Ratings
Action Research Idea

- Numerous ideas for action were generated using the Nominal Group Technique leading to the development of the:

- “Healthy Munch, Lunch and Crunch Program”
  - School based health promotion targeted at primary school aged children and the broader school community
  - Included a healthy art show with exhibition in the school hall and a free healthy lunch day
  - Awards and prizes for children’s art at morning assembly (pedometers, crayons)
Healthy Art – 1/2
Healthy Art – 3/4

[Images of art projects related to healthy eating and food.]
Healthy Art - 5/6

Healthy Eating

Go 4 Life Be Healthy

Introduction

Did you know?

People should eat 3 fruits and 5 vegetables a day.
The Value of Community Based Collaborations for Improving Public Health and Preventing Chronic Diseases

- Empowers participants
- Can lead to the development of relevant projects
The Value of Community Based Collaborations for Improving Public Health and Preventing Chronic Diseases

- Can shift the agenda from entertainment to health
- Can have a broad reach and ongoing momentum
The Value of Community Based Collaborations for Improving Public Health and Preventing Chronic Diseases

- Can be an avenue for engaging with and helping culturally diverse communities
- Can reduce chronic disease in the community