



**Community Development
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www.cdhn.org

Putting the Social into Health



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Welcome and Introductions



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About CDHN – www.cdhn.org

- CDHN is a regional, voluntary organisation with over 2,000 members across Northern Ireland.
- Health inequalities are the unfair and avoidable differences in the health status of people in our society.
- Health inequalities are killing people on a grand scale.
- CDHN exists because this must stop.



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What we will cover...

- Social Determinants of Health
- Health Literacy
- Asset Mapping



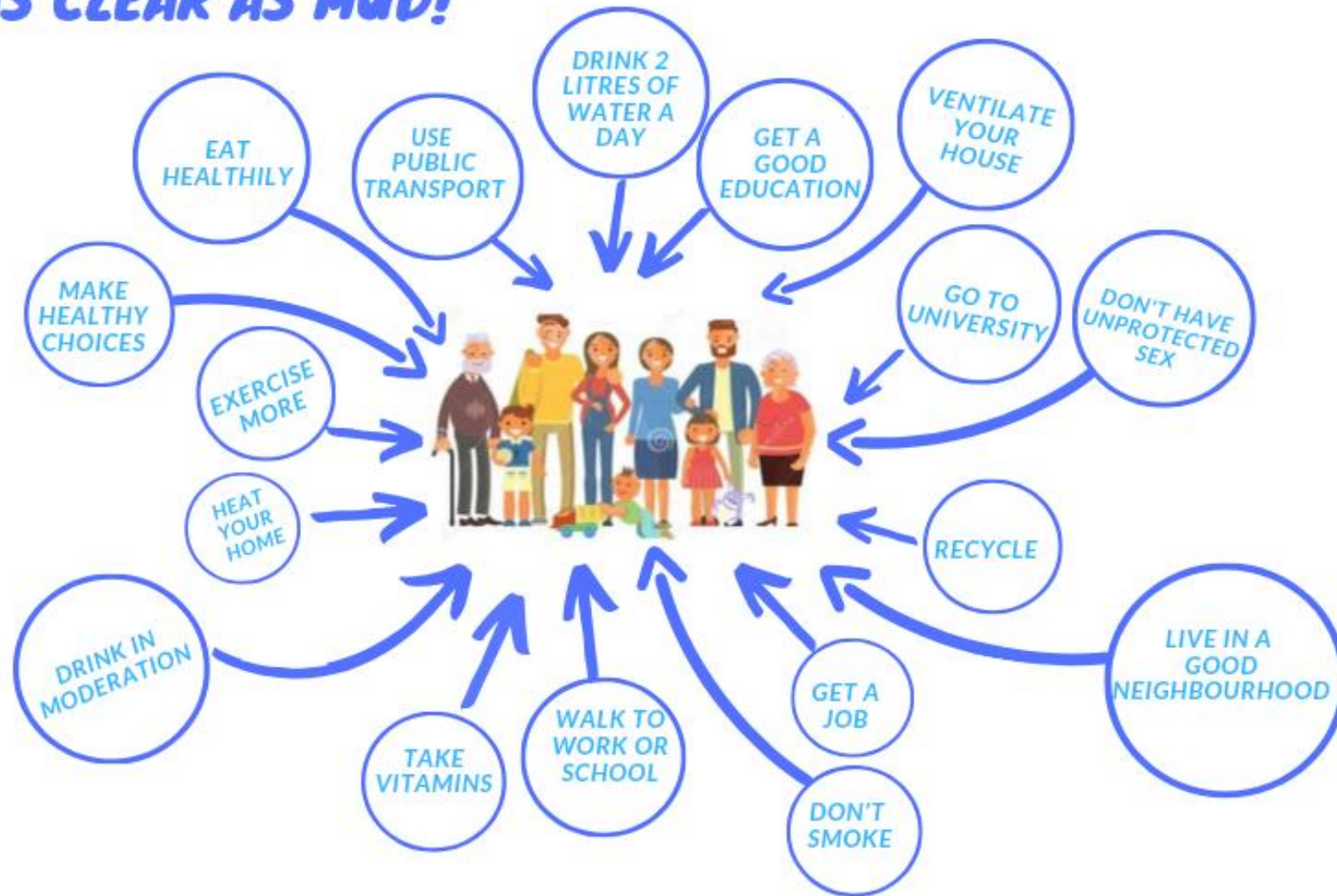
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What matters to me?



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AS CLEAR AS MUD!



The Medical and Social Model of Health

Medical	Social
Health is the absence of disease	Health is a product of social, biological and environmental factors
Health services are geared towards treating the sick and those who have a disability	Services emphasise all stages of prevention and treatment
High value is places on specialist medical services	Less value is places on the role of specialist there is more emphasis on self help and community activity
Health workers diagnose, treat, and validate the sick role	Health workers, community activists and other supports enable people to take greater control over their own lives.
The pathogenic focus emphasises finding biological cause and more often than not a pharmaceutical or medial intervention solution	Focuses on what keeps and maintains peoples health and well being (salutogenic approach)

Adapted from Naidooo and Wills 2009

Health Inequalities



Most Deprived	Least Deprived
Healthy life expectancy	13 Years
Smoking	Treble
% smoking during pregnancy	Quadruple
Teen birth rate	Six times
Suicide rate	Treble
Avoidable mortality	Double
Mental ill health	Double



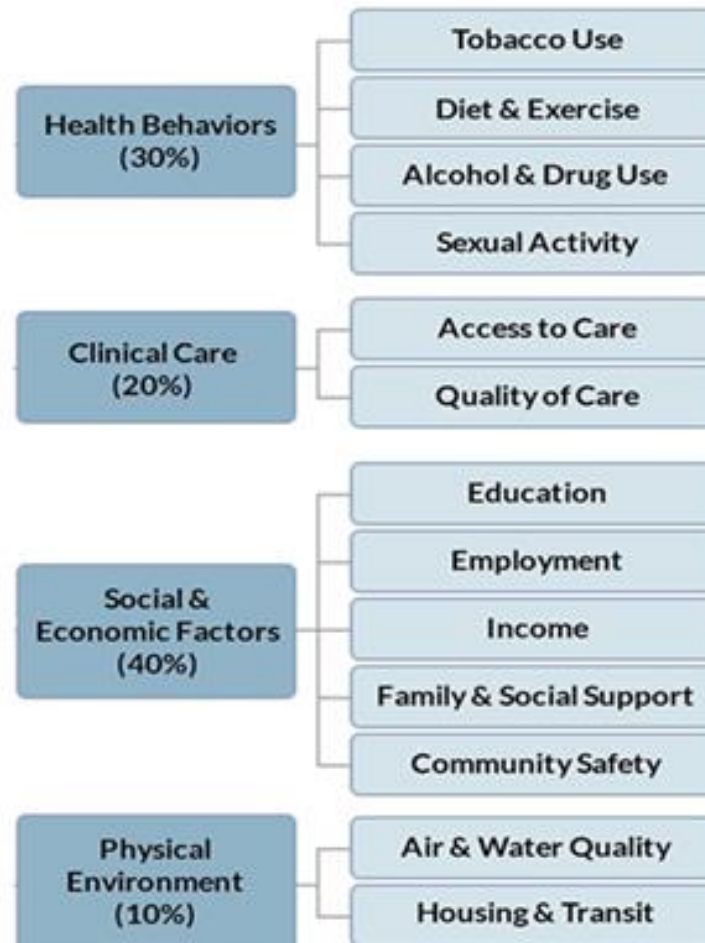
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What affects our health?



What affects our health?

Weighting of factors that influence health outcomes



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SOCIAL DETERMINANTS OF HEALTH

The social determinants of health are the conditions in which we are born, we grow and age, and in which we live and work. The factors below impact on our health and wellbeing.



Childhood experiences



Housing



Education



Social support



Family income



Employment



Our communities



Access to health services

Source: NHS Health Scotland

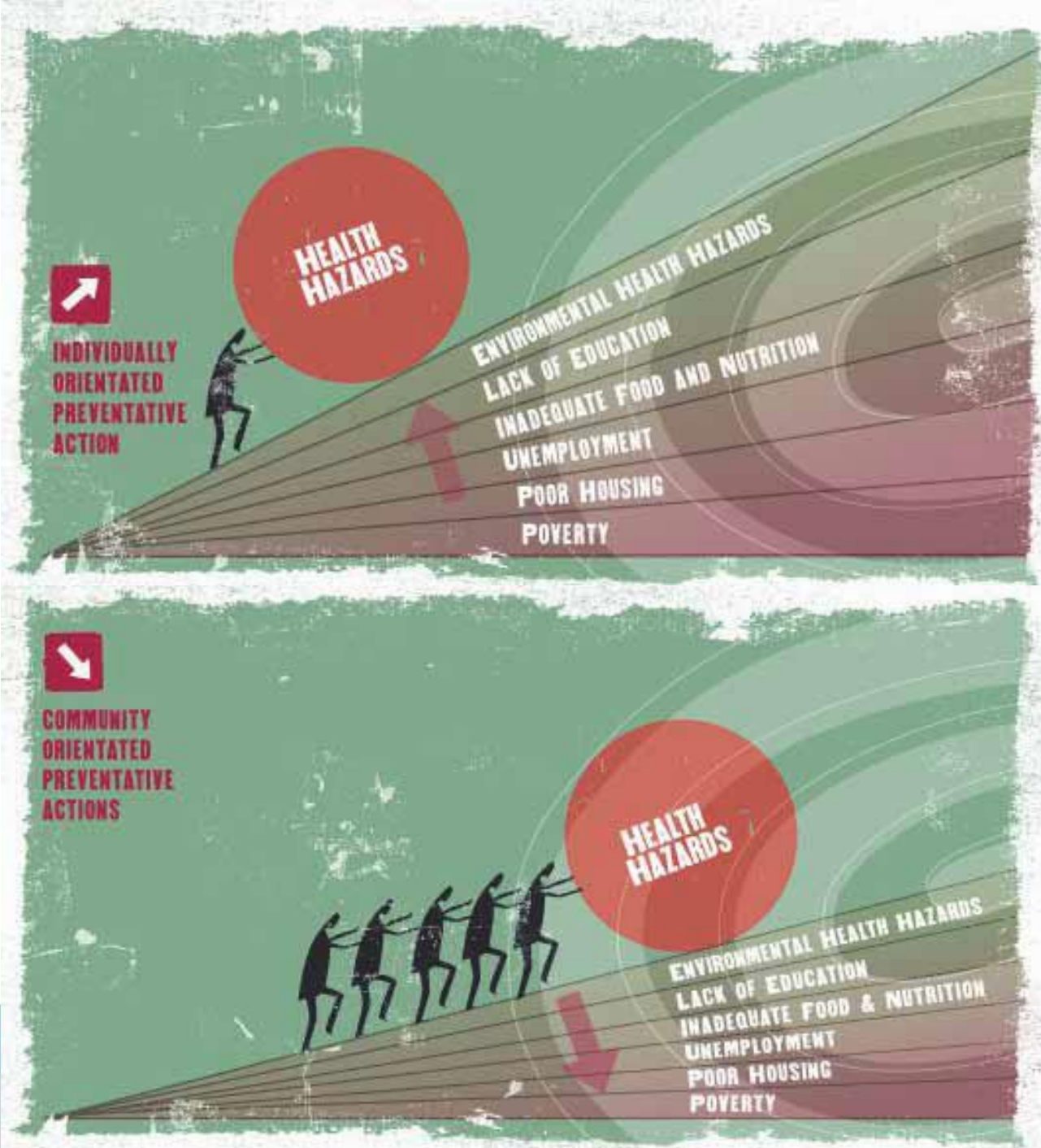
Maria's Story



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“Why treat people and send them back to the conditions that made them sick?” (Sir Michael Marmot)





Intersectional
action for
health –
WHO 1986

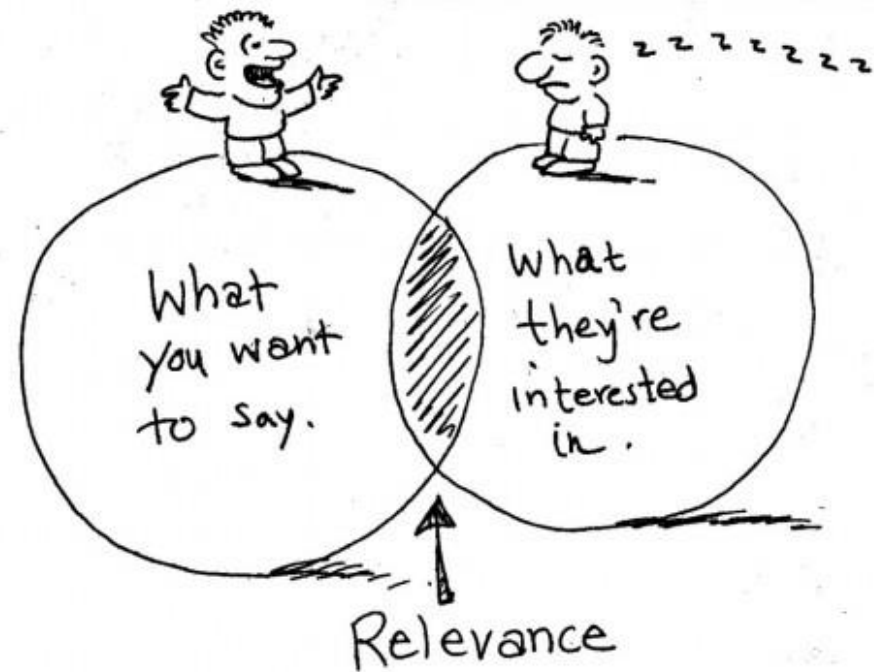


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Relevance...

'People will act on issues which they have strong feelings about... projects should start by identifying the issues which the local people speak about with excitement, hope, fear, anxiety or anger.'

(Hope and Timnell 1984)



Health Literacy Definition

“Health literacy is about people having enough knowledge, understanding, skills and confidence to use health information, to be active partners in their care, and to navigate health and social care systems.”

Alex Neil, MSP Cabinet Secretary for Health and Wellbeing, Scotland



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Health Literacy

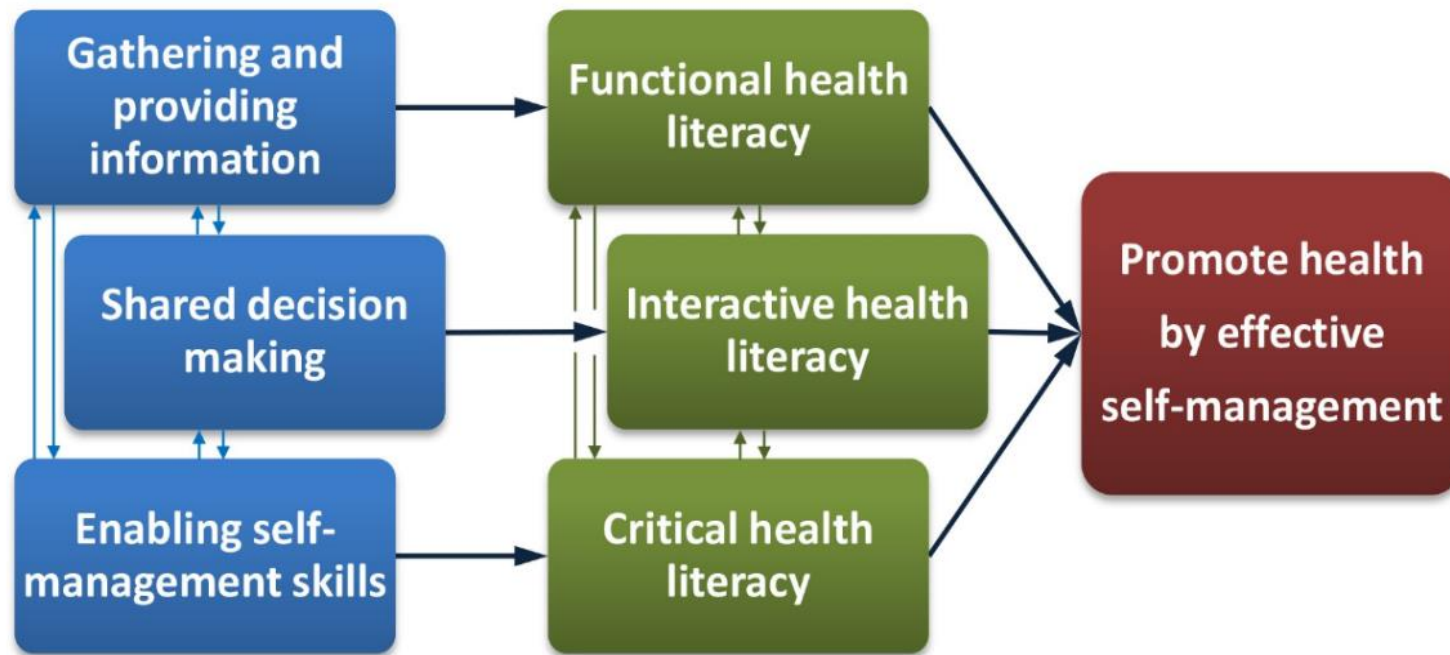


“Literacy has been shown to be one of the strongest predictors of health status along with age, income, employment status, education level and race or ethnic group” (WHO, Health Literacy The Solid Facts)

Who is affected

- 42% of working age adults are unable to understand and make use of everyday health information
- 61% of working age adults find health materials containing both text and figures too complex to understand
- 43% of working age adults struggle to understand instructions to calculate a childhood paracetamol dose
- Statistics for England from the IROHLA European Health Literacy Study.
- There are no specific statistics for NI.

Practical skills for improving health literacy



Time to reflect

1. How do you share information?
- personal reflection
2. What skills and abilities do you need when sharing information?
– Flipchart
3. Scenarios – small groups



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Some points to remember

- You need practical skills and abilities to share information effectively.
- How you value people, your attitudes towards them and how you behave in your role are also important.
- We can learn skills and abilities. We can't really "learn" attitudes and values. We can learn to be more aware of our own attitudes and values and the impact these can have.



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Some points to remember

- We can develop our self awareness of how we feel about people who we see as 'different' from ourselves and understand the impact this can have on what and how we give information.
- It is useful to remember that communication is a two way process. The person asking for information may also be making assumptions about you which may be affecting the communication

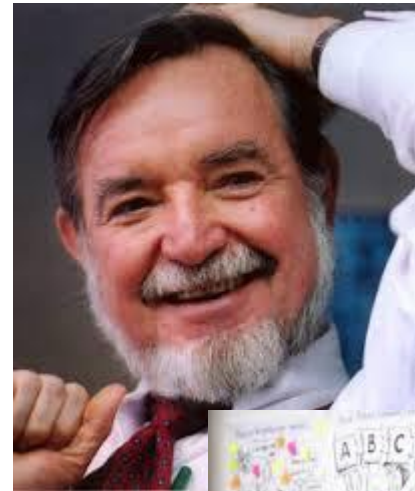


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Asset Mapping

'You can't know what a person or a community needs, until they first know what they have.'

*John McKnight, Co-Director,
ABCD Institute*



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Asset v deficit

The deficit approach	The asset and strengths based approach
Starts with deficiencies and needs in the community	Start with the assets in the community Start with the person's gifts and strengths
Respond to problems	Identify opportunities and strengths through conversations
Provides services to users	Invest in people as citizens
Emphasise the role of agencies	Emphasise the role of civil society and emphasise the individual's role and contribution
Focus on individuals	Focus on communities/ neighbourhoods and the common good, and focus on the person's place
See people as clients and consumers receiving services	See people as citizens and co-producers with something to offer
Treat people as passive and done-to	Help people to take control of their lives
'Fix people'	Support people to develop their potential
Implement programmes as the answer	See people as the answer

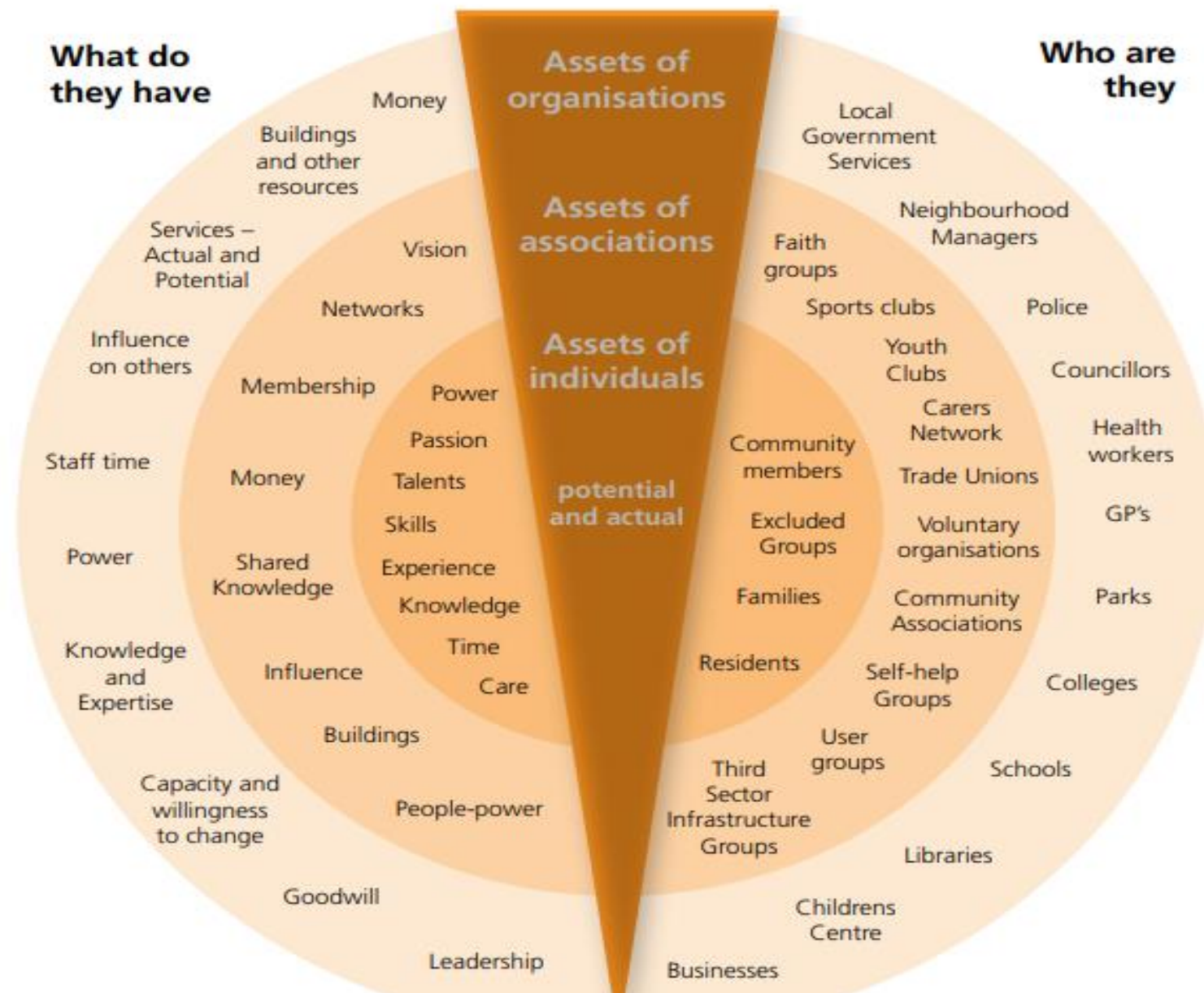
Six types of community assets

- Skills and talents of LOCAL PEOPLE.
- ASSOCIATIONS - the network of relationships they represent.
- INSTITUTIONS, agencies and professional entities.
- PHYSICAL ASSETS and infrastructure - land, buildings.
- ECONOMIC ASSETS - local economy, productive capacity.
- CULTURAL ASSETS—ways of knowing, ways of being.

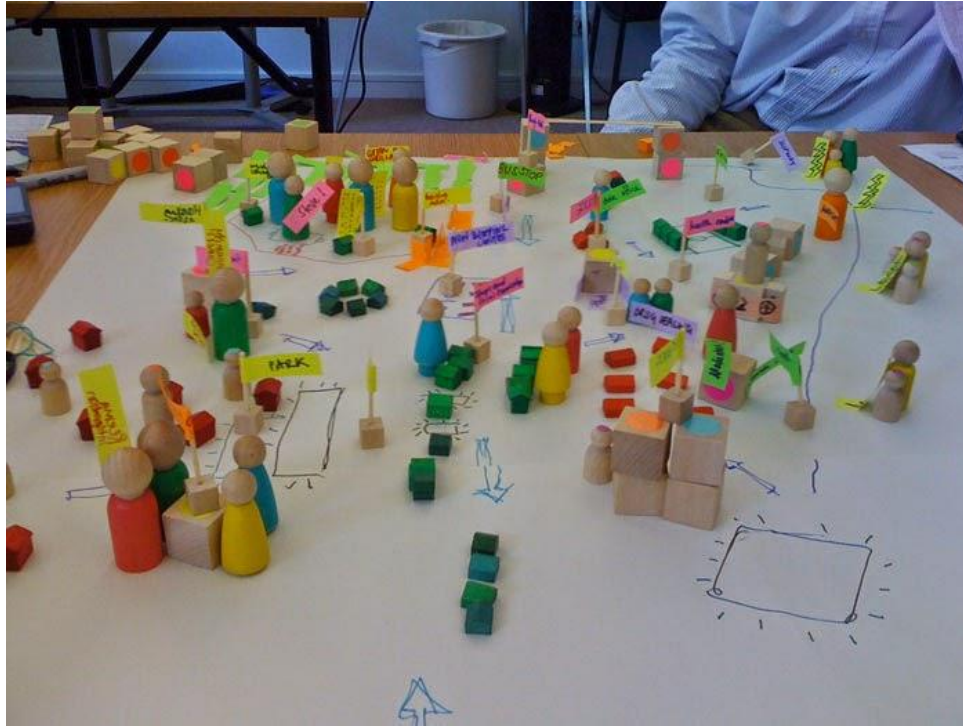


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Asset mapping



Have a go....



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Key messages from today

- Relevance
- Balance of power is addressed
- Root causes
- Upstream focus
- Connections are key
- As are the right conversations
- Assets are understood
- Role for advocates and advocacy
- What doesn't work is as useful (if not more so) than what does



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