Case Studies: Health Promotion Program Planning

Instructions:

1. Form small groups. Each group will work on one case study.
2. Discuss the case selected by using the questions provided.
3. Reconvene with the entire group and share your observations.

Case 1: Tea and Toast

Calinda is an FCN working in a faith community serving a large senior population. Over the past two years, she has received a number of requests for comprehensive nutrition information, from both seniors and caregivers in the community. In her efforts to respond to these requests, Calinda notices that there are very few nutrition education resources focusing on older adults. She is committed to developing an educational resource to meet this information deficit. At the same time, she realizes that nutrition education for seniors in her community needs to be part of a broader comprehensive health promotion initiative. This will help the seniors avoid the "tea and toast" syndrome—eating nutritionally deficient and unbalanced meals—and support independence among older adults living in the community. Calinda decides that a comprehensive health promotion initiative is in order.

1. What practical advice could you give Calinda in order to ensure that her plans around a comprehensive health promotion initiative incorporate each of the key health promotion features discussed in this module?
2. List three to five community agencies Calinda should invite to be on her planning team.
3. How does this scenario relate to your own experience with addressing health issues in your faith community and community at large?

Case 2: Baby and Beyond

Allison is an FCN working for a mega faith community in a large urban city. Her challenge is to provide educational opportunities for expectant and new mothers to ensure that they have the knowledge and skills necessary to give their children a healthy start in life. Her faith community does outreach work in the neighborhood nearby. Many of these parents are considered at-risk because they face barriers to good health such as low income, social isolation, and limited employment skills.

Allison collaborates with a program that offers pre- and post-natal classes for parents and caregivers. Through this program, she works closely with a group of outreach workers who are community parents living in the area.

Participants meet every week. The session opens with a short prayer and Scripture reading. Participants are given the opportunity to reflect silently on the spiritual influence they felt during the week, and some members share their feelings aloud. At the end of each class, participants identify the topics they want addressed at the next session. In response to their information needs, Allison covers topics such as the birthing process, breastfeeding, healthy eating during and after pregnancy, smoking cessation, drug and alcohol addiction, healthy child development, making baby food, and parenting skills. To ensure that participants have adequate resources to meet their nutritional needs, food and milk vouchers are provided. Participants are reimbursed for their transportation costs to and from the classes. The program also provides access to childcare so participants can attend the classes.

While the women were satisfied with the classes, there was a growing concern that other important health issues in the community were not being addressed. Over time, discussions held during the classes focused on other barriers to health faced by participants and their families, such as a lack of recreation facilities for young children and a shortage of affordable day care spaces. While many of the women expressed their need to get a job and support their families once their children were old enough, they were concerned that barriers such as a lack of proficiency in English and a lack of job training programs in the community would limit their ability to do so.

In response to the needs expressed by participants, Allison contacted several community service agencies in the neighborhood. The people with whom Allison spoke shared her concerns about the issues raised by the participants in her class. Allison collaborated with the other agencies to organize a community-wide forum at the auditorium of one of the local public schools. This event resulted in the formation of a committee made up of agency representatives and community residents.

Over the next two years, the committee pursued the following activities in response to the needs and priorities identified by community members.

- One of the partner agencies provided parents with access to computers so they could develop résumés and upgrade their computer skills.
- Another partner agency started several English as a Second Language classes.
- A successful proposal for funding allowed a local day care center to offer free half-day play days twice a week for children ages two to four years.
- Residents successfully lobbied the city to clean and upgrade playground facilities in two community parks.
- The committee applied for, and received, a community services grant to offer a summer camp for preschool children.
- The local library expanded its storytelling program to include local language stories every week.
- During the summer, the committee organized monthly barbecues as a fun social event for community residents.
- Allison's church set up an education and support group for new fathers.

Discuss this case study in terms of:

- whole-person view of health
- focus on participatory approach
- focus on determinants of health; building on strengths and assets
- use of multiple strategies

This case incorporates the key features of health promotion practice, including:

- A **whole-person-centered** view of health that goes beyond the physical health status of new and expectant mothers and children to encompass the social and mental dimensions of health and well-being.
- A **focus on participatory approaches** that entails the direct involvement of community members in planning and implementing activities in response to their shared health concerns.
- A **focus on the determinants of health** through activities addressing the social, economic, and environmental factors contributing to health such as employment, recreation, social support, literacy skills, healthy child development, and access to childcare.
- **Building on existing strengths** and assets by making use of existing community resources and facilities wherever possible and building on the capacity of community residents.
- Using **multiple, complementary strategies**, including health education, self-help and mutual aid, organizational change, community mobilization, and advocacy.