

VISUALS for CORE CONCEPTS

Creating conditions that support the health and wellbeing of humans and the planet

January 15, 2025

PROJECT

Becoming a Network-of-Networks / *Devenir un réseau national intersectoriel*
(April 2024-March 2025)

HEALTH
PROMOTION
CANADA



PROMOTION
DE LA SANTÉ
CANADA



CANADIAN
PUBLIC HEALTH
ASSOCIATION

ASSOCIATION
CANADIENNE DE
SANTÉ PUBLIQUE



National Collaborating Centre
for Determinants of Health

Centre de collaboration nationale
des déterminants de la santé



RÉFIPS
RÉSEAU FRANCOPHONE INTERNATIONAL
POUR LA PROMOTION DE LA SANTÉ

Core Concept Definitions

The frameworks used to help develop the simplified 'core concept definitions' are included here.

This is not an exhaustive collection, but is intended to help readers better understand where some of these concepts have come from.

The 'Core Concepts for Health Promotion' document can be found here:

https://drive.google.com/drive/folders/1FAEw4sFPw2-F_PPo67AD0oxTuvOV3nnt?usp=drive_link

Reference Links

Visuals

Alliance for Healthier Communities (Ontario):

[Model of Holistic Health and Wellbeing](#) (n/d)

[Model of Health and Wellbeing](#) (n/d)

Dyck et al. (*in press*). The Invisible Sector: Intersectoral action for health promotion and the critical leadership role of non-governmental organizations within civil society. In [Health Promotion in Canada](#), 5th edition.

Health Canada (2015) [First Nations Mental Wellness Continuum Framework](#)

National Collaborating Centre for Determinants of Health (2024) – [Let's Talk Determinants of Health](#)

Lacy-Nichols et al. (2023). [Conceptualising commercial entities in public health: beyond unhealthy commodities and transnational corporations](#)

Ministry of Health (PEI) (1996) [Circle of Health](#)

Morton et al. (2015). [Architectures of adaptive integration in large collaborative projects](#).

REFIPS (2024) - [La promotion de la santé : une vision systémique pour améliorer la santé, le bien-être et l'équité](#) (available in French only)

WHO – [Ottawa Charter](#) (1986)

WHO – [Geneva Charter](#) (2021)

UN [Sustainable Development Goals](#) (2015)

UN [One Health Definition](#) (2021)

Other

Communagir-Innoweave, June 2022. [Critical competencies that enable systemic changes](#) (available in French only)

Health Promotion Canada (2015) [Pan-Canadian Health Promoter Competencies and Glossary](#)

Lenton & Latour (2018). [Gaia 2.0](#).

Shrivastava & Zsolnai (2022) - [Wellbeing-oriented organizations: Connecting human flourishing with ecological regeneration](#).

WHO – [Constitution](#)

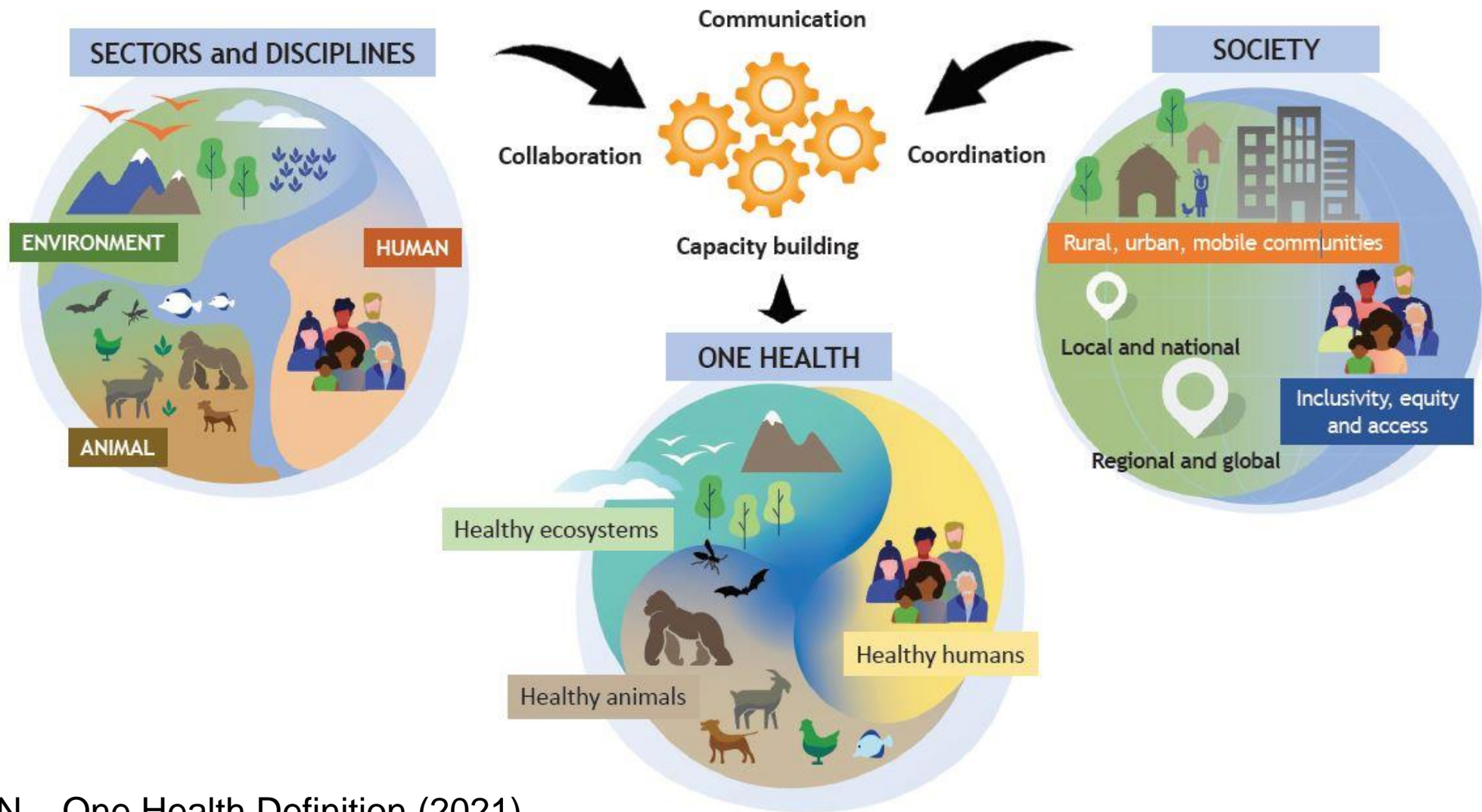
WHO – [Health Promotion Glossary](#) (1998)

WHO – [Health Promotion Glossary: New Terms](#) (2006)

WHO – [Health Promotion Glossary of Terms](#) (2021)

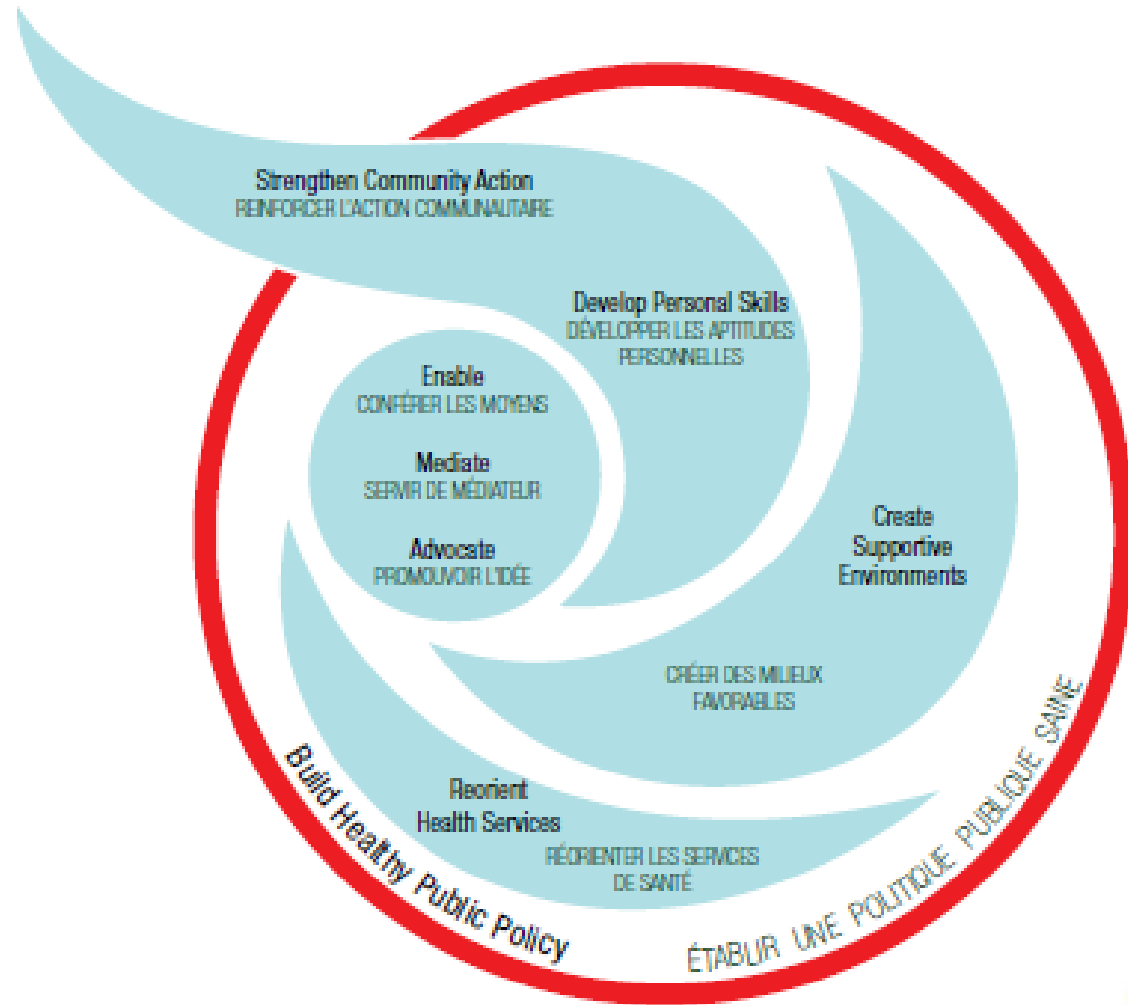
Visuals from key references are included in the slides below for easy referral. Please see the original documents for details.





UN – One Health Definition (2021)

Health Promotion Emblem



Ottawa Charter for Health Promotion (1986)

Geneva Charter for Well-Being (2021)

Coordinated action in five areas:

1. Value, respect and nurture planet earth and its ecosystems
2. Design an equitable economy that serves human development within planetary and local ecological boundaries
3. Develop healthy public policy for the common good
4. Achieve universal health coverage
5. Address the impact of digital transformation

WHO – Ottawa Charter (1986)

WHO – Geneva Charter (2021)



**World Health
Organization**

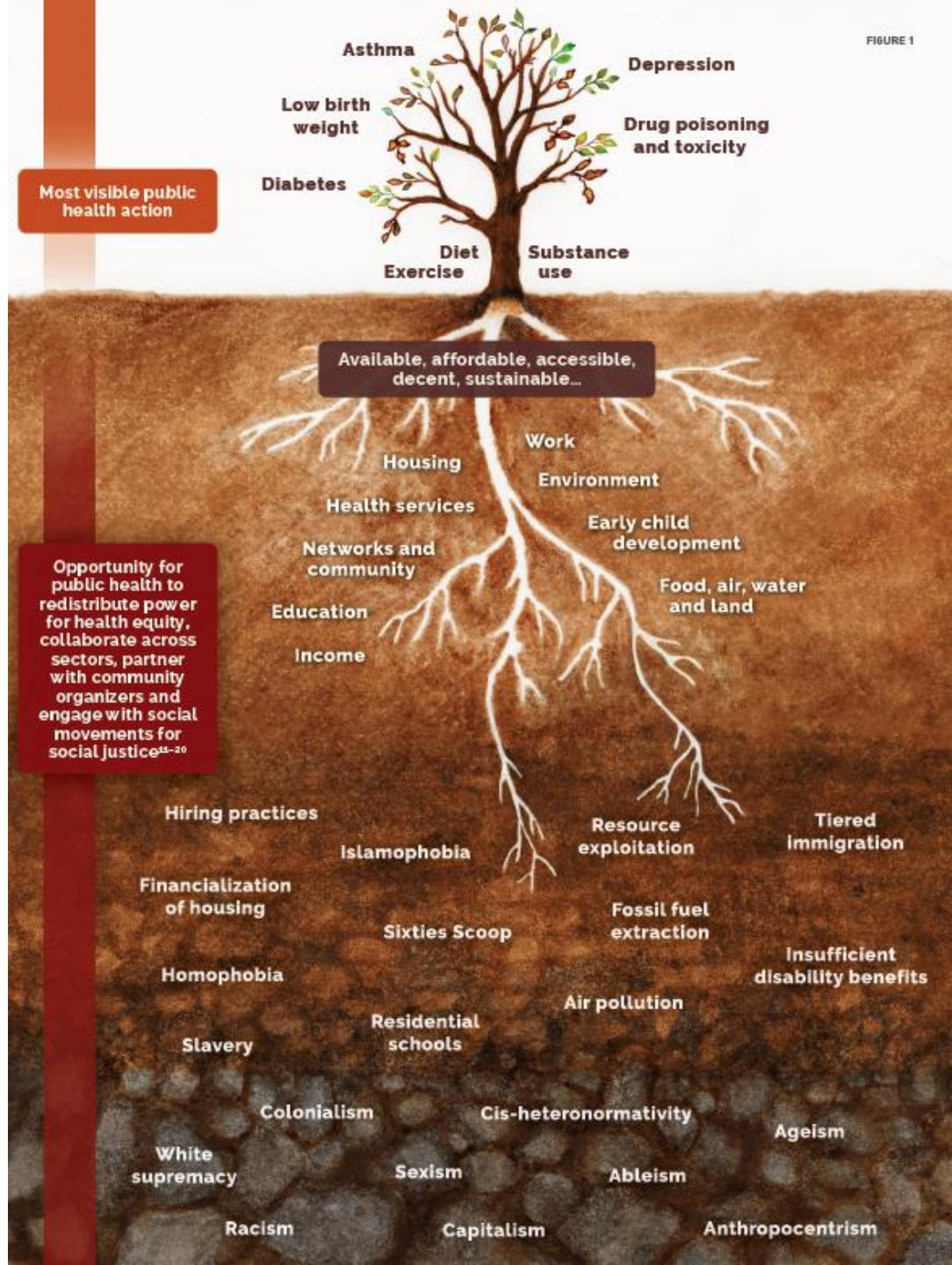


**10th Global Conference
on Health Promotion**

UN Sustainable Development
Goals (2015)

SUSTAINABLE DEVELOPMENT GOALS





Determinants of Health (NCCDH, 2024)

LEGEND

FIGURE 1: TREE IMAGE DEPICTING THE CAUSES OF HEALTH INEQUITIES AND OPPORTUNITIES FOR PUBLIC HEALTH ACTION



LEAVES: examples of the physical and mental health outcomes in communities and populations



TRUNK: examples of individual behaviours that contribute to health, often the focus of public health interventions



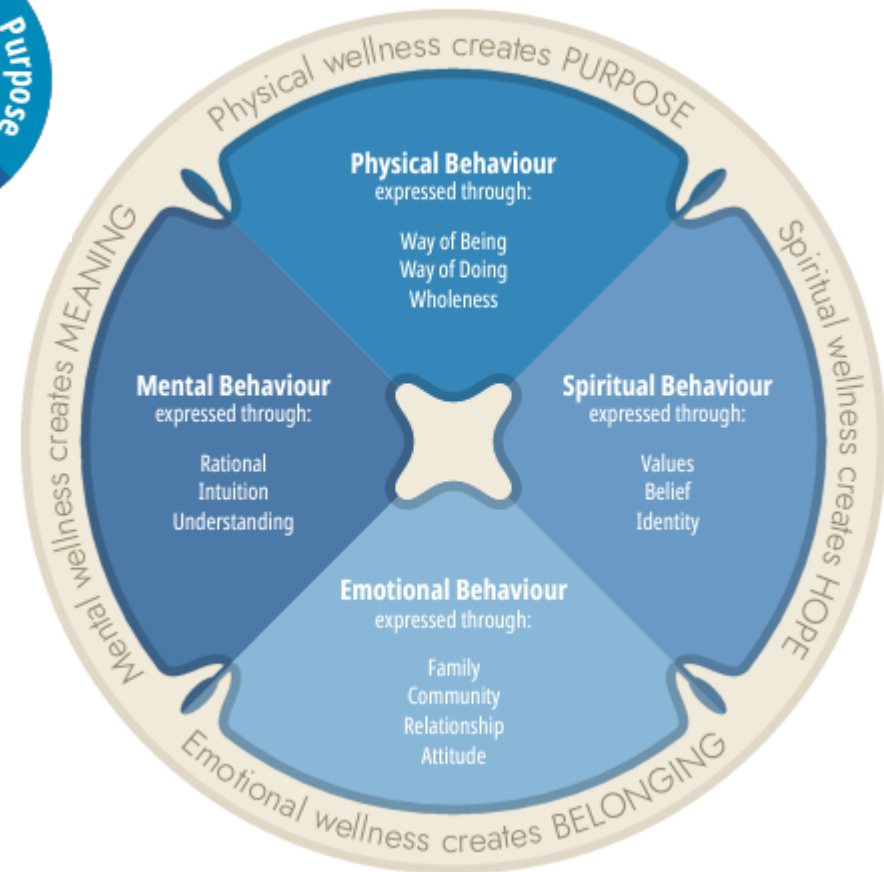
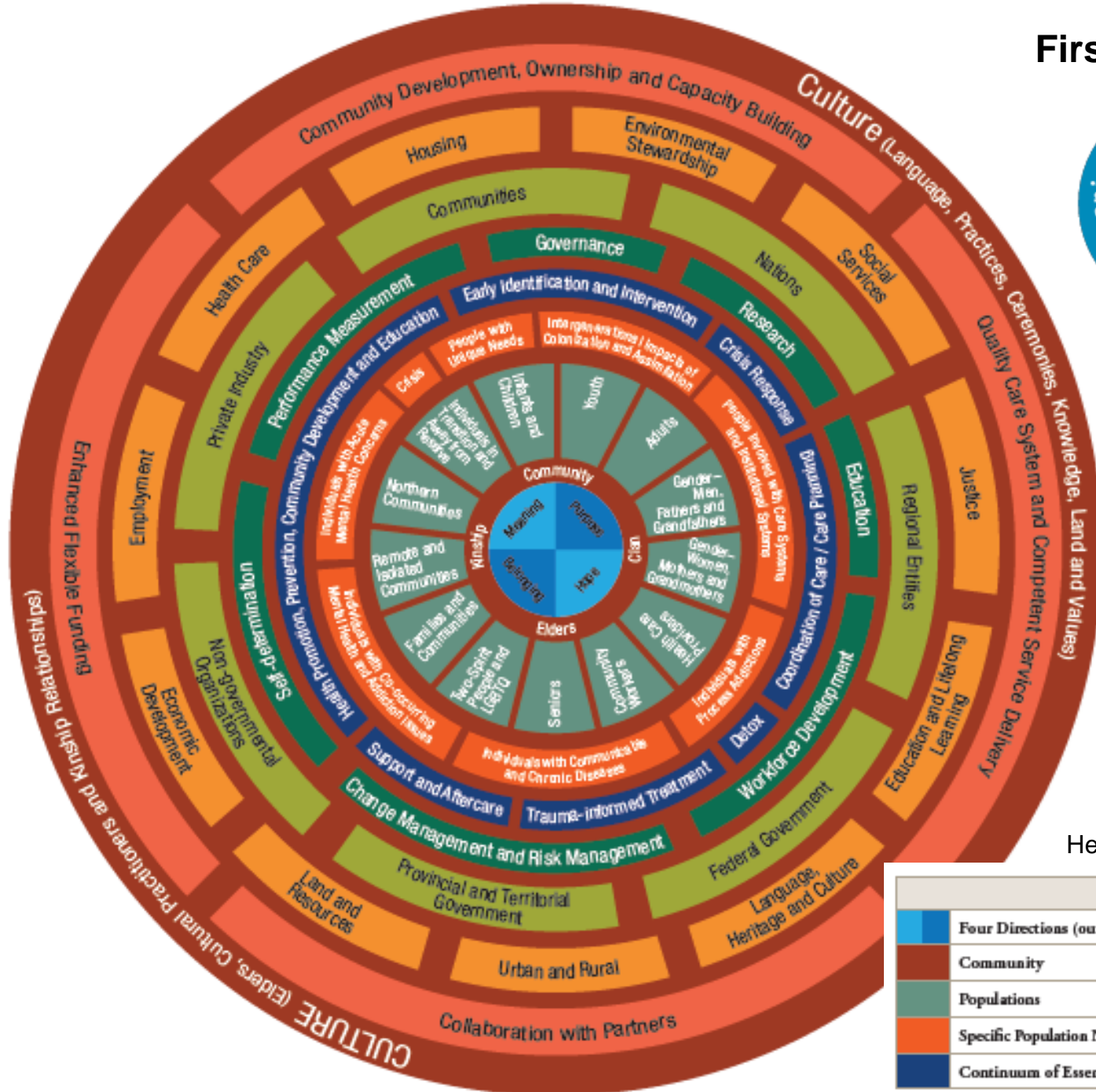
ROOTS: examples of the conditions of daily life that can directly or indirectly influence health outcomes (e.g., availability and affordability of food can indirectly influence dietary choices and, by extension, Type 2 diabetes; poor air quality can directly trigger asthma)



SOIL: examples of the underlying values, world views, policies and practices that shape the conditions of daily life and pattern health outcomes (e.g., by race, ability, gender, sexual orientation)

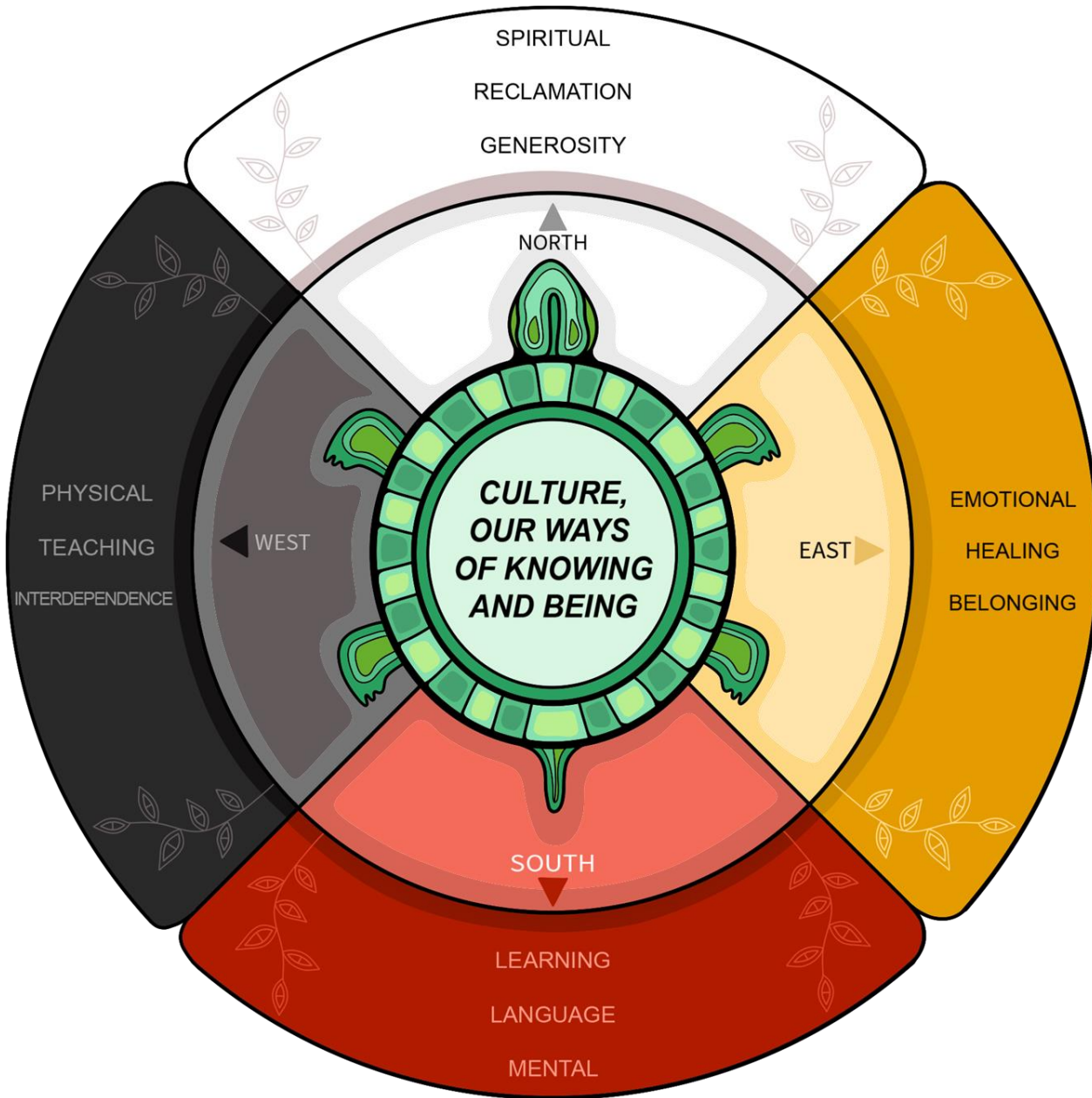
National Collaborating Centre for Determinants of Health. (2024). Let's Talk: Determinants of health. Antigonish, NS: NCCDH, St. Francis Xavier University.

First Nations Mental Wellness Continuum Model (January 2015)



Health Canada - First Nations Mental Wellness Continuum Framework (2015)

Legend (from centre to outer ring)			
	Four Directions (outcomes)		Supporting Elements
	Community		Partners in Implementation
	Populations		Indigenous Social Determinants of Health
	Specific Population Needs		Key Themes for Mental Wellness
	Continuum of Essential Services		Culture as Foundation



Model of Holistic Health and Wellbeing (for Ontario Community Health Centres)

Courtesy of IPHCC Indigenous Primary Health
Care Council | (iphcc.ca)

Alliance for Healthier Communities



Circle of Health (1996)

- Orange: Individual needs
- Yellow: Strategies to improve health (how)
- Green: Populations we can work with (who)
- Blue: Determinants – That make / keep us healthy (what)
- Purple: Values – why we work to improve health (why)

Circle of Health (1996)



Model of Health and Wellbeing (for Ontario Community Health Centres)

Health: is “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.” (WHO)

Goal: is to achieve better health for all. To reach this goal, our model champions transformative change for people and communities facing barriers to health.

Guiding Principles

- The Highest Quality, People- and Community-Centred Primary Health Care
- Health Equity and Social Justice
- Community Vitality and Belonging

Our Model's Attributes

- Population Needs-Based Planning
- A Community Development Approach
- A Strong Focus on the Determinants of Health (mitigation and advocacy)
- Interprofessional, Integrated and Coordinated Membership (team approach)
- Anti-oppression and Culturally Safe Practices
- Accessibility
- Community Centredness and Community Governance
- Accountability and Efficiency

Alliance for Healthier Communities

HEALTH PROMOTION

ONE HEALTH

FOR HEALTHIER

PEOPLE
LIVING ENVIRONMENTS
AND PLANET

HEALTH

PHYSICAL, MENTAL,
SPIRITUAL, CULTURAL,
FINANCIAL, SOCIAL,
ENVIRONMENTAL



A
SYSTEMIC
VISION

TO IMPROVE
HEALTH,
WELL-BEING
AND EQUITY



THAT ACTS ON THE FACTORS THAT INFLUENCE HEALTH

AN APPROACH

MULTI-LEVEL

GLOBAL

NATIONAL

REGIONAL

LOCAL

SUSTAINABILITY AND EQUITY

MULTI-SECTOR

URBAN PLANNING

EDUCATION

HEALTH CARE

WE ALL HAVE
A ROLE TO PLAY

AGRI-FOOD

JUSTICE

SOCIAL DEVELOPMENT

TRANSPORTATION

ARTS AND CULTURE

ECONOMY

DIGITAL

I CAN REDUCE
INEQUITIES

MULTI-STRATEGY

- CREATING FAVOURABLE ENVIRONMENTS (POLITICAL, ECONOMIC, BUILT, NATURAL, SOCIAL, CULTURAL, DIGITAL)
- IMPLEMENTING PUBLIC POLICIES AND PROGRAMS TO PROMOTE HEALTH
- STRENGTHENING COMMUNITY INITIATIVES
- SUPPORTING CITIZEN PARTICIPATION
- BUILDING CAPACITY (EMPOWERMENT)
- ADVOCATING
- ACTING AND PARTNERING ACROSS SECTORS

SOCIAL AND ENVIRONMENTAL JUSTICE

REFIPS (2024) - [Health promotion: A systemic vision to improve health, well-being and equity](#) (online in French only)

Government Sector

Also called the 'public sector', it **horizontally** crosses all departments, and **vertically** crosses all levels (local / municipal, regional, provincial / territorial, federal).

Examples:

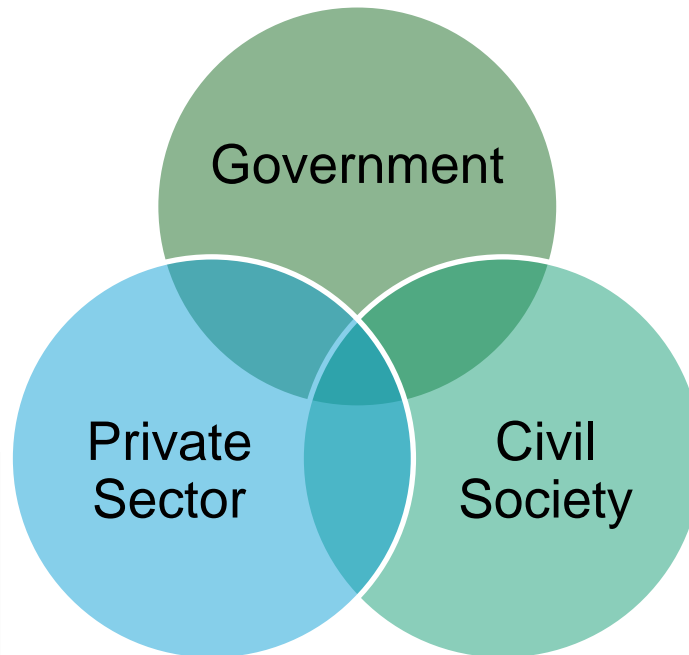
- Ministry of Finance (provincial level)
- Urban Planning Department (municipal level)

Private Sector

For-profit business, both large and small, and industry (including some health and social care organizations), **commerce**, and free **markets**.

Examples in for-profit health and social care:

- retirement facilities
- drug rehabilitation centres
- day care centres



Three-Sector Model

(Dyck et al., in press)

Civil Society Sector

Also called the 'third sector', is made up of ordinary **citizens** (individuals) and **NGOs** (non-governmental / nonprofit organizations).

Typically, arms-length or independent of government with a social, economic, cultural, or religious purpose or mission.

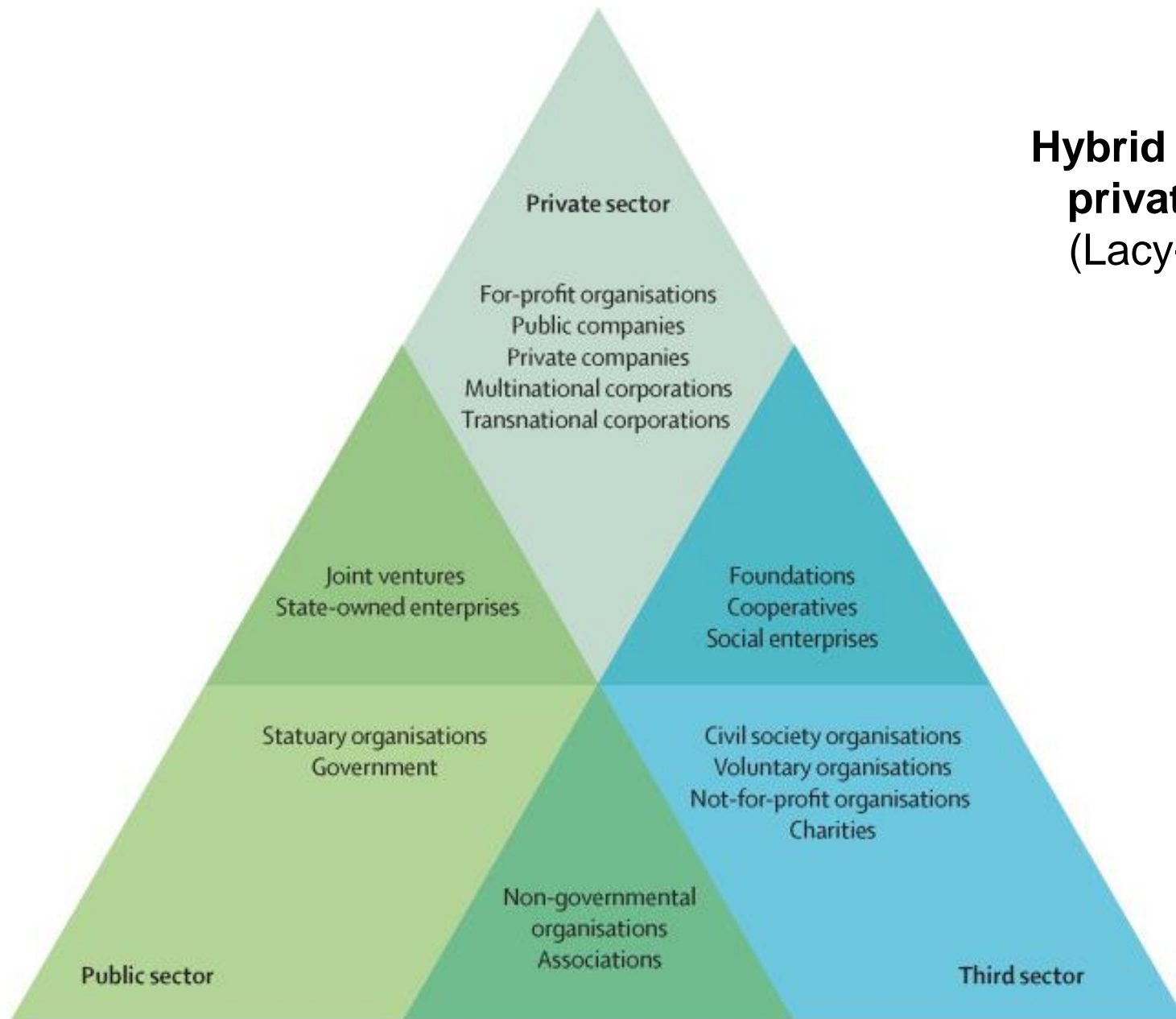
Examples of NGOs:

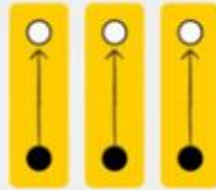
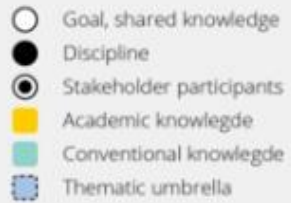
- societies
- charities
- associations
- foundations
- research organizations
- faith-based organizations

Examples of grass-roots organizations:

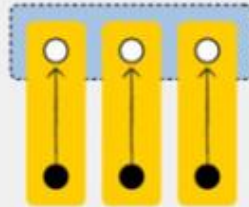
- coalitions
- networks
- social movements

Hybrid entities in the public, private and third sectors (Lacy-Nichols et al., 2023)

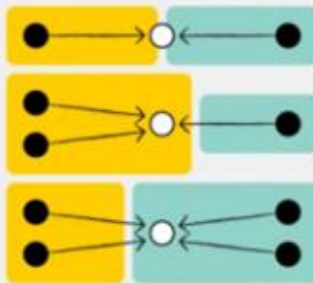




- DISCIPLINARY**
- Within one academic discipline
 - Disciplinary goal setting
 - Develops new disciplinary knowledge



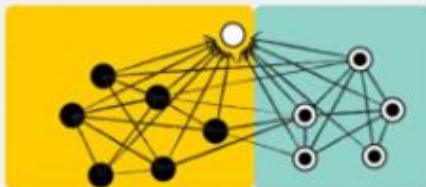
- MULTIDISCIPLINARY**
- Multiple disciplines
 - Multiple disciplinary goals set under one thematic umbrella



- PARTICIPATORY**
- Academic and non academic participants
 - Knowledge exchange without integration



- INTERDISCIPLINARY**
- Crosses disciplinary boundaries
 - Develops integrated knowledge
 - Draws from and contributes to 'interdisciplines'



- TRANSDISCIPLINARY**
- Crosses disciplinary and sectorial boundaries
 - Common goal setting
 - Develops integrated knowledge for science and society
 - Draws from and contributes to 'interdisciplines'

Schematic Representation of Transdisciplinary Research

(Morton et al., 2015)

Pan-Canadian Health Promoter Competencies (2015)

- 1. Health promotion knowledge and skills** - Draw upon a multi-disciplinary base of core concepts, principles, theory and research to understand health issues and inform health promotion action
- 2. Situational assessments** - Partner with communities to conduct a situational assessment for a health issue to assess needs, strengths and opportunities in the context of health determinants and health equity. A situational assessment integrates consideration of the health needs of the population; the social, economic, political, cultural and environmental contexts; stakeholder perspectives; and existing evidence and experience; in order to inform options for health promotion action
- 3. Plan and evaluate health promotion action** - Working with stakeholders, develop a plan to achieve measurable health promotion goals and objectives based on a situational assessment's findings. Modify the plan as needed based on monitoring of its implementation and evaluation of its impact
- 4. Policy development and advocacy** - Reflecting community needs, contribute to the development of, and advocacy for, policies to improve health and reduce inequities
- 5. Community mobilization and building community capacity** - Facilitate community mobilization and build community capacity around shared health priorities.
- 6. Partnership and collaboration** - Work collaboratively with partners and across sectors to enhance the impact and sustainability of health promotion action.
- 7. Communication** - Communicate health promotion information effectively with diverse audiences using appropriate approaches and technologies.
- 8. Diversity and inclusiveness** - Interact effectively with diverse individuals, groups and communities to promote health and reduce health inequities.
- 9. Leadership and building organizational capacity** - Provide leadership within employing organization to build health promotion capacity and performance including team and individual level learning

HPC (2015) Pan-Canadian Health Promoter Competencies and Glossary

What are the core competencies that enable systemic changes?

Synthesis and Description of 10 Competencies (1-5)

Knowing how to include

- 1.1 Ability to clearly establish the intentions, motivations and aims pursued by the entire group
- 1.2 Ability to set up spaces, times, devices and rules for discussion that promote full participation, regardless of status or role in society
- 1.3 Ability to flexibly manage the rules established to allow everyone to contribute

Building bridges

- 2.1 Ability to initiate a dialogue with people whose values, concerns or objectives are far removed from our own
- 2.2 Ability to cross borders and establish collaborations with people from varied backgrounds and socio-cultural and disciplinary sectors
- 2.3 Ability to adapt one's communication, to translate it to reach people from a context different from our own

Having critical thinking from an ethical perspective

- 3.1 Ability to become aware of one's own perspective when faced with a problem or social situation
- 3.2 Ability to question, go beyond polarized points of view, reveal blind spots and challenge the status quo, while adopting a constructive and respectful stance when expressing oneself, prioritizing concern for relationships with others
- 3.3 Ability to project the consequences of one's action over the long term

Dealing with power relations

- 4.1 Ability to identify and recognize the interests, power relations and possible asymmetries that are within us, in the group or in an organization
- 4.2 Ability to evaluate and make explicit how these power relations influence decision-making and/or can exclude and/or maintain the status quo
- 4.3 Ability to recognize what we can act on and activate the levers of action according to the situation and the context of the moment

Communicate empathetically

- 5.1 Ability to introspect: look inside yourself, welcome your states, sensations and emotions and recognize their impact on the way you perceive yourself and interact with others
- 5.2 Ability to listen actively without imposing your own filters and biases
- 5.3 Ability to express yourself in an authentic and non-violent manner

What are the core competencies that enable systemic changes?

Synthesis and Description of 10 Competencies (6-10)

Learning together

- 6.1 Ability to step back and provide feedback to bring out learning and readjust action
- 6.2 Ability to build and collectively make sense of knowledge from various sources and contexts, developed using different methods, lenses and types of analyses
- 6.3 Ability to create a safe and respectful context that generates trust, sharing and risk-taking

Acting in an ecosystem

- 7.1 Ability to implement generative strategies that are beneficial to other resources, to existing interventions and to the overall health of the ecosystem (win-win-win)
- 7.2 Ability to create better alignment between internal management and the needs of the ecosystem in which one acts
- 7.3 Ability to combine knowledge from various sources, methods and contexts and to give it meaning collectively

Dialogue in a context of complexity

- 8.1 Ability to value the expression of divergent points of view
- 8.2 Ability to deal with tensions and polarizations
- 8.3 Ability to resolve conflicts in a peaceful and prosocial manner
- 8.4 Ability to recognize what our own experience makes us live and to engage in action despite tensions and divergences (psychological flexibility)

Mobilize knowledge

- 9.1 Ability to clearly communicate knowledge from different sources to different audiences
- 9.2 Ability to promote and mobilize scientific and experiential knowledge useful for a better understanding of the systemic challenge on which we want to act or the lever of action to activate
- 9.3 Ability to create systems allowing appropriation of knowledge by target audiences

Thinking systemically

- 10.1 Analytical capacity by which we consider several sources of influence in interaction and which act on a situation
- 10.2 Capacity to know and recognize one's role and contribution as an individual or organization in a system (more global ecosystem)
- 10.3 Intellectual and socio-affective capacity to consider one's own perspective and those of others to nourish and develop a new understanding

Communagir-Innoweave, June 2022
Translated from French using Google Translate

“Wellbeing is central to flourishing of living systems. Living systems, be they human or non-human, small or big, individual or collective, have the potential to fulfil their purpose by realizing their capacities, that is, they can flourish. Humans and nature are interconnected in deep ways.”

Lenton, T. M., & Latour, B. (2018)

“Wellbeing is an organizing principle that ensures simultaneous flourishing of people and nature. It binds together an ethic of nature and ethics of people/community into a practical framework for creating integrated socio-ecological wellbeing.”

Paul Shrivastava & Laszlo Zsolnai (2022)

Feedback?

You can provide feedback via a short survey tool:

<https://forms.gle/WVZdeRGmm8qrPdCL7>

You can also be in touch directly via the contact information below to email your comments and questions.

Lesley Dyck, Project Coordinator

lesley@lesleydyck.ca

We would like to know what you think about these definitions and related frameworks.

What resonates the most for you?

What is confusing or missing?

How could we simplify or improve the language?

What resources can you share that might be helpful?