



Key Characteristics of Exemplary Health Promotion and Nutrition Programs

The World Health Organization defines health promotion as the “process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.”¹ A focus on group or population interventions distinguishes health promotion programs from medical or clinical health services, which typically focus on one patient’s health status and health behaviors. Health promotion programs can range from education programs, preventive screening events, health support groups, community organizing and advocacy work, in addition to many other activities.

PHMC Research and Evaluation staff interviewed key experts in the field of Health Promotion and Nutrition Education from the Health Promotion Council of Southeastern Pennsylvania, an affiliate organization of PHMC.² These experts provided valuable insight into best practices of health promotion programs, as well as special considerations for congregations with an interest in providing health promotion or nutrition programs.

Key Characteristics

Leadership: A successful health promotion program must have committed leadership and sound organizational structure. This is especially important in a faith-based setting, where health and wellness is not always part of the congregation’s mission. Since some faith-based organizations concentrate solely on spiritual issues and not physical/material issues, to have a successful health program, one respondent noted that congregation leaders must “intentionally include health as part of the organization’s mission”. If faith leaders show their commitment to addressing health and wellness issues, the congregation will follow suit and support the programs. Staff interviewed for the project noted that they believed the only reason why some health programs existed was because faith leaders encouraged their members to volunteer or become involved with the program in some capacity.

Staffing: Trained staff are critical to health and nutrition education programs. Staff do not need to have degrees in health education or nutrition, but they should receive training from an agency about the specific health behaviors that the program is promoting. For nutrition educators in particular, one expert said that it is most important that staff be able to cook, since cooking demonstrations are an important element of nutrition programs.

¹ WHO, 2010: http://www.who.int/topics/health_promotion/en/

² Since 1981, HPC has worked in the area of chronic disease education, prevention, and management, with programs serving vulnerable populations in the Philadelphia area (www.hpcpa.org). They have also worked with local agencies on building their organizational capacity and training staff on best practices in community health.



Volunteers: Many health promotion programs are staffed by volunteers, so it is very important to have a volunteer coordinator position to manage their work. The coordinator can be a volunteer or a paid position, but someone needs to manage all the different tasks and shifts for volunteers. Without a coordinator, volunteers may feel isolated or overlooked without concrete things to do.

For faith-based organizations that are interested in having a health promotion program, members of the congregation who work in the health field often volunteer their time and skills. Drawing upon resources from within the congregation builds more congregational support for the program. However, the program must consider whether or not services can be sustained on volunteer time. If the program is an annual health fair, then volunteers would be suitable. If the health program is a weekly exercise and cooking group, they need to evaluate volunteers' willingness to commit to a prolonged timeline.

Program content: Health promotion and nutrition activities should be hands-on and practical. Healthy cooking demonstrations and free samples of food engage participants and allow them to experience firsthand how they might be able to incorporate new foods into their diet.

Space: A health program must have enough space to comfortably carry out its activities, whether they are focused on cooking demonstrations, food distribution, exercise classes, or health screenings. Certain programs that involve food or food preparation require external certification for sanitation reasons.

Accessibility: HPC staff mentioned the importance of bringing services to the community, instead of having the community come to the program. Recruiting people to go to a health promotion event is difficult, so to ensure participation, the services should be delivered at a site where people already congregate, such as faith-based organizations. Health and nutrition programs can also work with food pantry and emergency food programs to deliver nutrition education when people pick up their food packages. Healthy recipe cards and information about how to cook the food in the package are ways to ensure that participants receive some helpful advice about the products they receive.

Partnerships: Since the main mission of congregations is not to deliver health promotion services for their members, partnerships with health agencies are important for health programs success. Local hospitals usually have community outreach departments that are able to work at health fairs, deliver preventive screenings, and provide health education sessions. Students working towards a health degree may also be available to work at events that faith-based organizations conduct.

In addition to partnering with health agencies, congregation-based programs should collaborate with other local community groups to ensure that the services they provide do not overlap. If many services are already provided in the community, a congregation may want to consider fulfilling a different need. Being aware of all the community resources also enables the faith organization to refer congregation members to other groups that can



provide help. Partnering is an efficient way for faith-based groups to help their community without needing to invest too many of their own resources into developing their own programs and managing staff and volunteers.

Community relationships: Successful community-based health programs establish solid relationships with the community where it is located. Programs should assess community needs and deliver targeted services to meet those needs. When a program is new, marketing the program to the community is critical to establishing the program as a viable resource in the community.

Faith-based organizations that have successful community health programs extend their reach beyond the congregation and make the programs open to all members of the community. Having a neutral secular name instead of a religiously themed name is important so that all people feel welcome to attend. If a program has a religious name, community members are more likely to assume that the program is only for people who belong to that faith. Houses of worship should not proselytize to program participants or require them to attend services as part of program membership.