

Visión y Compromiso™



The Promotor Model for Community Transformation

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**Washington Promotores/Community
Health Workers Network 6/4/19**

THE TRANSFORMATIVE PROCESS

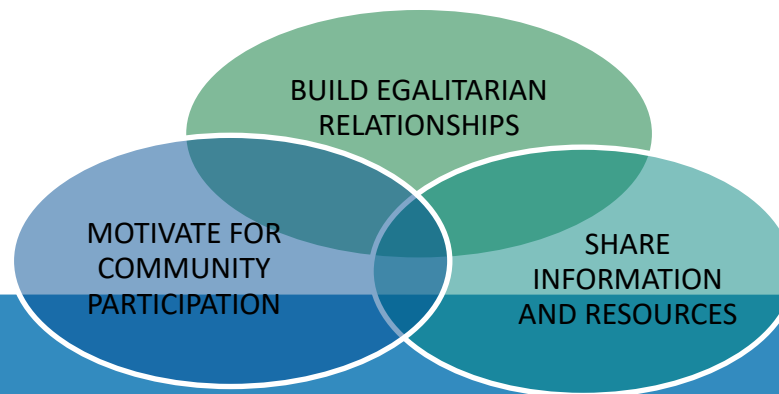


“Many of us are leaders in our community. We are compassionate and have this desire to serve. We don’t just work at an office from 9 to 6. No, we live in the community. And we have to be able to go and talk to people who are in need late at night or during the day – whenever they need it. This is the work and we give it with our hearts.”

THE COMMUNITY TRANSFORMATIONAL MODEL

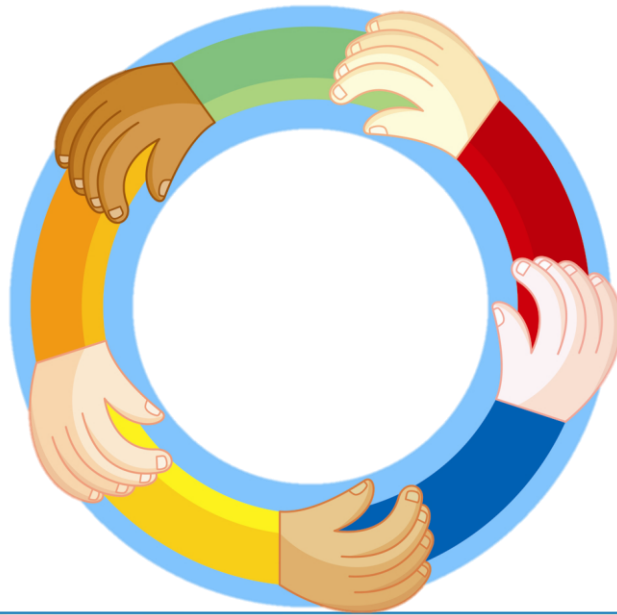
THE PROMOTOR MODEL

The Promotor model in California is a social change model. It can be implemented with any issue (i.e. diabetes, neighborhood safety, breast cancer) because it is the quality of the relationships, not a particular issue area, which has the potential to create community change. If the Promotor model is allowed to function according to the theory of change, Promotores will:



PROMOTORES THROUGHOUT HISTORY

International Origin



WHO ARE PROMOTORES?

- Promotores are community members who act as natural helpers and liaisons to their neighbors and local neighborhoods; they are characterized by servicio de corazón – service from the heart – (Visión y Compromiso, 2003).
- Promotores are powerful advocates for individual and community transformation. They share information with community residents about local resources and have the capacity to influence policies related to critical issues facing their communities. The role of the Promotor extends far beyond the disease-related functions (BIO-MEDICAL MODEL) of community health to a passion for human rights and social justice (SOCIO-ECOLOGICAL MODEL).



THE PROMOTOR MODEL

“I don’t think many people understand how important popular education is to the model. The philosophy of any curricula must be based in popular education – no matter if it is for an immunization campaign or domestic violence. The critical analysis it brings is transformative. Popular Education helps us create a space for people to begin to analyze root causes of issues affecting their communities – upstream and downstream. When people begin to analyze the situation, they start to recognize their own roles and responsibilities. They learn to recognize the problem, analyze the attitudes, and come to understand why things are the way they are. Then they can think about what they need to do to first change their own lives and then help others to change theirs too.”

COMMUNITY PARTICIPATION



In **1979**, the World Health organization (WHO) held a conference in Russia and identified **community participation** in health as a **key component** of primary care.

COMPREHENSIVE HEALTH

The **Ottawa Charter** presented in Canada at the first International Health Promotion Conference in 1986, states that the conditions and requirements for health are peace, shelter, education food, income, a stable eco-system, sustainable resources , social justice and equity.

To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment. Health is, therefore, seen as a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities. Therefore, health promotion is not just the responsibility of the health sector, but goes beyond healthy life-styles to well-being.



COMMUNITY HEALTH

Healthy communities are defined by a process that includes: 1) A high degree of public participation in and control over decisions affecting one's life, health and well-being; 2) A clean, safe, high-quality physical environment (including housing quality); 3) The meeting of basic needs (food, water, shelter, income, safety, work) for all people; and 4) A strong, mutually supportive and non-exploitative community. In this way, health promotion "requires the empowerment of individuals and communities, enabling them to exert more control over all of the factors that contribute to their health and well-being. This means that the community— both as individuals and as members of community and neighborhood organizations – has to be centrally involved in the process of creating a healthier environment. They, or their representatives, need to be at the table as active participants." (Breslow, 2002)

HEALTH EQUITY & SOCIAL DETERMINANTS OF HEALTH

Health equity is achieved when “every person has the opportunity to ‘attain his or her full health potential’ and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.” There are many factors that affect the ability to achieve health equity, including the circumstances in which people are born, grow, live, work, and age, as well as the systems in place to deal with illness, which are known as social determinants of health. Social determinants of health can include income, education, employment status, transportation, housing, access to health care services, and exposure to pollution. These, in turn, influence safety and adequacy of housing, air and water quality, crime rates, behavioral health, and access to preventive health care.

IDENTIFYING HEALTH DISPARITIES TO ACHIEVE HEALTH EQUITY
IN SAN DIEGO COUNTY: SOCIOECONOMIC STATUS
March 2016

Primary Characteristics and Values of Promotores

“Warmth and an attitude of service is something we have been raised with – it is not something you can get from a training.”

1. Promotores create and cultivate egalitarian relationships based on mutual trust, understanding and respect.
2. Promotores are committed to sharing information and resources.
3. Promotores approach the community with empathy, love and compassion.
4. Promotores are accessible and trusted members of the community where they live.
5. Promotores share similar life experiences as the community.
6. Promotores have a profound desire to serve the community, are tireless in their service, and limitless in their generosity of spirit.
7. Promotores communicate in the language of the people and are knowledgeable about the community’s cultural traditions.
8. Promotores are a two-way bridge connecting the community to resources and ensuring that institutions respond to community needs.
9. Promotores are natural advocates who are committed to social justice.
10. Promotores are effective role models for community change.

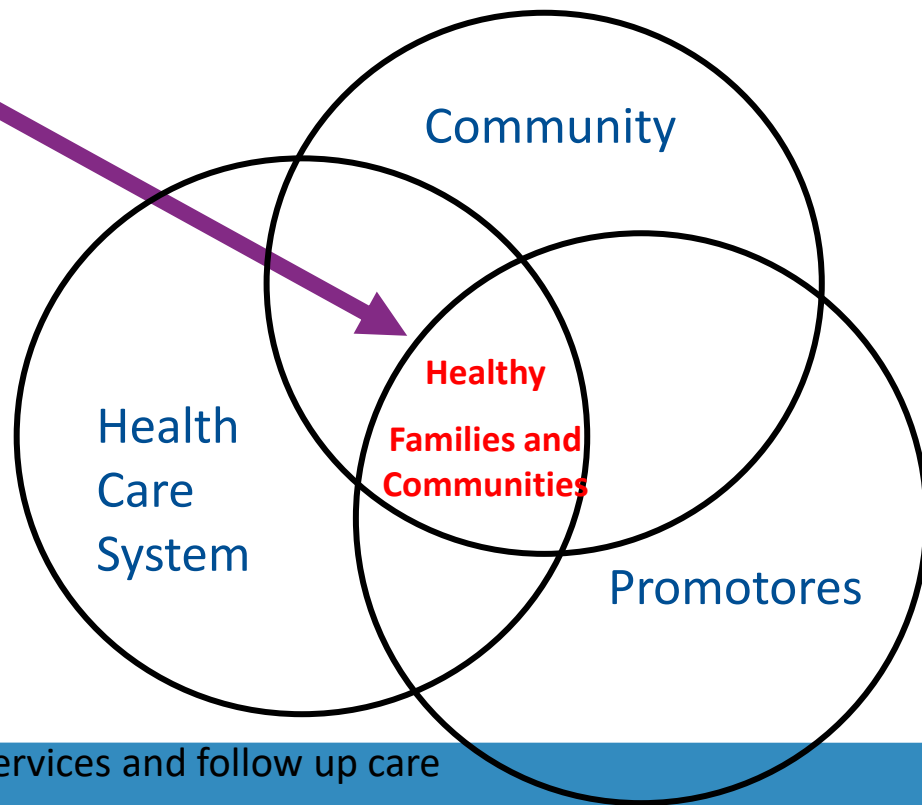
PROMOTORES REDUCE DISPARITIES AND PROMOTE HEALTH EQUITY

PROMOTORES

- Naturally connect with and maximize existing social networks
- Increase trustworthiness
- Local workforce development
- Provide cost-effective services
- Reinforce cultural values and norms
- Encourage community participation in improving health

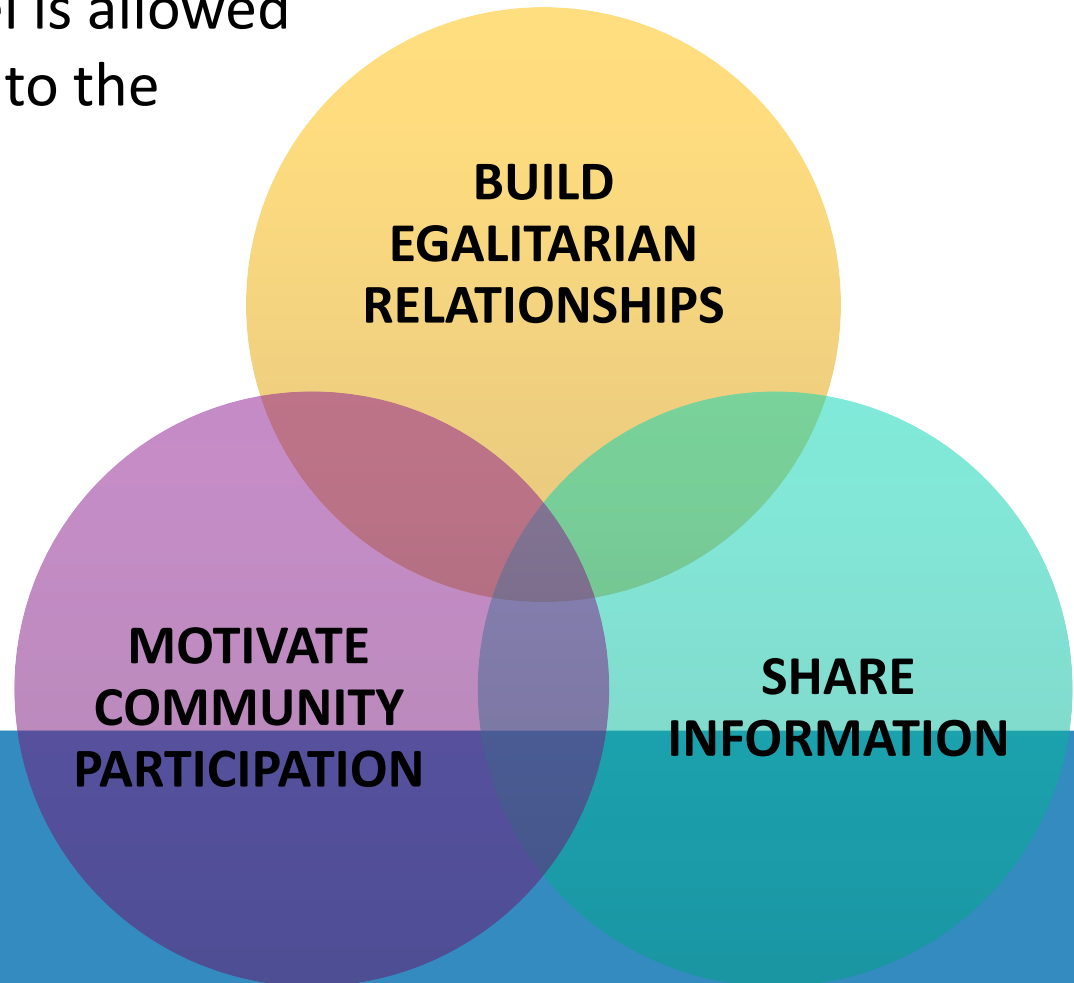
As Liaisons, they help:

- Keep appointments
- Increase access to prevention, scope of services and follow up care
- Decrease effect of cultural and linguistic barriers for organizations



THE COMMUNITY TRANSFORMATIONAL MODEL

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THE COMMUNITY TRANSFORMATIONAL MODEL

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“We are Promotoras, community leaders, community health workers, community health advocates, community health outreach workers, family health workers, navigators, and many more. But the principles and values we use in this model are the same. Mostly, we all focus on the needs of the community.

It is the funding that creates professional separation and drives the title.”

OUR CHALLENGE. OUR OPPORTUNITY

“It is not just the promotora who must fit the organization, but the organization must fit the cultural values of the community-based model too. Organizations who truly understand promotores use popular education methodology appropriate for the community transformational model. Core competencies are also linked to the model. System readiness means you already have in place values and principles to support the model and you understand what the model needs to be successful.”

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***Working Towards a
Healthy and Dignified Life***