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| **Language of marginalisation and oppression** |
| **Setting/problem**  When addressing the issue of equity health promoters are asked to think specifically about groups who are unable to gain equitable access to many of the determinants of health: adequate income, housing, education, social cohesion etc. These groups are described in a variety of ways, for example, marginalised, vulnerable, excluded, powerless, hard to reach.  **Intervention**  This paper will explore the formal definitions of some of this language, the common usage of the language and how this usage creates positive or negative contexts for empowerment and other health promotion practices with groups labelled in this way.  **Outcomes**  The paper will particularly examine how the use of this language can focus health promoter attention on individual deficit and blame or on the contextual and socio-political perspective of a particular group’s circumstances.  **Implications**  Health promoters will have an opportunity to reflect on the language they use to describe the groups they are working with and how this language can create either benefit or harm to the particular populations.  **Preferred presentation format**  Oral presentation |