

Transformative health promotion: what is needed to advance progress?

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Abstract: Transformative health promotion actions are needed to achieve health equity and the Sustainable Development Goals (SDGs), advance human and planetary wellbeing, and ensure that we build back better post-COVID-19. Health policies and systems need to be aligned with the values, principles and strategies of health promotion and investment made in strengthening essential health promotion functions. This paper considers how transformative health promotion can be advanced, by reflecting critically on what progress needs to be made and the structures and processes that are required to strengthen health promotion at a systems level. Progress in implementing health promotion is variable, and there is a general lack of investment in developing the necessary health promotion systems for substantive progress to be made. Key enablers and system requirements for comprehensive health promotion are examined, including the following critical elements: (i) effective advocacy for the concept and practice of health promotion; (ii) enabling policy structures for universal health promotion actions on a cross-sectoral basis; (iii) effective implementation systems, support mechanisms and workforce capacity for multisectoral health promotion action; (iv) investment in innovative research methods and knowledge translation to inform transformative health promotion approaches. In strengthening capacity to implement transformative health promotion actions, political will needs to be mobilized to ensure that dedicated and sustainable funding is made available, and the organizational and workforce capacity to deliver effective health promotion interventions is in place. The International Union for Health Promotion and Education (IUHPE) plays a central role in advancing transformative health promotion through mobilising and supporting its global members and partners in strengthening health promotion systems.

Keywords: Transformative health promotion, health promotion systems, enablers and system requirements

Introduction


Transformative health promotion approaches are needed to advance population health and wellbeing and address current and future challenges to global health and wellbeing. Achieving the goals of global health strategies (1) and the United Nations (UN) Sustainable Development Goals (SDGs) (2) calls for responsive and flexible health systems and approaches that can move beyond a focus on curative health care to deliver population-based strategies that will ensure healthy lives for all,

address the broad determinants of health, and place empowered people at the centre of their own health and wellbeing. Investment in health promotion has the potential to bring transformational change in how population health is understood, and expand the range of innovative mechanisms and strategies that can be used to promote health and wellbeing, and reduce health inequities.

The scale of the COVID-19 pandemic and its impact on people's health, and their social and economic lives, has highlighted the urgent need for comprehensive multisectoral responses that can

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address the upstream drivers and consequences of health challenges. The need for responsive public health systems is thrown into sharp focus, in particular the critical role of health-promoting social and behavioural interventions, and the importance of effective coordination and collaboration at a country and global level. The pandemic has exposed systemic failures to invest in health infrastructures, particularly those related to multidisciplinary public health and health promotion. The inequities and structural deficiencies exposed in the capacity to respond to the pandemic calls for a profound, structural and sustained transformation of health systems (3). Health promotion must be at the centre of this transformation to ensure that the underlying causes and effects of health challenges are addressed. This entails placing a greater focus on population-based interventions and community empowerment strategies that can increase people's control over their health, reduce health risks and inequities, enhance social cohesion and community solidarity, and create supportive environments for sustainable population health and wellbeing. Health promotion interventions at a community and population level have been shown to be critical in addressing the health challenges of NCDs and other infectious diseases, improving mental health, and addressing the social determinants of health and health equity (4,5). It is time to address the chronic lack of investment in health promotion in order to ensure that systems and processes are put in place that can deliver transformative health promotion actions for long-term change in an evidence-informed, integrated, and sustained fashion.

This paper considers how transformative health promotion can be advanced, by reflecting critically on what progress needs to be made, and what structures and processes are required to strengthen health promotion at a systems level. The enabling mechanisms that are needed at a conceptual, policy and implementation level to strengthen health promotion systems are discussed.

The need for transformative health promotion action

Addressing current and future health challenges

The rationale for health promotion is as compelling today, if not more so, than it was when

it emerged as a dynamic new force within public health in the 1980s (6). The complexity of current threats to health and wellbeing, with the most disadvantaged in society bearing the greatest burden, means that transformative action is urgently required to make measurable progress. Addressing the broad and complex nature of the challenges presented by increasing health inequities, infectious diseases, noncommunicable diseases (NCDs), mental health challenges, humanitarian crises and planetary health requires a transformation of public health systems and approaches. Treatment approaches and vaccines alone are not sufficient to eradicate diseases. Comprehensive population-based approaches are required to bring about the scale and scope of changes needed for sustainable health improvement at a population level. Supportive policy measures focused on strengthening health promotion are required to ensure effective action across governments and society that will lead to more equitable health outcomes.

Strengthening the capacity of health systems to deliver on improved population health and wellbeing means reorienting health policy and systems to focus on creating the environments, structures and processes that shape the development of good health at a population level. Strengthening health promotion is an effective and efficient means of enhancing people's mental and physical health and ensuring their social wellbeing across the life course. A narrow focus on disease-oriented health care and treatment on its own is unsustainable financially, and will not achieve the necessary improvements in population health (7,8). A fundamental shift in focus from disease to health in our health systems is needed. This entails transforming existing organizational structures, resources, workforce and services toward promoting population health and wellbeing and integrating health promotion across the health system. The practical implementation of health promotion will improve the performance of health systems and strengthen their capacity to improve population health and reduce health inequities, both of which are key to realization of achieving health for all and ensuring that we build back better post-COVID.

Reducing health inequities

Delivering on the UN SDGs (2) and universal health coverage (UHC) (9) calls for a renewed focus

on a determinants of health approach, and for prioritization of policies and strategies that can address the social, economic, commercial, cultural and environmental determinants of health. Addressing the structural determinants of health requires change at the level of social policies and systems in order to reduce poverty, improve living environments and working conditions and ensure equity in access to resources and services, alongside changes in societal norms and values that will tackle structural racism and discrimination and promote social justice. Closing the health equity gap calls for comprehensive action based on a whole-of-government and whole-of-society approach (10). An integrated policy approach is integral to effective action, entailing multisectoral action across governments, civic society and international organizations to ensure healthy lives and sustainable living environments (11).

Achieving intersectoral action for health is, however, challenging as it requires political will, coordinated action and structures to advance cross-sectoral policy development and implementation. A 'health in all policies' approach (HiAP) (12) emphasizes intersectoral actions across government and society and calls for new models of working, including effective intersectoral structures and processes, participatory processes and partnership working. However, a HiAP approach has been implemented comprehensively in only a handful of countries, and the intersectoral policy systems and structures necessary to support its implementation are lacking in most countries.

Health promotion as a transformative strategy for advancing wellbeing

The growing focus on wellbeing (13), and the creation of wellbeing budgets in some countries, has brought the wellbeing agenda into the centre of the policy making process in governments. The UN Political Declaration Rio+ Summit (14) committed member states to improving the wellbeing of the planet and its inhabitants going beyond a focus on gross domestic product as the sole indicator of a country's growth and development. The wellbeing agenda guides policy towards a more holistic vision of human development and a more integrated approach to growth and social progress. A positive wellbeing focus calls for new policy frameworks and

a re-thinking of social, economic and ecological policies and their impact on wellbeing and human flourishing (15).

Promoting mental wellbeing was explicitly referenced for the first time on the UN sustainable development agenda in 2015, thereby acknowledging that good mental health is central to ensuring healthy and flourishing lives for all, and contributes to achieving a wide range of health, social, economic and development outcomes. Frameworks for population mental health promotion clearly endorse the central role of intersectoral actions across governments and society in creating the conditions that will create and promote positive mental health and reduce mental health inequities (16), including those exacerbated by the COVID-19 pandemic (17). Effective and feasible population-based mental health promotion interventions have been developed that can be implemented across the lifecourse and across key settings (18). However, these comprehensive universal strategies require an enabling policy structure, processes and capacity to ensure that they can be implemented in a sustainable manner.

The enablers of transformative health promotion

From rhetoric to transformative actions

While many global health policies and strategies are aligned with the goals of health promotion, political commitment to implementing health promotion is still lagging in many countries. Health systems and budgets remain focused primarily on curative and clinical care (19), and there has been a lack of long-term investment in health promotion in most countries. Re-balancing the prioritization of treating and preventing disease over the promotion of longer-term health improvement is difficult to achieve, especially when health funding and resources are under pressure. Health promotion interventions have been shown to be cost-effective in improving population health, reducing risks for NCDs, improving mental health and addressing the determinants of health (5,20,21). However, implementation gaps exist in policy and practice, and this combined with a lack of funding and political commitment results in a failure to implement health promotion and thereby a failure to realize its full potential. This represents a lost

opportunity with significant consequences in terms of diminished levels of health and wellbeing, avoidable illness and suffering, and broader social and economic impacts (22).

The Ottawa Charter (6) put health promotion on the policy agenda of many countries. While some countries have made good progress in establishing the necessary infrastructure for implementing health promotion policies and actions, progress generally has been characterized as lacking political commitment, with significant challenges remaining in integrating health promotion as a core plank of modern health systems (23–25). Approaches such as healthy settings have been successfully implemented in a number of countries globally (26). However, the level of infrastructure and capacity to support and sustain integrated health promotion varies considerably. Capacity mapping exercises across high-, middle- and low-income countries (27,28) suggest that health promotion systems are poorly developed and underfunded in most countries and there is a limited appreciation of the infrastructure, resources, knowledge and skills that are required to translate health promotion into action. As a result, there are significant implementation gaps and a lack of investment in the necessary health promotion systems for substantive progress to be made.

What is needed to advance progress?

Advancing progress calls for renewed efforts in prioritizing health promotion on the policy agenda and ensuring effective structures for its delivery. For this to be achieved, political commitment needs to be galvanized, with the creation of enabling intersectoral policy structures and processes for the sustained implementation of comprehensive health promotion policies and actions at a country level.

The International Union for Health Promotion and Education (IUHPE) report, ‘Shaping the future of health promotion: priorities for action (29)’, set out the policies and system conditions necessary for effective health promotion in the 21st century. The main priorities included: putting healthy public policy into practice; strengthening structures and processes in all sectors; increasing knowledge-based practices; building a competent health promotion workforce; empowering communities. The WHO Nairobi Call to Action (22) also outlined key strategies and commitments to close the implementation gap in

health promotion, especially in low-income countries. Among the strategies emphasized were: developing knowledge and skills for intersectoral collaboration, and effective delivery as a means of achieving a critical mass of capacity for health promotion globally. Over a decade later, these goals remain unmet in many countries, and the actions outlined are still required to strengthen health promotion systems and ensure successful implementation. A report on fostering health-promoting health systems in the European Union (30) called for a strengthening of the capacity of countries to implement health promotion at a political, policy and service delivery level and recommended a range of policy measures and financial mechanisms to support the implementation of transformative health promotion policies and practices.

Enablers and requirements for strengthening health promotion

In this section, key enablers and system requirements for comprehensive health promotion initiatives are considered, including those at a conceptual, policy and practice level.

Effective health promotion advocacy

Effective advocacy approaches are needed to promote a better understanding of health promotion and to communicate clearly its key purpose and functions and raise its visibility within public health, the health sector and in society more generally. Public discourse on health is dominated by a focus on illness and hospitals, and it is, therefore, difficult to mobilize a strong demand or base of support among the public, interest groups and opinion leaders in shaping a health promotion agenda. The distinction between promotion and prevention is often blurred, and there is a lack of understanding of where health promotion sits within public health and the wider health system. As health promotion requires a more long-term commitment and vision for embedding change at a wider societal and population level over time, this can make it more difficult to get buy-in and support from politicians and policy makers (31). Organized advocacy methods are needed to effectively frame the health promotion agenda for different policy, practice and public audiences. As outlined in current health

promotion advocacy models (32), key concepts, evidence and strategies need to be translated into accessible and persuasive language that will raise the profile of health promotion, create a demand for action and enable policy and systems change for advancing health promotion. Effective public engagement is also required to generate a better public understanding of the determinants of health and wellbeing and to demand greater accountability for health creation and promotion at a country and government level.

Policy structures and processes

The predominance of a medicalized culture within health systems reinforces a policy focus on illness and health care services and can lead to resistance in addressing more comprehensive approaches required to address the upstream determinants of health (33,34). Even when health promotion is included in health policy, this can result in a drift towards topic-specific and narrower behaviour-change initiatives ('lifestyle drift') with less of a focus on comprehensive intersectoral approaches, which are more complex and more difficult to coordinate and evaluate (24,35). The perceived complexity and broad scope of health promotion can result in a diffusion of responsibility and a lack of institutional ownership. In addition, interference from vested commercial interests can also make securing political and policy support quite challenging (36).

To strengthen health promotion systems, a number of key system requirements have been outlined in a Position Statement by the International Union for Health Promotion and Education (37). This Position Statement calls for leadership at the highest political level and intersectoral governance in adopting robust policies and action plans and ensuring that the necessary institutional capacity, funding and resources are made available for effective and sustained implementation of health promotion actions. Systems requirements are also outlined at the level of creating enabling implementation structures and delivery mechanisms. These include creating the necessary organizational capacity within the health system and beyond, partnership working across sectors, technical expertise and the training and recruitment of a competent and skilled health promotion workforce. Each of these requirements will be addressed in turn.

Political and policy requirements

Political commitment is key to addressing institutional barriers at a policy and political level and bringing a clear focus on the promotion of population health and health equity. While some countries have established dedicated policy divisions for health promotion, few have dedicated ministerial level responsibility specifically for health promotion. Having such a position ensures commitment to health promotion within the political and policy system, and addresses the need for clear responsibility and accountability for delivering on health promotion at a national or regional level.

The development of national action plans with a clear set of health promotion goals and specific objectives are also critical for ensuring that policy objectives are translated into priority actions. Such plans need to clearly specify desired outcomes, processes and mechanisms for delivery and accountability for action over a specified period.

Enabler requirements

Sustainable financing of health promotion is crucial as adequate funding needs to be safeguarded to ensure continuation over time. A study by the Organisation for Economic Co-operation and Development (OECD) (19) shows that less than 3% of total health care expenditure is typically spent on prevention and health promotion, with spending dropping dramatically during periods of economic recession. Protection mechanisms are required, for example, through clearly earmarking funding or setting target levels or percentages of total health expenditure. Institutions such as Health Promotion Foundations have been established to provide new modes of paying for health promotion (38). A number of options for funding multisectoral health promotion actions have also been proposed, including earmarked funding, delegated financing, budgeting schemes and new investment models (39,40). Dedicated and sustainable funding is critical to ensure that health promotion priority actions can be properly resourced and sustained into the future.

Dedicated health promotion institutions with a clear mandate for health promotion policy development, programme implementation and evaluation are needed to strengthen action at national and regional levels. Institutional structures, such as health promotion institutes, foundations,

government departments and service provision arms, need to be established and appropriately resourced at a country level. These structures are vital to effective health promotion implementation and advancing the development of dedicated health promotion practice functions.

Mechanisms for cross-sectoral collaboration are needed to address the determinants of health and implement a HiAP approach. A clear governance structure for health promotion is required to ensure delivery on priority strategies across different sectors and government departments. This involves processes for inter-governmental policy development, including health impact assessments of public policies and cross-sectoral decision-making and planning processes to ensure policy coherence (41).

High-level leadership ensures that health promotion is prioritized within national policies and that technical guidance and resources are provided for the implementation of priority health promotion actions. Health promotion leadership is necessary for the strategic development of organizational structures and processes for planning, implementing, evaluating and sustaining innovative intersectoral actions and strengthening health promotion capacity at a national level.

Health promotion workforce competency is essential to effective implementation and requires a cadre of skilled and trained practitioners with the necessary knowledge and skill-mix (42). International developments led by IUHPE have identified core competencies for health promotion (43,44), including a comprehensive framework for informing workforce development and training in Europe (45) and an international competency-based Accreditation System, which accredits individual health promotion practitioners and postgraduate level educational programmes globally (<https://www.iuhpe.org/index.php/en/the-accreditation-system>). These competency-based frameworks provide an important quality assurance function for health promotion practice and shape the curricula for postgraduate training and professional development for the next generation of health promoters.

Delivery and implementation requirements

Effective implementation of comprehensive health promotion interventions calls for infrastructures that can support delivery both within the health system

and across sectors. This requires the development of organizational capacity and structures with a clear mandate to support delivery of intersectoral health promotion at the national and local level.

Effective partnership working is needed to develop and sustain health promotion actions across sectors, working in collaboration with communities, governmental and non-governmental agencies (46). Effective consultation processes and community engagement strategies are also required to enable active public engagement in policy and practice development (47), including meaningful participation by vulnerable and socially marginalized groups and young people.

Investment in evidence generation and evaluation is necessary to build a strong evidence base for health promotion and ensure that evidence is translated into policy and practice. Research evidence is needed from intervention and implementation evaluation studies, evidence synthesis, economic studies and epidemiological studies of positive indicators of health, to support effective health promotion strategies and inform the scaling-up and sustainability of interventions, especially in low-resource settings. The complexity and breadth of health promotion practice requires a wide spectrum of research methods, including innovative transdisciplinary methods that can capture the systemic impact of upstream and multilevel intervention approaches. Methodologies to undertake the systematic assessment of the health equity impact of policy making across sectors are also needed to support HiAP implementation and monitoring. The development of knowledge translation (KT) for health promotion is especially important to promote the more effective use of evidence in policy and practice. Building on initiatives such as the IUHPE Global Programme on Health Promotion Effectiveness (48), further investment is needed in strengthening KT functions through the development of dedicated health promotion KT programmes. KT mechanisms play a critical role in ensuring that existing knowledge and evidence is translated effectively to address health challenges and that evidence-based tools, methods and services are developed to support best practice and policy and reduce health inequities.

Conclusions

Transforming health systems to achieve health equity, the SDGs and ensuring that we build back

better post-COVID-19 requires considerable change and calls for a re-aligning of health policies and systems with the values, principles and strategies of health promotion. To ensure transformation means investing in comprehensive and innovative health promotion policies, practice and research that will act as drivers of population health, wellbeing, social and economic development and a flourishing and sustainable society. A range of mechanisms outside of the health sector will need to be applied to support the implementation of transformative health promotion policies and practices, including reforms in other policy areas that can address the wider determinants of population health and reduce health inequities. This will require strong political and technical leadership and investment in developing the policy mechanisms and organizational capacity for effective intersectoral action.

Reviewing current progress, it is clear that prioritising health promotion on the policy agenda and integrating it more effectively within health systems requires a strengthening of the essential health promotion functions at a broader political and policy level as advocated by IUHPE (37). There is an urgent need to address the longstanding underinvestment in health promotion and to tackle fragmented and inadequate implementation at a country level. A comprehensive response to the implementation of the SDGs and UHC, and the pandemic, calls for a clear focus on strengthening health promotion systems. This entails advancing the following critical actions: (i) developing effective advocacy to promote a better understanding of health promotion and its key purpose and functions; (ii) enabling policy structures for universal health promotion actions on a cross-sectoral basis; (iii) establishing effective implementation systems, support mechanisms and workforce capacity for multisectoral health promotion action; (iv) developing innovative research and KT methods to inform transformative health promotion approaches. In strengthening the capacity of countries to implement health promotion, sustainable and dedicated funding is required, together with the organizational and workforce capacity to deliver effective health promotion interventions.

As the global professional body for health promotion, IUHPE plays a vital role in advancing transformative health promotion actions. The new five-year strategy (IUHPE 2021–2026) places

strengthening health promotion systems at the centre of its priority actions, as this underpinning requirement is critical in addressing global health challenges, supporting action on the determinants of health, mental health and wellbeing and the development of the health promotion field (see details at: <https://www.iuhpe.org/index.php/en/>). Working in collaboration with international members, partners and agencies, IUHPE emphasizes the importance of advocacy, leadership, capacity development, knowledge development and translation in supporting countries to implement comprehensive health promotion strategies and strengthen the quality of health promotion policy, research and practice. Central to this is IUHPE's role in mobilising and supporting the global community of health promoters in developing and implementing health promotion actions that will deliver improved population health and health equity, transform health systems and enhance human wellbeing and sustainable development. It is time to implement what we know works in promoting health and wellbeing and ensure that the infrastructures and systems are in place to support evidence-informed and sustainable comprehensive health promotion actions globally.

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