

Lecture 1

HEALTH PROMOTION

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- The primary means of health promotion occur through developing healthy public policy that addresses the prerequisites of health such as income, housing, food security, employment, and quality working conditions.
- More recent work has used the term Health in All Policies to refer to the actions to incorporate health into all public policies.
- Protecting and promoting the health of the population requires Intersectoral and interdisciplinary approaches to health promotion. These approaches include key specific roles for the Health Promotion workforce and for the broader health and social care workforce in addition to the Non-Governmental Organizations (NGOs) and statutory and voluntary sectors.
- These commitments require the re-orientation of health and social care services in Ireland to include the development of organizational structures that support the promotion of health and the development of the skills and capacity of those outside the Health Promotion workforce to adopt a stronger evidence-based health promoting role.

Historical origin of health promotion

Although it is commonly accepted that the basic concepts of 'Health Promotion' have been developed in the last two decades, they have their roots in ancient civilizations and in particular in Greek antiquity. As evident from medical and philosophical documents of the sixth to fourth centuries B.C., the ancient Greeks were the first to break with the supernatural conceptions of health and disease that had so far dominated human societies. The ancient Greeks realized that maintaining good health and fighting illness depend on natural causes and that health and disease cannot be dissociated from particular physical and social environments nor from human behavior. In this context, they gave emphasis in health education and skill development, they recognized the importance of supportive environments and of healthy public policy and they re-oriented medicine toward a more naturalistic and humanistic perspective.

Definition

Health promotion is the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behaviour towards a wide range of social and environmental interventions.

Prerequisites for Health

The fundamental conditions and resources for health are:

- ✓ Peace,
- ✓ Shelter,
- ✓ Education,
- ✓ Food,
- ✓ Income,
- ✓ A stable eco-system,
- ✓ Sustainable resources,
- ✓ Social justice, and equity.

Improvement in health requires a secure foundation in these basic prerequisites.

Purpose of health promotion

- ✓ Promoting and improving the health of the population
- ✓ Ensure health promotion practice throughout the health service
- ✓ Increase the effective and efficient use of resources to promote the health of the population
- ✓ Ensure value for money (VFM), particularly in the context of a reducing workforce.
- ✓ the provision of cardiac rehabilitation
- ✓ programmes in community settings
- ✓ provision of antenatal classes to teen mothers in youth care settings

Outcome areas for health promotion

Six key outcome areas for health promotion as follows:

- ❖ Re-orientate health and other public services
- ❖ Create supportive environments for health
- ❖ Reduce health inequalities
- ❖ Improve health
- ❖ Prevent and reduce disease
- ❖ Reduce costs to the healthcare system.

Re-orientate health and other public services

- The development and effectiveness of primary care will be strengthened by improved

capacities in community profiling, needs assessments, community participation and

mobilization and the provision of socially inclusive services

- The WHO Health Promoting Hospitals/Health Services Initiative will be further

developed and expanded to support the integration of evidence-based health promotion within the acute and wider health and social care services

- HSE staff will be supported to engage in meaningful partnerships which encourage the audit of policies and practices in order to reduce health inequalities and ensure maximum health gain.

Create supportive environments for health

- The use of multi-strand approaches to promote and enhance health and include a combination of medical, lifestyle, behavioural and social-environmental approaches
- A planning process that is needs-based and incorporates evaluation and coordination between health care providers
- Full engagement in collaborative partnerships which are adequately resourced and which are regularly reviewed in terms of structure, function and effectiveness.

Reduce health inequalities

- Improved inter-agency cooperation to address the social determinants of health and health inequalities
- Development of partnerships for health which will result in integrated planning in areas such as housing, public spaces, transport, etc.
- Increased involvement and participation of individuals and communities in identifying and addressing health needs and health inequalities.

Improve health

- Increased awareness of the determinants of health and effective approaches used to address the determinants of health
- Increased environments to support healthy choices in the priority settings of health services, communities and education
- Increased capacity of individuals and groups to take action to improve health, for example, through the development of personal skills to address health issues and the determinants of health
- Mechanisms to support improved health behavior and practices among individual population groups identified through particular settings, for example, children, adults, older people, special interest groups, etc.

Prevent and reduce disease

- Improvement in cardiovascular disease risk factors (for example, smoking, alcohol intake, salt consumption, etc.) and significant improvement in health-related behaviors like healthier eating, greater participation in physical activity, etc.
- Modifications in risk-taking behaviors and improving risk factors for cancers
- Reduction in factors that contribute to mental ill-health through creating supportive environments for health, reducing stressful circumstances, developing supportive personal relationships and social networks
- A significant reduction in sexually transmitted infections and negative outcomes in relation to unplanned and unwanted pregnancies
- Reduction of unintentional injuries in home environment, at work places and on the road.

Reduce costs to the healthcare system

- For older people, regular physical activity reduces the risk of falls and resulting injuries. As one becomes more active, more often and for longer periods, there is a resultant reduction in the risk of chronic illness.
- The evidence base on smoking cessation is substantial. Cost effectiveness studies indicate that the cost per quality-adjusted life year (QALY) gained by smoking cessation interventions is in the range of £174 to £873. It is clear that smoking cessation is highly cost effective.
- Interventions for the prevention of anxiety and depression among employees have also shown promising results in the reduction of sickness absence.

Principles of Health Promotion

World Health Organization Principles of Health Promotion

- ❖ **Empowerment** – a way of working to enable people to gain greater control over decisions and actions affecting their health.
- ❖ **Participative** – where people take an active part in decision making.
- ❖ **Holistic** – taking account of the separate influences on health and the interaction of these dimensions.
- ❖ **Equitable** – ensuring fairness of outcomes for service users.
- ❖ **Intersectoral** – working in partnership with other relevant agencies/ organizations.
- ❖ **Sustainable** – ensuring that the outcomes of health promotion activities are sustainable in the long term.
- ❖ **Multi Strategy** – working on a number of strategy areas such as programmes, policy.

The Ottawa Charter for Health Promotion

First International Conference on Health Promotion, Ottawa, 21 November 1986. This conference was primarily a response to growing expectations for a new public health movement around the world. Discussions focused on the needs in industrialized countries, but took into account similar concerns in all other regions. It built on the progress made through the Declaration on Primary Health Care at Alma-Ata, the World Health Organization's Targets for Health for All document, and the recent debate at the World Health Assembly on intersectoral action for health.

The Ottawa Charter for Health Promotion

It launched a series of actions among international organizations, national governments and local communities to achieve the goal of "Health For All" by the year 2000 and beyond through better health promotion. Health promotion cannot be achieved by the health sector alone; rather its success will depend on the collaboration of all sectors of government (social, economic, etc.) as well as independent organizations (media, industry, etc.).

Health Promotion Action:



Building Healthy Public Policy

Health promotion goes beyond health care. It puts health on the agenda of policy makers in all sectors and at all levels, directing them to be aware of the health consequences of their decisions and to accept their responsibilities for health. Health promotion policy combines diverse but complementary approaches including legislation, fiscal measures, taxation and organizational change. It is coordinated action that leads to health, income and social policies that foster greater equity. Joint action contributes to ensuring safer and healthier goods and services, healthier public services, and cleaner, more enjoyable environments.

Health promotion policy requires the identification of obstacles to the adoption of healthy public policies in non-health sectors, and ways of removing them. The aim must be to make the healthier choice the easier choice for policy makers as well.

Create Supportive Environments

Our societies are complex and interrelated. Health cannot be separated from other goals. The inextricable links between people and their environment constitutes the basis for a socioecological approach to health. The overall guiding principle for the world, nations, regions and communities alike, is the need to encourage reciprocal maintenance – to take care of each other, our communities and our natural environment. The conservation of natural resources throughout the world should be emphasized as a global responsibility.

Changing patterns of life, work and leisure have a significant impact on health. Work and leisure should be a source of health for people. The way society organizes work should help create a healthy society. Health promotion generates living and working conditions that are safe, stimulating, satisfying and enjoyable.

Systematic assessment of the health impact of a rapidly changing environment – particularly in areas of technology, work, energy production and urbanization – is essential and must be followed by action to ensure positive benefit to the health of the public.

The protection of the natural and built environments and the conservation of natural resources must be addressed in any health promotion strategy.

Strengthen Community Actions

Health promotion works through concrete and effective community action in setting priorities, making decisions, planning strategies and implementing them to achieve better health. At the heart of this process is the empowerment of communities – their ownership and control of their own endeavours and destinies.

Community development draws on existing human and material resources in the community to enhance self-help and social support, and to develop flexible systems for strengthening public participation in and direction of health matters. This requires full and continuous access to information, learning opportunities for health, as well as funding support

Develop Personal Skills

Health promotion supports personal and social development through providing information, education for health, and enhancing life skills. By so doing, it increases the options available to people to exercise more control over their own health and over their environments, and to make choices conducive to health.

Enabling people to learn, throughout life, to prepare themselves for all of its stages and to cope with chronic illness and injuries is essential. This has to be facilitated in school, home, work and community settings. Action is required through educational, professional, commercial and voluntary bodies, and within the institutions themselves.

Reorient Health Services

The responsibility for health promotion in health services is shared among individuals, community groups, health professionals, health service institutions and governments. They must work together towards a health care system which contributes to the pursuit of health.

The role of the health sector must move increasingly in a health promotion direction, beyond its responsibility for providing clinical and curative services. Health services need to embrace an expanded mandate which is sensitive and respects cultural needs. This mandate should support the needs of individuals and communities for a healthier life, and open channels between the health sector and broader social, political, economic and physical environmental components. Reorienting health services also requires stronger attention to health research as well as changes in professional education and training. This must lead to a change of attitude and organization of health services which refocuses on the total needs of the individual as a whole person.

Moving into the Future

Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love. Health is created by caring for oneself and others, by being able to take decisions and have control over one's life circumstances, and by ensuring that the society one lives in creates conditions that allow the attainment of health by all its members.

Caring, holism and ecology are essential issues in developing strategies for health promotion. Therefore, those involved should take as a guiding principle that, in each phase of planning, implementation and evaluation of health promotion activities, women and men should become equal partners.

Approaches to Health Promotion

1. Preventive Medical approach
2. Behaviour change approach
3. Socio-environmental approach
4. Harm-minimization approach
5. Zero-tolerance approach

1. Preventive Medical Approach

Preventative medical approaches are the traditional approaches of the health sector, which regards health as the absence of illness and disease. These approaches are directed at improving physiological risk factors; that is, those relating to the way living things function.

Examples are high blood pressure and lack of immunization. These approaches also focus on the treatment and prevention of disease.

2. Behavioural approaches

Behavioural approaches are concerned with individuals or groups whose behavioural or social situations place them at greater risk of developing unhealthy lifestyles. These approaches target smaller 'at-risk' groups within a population to change their behaviour. This is based on the theory that a change in behaviour of a small percentage of the whole population results in significantly more people changing behaviours.

Lifestyle/behavioural approaches are directed at improving the health of groups whose behaviours put their health at risk, such as people who smoke, have poor nutrition, are physically inactive or misuse substances. These approaches use health education, social marketing, put their health at risk, such as people who smoke, have poor nutrition, are physically inactive or misuse substances. These approaches use health education and awareness programmes.

3. Socio–environmental approach

The socio–environmental approach promotes health by addressing the social determinants of health, such as access to food, housing, income, employment, transport and education and factors such as addiction, social isolation and early life experiences.

Health promotion actions commonly used in the socio–environmental approach include: creating environments that support health (for example, a school providing trees and sheltered areas to protect students and staff from the Sun’s rays) working with communities to strengthen their development (for example, a school developing a nutrition policy to promote healthy eating and selling nutritious food in the canteen) advocating for public policy.

4. Harm–minimisation approach

The harm–minimisation approach accepts that despite our best efforts, some people will choose to engage in risk–taking behaviour, such as drug use or unsafe sexual activity. The harm–minimisation approach aims to reduce the adverse health, social and economic consequences of risk–taking behaviours by minimising or limiting the harms and hazards for both the community and the individual without necessarily eliminating use.

5. Zero-tolerance approach

- Zero tolerance is a term commonly associated with strict policing measures. A law, policy, or practice that provides for the imposition of severe penalties for a proscribed offense or behavior without making exceptions for circumstances. When these approaches are used in connection with wider drug use issues or sexual health practices, for example, they may potentially lead to increased victimization. It does not consider a particular behaviour, such as drug use, to be a health issue. Rather, it is viewed as a legal issue.

The health promotion model

The health promotion model (HPM) proposed by Nola J Pender (1982; revised, 1996) was designed to be a “complementary counterpart to models of health protection.”

- ✓ It defines health as "a positive dynamic state not merely the absence of disease".
- ✓ Health promotion is directed at increasing a client's level of well being.
- ✓ The health promotion model describes the multi dimensional nature of persons as they interact within their environment to pursue health.

The health promotion model

The health promotion model notes that each person has unique personal characteristics and experiences that affect subsequent actions.

- ✓ The set of variables for behavioral specific knowledge and affect have important motivational significance.
- ✓ These variables can be modified through nursing actions.
- ✓ Health promoting behavior is the desired behavioral outcome and is the end point in the HPM.
- ✓ Health promoting behaviors should result in improved health, enhanced functional ability and better quality of life at all stages of development.
- ✓ The final behavioral demand is also influenced by the immediate competing demand and preferences, which can derail an intended health promoting actions.

Conclusion

With the ever increasing spiral of healthcare costs, health prevention seems like a sensible mechanism to both improve the health of the population while limiting, to some extent, the cost of healthcare. At this time however, as reasonable as healthcare promotions seem, there is little quantitative evidence to support their efficiency. This paper presents several models of healthcare promotion and several evaluation techniques and attempts to educate readers of which model and technique maybe best suited for varying situations.