Commentary

Visioning the future of health promotion

Ilona Kickbusch ⓘD

Abstract: COVID-19 has shown us clearly that the world must commit to a transformative approach that promotes health and wellbeing. Living in the Anthropocene – an epoch defined by human impact on our ecosystems – moves us into unknown territory. The challenge is to find a way of living that aims to meet the needs of all people within the means of the living planet. We will require foresight, agility and resilience to be well prepared. The global risks we face are enormous and they are interconnected – yet the opportunity to accelerate change for the better is extraordinary as well. We have models, knowledge and technologies at our disposal that could significantly improve health and wellbeing and create fairer and more sustainable societies – yet they have not been used widely to serve the public purpose and to address inequities.

Keywords: transformative approach, sustainable development goals, complexity, wellbeing, health promotion

Being transformative

COVID-19 has shown us clearly that the world must commit to a transformative approach that promotes health and wellbeing. Living in the Anthropocene – an epoch defined by human impact on our ecosystems – moves us into unknown territory (1). The impact of the COVID-19 pandemic reinforces this view (2).

The challenge is to find a way of living that aims to meet the needs of all people within the means of the living planet. We will require foresight, agility and resilience to be well prepared. The global risks we face are enormous and they are interconnected – yet the opportunities to accelerate change for the better are extraordinary as well. We have a blueprint – the Sustainable Development Goals (SDGs) – as well as models, knowledge and technologies at our disposal that could significantly improve health and wellbeing and create fairer and more sustainable societies – yet they have not been used widely to serve the public purpose and to address inequities (3).

The way forward – towards a framework for a new public health for the 21st century – must fit the time and its challenges: these are inequality, climate crisis, pandemics, digitalization and a weakening democracy. We need to adapt our basic approaches and action areas of health promotion to the drivers of change in a global risk society (4). Transformation happens at many levels; over the last years it has taken place especially at the city level as well as through new technologies (5). The ethos and the five strategies introduced by the Ottawa Charter for Health Promotion (6) remain valid, but they need to be implemented creatively in a very different world defined by rapid political, social, economic and environmental change as well as deep techno-logical and digital transformation. This makes it necessary to rethink and adapt them.

The 17 SDGs have been an important step in setting global priorities and highlighting how the challenges interrelate. The Global Conference on Health Promotion in Shanghai 2016 reiterated this close interface between the SDGs and health promotion, as shown in Figure 1.

Global Health Center, Geneva, Switzerland.

Correspondence to: Ilona Kickbusch, Global Health Center, Chemin Eugene Rigot 2, Geneva, 1211, Switzerland. Email: kickbusch@bluewin.ch

Figure 1. World Health Organization (WHO) infographic: Promoting health, promoting sustainable development. Source: WHO, Geneva (2016). Available from: https://www.who.int/healthpromotion/conferences/9gchp/infographic_health_promotion.jpg?ua=1OpenAccess

Embracing complexity

The SDGs clearly embrace complexity – and they show how all SDGs impact on health. This allows for transformative agendas in global health such as ONEHEALTH approaches or the strong commitment to universal health coverage (7). But there are also other important mind shifts that health promotion must consider as it addresses the priority of integrating the health equity and the sustainability challenge. Health promotion has been transformative in content and process from its inception, and this has often worked against the acceptance of health promotion approaches in the past (8). In particular this was due to a lack of understanding of the interconnectedness of influences and of the time frames within which success can be measured. Health promotion must focus on the patterns that create or hinder health and wellbeing, which for many people cumulate either positively or negatively over time and the lifespan (9). This is most obvious in the interface of factors such as the distribution of wealth, knowledge and life chances (10).

Yet such a long-term view runs counter to the short-term orientation of measuring political success. Policies for wellbeing must be built forward rather than be reactive to risks and they must be developed together with communities. The health impacts of new developments often cannot be assessed in the short term – that is why many policies that could protect health come too late, as the potential health impacts were not considered, communities were not involved or lobbying by industry was successful. We see this clearly in relation to the health impacts of digitalization (11).

While health promotion has been very committed to the inclusion of social science expertise from the
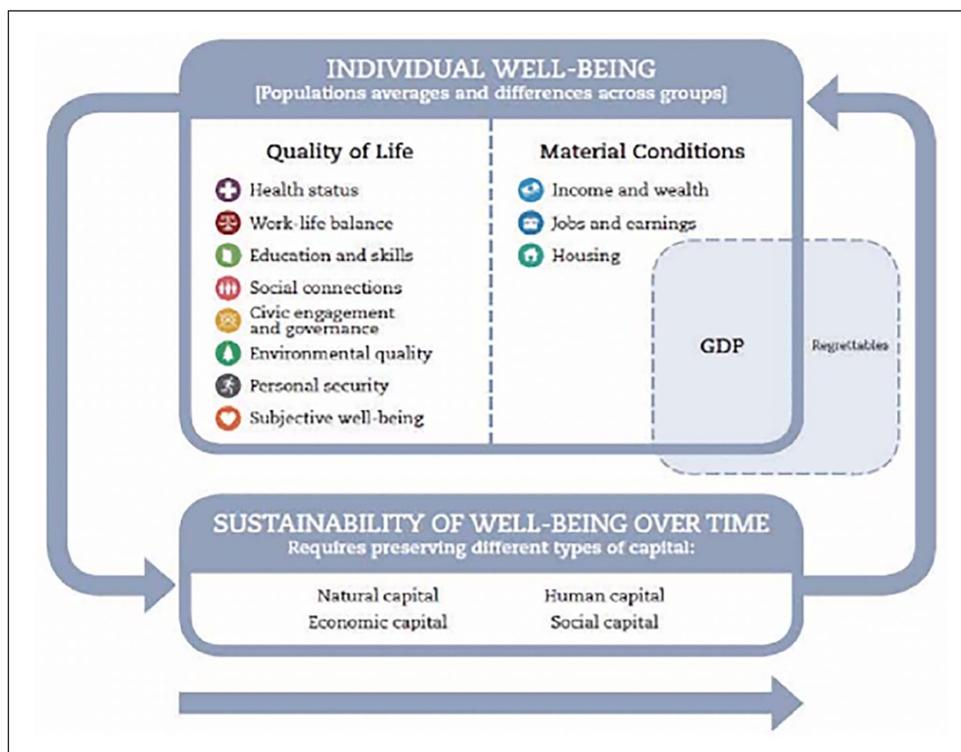
Figure 2. OECD framework for measuring wellbeing and progress.
Source: OECD (2013). https://www.oecd.org/officialdocuments/publicdisplaydocumentpdf/?cote=SDD/DOC(2019)2&docLanguage=En

start, there is now a need for the use of complexity science to better understand the collective behaviour of social and economic organizations; increasingly, the term ecosystem is used to describe the many patterns of interactions between different players that emerge (12). The new data-driven approaches to gathering public health intelligence can help to engage in such new analytics. This also acknowledges that many of the challenges which health promotion aims to address are wicked problems. 'Wicked' means that they are very difficult or even impossible to resolve with simple solutions, not least because of the complex interdependencies and dynamics between influences (13). And finally, new problems need to be addressed, such as the impact of the digital transformation on our health and wellbeing – a dynamic not yet included in the original conceptualization of the social determinants of health (14).

The transformative metrics of wellbeing

Most people in the world do not live in safe and stable environments and do not benefit from economic development or the digital transformation. Health promotion must be one of the drivers to help create a better future – especially for the next generation. This is even more so as the COVID-19 pandemic and impacts of the climate crisis have reinforced existing inequalities, destroyed livelihoods, pushed people into poverty and increased many health problems (15). We must build forward better by focusing on transformation.

What do we define as success? All major international organizations agree that macro-economic data alone, such as GDP, do not provide a sufficiently detailed picture of the living conditions and the health and wellbeing that ordinary people experience (16). This applies to all countries at all levels of development, as the work of the World
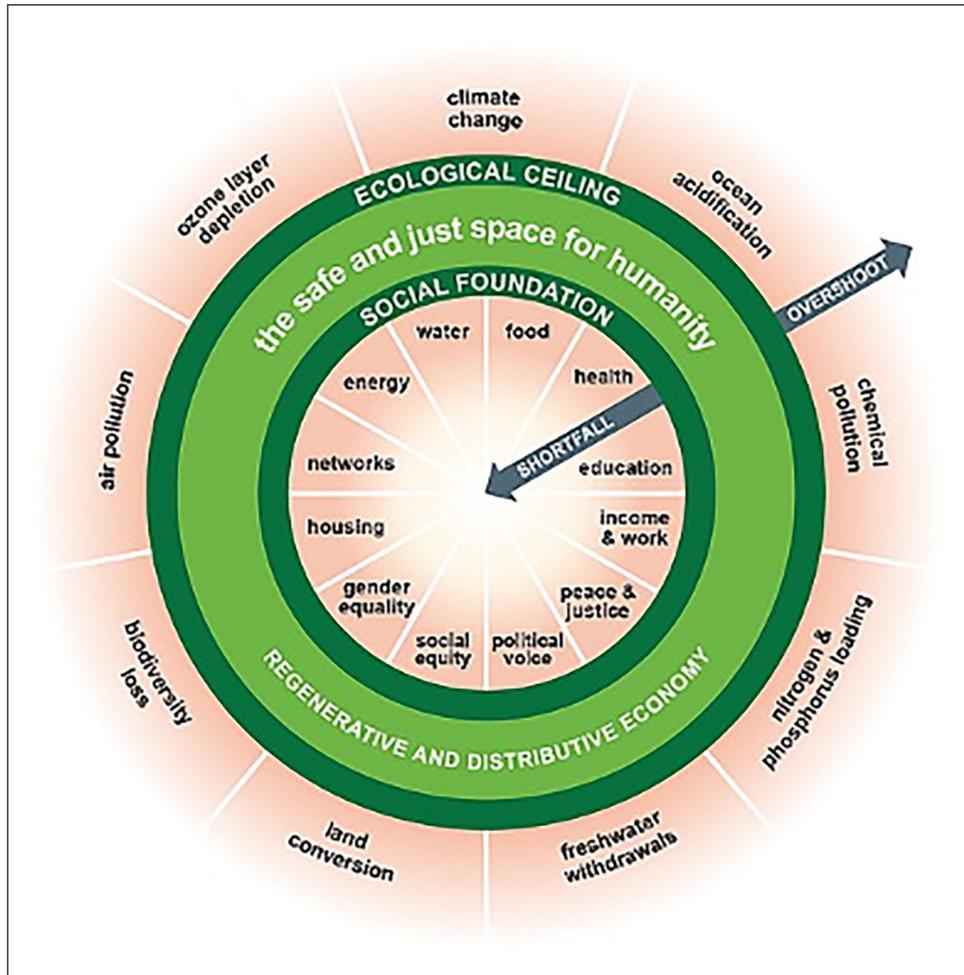
Figure 3. The doughnut of social and planetary boundaries.
Source: Doughnut Economics (2021). Available from: https://doughnuteconomics.org/about-doughnut-economics

Happiness Report (17) and of the Organisation for Economic Co-operation and Development (OECD) (18) on wellbeing has clearly shown. The measure we seek for health must be the health and wellbeing that people *experience in the context of everyday life*, where they live, love, work, play, shop, travel and google. These measures must also include environmental sustainability. The World Happiness Report 2020 for the first time ranks cities around the world by their subjective wellbeing and analyses how the social, urban and natural environments combine to affect our happiness (19).

Another step towards transforming the measures of a society's success is achieved by the metrics proposed by the OECD wellbeing index, which measures individual wellbeing through a combination of quality of life and material conditions and relates it to sustainability of wellbeing over time (20).

The OECD (2013) draws particular attention to the need to build and ensure four forms of capital over time: natural capital, economic capital, human capital and social capital. The World Bank also considers the investment in human capital as one of

the key strategies to ensure a better future. The OECD indicates visually in its graphs the very small part of wellbeing a measure such as GDP captures. The country comparisons that follow from this work are an excellent start for identifying the priorities of a national health promotion strategy with a focus on the determinants of health and wellbeing in all policies by incorporating these metrics and frameworks into a multidimensional policy decision-making approach for health and wellbeing. What they do not yet capture are dimensions of wellbeing that we have only recently begun to acknowledge – such as the impact of structural racism (21) or the level of violence against women (22). Health promotion must address the structures that shape people's aspirations and impact on their experienced wellbeing through social relationships over time.

Transformative action: the doughnut model

There are other new models that provide a solid base to move us forward. The 'doughnut model' relates the social foundations of our lives to the planetary boundaries. The economist Kate Raworth has developed a visual framework for sustainable development that allows us to capture both the access to life's essentials (healthcare, education, equity and so on) as well as the ecological ceilings that our life depends on (23). This model pictured below considers an economy as *prosperous* when 12 social foundations – what we in health promotion call the determinants of health – are met without overshooting any of the nine ecological ceilings. Based on this it is possible to identify the safe and just space for humanity supported by a regenerative and distributive economy. This approach addresses one of the gaps in the initial work on the social determinants of health – not yet having a full understanding of the interface between social and ecological challenges.

Just as the OECD wellbeing indicators are already being used by a number of countries, we can witness the 'doughnut' mindset already being applied by a number of cities. They can use a methodological guide for downscaling the doughnut to the city and turning it into a tool for transformative action. This could well be the next generation of 'healthy cities', an approach created by the health promotion movement, bringing together local aspirations with global responsibility (24).

Such approaches conduct governance through active co-design to make social, physical, commercial and digital environments conducive to health. They create new public spaces and platforms for empowerment, both in community settings and in the digital space. They develop governance that promotes health in many sectors and commits to equity, wellbeing, social participation and social inclusion (25).

Transformative design of 'supportive environments'

An integrated health promotion approach will focus on the patterns of economic, social and health risks that emerge for many people, over most of which they have no control. This now includes the digital environment of disinformation and data extraction (26). Health promotion must go to the next level by focusing on the interconnectedness and patterns between different policies, interventions and impacts. Most obvious are the combined impact of mobility, food systems, air pollution and inequity on both our health and the health of the planet (27). Health promotion must also apply the increased understanding of the strong interface between our minds and our bodies, between ourselves and the natural and built environments we live in. The COVID-19 lockdowns have made clear how dependent we are for our wellbeing on supportive social and physical environments and social interaction with others as well as with nature. Positive interaction with others improves our health status and our perceived wellbeing, as the growing research on loneliness or on cyberbullying shows. Feeling valued and feeling safe, having dignity and opportunity are key components of perceived wellbeing. Having access to green spaces improves our wellbeing (28).

Just as we design the physical environment, we can co-design our social environments to promote health and wellbeing. Obviously in a process that engages people to such an extent, such activities can become an integral part of behaviours and aspirations within the context of everyday lives – success comes with experienced wellbeing. Most significant is social contact – active rather than passive leisure activities build in socializing opportunities through health. A breakthrough

experience is the 'friendship bench', which encourages people to share problems and create a sense of belonging in communities (29).

While this kind of thinking has begun to be integrated into new approaches to city planning or the planning of schools, hospitals and offices, we are still far away from designing the digital environment to promote health and wellbeing. Here we find commercial strategies that not only are built to destroy the long-term social capital and trust our societies depend on, but also have direct health consequences such as addiction or a variety of other mental health problems. As health promotion addresses the commercial determinants of health (30) it must also turn to the commodification of attention through social media platforms (31). Health promotion must work with those that aim to make the internet be supportive of democratic social discourse, also for health. A concrete example is the development of 'civic tech' approaches to health in Taiwan, which shows that such approaches can both help fight a pandemic and strengthen democracy (32).

Data show that even where incomes increase, people's levels of wellbeing do not always follow unless economic empowerment matches social empowerment (33). Young people in particular are engaged in questioning long-standing models of growth which endanger both human and planetary health – and they are rightfully demanding a voice to engage in sustainable solutions. The recent 2019 United Nations Development Programme (UNDP) report 'Beyond income, beyond averages, beyond today' shows that new types of inequalities are opening up around technology and climate change, which in turn show significant impact on health and wellbeing (34).

Health promotion will therefore need to develop a much broader understanding of health literacy. It now needs to be approached in a way that combines health literacy, digital literacy and civic literacy. Increasingly it is also dependent on basic science literacy. Conversations on the web about health must be based on reliable information not fake news and infodemics (34), and they must be conducted in an environment of respect, just as many face-to-face community health activities are. The digital support and monitoring of health behaviour is expanding exponentially as apps on the phone, as watches that interface with vital signs, as diagnostic tools and mobile clinics. Health promotion must develop strategies that strengthen the positive impact of these new tools and technologies all around the world (35).

Reaping benefits from new approaches

We know that taking into account complexity is the hallmark of any successful policy (36) and an increasing number of countries have engaged in developing integrated policy by applying health in all policy, whole of government and whole of society approaches. Moving forward in such a direction will allow societies to reap significant benefit from policies that promote health, wellbeing and sustainability. Health promotion can take a leading role in this transformation towards health and wellbeing.

A new framework for health promotion must take its starting point from strategies that counteract the disempowerment many people feel. Societies and individuals are faced with 'wicked problems' and the increasing speed and complexity within which they need to be resolved. The COVID-19 pandemic has shown how difficult it is for some and how this can endanger democracy. The SDGs aim to respond to this complex world of change but for many people the speed of change is disorienting; they fear for their future and that of their children. The shaping of the future is not an expert exercise – it needs the kind of strong community involvement that health promotion has always advocated.

ORCID iD

Ilona Kickbusch [iD] https://orcid.org/0000-0002-2699-7166

References

1. Haines A, Scheelbeek P, Abbasi K (eds). BMJ Series: Health in Anthropocene [Internet]. The BMJ [cited 2021 May 31]. Available from: https://www.bmj.com/anthropocene

2. Horn E. Tipping points: the Anthropocene and Covid-19 [Internet]. In: Pandemics, Politics, and Society. Berlin: De Gruyter; 2021 [cited 2021 May 31]. Available from: https://www.degruyter.com/document/doi/10.1515/9783110713350-009/html

3. UN. Take Action for the Sustainable Development Goals [Internet]. Sustainable Development Goals. [cited 2021 May 31]. Available from: https://www.un.org/sustainabledevelopment/sustainable-development-goals/

4. Beck U. World risk society as cosmopolitan society? Ecological questions in a framework of manufactured uncertainties. Theory Cult Soc. 1996; 13: 1–32.

5. McPhearson T. Transforming cities and science for climate change resilience in the Anthropocene. In: Hölscher K, Frantzeskaki N (eds). Transformative Climate Governance: A Capacities Perspective to Systematise, Evaluate and Guide Climate Action. (Palgrave Studies in Environmental Transformation, Transition and Accountability). Cham: Springer International Publishing; 2020, pp.99–111.

6. WHO. First International Conference on Health Promotion, Ottawa [Internet]. Health Promotion. WHO; 1986 [cited 2021 May 31]. Available from: https://www.who.int/teams/health-promotion/enhanced-wellbeing/first-global-conference

7. Rabinowitz PM, Pappaioanou M, Bardosh KL, Conti L. A planetary vision for one health. BMJ Global Health. 2018; 3: e001137.

8. McQueen D, Noack H. Health promotion indicators: current status, issues and problems. Health Promotion International. 1988; 3: 117–125.

9. Max Planck Gesellschaft. A Healthy Lifestyle Increases Life Expectancy by Up To Seven Years [Internet]. 2017 [cited 2021 May 31]. Available from: http://www.mpg.de/11407661/healthy-lifestyle-increases-life-expectancy

10. National Research Council. The role of inequality. In: Crimmins EM, Preston SH, Cohen B (eds). Explaining Divergent Levels of Longevity in High-Income Countries. (Panel on Understanding Divergent Trends in Longevity in High-Income Countries. Committee on Population, Division of Behavioral and Social Sciences and Education). Washington, DC: The National Academies Press; 2011, pp.117–141.

11. Haidt J, Allen N. Scrutinizing the effects of digital technology on mental health. Nature. 2020; 578: 226–227.

12. Avramakis E, Anchen J, Kiran Raverkar A, Fitzgerald C. Health Ecosystems: To Steer or Not to Steer. Swiss Re Institute; 2019 [cited 2021 May 31]. Available from: https://www.swissre.com/institute/research/topics-and-risk-dialogues/health-and-longevity/Health-Ecosystems–To-steer-or-not-to-steer.html

13. Walls HL. Wicked problems and a 'wicked' solution. Glob Health. 2018; 14: 34.

14. Jercich K. Digital health literacy as a social determinant of health [Internet]. Healthcare IT News, 2021 [cited 2021 May 31]. Available from: https://www.healthcareitnews.com/news/digital-health-literacy-social-determinant-health

15. Stiglitz J. Conquering the great divide [Internet]. IMF Finance & Development Magazine; 2020 [cited 2021 May 31], pp.17–19. Available from: https://www.imf.org/external/pubs/ft/fandd/2020/09/COVID19-and-global-inequality-joseph-stiglitz.htm

16. Kapoor A, Debroy B. GDP is not a measure of human well-being [Internet]. Harvard Business Review, 2019 [cited 2021 May 31]. Available from: https://hbr.org/2019/10/gdp-is-not-a-measure-of-human-well-being

17. World Happiness Report 2021 [Internet]. New York: Sustainable Development Solutions Network; 2021 [cited 2021 May 31]. Available from: https://worldhappiness.report/ed/2021/

18. OECD. Measuring Well-being and Progress: Well-being Research – OECD [Internet]. Statistics. [cited 2021 May 31]. Available from: https://www.oecd.org/statistics/measuring-well-being-and-progress.htm

19. De Neve J-E, Krekel C. Cities and happiness: a global ranking and analysis [Internet]. In: World Happiness Report 2021. New York: Sustainable Development Solutions Network; 2020 [cited 2021 May 31]. Available from: https://worldhappiness.report/ed/2020/cities-and-happiness-a-global-ranking-and-analysis/

20. OECD. Better Life Index [Internet]. [cited 2021 May 31]. Available from: http://www.oecdbetterlifeindex.org/#/11111111111

21. APHA. Structural Racism is a Public Health Crisis: Impact on the Black Community [Internet]. APHA; 2020 [cited 2021 May 31]. Available from: https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2021/01/13/structural-racism-is-a-public-health-crisis

22. Garcia-Moreno C, Watts C. Violence against women: an urgent public health priority. Bull World Health Organ. 2011; 89: 2.

23. Kate R. Exploring Doughnut Economics [Internet]. 2017 [cited 2021 May 31]. Available from: https://www.kateraworth.com/

24. Nugent C. Amsterdam Is Embracing a New Economic Theory to Help Save the Environment. Could It Replace Capitalism? [Internet]. Time; 2021 [cited 2021 May 31]. Available from: https://time.com/5930093/amsterdam-doughnut-economics/

25. Doughnut Economics Action Lab [Internet]. [cited 2021 May 31]. Available from: https://doughnuteconomics.org/

26. Couldry N, Mejias UA. Data colonialism: rethinking big data's relation to the contemporary subject. Telev New Media. 2019; 20: 336–349.

27. Planetary Health Alliance. Changing Food Systems [Internet]. Planetary Health Alliance. [cited 2021 May 31]. Available from: http://www.planetaryhealthalliance.org/changing-food-systems

28. Campbell M, Gavett G. What Covid-19 Has Done to Our Well-Being, in 12 Charts. Harvard Business Review [Internet]. 2021 [cited 2021 May 31]. Available from: https://hbr.org/2021/02/what-covid-19-has-done-to-our-well-being-in-12-charts

29. The Mental Health Innovation Network. The Friendship Bench [Internet]. Mental Health Innovation Network. 2014 [cited 2021 May 31]. Available from: https://www.mhinnovation.net/innovations/friendship-bench

30. Mialon M. An overview of the commercial determinants of health. Global Health. 2020; 16: 74.

31. Doyle W. Brand Communication and the Attention Economy. In: Doyle W, Roda C (eds). Communication in the Era of Attention Scarcity. Cham: Springer International Publishing; 2019, pp.49–61.

32. Beacon R. Taiwan's civic tech gift to the world [Internet]. GovInsider. 2020 [cited 2021 May 31]. Available from: https://govinsider.asia/future-of-work/taiwans-civic-tech-gift-to-the-world/

33. UNDESA, UNDSPD. Online survey on promoting empowerment of people [Internet]. New York: UN; 2015 [cited 2021 May 31], p.175. Available from: https://www.un.org/development/desa/socialperspectiveondevelopment/2015/08/25/online-survey-on-promoting-empowerment-of-people/

34. UNDP. Human Development Report 2019: Beyond income, beyond averages, beyond today [Internet]. New York: UNDP; 2019 [cited 2021 May 31]. Available from: http://hdr.undp.org/sites/default/files/hdr2019.pdf

35. O'Neil I. Digital Health Promotion: A Critical Introduction [Internet]. 1st ed. Cambridge; Medford, MA: Wiley; 2019 [cited 2021 May 31]. 176 p. Available from: https://www.wiley.com/en-us/Digital+Health+Promotion%3A+A+Critical+Introduction-p-9781509533336

36. Thiel A, Blomquist WA, Garrick DE (eds). Governing Complexity: Analyzing and Applying Polycentricity. (Cambridge Studies in Economics, Choice, and Society). Cambridge: Cambridge University Press; 2019.