

## **Is the Ottawa Charter for Health Promotion fit for purpose in the 21<sup>st</sup> Century?**

### **The Ottawa Charter for Health Promotion**

The Ottawa Charter for Health Promotion (The Ottawa Charter) was adopted at the first International Conference on Health Promotion, in Ottawa on the 21st of November 1986 <sup>(1)</sup>. The conference was jointly organized by the World Health Organisation, Health and Welfare Canada and the Canadian Public Health Association, towards achieving "Health for All by the year 2000", and to build on the Declaration on Primary Health Care at Alma Ata, adopted in 1978 <sup>(2)</sup>.

The first International Conference on Health Promotion was a response to growing global expectations for a new public health movement and focused on the needs in industrialized countries, attended by more than 200 participants from mostly industrialized countries, with little or no representation from non-industrialized countries and indigenous peoples. The participants pledged to advocate political commitment for equitable healthy public policy, to counteract harmful products, to tackle inequities, to acknowledge the role of people in the improvement of their own health, living conditions and well-being, to reorient health services and to recognize health as a social investment.

The Ottawa Charter definition of health promotion is essentially a process of enabling people to increase control over, and to improve their health, to go beyond healthy lifestyles to well-being. The definition has been subsequently refined to provide a contemporary interpretation as used by the World Health Organisation: " Health promotion enables people to increase control over their own health. It covers a wide range of social and environmental interventions that are designed to benefit and protect individual people's health and quality of life by addressing and preventing the root causes of ill health, not just focusing on treatment and cure" <sup>(3)</sup>.

The Ottawa Charter identifies fundamental conditions and resources to provide a secure foundation in prerequisites for the improvement in health and prioritized basic strategies for

health promotion as Advocate, Enable and Mediate. The Ottawa Charter defined health promotion actions as 5 key areas to build healthy public policy, to create supportive environments, to strengthen community actions, to develop personal skills and to reorient health services. The Ottawa Charter emphasised the importance of women and men being equal partners, the use of a settings approach and the ability to take decisions and have control over one's life (empowerment).

### **Is the Ottawa Charter for Health Promotion fit for purpose in the 21<sup>st</sup> Century?**

For 40 years the Ottawa Charter has remained unchanged even though the world, the political (cultural and communication) landscape and the health needs of people have changed dramatically. Health promotion faces new and complex challenges in the 21<sup>st</sup> Century. The unnecessary delay to replace the Ottawa Charter has put health promotion in a difficult position at a time when its legitimacy at the World Health Organisation is in doubt and when no other international organization has the capacity to secure its future.

In particular, a replacement or revision of the Ottawa Charter must consider:

- The contemporary perspectives, concepts, definitions and language that are used in health promotion in the modern era including "One Health", health literacy, health as a social construct, the determinants of health, inclusion, resilience and equity.
- New global health promotion challenges that have arisen in the past 40 years including the emerging infectious diseases, increased armed conflicts, social isolation and mental health, urbanization, the internet, social media, AI and digital technology, mass migration, the climate crisis, food insecurity and widening economic inequalities.

### *The prerequisites for health*

The Ottawa Charter identifies basic prerequisites for the improvement in health: peace; shelter; education; food; income; a stable eco-system; sustainable resources; social justice and equity. The prerequisites for health are relevant in the modern era with the further consideration of trust building, two-way dialogue, autonomy, the ability to self-care, an appreciation of diversity and cultural competence.

### The basic strategies for health promotion

The basic strategies for health promotion were prioritized by the Ottawa Charter as Advocate, Enable (a supportive environment) and Mediate. In the modern era, basic strategies for health promotion must also consider community engagement and co-production and explicitly, empowerment. Terms used in the Ottawa Charter such as life skills can be expanded to include health literacy, digital health literacy, behaviour change communication and policy strategies that include the promotion of community-based initiatives and co-production.

### **Health Promotion Actions**

The Ottawa Charter defined health promotion actions as 5 key areas to build healthy public policy, to create supportive environments, to strengthen community actions, to develop personal skills and to reorient health services.

### Build Healthy Public Policy

The Ottawa Charter discusses healthy public policy as going beyond health care. It puts health on the agenda of policy makers in all sectors and at all levels through coordinated action with the aim “to make the healthier choice the easier choice”.

In the modern era healthy public policy refers to policies that are designed to promote health and well-being by addressing the determinants of health through laws, regulations and actions such as healthy cities. With an interdisciplinary approach, and in particular health in all policies, it works across sectors to improve health and reduce inequalities with, importantly, the engagement and involvement of communities.

### Create Supportive Environments

The Ottawa Charter discusses creating supportive environments as strengthening the links between people and their environment for a socioecological approach to health. A healthy society can be created through living and working conditions that are safe, especially in areas of technology and the built environment. The focus is for the protection and conservation of natural resources through health promotion.

In the modern era creating supportive environments is encompassed in the concept of “Planetary health” and is the topic of the Geneva Charter for well-being that expresses “the urgency of creating sustainable well-being societies, committed to achieving equitable health now and for future generations without breaching ecological limits” (4). Healthy working conditions should also consider remote working practices and settings created by advances in the internet, social media, AI and digital health technology.

### Strengthen Community Actions

The Ottawa Charter discusses strengthening community actions as setting priorities, making decisions, planning strategies and implementing them to achieve better health. Community empowerment, ownership and control are identified as well as drawing on existing human and material resources and that strategies and programs should be adapted to the local needs and to differing social, cultural and economic systems.

In the modern era strengthening community actions include capacity building, resilience and bottom-up, community-based approaches that enable communities to gain more control over their lives and health. Individual and collective empowerment are key concepts as well as community engagement and co-production. Strengthening community actions could be better explained for the modern era, as to “Strengthen collective empowerment”.

### Develop Personal Skills

The Ottawa Charter discusses developing personal skills as providing information and education for health and enhancing life skills to help people to make healthy choices throughout life, in school, home, work and community settings.

In the modern era developing personal skills involves much more including the use of behaviour change communication, health literacy, digital health literacy and other advanced digital techniques for communication, for example, wearable health technology. Developing personal skills could be better explained in the modern era as to “develop healthy behaviours and (digital) health literacy”.

### Reorient Health Services

The Ottawa Charter discusses reorientating health services as a health care system that increasingly moves in a health promotion direction, beyond its responsibility for providing clinical and curative services, is sensitive to and respects cultural needs. Reorientation involves professional education and training and an organisational refocus on the needs of the whole person.

In the modern era reorientating health services involves much more including patient empowerment, patient action groups, health literacy, health activism, recognition of "one health", autonomy and the ability to self-care and to meet basic individual needs, recognition of diversity and professional cultural competence. Reorientating health services could be better explained in the modern era as to "develop people-centred health services".

### **Conclusion**

The Ottawa Charter has served as a useful framework to guide both students and professionals of health promotion in the design and implementation of policy and programs. The Ottawa Charter is 40 years old and remains unchanged even though the world and the health needs of people have changed dramatically. Health promotion faces new and complex challenges in the 21<sup>st</sup> Century and presently, the Ottawa Charter is not well placed to address these challenges because its revision is long overdue.

The prerequisites for health and the basic strategies for health promotion, with revision, remain relevant in the modern era. The 5 health promotion action areas to build healthy public policy, to create supportive environments, to strengthen community actions, to develop personal skills and to reorient health services require an urgent update, and new headings to better reflect the challenges of the modern era.

Led by a competent international organization, an inclusive approach should be taken in collaboration with non-governmental and voluntary organizations, social movements, health promotion professionals and governments, to revise or replace the outdated Ottawa Charter to adequately address the new perspectives and challenges of global health promotion for the modern era.

The original English version is available in the following article published on 26th February 2026:

[La Carta di Ottawa per la Promozione della Salute è adeguata agli obiettivi del XXI secolo? - Dors](#)

### Glenn Laverack Bio



He is a social scientist with a distinguished career in international health promotion for 40 years as a practitioner, academic, researcher, and as an adviser to the UN, governmental and to third sector organisations, in more than 50 countries. He is an advocate for the value of involving communities at the centre of health promotion and has a wide range of publications including 28 books in 13 different languages. He has managed several large-scale health promotion programs including in Ghana and India and has worked as a consultant to design and evaluate many projects. He was formerly the Director of Health Promotion, at the University of Auckland, New Zealand and is currently an adjunct full professor at the United Arab Emirates University and an independent adviser and researcher.

### References

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<sup>1</sup> World Health Organization. Ottawa Charter for Health Promotion. Geneva: World Health Organization, 1986. <https://www.who.int/teams/health>

<sup>2</sup> World Health Organisation (1978) Declaration of Alma Ata. Geneva: World Health Organization.

<sup>3</sup> World Health Organisation (2026) What is health Promotion? Geneva. World Health Organisation (2021) accessed 10/01/2026 [Health promotion](#)

<sup>4</sup> World Health Organisation (2021) The Geneva Charter for Well-being. 10th Global Conference on Health Promotion. Geneva. World Health Organisation.