**THE CHALLENGE OF PROMOTING HEALTH:
EXPLORATION AND ACTION**

This book forms part of the core text for the Open University course *Promoting Health: Skills, Perspectives and Practice* (K301) and a new qualification, The Certificate in Health Promotion. It has been produced with support from the Health Education Authority and Health Promotion Wales, although the content of the course is the sole responsibility of The Open University.

If you are interested in studying the course and gaining the new Certificate please write to the Information Officer, School of Health and Social Welfare, Walton Hall, Milton Keynes MK7 6AA, UK.

Other texts required for the course and also published by Macmillan in association with The Open University are:

- the first core text, *Promoting Health: Knowledge and Practice*, edited by Jeanne Katz and Alyson Peberdy
- the course reader, *Debates and Dilemmas in Promoting Health*, edited by Moyra Sidell, Linda Jones, Jeanne Katz and Alyson Peberdy
- the set book, *Health Promotion: Professional Perspectives*, edited by Angela Scriven and Judy Orme.

The Challenge of Promoting Health Exploration and Action

Edited by

Linda Jones and Moyra Sidell
The Open University

in association with
Palgrave Macmillan

Cover photo: Tony Stone Images (Jeremy Walker)

Copyright © The Open University, 1997

Softcover reprint of the hardcover 1st edition 1997

All rights reserved. No reproduction, copy or transmission of this publication may be made without written permission.

No paragraph of this publication may be reproduced, copied or transmitted save with written permission or in accordance with the provisions of the Copyright, Designs and Patents Act 1988, or under the terms of any licence permitting limited copying issued by the Copyright Licensing Agency, 90 Tottenham Court Road, London W1P 9HE.

Any person who does any unauthorised act in relation to this publication may be liable to criminal prosecution and civil claims for damages.

The authors have asserted their rights to be identified as the authors of this work in accordance with the Copyright, Designs and Patents Act 1988.

First published 1997 by
MACMILLAN PRESS LTD

Houndmills, Basingstoke, Hampshire RG21 6XS and London
Companies and representatives throughout the world

ISBN 978-0-333-68174-9

ISBN 978-1-349-25564-1 (eBook)

DOI 10.1007/978-1-349-25564-1

A catalogue record for the book is available from the British Library.

This book is printed on paper suitable for recycling and made from fully managed and sustained forest sources.

10 9 8 7 6 5 4 3 2 1
06 05 04 03 02 01 00 99 98 97

15165B/k301b2p1i1.1

Contents

Preface	vii
Acknowledgements	viii
General Introduction	x
Part 1 Promoting health at the local level: the collective approach	1
Chapter 1 The potential for promoting health with local communities: general practice and the primary health care team	3
<i>Jill Russell</i>	
Chapter 2 Community action for health	20
<i>Moyra Sidell</i>	
Chapter 3 Partnerships and collaborations: the promise of participation	37
<i>Moyra Sidell</i>	
Chapter 4 Working at the local level	55
<i>Pat Thornley</i>	
Chapter 5 Evaluating community action	73
<i>Alyson Peberdy</i>	
Part 2 Promoting health through public policy	89
Chapter 6 Health promotion and public policy	91
<i>Linda Jones</i>	
Chapter 7 Making and changing public policy	112
<i>Linda Jones</i>	
Chapter 8 The politics of health promotion	131
<i>Linda Jones, from a first draft by Lee Adams</i>	
Chapter 9 The social policy contribution to health promotion	158
<i>Linda Jones</i>	

	Chapter 10 Health promotion and environmental politics	183
	<i>Linda Jones</i>	
Part 3	Debates and dilemmas in promoting health	207
	Chapter 11 Men's health in perspective	209
	<i>Graham Holroyd</i>	
	Chapter 12 Collaboration: united we stand, divided we fall?	219
	<i>Audrey Leathard</i>	
	Chapter 13 Ethics: from health care to public policy	236
	<i>Alan Cribb</i>	
	Chapter 14 Health promotion and society: critical perspectives	249
	<i>Martin O'Brien</i>	
	Chapter 15 Social science and the future of population health research	260
	<i>Gareth Williams and Jennie Popay</i>	
	Chapter 16 The future of health promotion	274
	<i>Jenny Douglas, Sarah Nettleton, Chris Tudor-Smith, Peter Farley, Kathy Elliot, Sir Kenneth Calman</i>	
	References	285
	Index	308

Preface

The Open University Team have perceived precisely one of the major challenges facing health care today. They have approached the challenge with insight and inspiration. The increasing importance of health promotion means that promoting health has become the business of all those engaged in health and social care. This book will be invaluable for a wide range of practitioners, policy makers, academics and other lay and professional people interested in enhancing the nation's health. The text will prove to be particularly timely for large numbers of nurses in roles which actively embrace preventive care and the promotion of health.

This practice-led book illuminates the complexity of health promotion as a concept and focuses appropriately on key approaches to working in this area. Issues associated with ways of working and building collaborative relationships and alliances are carefully addressed. Readers are eased into examining the paradox between empowerment and the traditional medical model and lifestyle approach.

The principles of analysis and critique pervade the text and encourage innovation and progressive practice. Some deeply held assumptions about definitions of ownership and control in health are challenged.

Emancipation and partnership are presented as key determinants of effectiveness and the need to rigorously evaluate health promotion activity is emphasised.

This book is itself a testimony to the value of collaboration and open-mindedness. Its content has been debated and vetted by a range of individuals and organisations. The Open University course, *Promoting Health: Skills, Perspectives and Practice*, of which this book and its sister publication *Promoting Health: Knowledge and Practice* form core texts, has evolved in partnership with potential consumers, HEA and Health Promotion Wales.

The Challenge of Promoting Health: Exploration and Action truly breaks new ground. It provides the building blocks for progressive health promotion through skilfully helping readers to apply theory to practice. It offers exactly what is needed by all those charged with a responsibility to enhance health. It stimulates provocation and challenge to turn thinking into action.

Professor Jill Macleod Clark
The Nightingale Institute
King's College London

Acknowledgements

Grateful acknowledgement is made to Liverpool City Council for their help, co-operation and input to Chapters 3 and 4. Also to the Greater London Association of Community Health Councils for the use of their material from *A review of health promotion in primary care: from the GP health promotion contract to promoting health with local communities* for Chapter 1. Also to the Health Education Authority for numerous case studies.

Grateful acknowledgement is made to the following sources for permission to reproduce material in this book:

Text

Bedford, B. (1996) Letter to *Health Services Journal*, 25 April 1996; Smithies, J. (1995) *Moving On – A Report of the National Community Health Conference*, Labyrinth Training and Consultancy; *The SCCD Charter – A Working Statement on Community Development* (1992), reproduced by courtesy of the Standing Conference for Community Development, 356 Glossop Road, Sheffield, S10 2HW; Labonte, R. (1993) 'Community development and partnerships', *Canadian Journal of Public Health*, 84 (4); Department of Health (1993) *Working Together for Better Health*, © Crown Copyright is reproduced with the permission of the Controller of Her Majesty's Stationery Office; Boxes 5.3, 5.4: Beattie, A. (1991) 'Knowledge and control in health promotion: a test case for social policy and social theory', in Gabe, J., Calnan, M. and Bury, M. (eds) *The Sociology of the Health Service*, Routledge; Box 6.1: Riley, J.C. (1987) *The Eighteenth Century Campaign to Avoid Disease*, Routledge; Box 8.1: Department of Health (1992) *The Health of the Nation – A Strategy for Health in England*, © Crown Copyright is reproduced with the permission of the Controller of Her Majesty's Stationery Office.

Figures

Figure 2.1: adapted from Blennerhasset, S., Farrant, W. and Jones, J. (1989) 'Support for community health projects in the UK', *Health Promotion*, 4 (3), Oxford University Press. By permission of Oxford University Press; Figure 3.1: Reproduced with the kind permission of Pavilion Publishing (Brighton) Ltd., from 'Managing user involvement' in *Roots and Branches – Papers from the OU/HEA*; Figure 4.1: Draper, R. (1992) *Reflections on Progress – Health for All 2000*, World Health Organisation; Figure 5.2: Beattie, A. (1991) 'Knowledge and control in health promotion: a test case for social policy and social theory', in Gabe, J., Calnan, M. and Bury, M. (eds) *The Sociology of the Health Service*, Routledge; Figure 5.3: Bracht, N. and Tsouros, A. (1990) 'Principles and strategies of effective community participation', *Health Promotion International*, 5 (3), Oxford University Press. Reprinted by permission of Oxford University Press; Figure 5.4: Smithies, J. and Adams, L. (1993) 'Walking the tightrope: issues in evaluation and community participation for Health for All', in Davies, J.K. and Kelly, M.P. (eds) *Healthy*

Cities: Research and Practice, Routledge; Figure 6.1: WHO (1986) *Ottawa Charter for Health Promotion*, World Health Organisation; Figure 6.2: Tones. B.K. (1990) *The Power to Choose: Health Education and the New Public Health*, Health Education Unit, Leeds Metropolitan University; Figure 6.3: Milio, N. (1987) *Promoting Health Through Public Policy*, Canadian Public Health Association, Ottawa, Canada; Figure 6.4: Macdonald, G. and Bunton, R. (1993) *Health Promotion: Disciplines and Diversity*, Routledge; Figure 7.1: adapted from Easton, D. (1965) *A Systems Analysis of Political Life*, John Wiley and Sons Ltd. Reprinted by permission of John Wiley and Sons Ltd; Figure 9.1: adapted from Beattie, A. (1991) 'Knowledge and control in health promotion: A test case for social policy and social theory', in Gabe, J., Calnan, M. and Bury, M. (eds) *The Sociology of the Health Service*, Routledge; Figure 9.2: Wilkinson, R.G. (1994) *Unfair Shares*, Barnardos; Figures 9.3 and 9.4: Jones, L.J. (1994) *The Social Context of Health and Health Work*, Macmillan Press Ltd, © Linda J. Jones 1994; Figure 10.1: Maglund, B. et al. (1991) "We Can Do It" *Sundsvall Handbook from 3rd International Conference on Health promotion, Sundsvall, Sweden, 9-15 June 1991, Stockholm*, Karolinska Institute/WHO; Figures 12.1 and 12.2: Leathard, A. (1994) *Going Inter-Professional: Working Together for Health and Welfare*, Routledge; Figure 12.3: Audit Commission (1993) *Their Health Your Business: The New Role of the District Health Authority*, © Crown Copyright. Reproduced with the permission of the Controller of Her Majesty's Stationery Office; Figure 12.4: Audit Commission (1994) *Finding a Place: A Review of Mental Health Services for Adults*, © Crown Copyright. Reproduced with the permission of the Controller of Her Majesty's Stationery Office.

Tables

Table 3.2: Eardley, A., Elkind, A., Hobbs, P. and McGuinness, H. (1989) 'Encouraging participation in breast-screening', *Health Education Journal*, 48, (4), Health Education Authority; Table 7.1: White, M. (1996) 'Who's who in public health?', *Healthlines*, May 1996, Health Education Authority; Table 8.1: National Audit Office analysis reproduced in *Health of the Nation, Progress Report*, (1996), © Crown Copyright. Reproduced with the permission of the Controller of Her Majesty's Stationery Office; Table 8.3: SHEPS (1994) *Roles for Health Promotion Specialists in Purchasing and Providing in the NHS Definition of Specialist Health Promoters' Roles*, Society of Health Education and Promotion Specialists; Table 9.2: Central Statistical Office (1994) *Social Trends*, © Crown Copyright is reproduced with the permission of the Controller of Her Majesty's Stationery Office and the Office for National Statistics; Table 10.1: Munn, R.E. (1992) 'Towards sustainable development', *Atmospheric Environment*, 26a (15), Elsevier Science Publishing Company Inc; Table 10.2: Brown, V., Ritchie, J. and Rotem, A. (1992) 'Health promotion and environmental management: a partnership for the future', *Health Promotion International*, 7 (3), Health Education Authority.

General Introduction

This book explores ways in which health promotion may be 'mainstreamed' within services, localities, organisations and policy-making processes. It investigates the experience of working for health at different levels and encourages would-be health promoters to review their own practice and consider how far it is possible to work in new ways and forge new health alliances. It is a partner volume to *Promoting Health: Knowledge and Practice*, which investigates the range of knowledge, skills and understanding which would be useful to those involved in promoting health. These include an understanding of key health promotion debates and models, assessing, planning and evaluating health promotion actions, interpreting health statistics, communicating with people, counselling skills and developing a systematic understanding of the nature and determinants of health.

In *The Challenge of Promoting Health: Exploration and Action* we examine debates and dilemmas as they arise in a range of practice contexts and approaches. These include debates about the reorientation of primary health care, the role of community development, the potential of health alliances and the scope for influencing public policy. We look also at some key dilemmas in practice: for example, the inherent difficulties of building empowerment and participation, the problems in reconciling an individual and a collective focus and the essentially contested nature of 'healthy public policy' work. In doing so we highlight three fundamental challenges facing health promotion as it enters the twenty-first century. The first of these is to persuade the public that health promotion is relevant to their everyday lives; the second challenge is to persuade professionals, in and outside the health sector, that health promotion should be an essential element of their everyday work. There is also a third challenge, perhaps the most difficult of all, which lies in breaking down the barriers between 'professional' and 'lay' work so that the insights and strengths of each may be harnessed in the struggle for better health.

Three challenges for health promoters

Public perceptions of health promotion are still confused and contradictory. On the one hand, findings from researchers such as Davison, Frankel and Davey-Smith (1992) indicate a deep scepticism towards health promotion and suggest that a complex lay logic of 'luck' and 'fate' may be a more potent influence on people's thinking. On the other hand, for many people health promotion means targeting behaviour. People in the street who are asked about health promotion often reply with conventional comments about changing behaviour and mention one of the 'big' four – smoking, drinking, diet or exercise (BBC, July, 1996). This does not mean that they will make a change; indeed, people may then go on to explain why change is difficult or impossible for them.

Such evidence presents a challenge to would-be health promoters which is not initially or even primarily about changing public attitudes but about changing their own thinking and practice. It is not surprising that the public perceive health promotion as attempted behaviour modification, if we reflect on the narrow emphasis there has been within most professional groups on 'lifestyles' and on offering heavy-handed health advice to individuals. If the relevance of health promotion to people's everyday lives is to be recognised health promoters need to challenge the 'lifestyles' orthodoxy and its marginalisation of socio-economic and environmental influences on health.

Would-be health promoters also need to think about process change rather than just product change. A survey of 'best practice' in the Health of the Nation areas reported that 'initiatives for new services accounted for by far the greatest number of examples. In these cases a need was identified and a service planned and delivered by nurses, midwives and health visitors, or at least with major input from them' (DoH, 1993: 13). New services may, of course, be important but this notion of health promotion as 'add on' services, with needs assessed and met largely by professionals, has served to perpetuate a view of health promotion as another health product. Opening another clinic or organising another advice session may be important, but it may also distract attention from the more basic objective of re-orientating statutory and voluntary services. Extensions of services are often much easier to achieve than a reorientation of current practice, which may be difficult and threatening.

The chapters that follow demonstrate how a broader approach to health promotion may be developed and examine the potential for health promoters to use this to review and reorientate their practice. They explore some key building blocks in improving health: health advocacy, community action, healthier public policies and supportive environments. In doing so they respond to the third challenge we noted above, which is to break down the barriers between 'lay' and 'professional' work for health.

Health promotion, it has been claimed, is 'everybody's business' (DHSS, 1976) and voluntary and community groups have been in the forefront of innovative work for health in recent years. Some have built strong alliances with professionals but others have been greeted with suspicion. The preference of professional groups, on the whole, has been for docile 'patients' and 'clients' rather than active partners. Self-help has been characterised in individual terms much more than in terms of active groups or communities. Yet a fundamental objective in health promotion is to achieve change within the wider society so that health has a higher priority and is better protected. This cannot be achieved without the commitment and participation of lay people in the process of challenge and change. This book, therefore, is also about ways of working in partnership with people in a range of agencies and localities, in order to make health promotion more sensitive to people's needs and more effective in bringing about change.

Action at the local level

Part 1 focuses on the interface between health and welfare professionals and local communities. It investigates how far the model of primary health care based health promotion, endorsed by the WHO as appropriate for developing countries, can be translated into the general practitioner services which form the basis of primary health care in the UK. The model of community-oriented primary health care advocated by the King's Fund (Gillam, 1994) represents a shift from attending to the patient who walks through the surgery door to adopting a whole practice view. This takes the local community's health as its brief and involves reaching out into the community to discover the community's health needs and priorities. Mainstreaming health promotion within primary health care and taking a community-oriented approach requires new ways of working for the primary health care team. The community is not a passive entity waiting to be acted upon. Avoiding 'cultural invasion' and achieving 'cultural synthesis' is as much a challenge for health promotion into the twenty-first century as it was at the time Paulo Freire (1972) was writing about the role of education in deprived communities in the 1960s and 70s.

Community development for health has a well established tradition within health promotion of supporting and enabling local communities to work together to improve their collective health and well-being. Community health development workers have attempted to avoid an emphasis on the individual lifestyle change approach to health promotion and instead have focused on the conditions of people's lives, trying to find ways through collective action that they might change their local health environment.

Recent government strategy, encouraging user involvement, consultation and participation in health and health care has put community development health workers under the spotlight and changed their role in many ways. Community development workers now have to represent the statutory agencies to the local community and the local community to the statutory agencies. They truly have a foot in both camps enabling statutory agencies and local communities to work together to promote health. Building health alliances which achieve a balance between a top-down and a bottom-up approach is a challenge with which many are now grappling.

Many would see the mainstreaming of community development work as a contradiction in terms. However, if community development is to be more than an exercise in Do-It-Yourself health, then it must bring about real participation by communities in decisions made at all levels which affect their health and well-being. The third challenge to health promotion identified earlier, of breaking down the barriers between lay people and professionals, requires health professionals at all levels to work in new ways and ways which many may find threatening to professional autonomy.

Promoting health through public policy

Part 2 explores the potential for improving health through the use of public policy. Traditionally, health and welfare work has been focused on individuals, with the assumption that it takes place within a given policy framework. Health promotion questions this view by focusing on groups and populations, and by seeking to transform policies so that health can be protected and enhanced. This suggests a role for would-be health promoters in challenging and modifying unhealthy policies and working to change them.

One response to such a demand might be to argue that building 'healthy public policy' is rather too ambitious a task for the average health promoter, who may associate policy making with managers, politicians and civil servants rather than 'grass roots' workers. A key message of Part 2 is that everyone is potentially a policy maker. Policy decisions are made and executed at many levels and a sound understanding of the policy process can enable health promoters to become more skilled in seizing opportunities to influence policy change. We look at the political bargaining around health, both through a case study of smoking policy and by exploring debates about national health strategies and welfare restructuring.

How has 'health promotion' been conceptualised and realised in public policy? This Part investigates its origins and growth and the contribution of public health, social policy and the environmental movement to its realisation. In particular, we explore the emergence of 'healthy public policy' and 'supportive environments' as key ideas in contemporary health promotion and discuss how far health promoters can build these ideas into their everyday work. There is a systematic analysis of the relationship between social welfare and health, which highlights how accounts and models of health promotion have drawn on welfare typologies and examines the shifting debates about welfare entitlement through a case study of poverty.

Finally, the incorporation of a 'green' dimension into health promotion is analysed and evaluated. How high a priority should health promoters attach to environmental interventions and what can be achieved at local level? Some of the attempts to integrate environmentalism into health, such as the 'Greening the NHS' initiative, are assessed. Struggles over health promotion territory, we suggest, are still continuing and health promoters need to decide where they stand in contemporary debates about the 'new public health' and the 'healthy public policy'.

Debates and dilemmas in promoting health

The discussion in Parts 1 and 2 of the practical and policy implications of new ways of working to promote health, enabling people to participate in the decisions which affect their health and mainstreaming health promotion, highlights many contradictions. The final Part of this book picks up and dissects some of the debates and dilemmas facing health

promotion as it moves into the twenty-first century. The ethical assumptions which underlie alternative ways of working are explored. A searching sociological analysis based on the surveillance and modernisation critiques asks difficult questions about the relationship between health promotion and wider social and political forces. Gender issues are brought into perspective by the recent emphasis on privileging men's health. The need for inter-professional collaboration which must underpin attempts at inter-sectoral and inter-agency working is subjected to scrutiny. The implications of a shift to user involvement with its emphasis on lay perspectives is critically analysed, asking how far it is possible to install a new lay epidemiology in health promotion.

The final chapter explores possible futures for health promotion. A range of people working in the field at national and international level put forward their own predictions and speculations about health promotion as it moves into the twenty-first century. Their different priorities and visions suggest that health promotion will continue to be an essentially contested territory.

Linda Jones and Moyra Sidell
1st November 1996