

Health Promotion Glossary Update

New terms

Burden of disease

The burden of disease is a measurement of the gap between a population's current health and the optimal state where all people attain full life expectancy without suffering major ill-health.

Reference: Modified definition (WHO, 2000)

Burden of disease analysis enables decision-makers to identify the most serious health problems facing a population. Loss of health in populations is measured in disability-adjusted life years (DALYs), which is the sum of years of life lost due to premature death (YLL) and years lived with disability (YLD). Burden of disease data provide a basis for determining the relative contribution of various risk factors to population health that can be used in health promotion priority setting. For instance, smoking, undernutrition and poor sanitation are related to a number of major causes of morbidity and mortality and therefore each is a potentially important focus for health promotion. In addition, burden of disease studies can reveal disparities in health within populations that indicate underlying social inequities that need to be addressed.

Capacity building

Capacity building is the development of knowledge, skills, commitment, structures, systems and leadership to enable effective health promotion. It involves actions to improve health at three levels: the advancement of knowledge and skills among practitioners; the expansion of support and infrastructure for health promotion in organisations, and; the development of cohesiveness and partnerships for health in communities.

Reference: Modified definition (Skinner, 1997; Hawe *et al.*, 2000; Catford 2005)

The competency of individual health promoters is a necessary but not sufficient condition for achieving effective health promotion. The support from the organisations they work within and work with is equally crucial to the effective implementation of health promotion strategies. At the organisational level this may include training of staff, providing resources, designing policies and procedures to institutionalise health promotion and developing structures for health promotion planning and evaluation. The scope of organisational capacity building encompasses the range of policies and partnerships for health promotion that may be necessary to implement specific programs or to identify and respond to new health needs as they arise. At the community level, capacity building may include raising awareness about health risks, strategies to foster community identity and cohesion, education to increase health literacy, facilitating access to external resources, and developing structures for community decision-making. Community capacity building concerns the ability of community members to take action to address their needs as well as the social and political support that is required for successful implementation of programs.

Evidence-based health promotion

The use of information derived from formal research and systematic investigation to identify causes and contributing factors to health needs and the most effective health promotion actions to address these in given contexts and populations.

Reference: New definition

As a field which recognises that health needs can be addressed by action at the individual, interpersonal, community, environmental and political levels, health promotion is informed by many types of evidence derived from a range of disciplines (Tang et al 2003). These include epidemiological studies about health determinants, health promotion program evaluations, ethnographic studies about social and cultural influences upon health needs, sociological research about the patterns and causes of inequalities, political science and historical studies about the public policy making process and economic research about the cost-effectiveness of interventions. Among the applications of evidence to health promotion planning is the identification of health promotion outcomes and intermediate impacts that should be addressed in order to achieve the goals of health promotion actions (Nutbeam, 1998).

It is important to note that formal evidence alone is not a sufficient basis for effective health promotion. External information can inform, but not replace the expertise of individual practitioners which guides the selection and application of evidence (Sackett et al., 1996; Tang et al., 2003).

Global health

Global health refers to the transnational impacts of globalization upon health determinants and health problems which are beyond the control of individual nations.

Reference: Modified definition (Lee, 2003)

Issues on the global health agenda include the inequities caused by patterns of international trade and investment, the effects of global climate change, the vulnerability of refugee populations, the marketing of harmful products by transnational corporations and the transmission of diseases resulting from travel between countries. The distinction between global health problems and those which could be regarded as international health issues, is that the former defy control by the institutions of individual countries. These global threats to health require partnerships for priority setting and health promotion at both the national and international level.

Health impact assessment

Health impact assessment is a combination of procedures, methods and tools by which a policy, program, product, or service may be judged concerning its effects on the health of the population.

Reference: Modified definition (WHO Regional Office for Europe, 1999)

Health impact assessment is usually conducted at the local or regional level, and its primary purpose is to inform the development of policies and programs that will promote better health and reduce health inequalities (Taylor et al., 2003). When used effectively health impact assessment can draw upon a wide range of values and evidence and facilitate intersectoral partnerships and community participation for health promotion (Sukkumnoed and Al-Wahaibi, 2005). Health impact assessment considers both positive and negative impacts and can be used to identify new opportunities for health promotion. Systems for health impact assessment and the subsequent development of health promotion plans and policies are particularly important in light of the economic and social changes being brought about by globalization. The issues that can be addressed in health impact assessments include the effects of international trade, changes in the regulatory controls that governments can use, access to new information and technologies, threats to the natural environment, and changes in lifestyles and social structures (Sukkumnoed and Al-Wahaibi, 2005).

Needs assessment

A systematic procedure for determining the nature and extent of health needs in a population, the causes and contributing factors to those needs and the human, organisational and community resources which are available to respond to these.

Reference: Modified definition (Last, 2001; Wright, 2001)

Needs assessment is an early step in planning a health promotion initiative. It is accompanied ideally by an assets assessment (resources available to promote health). The scope of needs assessment in health promotion is broad, reflecting an understanding that health is shaped by individual factors and the physical, social, economic, and political context in which people live. Information collected may include morbidity and mortality patterns, health-related cultural beliefs, educational attainment, housing quality, gender equity, political participation, food security, employment, poverty and environmental quality.

The opportunities for empowerment in health promotion begin in the needs assessment stage. Consulting communities is a key method for understanding factors which affect their health and quality of life, and is a means of recognising the needs of disadvantaged groups who may not be represented in routine statistical collections. Participatory needs assessment methods, such as Rapid Participatory Appraisal, can be used to engage communities in the process of information collection, analysis and priority setting, and to build future capacity for health promotion.

Self-efficacy

Perceived self-efficacy refers to beliefs that individuals hold about their capability to carry out action in a way that will influence the events that affect their lives.

Modified definition: (Bandura, 1994)

Self-efficacy beliefs determine how people feel, think, motivate themselves and behave. This is demonstrated in how much effort people will expend and how long they will persist in the face of obstacles and aversive experiences.

Social marketing

Social Marketing is the application of commercial marketing technologies to the analysis, planning, execution and evaluation of programs designed to influence the behaviour of target audiences in order to improve the welfare of individuals and society.

Modified definition: Andreasson (1995).

Social marketing strategies are concerned firstly with the needs, preferences and social and economic circumstances of the target market. This information is used to ensure the most attractive benefits of a product, service or idea are offered and to address any barriers to the acceptance of that offering (Maibach *et al.*, 2002). Communicating with target market members about the relative advantages of what is offered is one element of social marketing, but also important are addressing issues of price, access, environmental support and the marketing of competing products. Effective social marketing, therefore, may include efforts to address the economic and regulatory environment. Success of a social marketing strategy is determined by its contribution to the well-being of the target market or society as a whole (Maibach *et al.*, 2002).

Sustainable health promotion actions

Sustainable health promotion actions are those that can maintain their benefits for communities and populations beyond their initial stage of implementation. Sustainable actions can continue to be delivered within the limits of finances, expertise, infrastructure, natural resources and participation by stakeholders.

Reference: New definition

Achieving the changes in risk factors and risk conditions that will result in health gain in populations requires the implementation of health promotion actions over years and decades. Attention needs to be given, therefore, to designing actions which have the potential for ongoing delivery and institutionalization after they have been evaluated and found to be effective. Health promoting policy, across a range of sectors, and modifying the physical environment in which people live have particular value because of their potential sustainability. The issue of sustainability also highlights the importance of capacity building in health promotion and the benefits of intersectoral collaboration to create shared responsibility for the ongoing implementation of strategies.

The Ottawa Charter identifies a stable eco-system and sustainable resources among the prerequisites for health, and states that taking care of natural resources is central to creating a supportive environment for health. Sustainable health promotion strategies are those which are compatible with the natural environment in which they are carried out and do not create unintentional threats to the health of future generations due to their ecological impact.

Wellness

Wellness is the optimal state of health of individuals and groups. There are two focal concerns: the realisation of the fullest potential of an individual physically, psychologically, socially, spiritually and economically, and the fulfilment of one's role expectations in the family, community, place of worship, workplace and other settings.

Reference: New definition

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