A future task for health-promotion research: Integration of health promotion and sustainable development

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Abstract

Based on previous studies and reflections collected from participants in a workshop at the 8th Nordic Health Promotion Research Network conference, we reveal current tendencies and discuss future challenges for health-promotion research regarding integration of sustainable development principles. Despite obvious interfaces and interactions between the two, our contention is that strategies for health promotion are not sufficiently integrated with strategies for sustainable development and that policies aimed at solving health or sustainability problems may therefore cause new, undesired and unforeseen environmental and health problems. As illustrated in previous research and as deliberated in the above-mentioned workshop, a number of barriers are identified. These are believed to be related to historical segregation, the conceptual understandings of health promotion and sustainable development, as well as the politics and implementation of policy goals in both areas. Three focal points are proposed as important challenges to address in future research: (a) the duality of health promotion and sustainability and how it can be handled in order to enhance mutually supportive processes between them; (b) the social dimension of sustainability and how it can be strengthened in the development of strategies for health promotion and sustainable development; and (c) exploring and identifying policy approaches and strategies for integrating health promotion and sustainable development.

Key Words: Health promotion, sustainable development, social sustainability, policy integration, duality

Introduction

This debate article reveals and discusses future challenges for health-promotion research by emphasising three main issues to be explored regarding the integration of health promotion and sustainable development. The discussion is based on previous and current studies on the interactions between health promotion and sustainable development, as well as reflections on the theme in the workshop at the 8th Nordic Health Promotion Research Network (NHPRN) conference. Based on a condensation of the results from our previous findings (see Table I), policy studies and reflections of the participants in the workshop, we consider the similarities between the two regimes, and ask how they can be mutually supportive and how research can play a role in supporting formulations of policy, strategies and concepts for change in the ways we deal with health promotion and the integration of principles from sustainable development.

We will briefly summarise our findings, obtained through the work we have listed in Table I. The studies regarding the conceptualisation of sustainable development, health promotion and their interrelations point to the similarities and the interplay between the two concepts, but also importantly to the intricate and sometimes contradictory relations...
that characterise the interplay. This led to an understanding of health promotion and sustainability as a duality [8,9]. Two of these articles also discussed and criticised a narrow understanding of sustainable development in terms of environmental and/or economic sustainability, whereas social sustainability has often been downplayed or disregarded [10,11]. The work concerning community formation and everyday life further elaborated on important aspects of the links between health and social sustainability, especially through the focus on community formation [13,14]. Furthermore, an analysis of how the unequal societal distribution of knowledge about health and environment affects citizens’ everyday life points to the social and political conditions that influences the integration of environmental and health policies [12]. The issue of policy integration and social transition is addressed in an article that shows how spaces for alternative designs could give insight into how the integrative efforts in relation to health and sustainability are dependent upon a complex web of social actors, acting under institutional configurations evolving in an interplay of a number of different agendas [16]. The studies of health and sustainable development in relation to food issues reveal how both of these dimensions are inherently connected and how most changes within the food system affect both dimensions at the same time [10,17,18].

In the special issue of the TES journal, several of these issues were further elaborated on, not least the social dimension of sustainability and its interconnection with health promotion [4–6], as well as the question of policy integration, which was addressed in two articles covering both a broader discussion and analysis of health promotion and sustainable development as innovative, ‘transcending’, policy areas [2] and an analysis of policy integration related to the established fields of health and environmental policies [7]. In addition, a concrete example of barriers towards integration of health and sustainability in the field of dietary guidelines was included [3]. Finally, the duality concept, as mentioned above, was further discussed, taking food waste as an example. In continuation of these efforts, our workshop at the NHPRN Conference provided additional input to a discussion about barriers to and opportunities for integration of health promotion and sustainable development. What we think was still missing was an attempt to synthesise the work we have undertaken to deal with the integration of health and sustainable development. The present article deals with this ambition of providing a synthesis of our research experience in the field.

However, the idea of a policy integration of the two regimes is not new. It has been explored several times during the last 30–40 years in policy statements and declarations. Prominent and often mentioned examples of policy declarations with health/environment integrative content are: the United Nations (UN) Stockholm Conference on the Human Environment in 1972 [19], the initiation of the UN Health for All by the Year 2000 in Alma-Ata in 1978 [20], the World Health Organization (WHO) 3rd Health Promotion Conference Sundsvall Statement on Supportive Environments for Health in 1991 [21], and the sustainable development summits initiated in 1992 in Rio about environment and development [22]. More recently, the Shanghai Declaration on promoting health in the 2030 Agenda for Sustainable Development of 2016 pointed out health and well-being as ‘essential to achieving sustainable development’ [23], and the UN’s 17 sustainable development goals from 2015 hold several health targets intertwined in the 17 target areas. More specific policy targets have been seen in the National Environment and Health Action Plans (NEHAP) of the WHO in the 1990s as well as the WHO Healthy Cities Project.

There are obvious interfaces and interactions between health promotion and sustainable development. As argued previously by some of the authors of this article, a perspective on the duality of health and sustainability is believed to create a
platform for a critical and theoretical stance [8]. Non-sustainable development will very often have negative consequences for the people involved, but the opposite can also be true, as pointed out by Kjærgård, Pedersen and Land [9]. In addition, health promotion as a concept is clearly parallel to sustainable development because of its normativity and broad integrative character [8,9,24], and the multilevel governance and positive development strategies of the two regimes are similar [2].

Methods

For the 8th NHPRN conference in June 2016, we prepared a workshop with the theme ‘Health Promotion and Sustainable Development’. Here, key elements from a special issue of the Journal of Transdisciplinary Environmental Studies, published in 2013, formed the basis for the initial reflection and deliberation among the participants. About 30 international researchers attended the workshop and exchanged experiences and reflections on the topic.

We facilitated group discussions where mind maps of key issues were developed. A summary of the key points and issues was written shortly after the workshop and submitted to the participants. The summary and mind maps further aroused our curiosity about the issue, which led us to reflect on our own and other researchers’ findings on the integration of health promotion and sustainable development. These derived from previous policy document studies, sociological studies, case studies and cultural/ pedagogical studies, which, together with feedback and reflections from the workshop participants, provide the basis for the contribution of this paper to the debate on current and future challenges for integrating sustainable development and health promotion.

The concepts and the emergence of integration of sustainable development and health promotion

After almost 20 years of constructing a sectorial policy on environmental protection (pollution control, risk and hazards prevention, nature conservation and environmental infrastructure) in most of the world’s industrialised countries, the UN, from the mid-1980s to 1992, addressed the integration of environmental protection into socio-economic development. The Rio document from the 1992 Earth Summit and the subsequent process focused on enabling a sustainable agenda for the 21st century, encompassing a complex system of guidelines, technologies and policies [22]. It is thus an effort to integrate environmental concerns into other sectors and to develop mechanisms for integrating the dimensions of sustainable development. Sustainable development as a concept can be characterised as a complexity of environmental, social, economic, political and planning dimensions and the interactions between them in order to achieve environmental, economic, social and public health sustainability. It articulates global fairness in a call for a development that meets the essential needs of the world’s poor and the needs of the present generations without compromising the ability of future generations to meet their own needs [25]. The ability of the environment to meet the needs of both present and future generations is closely related to changes in technology and social organisation (and hence environmental protection and public health play a crucial role towards a sustainable development path).

After a long and important period of creating standards, measures and infrastructure to handle communicable diseases, epidemics and basic healthcare needs, the WHO initiated a new so-called public-health wave, incorporating understanding of health embedded in cultural and social systems, informed by social science [26]. Until then, public-health politics had been based on a medical focus on infectious diseases, followed by an emerging psycho-pedagogical wave to handle chronic, lifestyle diseases – in other words, avoiding or reducing risks relating to illnesses. The WHO Ottawa Charter on Health Promotion from 1986 addressed a number of conditions for ensuring a healthy life, including peace, shelter, food, income, a stable eco-system, sustainable resources, social justice and equity, health literacy, social networks, local community and healthy consumer products. The list of prerequisites for health has since been updated to include social security, social relations, empowerment of women, respect for human rights and, above all, alleviation of poverty. Accordingly, a number of actors were called upon and given responsibility for ensuring positive health outcomes. Generally, the core regulatory or policy principles are typical of soft governance: advocacy, enabling by creating a supportive environment, disseminating information and skills needed to make healthy choices, and mediation between different groups to ensure the pursuit of health. Health promotion is understood as ‘the process of enabling people to increase control over, and to improve, their health’ [27] and focuses broadly on societal conditions and social determinants that create possibilities for improvements or set barriers to health.

The strategies targeting sustainable development as well as those targeting health promotion are integrative efforts directed at implementing policies that will endure in relation to the environmental, social and economic dimensions. The necessity of holistic approaches to both sustainable development and
health promotion has been indicated in research and policies. However, we identify some further challenges linked to integration of the two regimes.

Current tendencies

It is thus our contention that strategies for health promotion are not sufficiently integrated with strategies for sustainable development, and that political strategies directed at solving (public) health problems or (environmental) sustainability problems may therefore cause new, undesired and unforeseen environmental or health problems [9]. There are several barriers to and challenges for integration of health promotion and sustainable development which are deeply rooted in structural conditions. These issues will be addressed below.

There has been a tendency to reduce sustainability conceptually to environmental sustainability [10]. The social dimension has been particularly deprioritised both conceptually and in more practice-oriented implementations of sustainability, as pointed out by several scholars [28–32]. This has led to neglect of the importance of the relationship between health and sustainability. Exceptions are found in certain specific interventions such as corporate social responsibility (CSR) schemes, multifunctional farming or urban renewal planning. Here, the social dimension of sustainability has gained importance over the last 10 years [31,33,34].

Conversely, there has been a tendency to disregard the fact that the concept of health promotion encompasses interaction with the biophysical environment [24]. One reason for this may be that the professionals and scholars in sustainable development and health promotion subscribe to different world views. The result is often that the health in health promotion is reduced to freedom from illness, well-being and empowerment, while the environmental dimension of sustainable development is reduced to quantifiable and measurable environmental indicators. This has made it a complex challenge to establish the connection to health promotion as an effort concerned with strengthening citizens' resources and capability to act.

A challenge identified by scholars sharing their experiences and reflections during the workshop on health promotion and sustainability at the 8th NHPRN conference was the difficulty of providing evidence of the outcome of efforts to integrate sustainable development and health promotion policies and initiatives.

In health promotion, there has been a tendency to focus on individual lifestyles and campaigns targeting risk behaviour [35]. Embedded in the rationale of neoliberalism, the focus is set on individual responsibility to take a healthy path in the numerous health-promotion strategies and initiatives. This tendency can be contested through a health promotion that seeks to understand health practices as initiatives that must be directed towards people's scope for action in relation to structures and societal conditions in different settings such as schools, local communities, workplaces and so on [36,37].

Another important barrier to an integration of health promotion and sustainable development has been the functional division of environment and health into different political and administrative sectors with their own separate institutions and practices. This differentiated political and administrative management has made it difficult to deal with broad cross-cutting goals and activities, despite the fact that a need for integrative policies has been recognised and formulated quite often in policy papers and programmes during recent decades [7]. This was stressed through the formulation of the so-called socio-ecological model of health formulated by the WHO and the UN Environment Programme in the early 1990s and the subsequent inclusion of the model in the declaration of the UN Rio Earth Summit in 1992 [22].

Health promotion and sustainability as a duality

Ilona Kickbusch has made a major contribution to the development and understanding of the interplay between health promotion and sustainable development by using the food system as a 'prism' for illuminating present and future challenges [24]. As a starting point for her review of how food links health promotion and sustainable development, she states that a primary goal is to establish 'a more sustainable, healthier, and more equitable food system in which choices for health are also the best choices for the planet and to support ethical and environmental choices that are also good for health' (p.18, italics by IK) [24].

One of the difficulties of pursuing this goal is that, as mentioned above, health and sustainability strategies are not always mutually supportive. A number of examples of this have been given in previous research [1,9,24]. As a conceptual approach, Kjærgård et al. [9] suggest that the mutual relationships between health promotion and sustainable development can be understood as a duality. Thus, Pedersen and Land [8] suggested considering health promotion and sustainable development as a duality, inspired by Anthony Giddens’ conception of structure and agency, where structures and agents are seen as mutually enabling and constraining. In
this understanding, structure is both a medium for and an outcome of social practices [38]. Similarly, health promotion and sustainable development produce, reproduce and constrain each other.

In order to identify health choices that are at same time the best choices for the planet, we therefore see it as a necessity to develop strategies for health promotion and sustainable development that are integrated in order to prevent one of the two setting barriers to or constraining the other. Developing separated strategies may lead to unintended social and environmental consequences or even produce new health or environmental problems, as illustrated by Pedersen, Land and Kjærgård [1].

In order to take the duality between health promotion and sustainable development into account and explore possible contradictions, Pedersen, Land and Kjærgård [1] point out a number of factors that must be incorporated in an overall consideration of possible strategies. Generally speaking, they mention habitable environments and social systems based on participatory processes, resilient ecosystems and viable economic systems, supportive socio-economic systems and the ways in which these factors enable or constrain both health promotion and sustainable development. With this conceptualisation, health promotion is perceived and discussed within the framework of the broad concept of sustainable development.

Social sustainability

Social sustainability is the dimension of sustainable development that has received least attention and is probably also the least conceptually developed in scholarly work as well as in policy debates and initiatives. Since ‘health promotion continually challenges health policy with a socio-ecological perspective on how we organize health in our societies in a more sustainable manner’, it ‘creates a special affinity to the concept of social sustainability’ (p.11) [24]. As stressed by Parra, another challenge is a too narrow focus on distribution of resources in discussions about social sustainability. She advocates for a wider definition of social sustainability with an emphasis on social innovation in order not to ‘risk reducing the sustainability debate to a rivalry between economic and ecological logics’ (p.143) [32].

Such a broader approach to social sustainability is for instance illustrated by Andersen [5,14] in her study based on action research of community health issues in a socially vulnerable urban area in Denmark. Through the concepts of empowerment and community health, she attempts to demonstrate how citizen participation can be achieved in order to ensure sustainable health promotion. Similarly, Thualagant [6] advocates for a socially sustainable perspective in her critique of health policies oriented towards potentially doped members of fitness clubs in Denmark. She sees policies emphasising control and rigid rule setting as counterproductive because of their stigmatising and socially exclusive character, and she advocates for a socially sustainable perspective that enables fellowship, self-development and inclusion of the members of the fitness club in a health-promoting culture. As a third example, From [4] argues that the introduction of e-health technologies in the social and health-care sectors leads to a strategy of governing citizens via discourses of promises and optimisation, where the encouragement of virtue and individual responsibility is presented as a new sustainable strategy for human welfare. She concludes that in the new strategies of digital welfare technologies are underpinned by new implicit strategies of health care and health promotion. These implicit strategies appear as challenges for socially sustainable development, since they favour cost savings over citizens’ health-care needs.

These examples, as well as the discussion of the need for a wider definition of the social aspect introduced by Parra, highlight the social dimension as crucial in the broader understanding of sustainable development, in the sense that human agency in relation to the economy and the environment is always embedded in and conditioned by social contexts. All these factors point to a need for further exploration of the conceptual understanding of the social dimension of sustainable development.

A recent emphasis on the social dimension of sustainable development is seen in the Shanghai Declaration of 2016 [23], which indicates a recent focus on social health. Nonetheless, it can be argued that this declaration mostly focuses on the health aspects of sustainable development in the UN Sustainable Development Goals, even though it states that people’s health can no longer be separated from the health of the planet. It would have been a strength, however, if the Declaration had attempted to provide a broader integration of health promotion and sustainable development.

Politics of integration of health promotion and sustainable development

The integration of the regimes of health promotion and sustainable development encounters further challenges in implementation at the political level. Both regimes emerged during the 1980s and share certain characteristics, such as being visionary,
calling upon deliberative governance and stakeholder democracy with an aim of enhancing positive health, ecology and a fair distribution of resources and life chances. Furthermore, they both called for new policy styles, new actor constellations and radical new forms of addressing positive health and ecosystems development [2]. Both regimes pose challenges to existing policy structures and systems if they are to be implemented according to how they are framed as policy regimes in the international contexts of the different UN organisations.

Taking Denmark as an example, these challenges are reflected on a national level. Here, a more limited and partial implementation of the two regimes is at stake, which differs from the way complex, systemic and wicked policy issues are handled in UN contexts [2]. Almlund and Holm [2] conclude that both regimes in their implementation suffer from a lack of maintaining the deliberative policy and sector integration efforts. Over time, health-promotion policies have turned into an individualistic handling of risky behaviour, while sustainable development policies have maintained a governance and whole-of-society approach but gradually turned into samples of scattered policies with no visionary transition efforts. Almlund and Holm raise the question of if and how the two regimes’ different policy styles eventually can support each other in the future and establish a complementary development.

If the complex policy regimes of health promotion and sustainable development pose challenges with regard to their implementation in national policy contexts, it seems relevant to ask about the more limited ambition of coordinating the established sectoral policy areas of public health and environmental protection. Since the mid-1980s, a growing number of coordination efforts between the public health and environmental policy sectors have emerged in the European Union (EU) and nationally. Long-term strategies have evolved in local projects, as well as in international regimes, policies and various ad hoc initiatives. Despite the fact that these efforts have been accompanied by numerous statements about the interconnectedness of health and the environment, the actual policy coordination in most if not all EU countries severely lags behind the declared intentions. It appears very clearly that both the public-health sector and the environmental protection sector in most or all EU states do not seriously address the need for coordinating efforts, or perhaps, more precisely, neglect to put this on the agenda, separately or jointly [7].

In theoretical terms, the experience that can be drawn from these failed efforts as well as from the challenges of the complex policy regimes of health promotion and sustainable development points to a need for further studies and reflections on whether and how two distinct policy regimes can converge, whether interdependencies can be institutionalised, and whether discourses and knowledge regimes can be intertwined. How can policy change for co-operation in these areas be accomplished incrementally, and what role can the various actors and institutions play in such a change? Among promising examples are context-specific efforts, such as the inclusive farming projects [13,34] oriented towards sustaining agriculture with a social and local economic profile, as well as climate mitigation efforts at community level. By enhancing frameworks for citizen and stakeholder involvement, taking quality of everyday life and health into account, several game-changing Local Agenda 21 and green-housing initiatives have emerged [39–41]. Such efforts can lead to cross-cutting activities that integrate health promotion and sustainable development by building social capital and community empowerment [5,14,41]. As argued by several scholars, researchers should discuss replacing current evaluation indicators within the two regimes by new types of indicators when examining/designing the possible outcome of a future intervention or policy. This seems to be an essential task for future research in order not to neglect social or health aspects, thus avoiding a generalising and instrumental approach to sustainability.

Conclusions

Our intention with this debate paper was to identify the main challenges for future research with regard to the political objectives of integrating health promotion and sustainable development. As outlined in this article and by other scholars, several points should be addressed if the ambition of integrating health promotion and sustainable development in future policies and practices is to be sustained. We believe that the recent WHO focus on health and well-being is essential in order to address the sustainable development goals as proclaimed at the WHO conference in November 2016 in Shanghai.

Based on contributions from various researchers and feedback from discussions at the 8th NHPRN workshop, we identify three challenges, which we believe are important focus areas for future health-promotion research:

- The duality between health promotion and sustainability and how it can be unfolded in order to enhance mutually supportive processes between them.
- The social dimension of sustainability and how it can be strengthened in the development of
strategies for health promotion and sustainable development.

- Exploring and identifying policy approaches and strategies for integrating health promotion and sustainable development.

These focus areas could advance the global agenda for health promotion and be a vehicle for taking an innovative approach to integrating health-promotion initiatives and the social and environmental dimensions of sustainable development. Developing health-promotion processes that take into account both social and environmental health may open up new paths and avoid rivalry with economic and environmental goals.

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