BENDING THE TRENDS TO PROMOTE HEALTH AND WELL-BEING

A strategic foresight on the future of health promotion
# Contents

Acknowledgements ................................................................. ii
Executive summary ............................................................... iii
Background .................................................................................. 1
Aim and scope ............................................................................... 3
Method ......................................................................................... 4
Strategic foresight on health promotion ........................................... 5
Enabling the future through transformative actions ......................... 14
Future balance of health paradigms ................................................. 17
Calling for a global health-promotion action plan .............................. 19
Concluding remarks ...................................................................... 20
References ...................................................................................... 22
Acknowledgements

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Executive summary

In the rapidly changing world of the twenty-first century, this strategic foresight on the future of health promotion aims to inform future planning of the World Health Organization in support of the Sustainable Development Goals, the Thirteenth General Programme of Work, and the Implementation Framework for the Third Billion Target of the WHO Thirteenth General Programme of Work (to be published in 2022) in relation to health promotion, sustainability and enhanced well-being. The strategic foresight conducted from August to November 2020 provides an analysis of health-promotion system capacity models and a horizon-scanning of global trends.

The key findings suggest to expand the capacity of health-promotion systems so they can bend future trends to promote health. By applying a health-promotion lens to global health challenges and opportunities, benefits can be made towards the development of healthier populations. The strategic foresight introduces the paradigm shifts needed to progress the agenda on planetary health, One Health and well-being, and presents transformational actions to support these shifts.

In the time of COVID-19, the proposals in this foresight are more prominent than ever. The pandemic has highlighted the need for more substantial investment in health promotion as a mindset, and professional capacity and practice supported by relevant digital infrastructure. Political instability needs global health diplomacy to sustain peace and security. A call is made for a global action plan to support countries to enhance health and well-being through health promotion.
Background

Health promotion is the process of enabling people to increase control over and improve their health (1). It captures physical, mental and social perspectives of health. It can be recognized as a mindset, capacity and practice. As a core function of public health, health promotion supports governments, communities, organizations and individuals to cope with and address health challenges. It embraces actions directed at strengthening the skills and capabilities of individuals, and actions directed at changing political, social, environmental and economic conditions to alleviate their detrimental impact on public and individual health.

Health promotion contributes to a vision of a world where people enjoy healthy lives and well-being, and live in a healthy, safe and supportive environment as members of an inclusive society. The Shanghai Declaration on Promoting Health in the 2030 Agenda for Sustainable Development highlights action areas such as tackling the determinants of health; good governance for health; promoting health literacy; healthy cities and settings; and social mobilization and equity (2). The COVID-19 pandemic has made the need for health promotion more prominent than ever.

Health promotion embraces health from a life-course perspective that spans generations. It focuses on a healthy start to life and targets the needs of people in their everyday lives and at critical periods. It promotes timely investments with a high rate of return for public health and the economy by addressing the root causes, rather than only the consequences, of ill health (3).

The megatrends, drivers and uncertain factors that unfold in the next 100 years will impact on people’s health and well-being in large and small ways. Current generations have been marked by social and political fluctuations such as globalization, welfare, emergencies, wars, economic crises and growth.

The roles of public health, health education and health promotion have changed over time. Rooted in economic and social developments, health in the nineteenth century was strengthened due to improvements in nutrition and hygiene and decreasing family sizes. Development of vaccines in the late nineteenth and early twentieth centuries and of antibiotics in the 1930s made it possible to deal with the spread of infectious diseases. Increased knowledge on the impact of risk factors on health qualified the role of disease prevention in reducing noncommunicable diseases (4).

The 1974 Lalonde Report (5) and the 1986 Ottawa Charter (6) launched the golden age of health promotion, followed by a focus on population health from 1990. Recent times have been characterized by a shift towards people-centred health. It is anticipated that the future of health promotion will see a transformation towards planetary health (7).

Since the 1990s, the world order has been described as turbulent, volatile, uncertain, complex and ambiguous, and health-related provision, prevention and promotion are not linear, continuous, predictable or immune to disruptive change (8). Global emergencies such as the COVID-19 pandemic, the H1N1, Ebola and Zika epidemics, and the growing burden of disease related to noncommunicable diseases and mental health have changed the lives of many people around the world. The long-term effects are a stark reminder of the key importance of health and health systems in all countries and communities. Global disruptions such as climate change, armed conflicts, irresponsible business practices, corruption, and unsustainable production and consumption are impacting health. There has never been a greater need to progress health and the specific attributes of health promotion to enhance solidarity and sustainability.
“Learning from the past is obviously important, but in a rapidly changing world that just isn't a complete approach to decision making... If we are to do better, we need a much more forward looking and integrated and flexible approach to the future which utilises the wealth of knowledge we have, rather than waiting for predictions to come to fruition before rising to tackle them” (9).

Being strategically prepared for the future enhances capacity to manage future trends and uncertainties. Conducting a megatrend analysis is critical for decision-makers seeking to drive ecologically sustainable human and social development and to remain resilient and agile as complexity increases and new ideas disrupt old ways of thinking and doing.

Megatrends are global, sustained and macroeconomic forces of development that impact society, cultures, environments, business, economies and people’s lives, defining our future world and its increasing pace of change. Once in place, megatrends influence a wide range of activities, processes and perceptions, possibly for decades – and thus they require a response (10). A robust strategic foresight process systematically considers a range of possible, plausible, probable and preferable futures, the hidden assumptions that underlie these futures, their potential consequences for policies and decisions, and the actions that might promote more desirable futures (11).
Aim and scope

To inform future planning in support of the Sustainable Development Goals, the World Health Organization (WHO) Thirteenth General Programme of Work, including its Triple Billion goals, and the Implementation Framework for the Third Billion Target of the WHO Thirteenth General Programme of Work (to be published in 2022), a strategic foresight was initiated by the Department of Health Promotion at WHO Headquarters with the aim to analyse the megatrends that influence the future of health promotion, and how they impact the goals of promoting health, keeping the world safe, and serving vulnerable people to support the development of healthier populations.
Method

The rapid review of trends was conducted from August to November 2020. Explorative data related to health promotion and global health were collected from health-related global trend reports (e.g., Deloitte, McKinsey) supported by scientific literature. The analytical process included five steps (Figure 1): scoping, horizon-scanning, analysis, interpreting the information, and determining recommendations on how to act (12).

The scoping phase entailed a review of existing models of health-promotion systems and capacity and their stakeholders to gain insights into the development of the health-promotion ecology. The review resulted in an update of the models to feature contemporary and future health-promotion system needs and service design.

The horizon-scanning phase aimed to detect patterns or signals of future disruptions that might have a transforming impact on health-promotion systems and their stakeholders.

The analysis yielded a trend universe identifying a range of global trends and global health trends concerning demography, economy, ecology, education, media, politics and technology. The trends were assessed to generate suggestions on how decision-makers can bend them to advance and shape health promotion in the future.

Given that the foresight is based on a rapid review, the outcomes presented are influenced by the uncertainty of the ever-changing conditions and contexts, and the predictions should be treated with caution. Nevertheless, the trend analysis can guide future actions by pointing towards plausible scenarios that decision-makers may strive for or try to avoid, depending on their impacts on health and well-being.

Fig. 1. Explorative rapid review approach
Strategic foresight on health promotion

This strategic foresight presents the findings of the analysis of the capacity of health-promotion systems and their stakeholders; the trend universe derived from the horizon-scanning; and recommendations on how to bend the trends to promote health and well-being. It highlights the paradigm shifts needed to expand the impact of health and well-being in the future.

Health-promotion system capacity and stakeholders

Global progress was recognized, but the strategic foresight identified the need for wider transformation of health-promotion systems and their capacity to meet the needs, opportunities and challenges of the present and the future (7, 13). Existing health-promotion systems should be enabled to solve current demands and shape health from a life-course perspective that extends into the next century. Redesigning health-promotion systems will ensure they focus to a wider degree on promoting healthier populations in a way that reflects the value of people-centeredness, working with and for people.

The study identified eight domains central to an efficient health-promotion system (Figure 2):

- organizational structures embracing institutional capacity for health promotion, programme and service delivery structures, and emergency response systems;
- workforces, including human resources and their health-promotion competencies, training and development, and professional associations;
- information and knowledge development, including health-promotion information, monitoring (e.g. of public health reporting and evaluation systems), research and knowledge development infrastructure, and the role of media in health promotion;
- technology and innovation, including digital health and social innovations, social media platforms and digital resources;
- people-centredness and co-production of health, including engagement and mobilization of citizens, migrants and immigrants, and shared decision-making and user experiences;
- partnerships, including formal and informal partnerships, joint ventures, and public-private partnerships;
- financial resources describing the generation of financial resources and resource allocation (e.g. through tax and treasury, insurance and donations);
- governance and leadership, including global governance for health, governance for global health, and the whole of government (ministries, regional and local councils, counties, municipalities).

The health-promotion workforce stems from a wide range of sectors and agencies at international, national and local levels. Several international organizations, including the European Union, WHO, the World Bank, the World Trade Organization, corporations, foundations and international nongovernmental organizations, provide, support and finance health-promotion projects. At the national level, a range of government departments, academia, media, businesses and nongovernmental organizations influence health.
At the local level, local authorities, volunteer organizations, strategic partnerships, schools, companies and the press are engaged in health activities. At the individual level, the health-promotion workforce includes health-promotion specialists and practitioners, and wider contributors such as primary health-care teams, teachers, social workers and journalists.

The system analysis revealed that new professionals such as influencers, designers and user-experts are needed in the health-promotion workforce (7, 13).

The system level should explicitly include people-centredness and co-production of health, such as through citizen engagement and focus on user experience (14). The transformation of health-promotion systems should use digital momentum and integrate technology and social innovation as an action area for health promotion (15). The virtual sphere is increasingly recognized as an important area for dealing with determinants of health. Along these lines, the challenge of infodemics requires a new setup for information and knowledge development and dissemination to prevent collateral damage to health due to mis- and disinformation (16).

Health promotion taps into the new thinking related to the economy of well-being and social sustainability, which requires an adjustment of the system's perspectives on costs, investments and value-creation related to health and quality of life (17).

The increased focus on partnerships calls for new methods of network management. Governance and leadership are challenged to think bigger and faster when faced with emergencies and uncertainties. This is less about technical limits and more about a mindset or vision towards what is possible, what people are willing to do, and the degree to which bureaucracy needs to be disrupted (18).

In the light of the increasing number of natural and human disasters, organizational structures must also focus on emergency-preparedness to promote resilience (19).
Health-promotion trend universe

The horizon-scanning of general global trends and specific global health trends related to health promotion yielded a trend universe focusing on major drivers such as demography, society (e.g. cultural values and norms), policy, economy, ecology, media, technology, innovation, education and personal development (Figure 3). The strategic assessment of the trends and drivers aimed to identify how the trends may be bent towards promoting health in the future.

Demography: population growth, burden of disease and urbanization

The human population is predicted to grow from 7.6 billion to 9.7 billion by 2050, assuming no catastrophic ecological collapse or devastating events. The world is moving from high to low rates of both mortality and fertility. Although more people live longer, however, they are not necessarily living healthier lives.
The burden of disease will remain a challenge around the globe and will require new solutions to capture unused potential for disease management, self-care, prevention and health promotion. Addressing the root causes related to the determinants of health will remain a priority for governments.

In addition, consumerism and social media are putting economic purchasing power and decision-making in the hands of people. The growing consumer culture and enhanced availability of information are leading to increased public expectations and opportunities around how health promotion is delivered and the quality of services. Tailored solutions and service design will be an asset for health-promotion systems in the future (10).

By 2030, two-thirds of the world’s population will reside in urban areas and there will be more than 40 megacities whereby most of them will be in low- and middle-income countries (20). The cities of today and tomorrow are facing a triple burden of health issues: infections such as HIV, tuberculosis, pneumonia, dengue and diarrhoea; noncommunicable diseases such as heart disease, stroke, asthma and other respiratory illnesses, cancers, diabetes, anxiety and depression; and violence and injuries, including road traffic accidents.

Climate change may bring about flooding, landslides, fires and severe weather events, leading to eco-refugees, mental health impacts and injuries. These are likely to impact more on low-income cities and populations.

Although cities have many challenges, however, they can also bring opportunities for better health, a cleaner environment and climate action. Strong urban policies must match the challenges, because health is essential for fostering positive urban livelihoods, building a productive workforce, creating resilient and vibrant communities, enabling mobility, promoting social interaction, and protecting vulnerable populations.

The health-promotion potential is made explicit by the work of the Healthy Cities movement. This should be expanded because the understanding of what makes a healthy architecture and built environment has changed radically in recent years (21).

**Society: social uprisings, mobilization and inclusion**

Social movements such as Future Friday, #MeToo and Black Lives Matter are spreading across the world. People have been mobilized to join digital protests, demonstrations and marches for social inclusion. They aim to improve the terms on which individuals and groups take part in society by increasing the abilities, opportunities and dignity of disadvantaged people. The social contract on which many welfare societies are founded is being questioned, and governments are increasingly being held accountable for their actions against or treatment of certain populations.

The role of citizens in social mobilization is at the core of health promotion – and the trend of social uprising is a window of opportunity. People are increasingly aware of and claiming their rights and obligations to be actors shaping their own lives. Social mobilization can be used as an important means to advance sustainable development policy by making it more responsive and accountable for people’s needs and demands.

Health promotion is about personal and collective empowerment, and it is a central lever towards equity – although much is yet to be done to overcome discrimination in all forms. Promotion of diversity and inclusion will be crucial drivers of change in health promotion and efforts to break down barriers, particularly those related to structural determinants of health.
**Politics: global health security, planetarism and stewardship**

In today’s globalized society, a disease threat anywhere is a disease threat everywhere. There is a growing demand for global health security and a resilient public health system that can prevent, detect and respond to health challenges wherever they occur in the world (22). In the future, however, health promotion should be added to the preparedness system as an extra layer of security, as highlighted in the analysis of the capacity of health-promotion systems.

The present trends of tribalism, globalization, nationalism and internationalism are drivers with strong impacts on global politics and health politics. What follows will be the dawn of a novel planetary awareness and consciousness. The logic of tribalism and nationalism generated systems dominated by conflict and competition and modest capacity for international cooperation and coordination. In contrast, the politics of planetarism accept the limits of our planetary existence and call for an adaptation of behaviour that combines the capacity of the planet grounded in ecologism, universalist cosmopolitanism and scientific humanism (23).

In line with those developments, health promotion as part of global stewardship – caring for fellow human beings and the non-human world – will be in demand to foster environmental sustainability and social justice (24). The development of social connectedness through community-building not only carries benefits for mental health but can also help build the social capital necessary for collective action as a core element of health promotion (25).

Human health, wellness and well-being depend intimately on vitality, which in turn depends on humankind, human kindness, empathy, mutualism, responsibility and reciprocity at the individual, community, societal and global levels (26).

**Economy: poverty, economy of well-being and universal coverage of health**

Global poverty is one of the biggest problems facing the world today, with two-thirds of the world’s population living on less than US$ 10 a day. The poorest people in the world are often hungry, have less access to education, live in unhealthy housing and neighbourhoods with inadequate sanitation, have inadequate access to clean water and energy supplies, and experience poorer health.

To make progress against poverty, health promotion plays a central role through the improvement of health determinants and the expansion of education (27).

The rise of noncommunicable diseases is a manifestation of a global economic system that prioritizes wealth creation over health creation (28). New economic models such as well-being economies, doughnut economies and steady-state economies are emerging that shift the economic paradigm focusing solely on gross domestic product, growth and consumerism. Meeting the challenges of the twenty-first century means ending the pursuit of perpetual growth and building an economy that is regenerative, collaborative and purposeful (29).

Some governments have adopted well-being budgets, with the aim to promote and protect the health and well-being of their populations. The pursuit of well-being may not be new, but budgeting for well-being has the potential to be a strategic shift in how money is used by placing results and accountability for outcomes at the centre of decision-making. This novel approach requires a reframing and strategic alignment among policy approaches, expenditures and measurement (30).

Universal health coverage, whereby all people have access to the health services they need, when and where they need them, includes the full range of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care. Maintaining and promoting
health without financial hardship remains a global challenge in the future. As a means to improve well-being and quality of life, health promotion supports the goal of universal health coverage when it is based on strong, people-centred primary health care rooted in the communities it serves (31).

**Fig. 3. The trend universe of health promotion**

**Ecology: planetary health, syndemics and commercial determinants of health**

Human impacts on our planet have become so profound that the current epoch has been labelled the Anthropocene. Exploitation of the environment has contributed to a more comfortable existence and a longer lifespan, but a tipping point has been reached where that exploitation is beginning to have a negative impact on human health and natural systems are collapsing (32). The global ecological footprint is 1.7 planets, meaning planetary boundaries have been crossed.

Threatening trends such as antibiotic resistance, pandemics and syndemics will worsen the prognosis and burden of disease in years to come. High-income countries must rapidly reduce their ecological footprints – two-thirds of which is carbon – by 70–80% while supporting growth in low-income countries, and facilitate redistribution to ensure everyone gets only their fair share of Earth’s biocapacity.
Health promotion forms part of the solution by contributing to a focus on adequacy, quality of life and improved health for all, together with respect for the integrity of natural systems in support of planetary health. There are significant health co-benefits to leading a more sustainable way of life, making health promotion and sustainability natural partners. As global health burdens shift from infections to noncommunicable diseases, greater emphasis is placed on the health-mediating roles of lifestyle and the environment.

As noted in the Rotorua Statement, much of the ecological devastation caused by unsustainable economic development across the world is founded on the erroneous human construct that humans are separate from the environment, which is seen as an unlimited resource to be exploited (33). This is the opposite of the Indigenous wisdom that assumes there is an inseparable interaction and contiguity between humanity and the natural environment – the part cannot undermine the whole upon which it depends and of which it is a part.

Indigenous health-promotion models show that, as custodians, humans should not only live sustainably within the environment but also adopt a collaborative and equitable approach in their relationship with fellow human beings. Fundamental guiding principles such as reciprocity, love, respect, humility and justice are pivotal to the worldview and daily practical living of Indigenous peoples (33).

The role of commercial determinants of health – or the values, strategies and approaches used by the private sector to promote products and choices that are detrimental to health – is becoming more and more evident. The present time is characterized by being both a market society and a market economy (34). Commercial determinants of health can be destructive, as illustrated by the power of the corporate sector in the field of tobacco, and the work on unhealthy commodities, industrial epidemics, profit-driven diseases, and corporate practices harmful to health and lifestyle choices, especially in relation to marketing to children (28).

Consequently, in light of the developments towards planetary health, there is a future demand for businesses with a culture of health focusing on sustainable and health-promoting local and global commerce. This is turn requires consuming less as a way to protect and enhance planetary health. Through health promotion, there is a window of opportunity to develop the health of people and the planet in joint efforts with the public and private sectors.

**Media: social media, evidence-based health information and constructive journalism**

Traditional media are losing their stronghold and being substituted by social media. Mainstream corporate media have not properly addressed social and ecological issues and have failed to reflect the views and concerns of a wide variety of groups in society. People and groups who traditionally are not invited to speak are having their conversations elsewhere on other media and on their own terms. Constructive journalism as a response to increasing tabloidization, sensationalism and negativity bias of the news media is emerging to counteract the harmful impact of mainstream media. This approach aims to provide audiences with a fair, accurate and contextualized picture of the world, without overemphasizing the negative and what is going wrong (35).

There is a need for a new set of values to inform policies that can shape media and technology, building on ethical and healthy parameters. Recognizing the role of health promotion in the advancement of equity through media, there is a window of opportunity to embrace new media and social platforms to reach vulnerable populations and communities through transparent and empowering means of collaboration.
Evidence-based health information, media literacy and health literacy are needed to provide timely relevant guidance on health and well-being. Media may help to inform governments and health systems to present clear, accurate, appropriate and accessible information for diverse audiences, such as through science communication and knowledge-brokering.

**Technology: public health genomics, exponentiality and the digital revolution**

The fourth industrial revolution impacts on development exponentially, and new technical frontiers are reached increasingly quickly (36). The promise and peril of the digital age demand new ethical frameworks for innovations, policy, strategy and practice. The digital transformation requires an investment in and development of new technologies, mindsets and operational models to deliver value in an ever-evolving digital economy (37). It is important to enable countries to plan, adopt and benefit from seamless and secure technologies that provide effective clinical and public health solutions to accelerate the achievement of social development goals. These solutions should bridge the digital divide and leave no one behind (15).

Building on the work of public health genomics from the past 20 years, precision public health enables the integration of genomics into public health strategies within the wider context of other determinants of health, such as socioeconomic, behavioural and environmental factors. This can lead to more precise individual and population-based interventions, and ultimately improve population health outcomes. Capitalizing on these genomic advances requires a coordinated approach to integrate the benefits of the associated knowledge and technologies into each aspect of public health delivery (38). Transformation of health-promotion systems and capacity is needed to match future demands.

**Education and skills: life-course perspective, health literacy and agency**

Human development during the lifespan will get increased attention in the future. Self-care – the ability of individuals, families and communities to promote health, prevent disease, maintain health, cope with illness and disability, and prepare for end of life with or without the support of health-care providers – includes self-management, self-testing, self-diagnostics, and mutual care and support. Self-care is becoming increasingly important to deal with the global burden of disease. Promotion of self-care and social prescribing is a means to empower individuals, families and communities for informed health decision-making. It has the potential to improve the efficiency of health systems and contribute towards health equity (39).

Health promotion stimulates agency, which is important for people individually and collectively to gain the capacity to act independently and make their own choices. This may be difficult if people do not feel they have control over their environment and their personal circumstances (40).

Structural factors such as social class, religion, gender, ethnicity, ability and customs may determine or limit agency. Deficits in health literacy skills may be a barrier for people and communities to address the social, economic and ecological determinants of health (41, 42).

Increased awareness of ethics and rights may eventually fuel a social movement or uprising, as demonstrated in recent years by the increased focus on climate change and gender rights. The changing role of the health-promotion workforce and the organizational structures to accommodate the diverse needs of people will be crucial to overcome discriminatory actions in the future.
**Uncertainties: good governance, service delivery, consumerism and technology**

Forewarned is forearmed. The prospect of a future filled with unpredictable events should compel decision-makers to use scenario-planning to delve deeply into the uncertainties that may affect their work, to better understand the range of potential futures, and to proactively plan their responses. Some governments and international organizations have taken steps to embrace future thinking – for example, Wales has established the Well-being of Future Generations (Wales) Act and a Future Generations Commissioner for Wales, and the United Nations Secretary-General is intending to set up a Special Envoy for Future Generations.

Future thinking embraces uncertainties and reflects on plausible outcomes – for example, the role of health governance may be jeopardized by political unrest. The COVID-19 pandemic has provided multiple examples of how distribution of resources may overrule investments and maintenance of ongoing prevention and health-promotion efforts (43).

A redesign of health-promotion services and how they are delivered has been suggested – but what will this look like?

Health-related consumerism has been increasing for many years, but people do not consume health services in the same way they do other goods. Recognizing the evolving focus on people and planet, it is interesting to see how long the retail-like mindset and quest for tailored solutions will prevail. A more in-depth analysis of health-promotion pathways in the COVID-19 era is recommended to embrace the knowledge, attitudes and behaviours of populations.

As technology giants and other disruptive players enter the health realm, incumbents must adapt to new market and business pressures. Will these new entrants displace existing players, or will their products fail to gain sufficient traction to effect real change? How might incumbents adapt to these challenges so they can survive and thrive? How will governments respond to the expanded role of technology stakeholders? Dealing with uncertainties such as these is one of the main reasons to deploy future thinking.
Enabling the future through transformative actions

The information presented here is based on a rapid review of future trends in the realm of health promotion and is subject to fluctuation. The uncertainty of the trends and developments does not preclude the ability or necessity to explore them in a strategically meaningful way. Thinking proactively about the future of health and well-being will inform decisions today and lay the groundwork for an advantage tomorrow (10).

Lessons learnt from Indigenous thinking show that the whole web of life – its inherent interdependence as one system – can provide more tools for health promotion. Adopting these approaches paves the way for health promotion to shape and set trends that lead to well-being rather than adhering and following trends and determinants that cause crises.

This assessment of the health-promotion system and the trend universe has identified a range of possible transformative actions to enable the future direction for health promotion:

- **Update the determinants of health model.** At every stage of life, health is determined by complex interactions between social and economic factors, the built and natural physical environments, and individual behaviours. These do not exist in isolation from each other. There is a call for an expansion of the list of social determinants of health to match the needs of the future – for example, to include the commercial and informational determinants of health to improve health for all.

- **Overcome ethnocentric thinking.** Increased focus on historical reflections and decolonization indicate that ethnocentric thinking may be a barrier for health promotion to truly recognize the potential of diverse cultural backgrounds and Indigenous philosophy to inspire new practices towards health for all. Overcoming this barrier requires health promotion to be genuinely inclusive and informed by cultural and Indigenous knowledge and conceptualization (44). Indigenous knowledge that shapes Indigenous health promotion sees humanity and the environment as inextricable – nature is a being and has rights (45).

- **Strengthen relational welfare.** The introduction of the welfare state in various parts of the world was revolutionary – it lifted thousands of people out of poverty and provided decent homes, good education, health care and security. But it is out of kilter now as it appears to be an elaborate and expensive system of managing needs and risks. The outdated transactional model needs to be replaced with a model that is shared, collective and relational. Stronger collaboration between sectors and stakeholders is needed to understand and tap into the lives of people who experience and develop health as part of everyday life. New approaches such as co-creation and people-centred health require new insights and bridge-building between medicine, public health and social sciences to match the needs of diverse populations. The relational welfare approach is a key feature of distributed systems, whereby emphasis is put on collaboration, personal values and missions (46).

- **Move from compartmentalized to synergized flow of health services** (Figure 4). Optimally, health systems are orchestrated by a wide range of sectors and stakeholders, depending on people's needs. Regardless of the presence of multimorbidity, engaging in a healthier lifestyle is associated with up to 6.3 more years of life for men and 76 years for women (47). A whole-of-health approach creates synergies rather than gaps, while maintaining and promoting universal health care, if it is based on a streamed flow of services instead of compartmentalized services working in silos.
• **Implement user involvement and co-creation of health.** Health promotion supports the Framework on Integrated, People-centred Health Services for all people to have access to health services that are provided in a way that is coordinated to their needs and respects their preferences, and that are safe, effective, timely, affordable and of acceptable quality (14). Implementation of health promotion through co-production of health and well-being requires clear views on the roles and responsibilities of the people and professionals involved. Quality indicators to encourage and reward user engagement and co-producing practices need to be identified or developed.

• **Increase people’s power through agency and empowerment.** The essential aim of health promotion is to build empowerment by enabling people to control and manage their health and well-being at individual and societal levels. Future wins lie in the progress and utility of the human and social resources available by improving health literacy. Tackling structural barriers related to the determinants of health may unlock new capacity regarding populations’ self-care and health promotion. Systems thinking and Indigenous thinking may help to elevate consciousness of being one – one planet, one humankind, One Health – with actions at the local level instead of people being “victims” of global forces beyond their control.

• **Integrate new innovations and technology reflected in the fourth industrial revolution.** Digitization enables new forms of data to fuel value-creation in the realm of health promotion. Taking advantage of the digital ecosystem, partnerships can be formed in a diverse array of fields and without geographical borders to enhance health-promotion products and services.

• **Strengthen focus towards self-care.** Major wins can be found in a shift towards health promotion and self-care. The health needs of the future require collective efforts at societal, community and individual levels. Sustainable development includes an increased focus on self-management, whereby people are actively engaged in maintaining and promoting their health. Health-literate, client-friendly health care is essential for supporting and maintaining this shift.

• **Focus on health-promotion consumer pathways and service design to increase impact.** Integrating service design and user pathways in the way health promotion is conducted and facilitated will impact on people’s motivation and satisfaction. System thinking is needed to design a more coherent and efficient health promotion system that has people-centredness at its core.

• **Amplify health promotion as an asset in the well-being economy.** New economic models emphasize the need for more holistic thinking regarding health and well-being and the financial underpinning of health promotion. This will enhance the likelihood of investments in health promotion if decision-makers have a clearer understanding of economic, social and ecological value-creation. Using the holistic and interdisciplinary approaches of Indigenous knowledge and system thinking to make health promotion more future-shaping and co-creating with other disciplines and sectors, rather than being responsive to economic models and demands, may be a way forward.

• **Recognize the importance of One Health and planetary health.** Shaping health promotion in the Anthropocene requires new ways of thinking. Climate change and environmental threats call for rapid action. Planetary health and One Health are approaches to designing and implementing programmes, policies, legislation and research in which multiple sectors communicate and work together to achieve better public health outcomes within the boundaries of planetary resources. Health promotion provides significant avenues to cope with the health of human civilization and the state of the natural systems on which it depends, as laid out in the Rotorua Statement (33, 48).

• **Increase synergy between health and education to develop health literacy.** It takes 8000 days for a child to develop into an adult. Sensitive phases shape development throughout this period, and age-appropriate, condition-specific support is required throughout if a child is to achieve
full potential as an adult. Well-designed health interventions from an early age and during the life course can leverage the current substantial investment in education, and improved design of educational programmes can improve health. The potential synergy between health and education is undervalued, and the returns on co-investment are rarely optimized (49). Applying a health-promotion and health literacy lens to the provision of education is likely to enhance other types of literacy, such as digital and civic literacy.

- **Expand healthy architecture in the built environment.** Increased urbanization on a global scale requires a fundamental change in the way housing, cities and urban life are designed, built and thought about in the future. New opportunities arise by bending megatrends to affect urban development towards the creation of the supporting environment that will help people live the lives they want.

Determinants of health include income and social status, social support networks, employment and working conditions, social environment, physical environment, personal health practices and coping skills, healthy child development, biology and genetic endowment, health services, gender, culture, commercial determinants and informational determinants.

**Fig. 4. Models of health service provision**

![Fig. 4. Models of health service provision](image-url)
Future balance of health paradigms

According to WHO Director-General Tedros Adhanom Ghebreyesus, “Ultimately, the future of health must be about promoting health and well-being, not treating disease” (50). This strategic foresight indicates that such a shift in health paradigms is emerging.

The dominant medical paradigm is fading to be supplemented with paradigms on prevention and health promotion. Future elements can be identified suggesting that planetary health – including One Health and the well-being of people and planet – is an emerging paradigm (48). The planetary health paradigm integrates western knowledge and Indigenous knowledge. It sees the planet as a living being with the right to flourish, and its relationship with humans as one of balanced and symbiotic reciprocity (45).

In turn, well-being can be understood as a relational state of holistic, material and spiritual well-being within and between human beings. For instance, some countries are working to develop well-being budgets to accommodate a more holistic view on societal affairs (30).

Although the present paradigms will fade to various degrees, and the balances shift considerably, some current practices are likely to remain as they are essential for the viability of future systems. Essentially, the health paradigm of the future will include elements from the medical, the preventive and the health-promotive, in combination with the planetary health paradigm (Figure 5).

**Fig. 5. Possible future balance of health paradigms**

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**Medical paradigm:** disease-oriented

**Preventive paradigm:** risk-oriented

**Health-promotion paradigm:** health determinants-oriented

**Planetary health paradigm:** One Health and well-being-oriented

The future is dominated by what was considered radical in the old system.

Elements of the future exist in the present.

Some of the ways of doing are essential for the viability of the future system and need to be retained.

Viability

Present system Transition zones Future system

Time

---

17
Each paradigm shift has its own approach and focus, which subsequently generate new conditions to facilitate health for all (Figure 6). The current dominating paradigm is the medical paradigm focusing on individuals. This is disease-oriented and amplifies access to treatment and care for all.

The preventive paradigm is risk-oriented and based on prevention for populations and communities. It generates access to early diagnosis and appropriate health information.

The health-promotion paradigm includes a focus on society, determinants of health, and empowerment of people and communities. It calls for access to right and equity.

The planetary health paradigm embraces universal health in a holistic manner that includes humans, animals and the environment. It suggests that future paradigms should be predicted on the sustainable capacity of the planet for people to live healthy lives in the Anthropocene.

**Fig. 6. Implications of health paradigms and their impact for healthier populations**

<table>
<thead>
<tr>
<th>Approach</th>
<th>Focus</th>
<th>Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical paradigm</td>
<td>Medical</td>
<td>Access to treatment/care</td>
</tr>
<tr>
<td>Preventive paradigm</td>
<td>Preventive</td>
<td>Access to early diagnosis/ health information</td>
</tr>
<tr>
<td>Health-promotion paradigm</td>
<td>Health promotion</td>
<td>Access to right to health and equity</td>
</tr>
<tr>
<td>Planetary health paradigm</td>
<td>One-Health</td>
<td>Access to universal health coverage and healthy lives</td>
</tr>
</tbody>
</table>
Calling for a global health-promotion action plan

Health promotion can act as a spearhead to promote health, keep the world safe and serve vulnerable people by keeping the public healthy and preventing the spread of disease. The global crisis threatening health and well-being cannot be solved with national solutions alone. In support of the sustainable development agenda, a global health-promotion action plan is proposed for governments to increase the power of people to gain control over their health and well-being, strengthen the system and structural capacity, and meet the WHO Triple Billion goals (51).

The action plan encourages nations to go beyond the twentieth-century definition of health in terms of strategies, operating models and organizational structures, and to build twenty-first-century forms of advancing health (Figure 7).

The action plan reconfirms and operationalizes the objectives outlined in the Shanghai Declaration on Promoting Health in the 2030 Agenda for Sustainable Development (2) with respect to the health-promotion developments grounded in the Ottawa principles (52). Health promotion supports the WHO Thirteenth General Programme of Work (53) and acts as an accelerator for the Triple Billion goals: 1 billion more people benefiting from universal health coverage, 1 billion more people better protected from health emergencies, and 1 billion more people enjoying better health and well-being (51).

Fig. 7. Possible increased prevention and health-promotion effects on health outcomes

Healthier populations

Increased prevention and health promotion efforts

Increased prevention efforts

Disease focused efforts

Historical  1980  2030  2100
Concluding remarks

Global health concerns will shift in the future. Health promotion is a result of an ongoing adaptation to the many amplifying and conflicting forces flowing through society. This strategic foresight provides an analysis of the health-promotion capacity needed to bend the megatrends of the future to reach the goals of healthier populations through promoting health, keeping the world safe and serving vulnerable people. It also provides insights into the paradigm shifts needed to fulfil the ambitions of improving the health of people and the planet.

Advancements in science and living standards have increased opportunities to live longer and healthier lives and reduced the incidence of infectious diseases. Pandemic challenges, obesity, malnutrition, antimicrobial resistance and noncommunicable diseases are still part of the health burden of our century, however. Cardiovascular and chronic respiratory diseases, diabetes, cancer, depression and anxiety are some of the symptoms of unhealthy lifestyles, growing pollution and other anthropogenic causes, and reactive rather than preventive medicine.

In the future, the burden of disease, which includes infectious diseases and increasing prevalence of noncommunicable diseases and environmental health risks, will be a continuous threat. Disruption is needed to tip the balance. The pathway to a healthy, thriving and sustainable future includes a commitment to a planetary peace agenda, and encouragement of mutualism, empathy and community cohesion, and underscores that aggression, conflict and violence are destructive to people, places and the planet. Instead, planetary health embracing both western and Indigenous thinking may prevail.

People, planet and partnerships

The aim of health promotion is essentially about making the easy choice the healthy choice, embracing the social determinants of health, and shaping the environment in a supportive manner. To this end, several objectives need to be addressed:

- Build healthy public policy and make bold political choices for health.
- Create conditions for good governance for health at all levels.
- Create supportive environments where people live, love, work, shop and play by addressing health determinants in a multicultural context.
- Strengthen community actions to address the impact of social, cultural, economic and commercial determinants of health by engaging civil society and all stakeholders of society in ways that support the promotion of health literacy and health literacy-friendly organizations.
- Develop personal skills and health literacy to empower citizens and enable their engagement in collective health promotion to develop resilient communities and individuals.
- Reorient health and social services to optimize fair access and integrate people-centredness by inherently integrating health promotion in health and human services at all levels.
- Support capacity-building of health-promotion stakeholders and infrastructure.
- Plan for, prepare for and respond to climate and health emergencies and develop agile and resilient populations and nations.
To facilitate the development of healthier populations, it is necessary to upscale the health-promotion system. Shifting from a compartmentalized model to a synergized model aimed at creating system synergies rather than system deficits can be a game-changer for the role of health promotion. Instead of being an add-on, health promotion must be an integrated part of health care and public health service delivery at all levels. Relational welfare will be key in the new social economic models and stimulated by collaboration, people’s values and missions.

The world faces formidable, often paradoxical, challenges, including population growth and ageing, increasing wealth and widening inequities, undernutrition and obesity, and environmental and pandemic threats that emerge in the wake of fast-paced development. In the Anthropocene, the global human community is reaching the limits of the planet’s capacities, creating a need for all people to become aware, actively engage and come together to collectively demand action and change from our leaders (54).

The solutions of the future demand integrationist approaches. The responsibility for planetary health requires us to relinquish conventional professional, societal and cultural partitions, and to develop contextual coalitions based on science and broader cultural narratives.

**Way forward**

Although the future cannot be predicted, the available data and trends can be used to foresee what the future might look like and think through the appropriate next steps. Essentially, health promotion needs to be future-creating rather than future-taking and future-responding. The emergence and rapid escalation of the COVID-19 pandemic demonstrated starkly how unpredictable events call for new and sometimes unconventional or nonlinear approaches to strategy.

Political instability relies on global health diplomacy to sustain peace and security. Governments and nations wishing to be at the forefront of developments may use foresight to address the strategic questions that decision-makers and planners must deal with to make health promotion survive and thrive. Urban and environmental stresses are increasing, with implications for the most vulnerable countries, industries and people. Developing a global action plan on health promotion can help harness and broaden health-promotion capacity to be able to cope more proactively with uncertainties and the known future trends for the sake of healthier populations and planetary health.
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