

## Is a unified definition of health promotion coterminous with the 'new public health'?

*Niyi Awofeso*

Howat et al. advocate for a clear definition of health promotion, providing one such definition which they characterised as "consistent with identified competencies for the Australian health promotion workforce", and welcomed the contributions of others.<sup>1</sup> My contributions are as follows: First, health promotion is generally regarded as the 'new public health',<sup>2</sup> a perspective not explicitly subscribed to in Howat's article. Are the authors concurrently attempting to define the 'new public health'? Incidentally, a unified definition of contemporary public health remains elusive.<sup>3,4</sup> Consensus on whether contemporary health promotion and the 'new public health' are coterminous should precede a definitional consensus, in part to prevent duplication.

Second, the authors have not stated the philosophical and theoretical foundations of their definition. Mature disciplines are shaped by theories of purpose – theories that explain why practitioners do what they do. Some workers argue that although health promotion has many theories of process, it lacks a commonly accepted theory of purpose, which is partly reflected in discursiveness of definitions and blurred focus of the discipline.<sup>4,5</sup> We need to improve on substantial groundwork already undertaken in defining the philosophy of health promotion and public health,<sup>6,7</sup> such as examining the limitations of a functionalist theoretical framework on current health promotion practice.<sup>8</sup>

Third, I observed that 'health protection' is absent from the authors' definition, unlike a popular definition of health promotion as "comprising efforts to enhance positive health and prevent ill-health, through the overlapping spheres of health education, prevention, and *health protection*".<sup>9</sup> I agree that it is time for health promotion/'new public health' to allow other agencies to address health protection issues.

Fourth, if the scope of activities of the 'new public health' becomes unwieldy, so will a 'unified' definition.<sup>10</sup> Given the wide variations in both social structures and health promotion practices in different regions of the world, it is perhaps unrealistic to have a global 'unified definition'. By relating their definition to identified competencies in the Australian health promotion workforce, the authors appear to have adopted a pragmatic approach by defining health promotion in the context of their operating environment. Perhaps other countries should do the same.

Finally, agreement on core health promotion activities should

lead to unified definitions, not the other way round. Such agreement should concentrate on important health issues that would underscore the relevance of health promotion to populations in most need of health services, rather than a preoccupation with 'soft targets', such as providing vaccination services.

## References

1. Howat P, Maycock B, Cross D, Collins J, Jackson L, Burns S, et al. Towards a more unified definition of health promotion. *Health Promot J Aust* 2003;14(2):82-5.
2. Baum F. *The New Public Health: An Australian perspective*. Oxford (UK): Oxford University Press; 1998. p. 1-28.
3. Garrett L. *Betrayal of Trust: The Collapse of Global Public Health*. New York (NY): Oxford University Press; 2001. p. 7-12.
4. Siegel M, Doner L. *Marketing Public Health: Strategies to Promote Social Change*. Fredericks (MD): Aspen; 1998. p. 3-22.
5. Raeburn J, Rootman I. *People-centred Health Promotion*. London (UK): Wiley; 1998. p. 1-21.
6. Seedhouse D. *Health Promotion: Philosophy, Prejudice and Practice*. Chichester (UK): Wiley; 1997.
7. Nijhuis HG, Van der Maesen LJG. The philosophical foundations of public health: an invitation to debate. *J Epidemiol Community Health* 1994;48:1-3.
8. Awofeso N. Using health promotion frameworks to effectively address health inequalities. *Health Promot J Aust* 2003;14:144.
9. Tannahill A. Regional health promotion planning and monitoring. *Health Educ J* 1987;46:125-7.
10. Smith C. 'Healthy Prisons': a contradiction in terms? *Howard J* 2000;39:339-53.

## Author

Niyi Awofeso, School of Public Health and Community Medicine,  
University of New South Wales

## Correspondence

Dr Niyi Awofeso, New South Wales Corrections Health Service,  
Long Bay Correctional Complex, PO Box 150, Matraville, NSW  
2036. Tel: (02) 9289 2480; fax: (02) 9289 3724;  
e-mail: awofeson@chs.health.nsw.gov.au