

How to use *Modernity*
The Role of Theory in Health Promotion

Editor's Foreword *Contents* **Introduction** **Editorial Board**
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Section 1: Introduction to *Modernity*
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Modernity, individualism, social structure, identity and evolution: the five that underpin modern health-promotion, from social exchange models, for which social structures are regarded as culture's public health assets, they are rarely acknowledged. From an evolutionary point of view, it would be useful to explore the evolution-unrelated aspects of health promotion.

Health and Modernity provides the first book that contemporary health promotion is, by definition, increasingly linked to its social context. The authors discuss global challenges in terms of cultural capital, risk and social responsibility, and the dynamic between individual and community in the process, they define an early text.

- Understands the complexity of health in all areas of human life
- It is essential to apply to issues in health promotion research
- Applies a multidisciplinary approach to public concerns
- Explores the role of public health and its impact on society
- Explores the role of political and social agents in promoting health objectives
- It addresses the importance of theory and evidence

The editors of *Health and Modernity* are invited to the first of their series of professional, scientific, and the public community in the global public health and health promotion fields. The editors include public health, the complexity of theory and the impact of theory on the practice of health promotion.



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McQueen
et al.

HEALTH & MODERNITY



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As will be apparent to even the most casual reader, this book took considerable time to produce and was the fruit of many discussions, exciting and tedious, but always with a tone that the authors wanted to really understand the theory behind their thinking. In many ways it was a luxury that few working in health promotion have, that is, to take the time to engage in the discourse that is needed to more fully understand one's point of view. If the end product is not the quintessential theory of health promotion, it is not the fault of those organizations and individuals about to be acknowledged.

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1

Introduction

Health Promotion: The Origins of the Third Public Health Revolution Leading to a New Public Health

DAVID V. MCQUEEN* AND ILONA KICKBUSCH

1. Why a Book on Theory and Health Promotion?

Health promotion has long sought to define itself, and this has been an admirable, if futile, pursuit. It is not that there have been unsatisfactory definitions put forward over the years; it is, rather, that on careful scrutiny most fall short of describing the essence of health promotion as a field of study and practice. Most people in the field recognize the comprehensive nature of health promotion and the broad base of its practice. This, in turn, makes any short or simple definition seemingly impossible. Perhaps the field cannot be defined but left open to extensive explanations of its practice. Nonetheless, the seeming inability to clearly define the dimensions of such a major endeavor leaves many, and particularly the authors of this book, with a sense of frustration. As with most frustrations, one seeks to get to the underlying reasons for the difficulties and that is when one asks “deeper” questions about the origins and meaning of the field. That is why the two chief protagonists of this book (Kickbusch & McQueen) searched for solace in theory.

Theory is almost always seen as an abstruse topic and many seek to avoid it. But theory is also the ultimate source for understanding the nature of things. It stems from the quest to develop a philosophy of understanding. Some people are not troubled by trying to grasp deeper meanings, but others are deeply troubled by simple answers. This book is written by those who are somewhat obsessed with understanding the meaning of health promotion and not by those who are content to just practice what they believe.

Thus the rationale for this book is rather straightforward: It is an effort to try to reach a critical understanding of what is an appropriate theoretical basis for current health promotion. However, it is not a historical rehashing of how health promotion got to the place that it now occupies in modern society. Rather, it is an effort to show how social theories have led to a society that in its modernity embraces the underlying nature of health promotion. It is, in the main, an effort to show what

* The findings and conclusions in the report are those of the author(s) and do not necessarily reflect the views of the Centers for Disease Control and Prevention.

socio-behavioral theories that rely on the individual as the source of action are wanting when explaining the full richness and importance of health promotion.

A second rationale for the book was apparent from the beginning of our work. The six authors were concerned with the lack of representation of social theories in the extant literature on health promotion. There was an underlying belief that there were important social theories in health promotion, but they had been unappreciated by those in the field or, in many cases, unarticulated. There was consternation that a field concerned with the social, the political, the cultural, with context, with groups, with movements, should have fashioned itself as so heavily rooted in the individually-based behavioral theories of health education and psychology. A clear goal was to broaden this narrow perspective.

Six authors working together over a considerable length of time, concentrating and debating aspects of social theory and its application to health promotion does result in a different kind of product. Of course each author concentrates on a perspective that represents their unique theoretical background, however it is fair to say that each author, not only gained from the process of making this book, but also gained new theoretical perspectives. It has been this process that has made this a different kind of theory book. Chapter Two (Potvin & Balbo) discusses the background of the book in some detail. It is our contention that the book as a whole is better understood if the reader has more information about the process of its making. It is part of our effort to be reflexive. What makes this publication unique is that it is neither the theoretical perspectives of six separate individuals nor that of six individuals speaking as one. Rather it is a unique combination of six voices that have listened, debated and incorporated different theoretical ideas. That is not to say that minds were profoundly changed, but they were certainly altered. This is not a trivial consideration because theory heretofore has generally been the product of a single mind. Notably in the social sciences, theory has not been the product of any participatory, explicitly reflexive effort. The field of health promotion, as a type of social science, has been no exception to this assertion. The mere fact that what started out as a book to provide a social science theory for health promotion has morphed into something larger, dealing with concepts of modernity, complexity, cultural capital, communications and systems theories. This was not just an experience in understanding, it was an experience in participation and learning—and was thus an experience that embodied principles and concepts articulated in the field of health promotion.

2. Why Should Practitioners Be Interested in This Book?

It has often been said that there is nothing as practical as a good theory, a phrase attributed to Kurt Lewin (1951) and as a statement it reflects our views. During our public health careers most of us have been involved in work that is applied and often carried out with a heavy emphasis on how we are going to carry out an intervention. In fact, considerable time is often devoted to the nuts and bolts of a project, for example, how to conduct a survey, how to interview, how to engage

the community and so on. In the excitement of the day to day challenges one often has little time to examine the theoretical underpinnings of a project, let alone go into a deeper reflexive discourse on why one is doing it. This emphasis on “doing” has its limitations, most prominently that projects will be unexamined and under-evaluated. However, even more profoundly, the emphasis on “doing” has resulted in a dearth of theoretical thinking.

Recently Alexander Rothman (2004) made the case that theory is not simply important as a starting point for interventions, but also that interventions are needed to test and refine theory. Among other points, he argues that “health behavior theories provide an explicit statement of the structural and psychological processes that are hypothesized to regulate behavior” (p. 2). Thus theories contribute directly to questions of intervention effectiveness and ultimately evaluation. Rothman limits his discussion chiefly to behavioral theories of individual change, but the points are equally relevant to social science theory and health promotion interventions in general. We would extend these notions to the role of theory at all stages in the research and practice of health promotion.

When we think about the nature of health promotion practice, particularly its diverse applications on policy, communities, settings, populations and individuals, it becomes apparent that a broad theoretical literature is relevant. Often one is driven at first to look at theories of change, and this has largely been the case in health education, but it is clear to us that theories of context and state are equally important. Social theory has always grappled as much with why there is stability and order as with why there is disorganization and conflict. Certainly every practical health promotion intervention should examine the whole spectrum of relevant social theory.

Finally, we would argue that health promotion practice has always possessed theoretical underpinnings, just not explicit. That is, there is always an underlying epistemology behind actions even when they are not explicitly stated, even when they are not fully understood by the practitioner, and even where the practitioner would state that they operate with no theoretical base. This book is also about the examination of that implicit and/or explicit theoretical base and more importantly the authors of this book are engaged in the illumination and transformation of that epistemological base.

3. Omissions and What Is Not in the Book

There is no recognized fundamental grand theory of, for or in health promotion. This book does not purport to provide any such grand theory. It is not that the authors would not have enjoyed developing such a theory, but that early on in our discourse the folly of such a grand theory was recognized. Instead we would argue that there are many theoretical sources that are vital for health promotion, and that many excellent sources have been ignored. In our chapters we introduce theoretical sources and theoretical ideas that we believe to be crucially important for health promotion. But it is not an exhaustive list. For those readers who would

argue that some important social theoretical position or theory should have been included, we plead *mea culpa*. However, we challenge those readers to develop those important theoretical ideas for health promotion. We have little fear that the field of health promotion will be overwhelmed by too much theoretical discourse.

Many readers of this book, most notably those who have approached health promotion from a health education background, will be struck by the omission of rationale choice theories. This is purposive. Such theories have considerable merit, but in our view, they have been afforded considerable place in health promotion theoretical thinking and have been well articulated by many others and therefore, we have nothing to add to this perspective. Our concern is with the critical missing perspectives.

Finally, more an apology than an omission, we recognize the limits of our perspectives that are rooted in our Western culture. We trust that our friends and colleagues who have been spared a Western education will view our work with some deference and realization of our limitations. We also recognize our limitations to the Italic and Germanic portions of the Indo-European language family. Thus our epistemological underpinnings are overwhelmingly influenced by literature in this heritage and we would make no claims of universalism with respect to our theoretical explanations.

4. Two Central Assertions or Assumptions of the Authors

The first is that health promotion is the avant-garde of public health. It is the basis of the shift away from the focus of public health on disease to a focus on health. Control and treatment of disease will continue to be paramount, but the challenges of the modern world revolve around creating and maintaining healthy populations. The compression of morbidity and the reduction of burden in an aging, highly populated world will be the driving force behind a focus on health. The second is that health itself is a force for social change. In recent Canadian elections, health was the number one issue; in many other countries it is a dominant part of the political discourse because of the economic consequences, whether the costs are borne by government, private sector or both. Thus health is fundamental to the social fabric of the modern world.

5. How to Read This Book

It is fashionable now to read selected parts and chapters of books. Perhaps this is a result of our busy schedules, perhaps because we often access parts of books and reports off the internet and read these disembodied pieces as if they were meant to stand alone. We hope that the reader will take a holistic approach. Because this book was the product of many discussions, much discourse and lengthy discussion between and among the six authors it has a particular wholeness. It could be taken as a challenge to the reader to discover who was influenced by