A Health Promotion Focus on COVID-19

Keep the Trojan horse out of our health systems:
Promote health for ALL in times of crisis and beyond!

CONTENTS

Ongoing discussion about the range of actions needed during the SARS-CoV-2 outbreak and Coronavirus Disease 2019 (COVID-19) is calling all of us to bring forward our thoughts and experiences about how best to cope with the multiple challenges we are facing regarding COVID-19. We would like to share the following five talking points that could evolve into a more refined and targeted public health discussion on the implications of this pandemic, from a health promotion perspective. As discussions worldwide bring topics such as health, equity, sustainability, solidarity or human dignity to a new level of implications, a systematic perspective is missing to bring these themes together with the disease prevention and curative efforts in the public health framework. This is where health promotion has the expertise to bring these extremely relevant issues together, to offer a comprehensive approach, in a common effort to support the medical care systems to face the sudden burden that was laid in their hands.

INTRODUCTION

The COVID-19 pandemic plunges the world into a crisis that is touching all sectors of society. In a desperate attempt to contain the further spread of the disease, governments across the world have taken unprecedented measures, closing schools, universities, houses of worship, shops, restaurants, theatres and other non-system relevant settings but where people usually meet and interact and spend their time. Travel and economic activity are limited, and severe restrictions are being imposed on physical contacts, limiting them to the very essential. Never before in modern history has a health problem had such an overwhelming impact on society, thus challenging our views of what a healthy society means.

The pandemic comes at a time when the global financial crisis of 2008 and the austerity that followed in many countries, led to a decline of resources in the public sector, including the health care sector. In this already precarious situation, COVID-19 is like a Trojan horse that entered our hospitals and health care systems, our very lives. The disease not only compromises the sustainability of the health care system, but sends a shock wave across all sectors, further compromising the resilience and sustainability of our care and social systems. These systems, which are already under stress, now must deal with a new crisis. The impact of which is of such a magnitude that all known response mechanisms seem inadequate. In the absence of a known treatment for COVID-19, the only option is to protect citizens and health workers against infection by the SARS-CoV-2 virus, which brings a heavy burden on the already fragile public health systems and stretched public health care and hospital professionals. As such, COVID-19 not only tests the health and care system's

resiliency, but also puts into question the relevance of the hospital centric perspective that in most western countries has dominated the health care system for decades.

In this context, it is important to consider the role of health promotion in dealing with the COVID-19 pandemic. Although at first sight, this pandemic and the way to address it may not appear to be a core concern for health promotion, we would argue that health promotion may be more important in this time of crisis than ever. Indeed, this crisis underscores the need for strong public systems, as well as the critical role of health literacy in promoting population health, and the need for effective communication and community mobilization efforts to enhance protective and self-care behaviors and measures at a societal, community and individual level. At the heart of a health promotion response to the COVID-19 crisis is the need to increase people's control over their health, to enhance social cohesion and solidarity, and to (re)build public trust and collective responsibility for population health and wellbeing. Successful community engagement, supported by digital opportunities for safe communication, is key to coping successfully with this crisis and its many disruptive consequences at a societal level. As such, health promotion actions have a central role to play in empowering communities and individuals in adopting effective responses and managing the psychosocial impacts of the multi-layered consequences of this pandemic. The health promotion community also has an advocacy role to play in arguing for sustained investment in public health systems, so that nations are better prepared for future crises and recognize the value of supporting health and well-being at all times.

To launch the debate on how health promotion can effectively deal with the COVID-19 pandemic, we would like to propose five discussion points to broaden the spectrum of our actions. These five points are centered on even key principles of health promotion: intersectorality, sustainability, empowerment and public engagement, equity and a life course perspective. As "discussion points" they are not final words: they are initial arguments to open the discussion with further contributions from the health promotion community. As the world must deal with the pandemic, we need to critically consider its implications for population health, and especially the positive contribution that health promotion can make to addressing the current crisis, while also re-thinking and enlarging the spectrum of our vision and actions.

DISCUSSION POINTS

1 INTERSECTORALITY

Intersectoral actions are crucial to tackle this public health challenge. They involve mobilizing collaborative actions from a whole-of-society and whole-of-government perspective. Some strategies have already been implemented to articulate different sectors of society in response to the threat. But these responses can be amplified with multidisciplinary task force teams that are community-based with whole-of-society approaches. Reinforcing community action to be able to accommodate and provide care to people affected by COVID-19 in human-sized facilities far from hospitals can decrease the pressure on hospitals and allow them to better respond to the challenge. A community focus also facilitates supporting vulnerable members of these communities to ensure equity and that they are also protected from infection (e.g. persons experiencing homelessness, people with low levels of literacy/health literacy, etc.)These task forces can meet in their own perimeters (i.e., community-based response settings) with health professionals, enabling joint action between the care sector and community/social ones. However, this does not mean that core principles of person- and patient-centered care should be neglected but integrated into intersectoral community action.

2 SUSTAINABILITY

There is an urgent need to strengthen the resilience of the public health, disease care and social services. At this stage of the crisis, professionals working in the disease care system need maximum functionality, yet many are lacking essential resources and hospitals alone cannot cope with the full impact of the pandemic. Hospitals should not receive people that are showing symptoms of flu (of any kind: normal or Covid-19) until critical life support care is needed, in order to maintain the responsiveness of such systems and their personnel. The goal should be to maintain the hospital system's full capacity to operate in the immediate and long term, continuing to fulfill its regular duties of taking care of known and emergent conditions. In the current situation, exhausting the human capacity of hospital facilities and staff should be avoided, as they are not easily replaceable. But sustainability goes beyond protecting the scarce resource of hospital staff: it also concerns strengthening the primary care and community-based health and social services and enhancing the role of health promotion and disease prevention in achieving sustainable population health and wellbeing. Health promoting settings – in this case – health promoting hospitals institutions that provide a range of health and social services, may be the most supportive in empowering and protecting all health professionals, individuals and their families, and the broader community and the community to cope with an emergency situation, exemplified by COVID-19.

In addition, sustainability also refers to protecting the environmental balance. The COVID-19 crisis is a stark reminder that environmental sustainability and health are two sides of the same coin: the SARS-CoV-2 virus is of animal origin, jumped species boundaries to infect humans and spread very rapidly in a globalized economic system characterized by high levels of interconnectedness and mobility, as well as little concern for the environment. Human health and the sustainability of the health system can be seriously compromised by a failure to address the environmental aspects and by not addressing the broader determinants of health, now seen to be so crucially important in mounting an effective response to the pandemic. Moreover, in order to guarantee social and cultural sustainability, advocacy for solidarity challenges the current *status quo* of our societies in which competitiveness is predominant and determines our social practices (e.g. school, work settings, corporations and countries relationships). In this very sense, the "one health" perspectives, inclusive of health promotion, becomes of utmost importance for future health action and policy.

3 EMPOWERMENT AND PUBLIC HEALTH ENGAGEMENT

Individual and community empowerment and advocacy are critical for effective COVID-19 response. Empowering people to act and gain control over the situation requires effective communication about the risks of contamination, about the ways to protect oneself and others, and about the ways to cope with living in confinement. This communication should consider the fact that there are subgroups within the population that suffer from low health literacy. Therefore, health recommendations should not only be based on sound scientific evidence, but also be consistent and formulated in a way that makes them easy to understand and culturally appropriate. Health messages should not only concern ways to protect oneself against the virus, but also highlight the need for increasing individual and social resilience with exercise and fresh air - while still observing the home quarantine recommendations – nutrition and sustainable healthy eating habits, physical activity, hydration, sunlight healthy use, confidence favoring mental health promoting reaching out and helping people who are at high risk or socially isolated, a balanced routine including equilibrium with adequate rest and sufficient sleep, empowerment (e.g. smoking cessation support) favoring and a salutogenic society (a society oriented toward the "genesis" i.e. creation of "salus" i.e. health). Communicating these health promoting messages should be a priority for health communication and government agencies and would be a valuable alternative to the "negative news" coverage of the pandemic which some media tend to focus on. Increasing the resilience of individuals, families, groups and communities plays a critical role in supporting an effective community response to the measures that are needed to contain and control the spread of the virus and will also support those impacted by COVID-19. Health literacy as a health promotion approach emphasizes the importance of enabling people and communities to acquire, understand, appraise and apply the best available knowledge and skills to cope with health threats such as COVID-19 and empower them to apply these actions in the context of their everyday lives, values, and life ambitions.

Broader repercussions of the COVID-19 pandemic such as an economic downturn, negativism, pessimism, reclusion, loneliness and anti-social feelings can have a detrimental impact on society. To counter these effects, it is necessary to boost the engagement of people to support and help each other. All sectors of the social ecosystem can collaborate to counter a negative population mindset, and focus on strengthening the support systems within individuals, families, organizations and communities. Empowering people and communities to act positively demands empathy and trust. Quarantine measures, although appropriate, should be communicated in a language that empowers citizens and stimulates public engagement within a systemically enlarged scope of action. When people gain an understanding of the dynamics of contagion and are supported in their efforts to make sense of the measures that are taken, they will be more likely to regain control over the situation and to better cope with it.

Fig 1: the health promotion focus on COVID-19
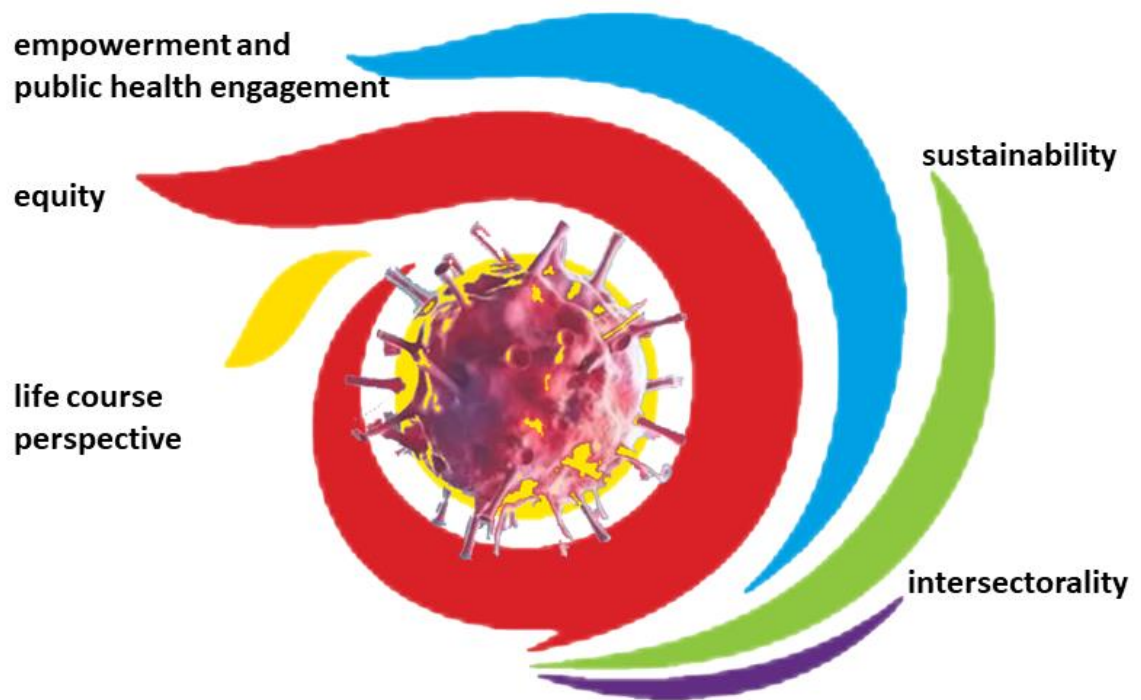
4 EQUITY

When combating the effects of the pandemic, no one should be left behind. In addition to existing country borders, another type of border between well-off neighborhoods and social disadvantage agglomerations, may compromise social cohesion. Although the virus is said to "not discriminate", people in disadvantaged situations, such as elderly, people with pre-existing conditions, people living in deprived neighborhoods or informal settlements, people who are not part of the formal economy, or people experiencing homelessness, are more vulnerable to infection and to suffer a range of consequences for the disease.

More than ever, public policies are needed focusing these groups and enhancing equity. By ensuring that resources are provided to those who are most in need, society can ensure a greater comprehension, manageability and meaningfulness of the crisis and promote a society that focuses on protecting and optimizing the health and wellbeing of the entire population, proportionate to the degree of disadvantage of those most in need. Consequently, there is need for culturally appropriate and tailored actions to ensure that existing social and health disparities are not exacerbated by the public health measures that are currently been taken. This includes:

- paying attention and investing resources to the specific needs of vulnerable groups, such as people living in poverty or experiencing homelessness, socially excluded groups, seniors and people with chronic conditions, migrant workers and refugees;
- setting up support and accompanying humanitarian services such as those required during major disasters;
- deployment of targeted interventions to reduce psychological stress and prevent subsequent mental health problems.

Many of the measures that have been introduced to curb the COVID-19 pandemic affect the lives of the most vulnerable groups in society more significantly than the average citizen. Therefore, additional measures are needed to support these population groups during the crisis and to limit the potentially negative impacts of general measures.

5 A LIFE COURSE PERSPECTIVE

The COVID-19 crisis does not only affect adults of all ages, but also children and young people. Although children have proven to be resilient to crises, their resilience should not be taken for granted, and efforts should be made to ensure their growth and development during the crisis and thereafter. Currently, the focus of the attention for children in the COVID-19 crisis is on ensuring the continuation of education (with equal opportunities for all), with schools switching to distance learning and applying online teaching platforms, and parents supporting the process by tutoring children at home. But this only addresses one aspect of the problem. Children's safety must also be ensured. Home confinement brings some families to exhaustion, as the re-arrangement of domestic, work- and school related tasks and duties in combination with the lasting uncertainty and anxiety, is demanding much energy. Other questions that arise are concerned with the arrangement for child care (e.g., when parents work in the care sector or are otherwise continuing to work outside home), the difficulty of being at home with parents working from home, coping with boredom or depression, media overload, feeling enclosed and deprived of contacts with friends, grandparents and others.   All these questions require creative solutions. These should not only come from parents, teachers or experts, but could also be suggested by young people themselves. Health promotion has always advocated for a participatory approach, and in finding creative ways to cope with the COVID-19 crisis young people's ideas may be well worth considering. Particular attention should also be given to the needs of at-risk children, such as those who are facing adversities and those exposed to domestic violence and abuse (physical, psychological and sexual abuse), as this time of crisis combined with family confinement increases the risk of violence and reduces the possibilities of outside intervention.

It is often said that every crisis is also an opportunity. Coping with COVID-19 is indeed presenting some unexpected opportunities. Families that spend time in confinement spend more time together and may discover that quality time is something to be sustained even when the need for quarantine will be lifted. Digital solutions that have been developed to allow working and schooling from home will most probably be adopted and used more often by employers and schools in the long-term. To make use of those opportunities, it will be necessary to prepare for them. For instance, more use of digital means requires a sufficient level of digital literacy, therefore the public needs to be supported in working with these tools. Similarly, the recommendation to maintain physical distance and the isolation of vulnerable people to protect them from infection, warrants the development of compensatory measures, to ensure that we do not exacerbate the sense of loneliness and social distance that is already widespread. Furthermore, the COVID-19 outbreak has brought health communication directly into our homes and mobile devices. It has made it clear to all of us how the health of one person is closely linked to the health of others, whether at the local, regional, national or global level. It emphasized the impossibility of considering mankind separately from his global environment, be it physical, spiritual, social or cultural. More than ever, it reminded political leaders of the importance of health and the need to base actions on a global and ecosystemic understanding of the issues at stake, on community action, solidarity and trust.

This will hopefully cement a new health-promoting role for political and governmental leaders in the future. Lastly, the unexpected benefits to planetary health in terms of reduced global and local travel and air pollution, as well as the wide recognition for the extraordinary work of those in the frontline of the fight against the disease, and the many inspiring acts of solidarity among volunteers, citizens, communities, countries, and acts of human kindness that have been shown at all levels, give hope that a new day is brightly emerging.

As the COVID-19 crisis unfolds, there is a need for analysis, evaluation and learning from all the actors who are involved in the process of managing and controlling this pandemic. This includes policy makers, health professionals, scientists, and citizens, but also representatives from the most vulnerable and most impacted populations. While crises routinely and periodically occur, the current COVID-19 crisis is of such a large scale that it highlights the need for an integrated approach encompassing health, organizational, social political, financial and ethical aspects. The information gathered from this experience will be critical to strengthen our response to future crises. Health promotion has much to offer to help people and communities to cope with the COVID-19 crisis and its consequences, but the health promotion community can also benefit by learning a lot from this crisis.

It is our hope that, together and moving forward, these preliminary thoughts serve as a stimulus to the health promotion community to contribute with perspectives and reflections as we deal with this Trojan horse on our doorsteps.

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