

Why health promotion is important for the COVID-19 pandemic

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Why health promotion matters



- COVID-19 has a huge health and societal impact
 - Measures to prevent the virus from spreading and to reinforce treatment capacities are unprecedented
 - Lockdown has very disruptive societal consequences
- Health promotion is more important than ever
 - Many protective measures involve **behaviour change** of citizens & health workers
 - Response to COVID-19 is the largest behavioural change project in the history of mankind
 - Health promotion workers are experts in health-related behavior change
 - Perception that existing health systems are failing to protect citizens against the spread of the virus
 - This creates a need for people to **regain control** of their health
 - to protect oneself against the disease
 - to deal with its disruptive consequences

Health promotion's contribution to tackle the COVID-19 pandemic



- Downstream
 - Improve measures to change citizen's preventive behaviour
 - Take low health literacy into consideration
- Midstream
 - Empower organizations and communities to cope with the pandemic and its consequences
- Upstream
 - Informing policy makers
 - Help build a policy environment that minimizes the spread of the infection and maximizes the sense of control of citizens



Preventive Behaviour Change Measures



Verpanding coronavirus voorkomen
 De belangrijkste maatregelen die je kan nemen om verspreiding van het coronavirus te voorkomen, zijn:

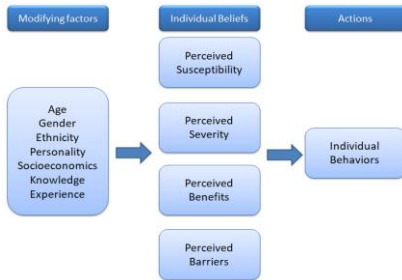
- Handsje wassen regelmatig
- Hoofd en neus in de elleboek van je afdekking
- Niet roken

Deze maatregelen helpen voor alle situaties die grippe en verkoudheid kunnen veroorzaken. Het is dus altijd belangrijk om deze op te volgen.



- Health authorities have tried to enhance protective behavior of citizens through
 - providing information
 - issuing health warnings
 - imposing restrictions
- Variable levels of success
 - relatively weak public response in the beginning of the epidemic (e.g., “lockdown parties”)
 - increasing level of adherence at the height of the crisis
 - diminishing adherence as measures are gradually relaxed
- Low adherence is condemned as “irresponsible” and “selfish”

Improving Preventive Behaviour Change Measures



- Health behavior models have shown that people will only act on health warnings if they
 - believe that they are personally **susceptible**
 - perceive the consequences as **severe**
 - perceive the preventive action as **effective** to reduce the threat
 - believe they are **capable** to perform the preventive action
- Wide coverage of the pandemic by the media creates anxiety
 - too much anxiety can elicit **cognitive avoidance strategies** which minimize the perceived threat
 - social identity needs in interaction with contextual factors can increase and mitigate the actual rejection of evidence (**knowledge resistance**)



Maintaining preventive behaviour

- Behaviour change $\neq$ behaviour maintenance
 - As the SARS-COV19 virus will still be around for some time, relying on rational considerations, fear appeals and legal restrictions will become increasingly ineffective to maintain preventive behaviour
- Encouraging sustainable behaviour change
 - Modify the context to facilitate protective behaviour



- Establish new social norms
- Promote habit formation
 - takes shape when the newly learnt behaviour persists
 - takes place automatically, without the need for conscious reflection
 - robust against change



The importance of self-determination

- To (re)gain control of their lives in the pandemic, people must
 - know what individual preventive measures to take
 - know how to deal with the consequences
- With respect to COVID-19, there is (too) much information
 - not all information is useful, some information is biased or wrong
 - too much information can create confusion
 - the challenge is *not* to provide *more* information, but to help people find the way to *accurate and reliable* health information
- Health literacy

« A person's knowledge, motivation and competences to access, understand, appraise, and apply health information in order to make judgments and take decisions in everyday life concerning healthcare, disease prevention and health promotion to maintain or improve quality of life during the life course»



Sørensen et al., Health literacy and public health: A systematic review and integration of definitions and models. *BMC Public Health*. 2012;12:80



The role of health literacy

- Addressing the challenge of low health literacy
 - increase the level of health literacy in the population
 - detect and compensate for low levels of health literacy through adapting the communication with patients
 - reduce the health systems' demands for health literacy
- Taking health literacy into account when informing people about COVID-19
 - provide information in an understandable, transparent and consistent way recognizing that people with low health literacy may need more explanation and different communication formats
 - explain the situation transparently and clarify the objectives repeatedly
 - communicate new evidence and information without being afraid to correct earlier messages and statements if necessary
 - avoid blaming, but instead strengthen the well-informed responsibility of the individual while showing solidarity with vulnerable groups



Taking up information is an active cognitive process

- People actively select information sources and information from within these sources
 - selection is influenced by context, emotions and selective attention
 - subject to selection and confirmation bias
- Cognitive schemes are activated to understand and appraise information about the virus and to judge the importance of preventive measures

This can also cause bias

- **negative** information bias
(i.e. the tendency to attach more importance to negative than to positive information, resulting in « catastrophic thinking »)
- **positive** information bias
(i.e. the tendency to consider oneself as less at risk for negative consequence, causing « unrealistic optimism »)
- **familiarity** or recency bias



Countering fake news

- Persistent 'myths' about COVID-19
 - belief that the virus was made in a laboratory or otherwise engineered
 - belief that the virus is a hoax and that the symptoms are caused by 5G masts
 - belief that young people cannot get infected
 - belief that antibiotics or vaccines against pneumonia protect against the infection
- False beliefs are reinforced by the false consensus that is created when information is shared on social media
 - leading to the 'echo chamber' or 'illusion of truth' effect
- Can be countered by encouraging people to
 - cross check the accuracy and credibility of information
 - check the source of information
 - where does it come from, who is behind the information, what is the intention, why was it shared, when was it published ...
 - verify the information by consulting a second source
 - think twice before sharing information that has not been fact-checked



Empowering Organizations and Communities

- Efforts to implement protective measures will be more successful if the advice from experts is combined with **local community knowledge**
 - Partners in the community can help to improve the understanding of disease control protocols
 - Moderate changes can be made that better reflect the community's sensitivities
- **Community engagement** can strengthen the capacity to deal with the disruptive effects of the pandemic
 - Despite the insecurity and stress due to the switch to different modes of operating, many communities show high levels of **solidarity and mutual support**
 - Community **resilience and trust** provide a strong basis to help organizations and communities cope with the unfamiliar situation, re-organize and regain control
 - Need to build on the existing strengths and capacities within a community
- Apply principles of **organizational change** to help schools, universities and workplaces deal with the longer-term disruptive effects



Strengthen policies to tackle COVID-19

- Strengthen **public health / health promotion systems** that
 - increase people's control over their health
 - enhance social cohesion and solidarity
 - and build public trust and collective responsibility for promoting health and wellbeing.
- Support **health promotion actions** that enable people and communities to cope with the pandemic and its consequences
- Invest in sustainable actions that address the **wider determinants of health** and reduce inequities in future crises through a whole-of-government and whole-of-society response
- Advocate for **strong global systems** based on principles of equity and global solidarity that can



**COVID-19
RESPONSE**

A sustainable reply to the COVID-19 pandemic

- Health promotion can contribute to containing COVID-19 and help people and communities to regain control
 - encourage and facilitate people to adopt and maintain protective behavior
 - strengthen people's competences to find the way to accurate and reliable health information
 - strengthen communities to take action, building on the existing strengths and capacities within the community
 - draw on the expertise with the settings approach to help schools, universities and workplaces deal with the longer-term disruptive effects of COVID-19
- Health promotion should also learn from the crisis



Learning from the crisis

- Recognize the **importance of infectious diseases**
 - Health promotion has traditionally focused on non-communicable diseases and promoting positive health, but neglected to apply health promotion principles and methods to address infectious diseases
 - Requires a stronger focus on intervention research and a better understanding in the processes involved in implementation, rather than on outcomes and causality
- Recognize that human **health is not an isolated issue**
 - Embrace the concept of “One Health”, which recognizes the interconnection between people, animals, plants and their shared environment
- Prepare to **respond swiftly** and effectively to epidemics
 - Learn about the ways in which people make decisions, organizations operate and communities relate in reaction to epidemics and other crises
 - Seek out how social cohesion and trust in public institutions can be strengthened and mobilized to make communities and populations more resilient against crisis
- Accept that **not all events can be predicted** and controlled, and that uncertainty is part of life

