

# Health Promotion Responses to the COVID-19 Pandemic

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## Why health promotion matters to address the COVID-19 challenge



- 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 disruptive societal consequences
- Health promotion is more important than ever
  - Many protective measures involve **behaviour change** by citizens & health workers
  - Perception that the existing health system is failing to protect citizens against the spread of the virus 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 pandemic can focus at the **downstream**, **midstream** and **upstream** level





## Improving Preventive Behaviour Change Measures

- Health authorities have tried to enhance protective behaviour
  - through providing information, issuing health warnings, and imposing legal restrictions
  - low adherence is condemned as “irresponsible” and “selfish”
- Health behaviour models show 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* that 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*
  - Protective behaviour will have to be maintained as long as chance of infection remains
  - Relying on health warnings, fear appeals and legal restrictions will become increasingly ineffective to maintain preventive behaviour
- Encouraging sustainable behaviour change requires
  - the establishing of *social norms*
  - modification of the *context* to facilitate and encourage (« nudge ») protective behaviour
  - encouraging *habit formation*
    - takes shape when the newly learnt behaviour persists
    - takes place automatically, without the need for conscious reflection
    - robust against change



## Empowering Organizations and Communities

- Efforts to implement protective measures will be more successful if the advice from experts is combined with **local community knowledge**
  - community partners 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
- **Strengthening community action** is a key competence of health promotion
  - builds on the existing strengths and capacities within a community
  - expertise creating healthy settings can be a source of inspiration and support to help schools, universities and workplaces deal with the longer-term disruptive effects



## The importance of health literacy

- 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
  - 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; and
  - 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 cold weather or hand dryers kill the virus
  - 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 the 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



**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



## 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

