Editorial

1986-2016: from Ottawa to Vienna

November, 1986, Ottawa-public health leaders gather at the first international conference on health promotion and agree a Charter, the Ottawa Charter, to achieve Health for All. The Charter recognised that health promotion goes beyond the health sector. Health extends from lifestyle to wellbeing, and so defines prerequisites for health, which include peace, shelter, education, food, income, stable ecosystems, sustainable resources, social justice, and equity. The Ottawa Charter articulated health promotion based on five pillars: healthy public policy (health and equity in all sectors), supporting environments (in face of the changing patterns of life, which impacts on health), community action, personal skills (for people to exercise greater control on their own health), and health services (a reorientation beyond their clinical and curative goals). Crucially, health was recognised as a major social investment.

November, 2016, Vienna-public health leaders and researchers convened for the 9th European Public Health Conference and took stock. While they recognised that the broad socioecological approach to public health described in the Ottawa Charter is still relevant 30 years later, there also seemed to be agreement that the Charter needed new inspiration, new strategies, and new skills. Perhaps there was even a case for a new declaration.

As exemplified in this second issue of The Lancet Public Health, public health is a dynamic discipline. Statements that were right for a world 30 years ago need to be regularly reviewed and revised as new acute and chronic predicaments evolve.

The origins of public health lie in the prevention and control of infectious disease. But the complexity of the relation between disease and infection has grown. In an attempt to support policy decisions about cervical cancer prevention, Kate Simms and colleagues use modelling to estimate the cost-effectiveness of the new nonavalent human papillomavirus (HPV) vaccine in countries transitioning to primary HPV screening, such as Australia next year. Public health also faces new challenges. Ellen Flint and colleagues show that individuals who switched from using their cars for commuting to active or public transport experienced a decrease in their body-mass index. Such work strongly supports policies that encourage active commuting as part of the public health response to the obesity epidemic, and more broadly strengthens the evidence for the role of urban design in improving health.

Sometimes, entirely new threats appear. Marek Majdan and colleagues estimate the incidence and mortality of traumatic brain injury in Europe. They offer a much needed epidemiological snapshot of the situation, crucial for future evaluation of trends and the alignment of preventive measures. Public health also has to address unexpected crises. Ioannis Laliotis and colleagues dissect the causes of mortality in Greece-disproportionally hit by the 2008 financial crisis and austerity measures. Such studies document how the effects of a financial recession are linked to the measures taken in response to it. These four studies exemplify the dynamic complexity of the challenges facing public health. Societies evolve. Threats evolve. The case for health promotion needs to evolve too.

Building on the Ottawa Charter, the Vienna Declaration takes into account new and emerging threats to public health, which have arisen and been better understood over the past 30 years. The Declaration integrates the vision in the Sustainable Development Goals, "to recognise the multi-tiered determinants of health and opportunities for action". The prerequisites for health are expanded, updated, and detailed: for example, "regardless of gender, sexuality and sexual identity, race, ethnicity, religion, and citizenship", "high level of social protection for all", and "health promoting working conditions" were added. The five areas for action are also updated to include the importance of commercial and political determinants of health, welfare reform and international trade, economic and employment policies, urban design, health literacy in the age of the internet, sustainability of health services in the face of costly innovation. The Vienna Declaration pledges to strengthen transparent and innovative information systems to inform public health policies; to advocate for health by engaging with those who support health, but also by challenging those who threaten health; and to hold leaders accountable.

The Vienna Declaration is important because it encapsulates the quintessence of what has been learned over the past 30 years concerning the broader definition of health-anchored within the global agenda of sustainable development, social, economic, and ecological determinants of health, and the underlying forces that forge and shake our world today.
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See Articles pages e46, e56, e66, and e76 For the Vienna Declaration see

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