

SECOND EDITION

INTRODUCTION TO HEALTH PROMOTION

ANASTASIA SNELLING



JOSSEY-BASS™
A Wiley Brand

INTRODUCTION TO HEALTH PROMOTION

INTRODUCTION TO HEALTH PROMOTION

Edited by
Anastasia Snelling
American University, Washington, DC, USA

Second Edition

J JOSSEY-BASS™
A Wiley Brand

Copyright © 2024 by John Wiley & Sons Inc. All rights reserved.

Published by John Wiley & Sons, Inc., Hoboken, New Jersey.
Published simultaneously in Canada.

No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, scanning, or otherwise, except as permitted under Section 107 or 108 of the 1976 United States Copyright Act, without either the prior written permission of the Publisher, or authorization through payment of the appropriate per-copy fee to the Copyright Clearance Center, Inc., 222 Rosewood Drive, Danvers, MA 01923, (978) 750-8400, fax (978) 750-4470, or on the web at www.copyright.com. Requests to the Publisher for permission should be addressed to the Permissions Department, John Wiley & Sons, Inc., 111 River Street, Hoboken, NJ 07030, (201) 748-6011, fax (201) 748-6008, or online at <http://www.wiley.com/go/permission>.

Trademarks: Wiley and the Wiley logo are trademarks or registered trademarks of John Wiley & Sons, Inc. and/or its affiliates in the United States and other countries and may not be used without written permission. All other trademarks are the property of their respective owners. John Wiley & Sons, Inc. is not associated with any product or vendor mentioned in this book.

Limit of Liability/Disclaimer of Warranty: While the publisher and author have used their best efforts in preparing this book, they make no representations or warranties with respect to the accuracy or completeness of the contents of this book and specifically disclaim any implied warranties of merchantability or fitness for a particular purpose. No warranty may be created or extended by sales representatives or written sales materials. The advice and strategies contained herein may not be suitable for your situation. You should consult with a professional where appropriate. Further, readers should be aware that websites listed in this work may have changed or disappeared between when this work was written and when it is read. Neither the publisher nor authors shall be liable for any loss of profit or any other commercial damages, including but not limited to special, incidental, consequential, or other damages.

For general information on our other products and services or for technical support, please contact our Customer Care Department within the United States at (800) 762-2974, outside the United States at (317) 572-3993 or fax (317) 572-4002.

Wiley also publishes its books in a variety of electronic formats. Some content that appears in print may not be available in electronic formats. For more information about Wiley products, visit our web site at www.wiley.com.

Library of Congress Cataloging-in-Publication Data:

Names: Snelling, Anastasia, 1957- editor.

Title: Introduction to health promotion / edited by Anastasia Snelling.

Description: Second edition. | Hoboken, New Jersey : Jossey-Bass, [2024] |

Includes bibliographical references and index.

Identifiers: LCCN 2023012885 (print) | LCCN 2023012886 (ebook) | ISBN

9781394155965 (paperback) | ISBN 9781394155989 (adobe pdf) | ISBN

9781394155972 (epub)

Subjects: MESH: Health Promotion—methods | Health Promotion--trends |

Health Behavior | Health Planning—methods | Preventive Health

Services—methods | United States

Classification: LCC RA427.8 (print) | LCC RA427.8 (ebook) | NLM WA 590 |

DDC 362.1—dc23/eng/20230508

LC record available at <https://lcn.loc.gov/2023012885>

LC ebook record available at <https://lcn.loc.gov/2023012886>

Cover Design: Wiley

Cover Images: © Tom Werner/Getty Images; Claudia Totir/Getty Images; MilanMarkovic78/Shutterstock

CONTENTS

Tables and Figures	xv
Foreword	xix
Preface to First Edition	xxi
Preface to Second Edition.	xxvii
The Editor	xxix
The Contributors	xxxii
About The Companion Website	xxxv

Part One: THE FOUNDATION OF HEALTH PROMOTION 1

Chapter 1 Health Promotion: An Expanding Field 3

Anastasia Snelling

Brief Overview of Health from 1900–2020.	3
1900–1950s	3
1960s–2020s	5
COVID-19 Pandemic	8
Health Promotion: An Expanding Field	9
Health Education	10
Public Health	10
Social Determinants of Health.	11
Important Health Promotion Concepts	13
Risk Factors, Chronic Diseases, and Empowerment	13
Prevention Activities: Primary, Secondary, and Tertiary	14
Health Promotion Meets the Health Care System.	15
Patient Protection and Affordable Care Act	16
Discussion.	17
Positions in the Health Promotion Field	17
Summary	18
Key Terms	18
Review Questions	19
Student Activities	20
References	20

Chapter 2 Health Behavior Change Theories and Models: Understanding the Process of Behavior Change 23

Maura Stevenson

Health Behavior Theories.	24
Social Cognitive Theory	24

Transtheoretical Model of Behavior Change	28
Health Belief Model	32
Theory of Planned Behavior	34
Historical Perspective	38
Summary	38
Key Terms	40
Review Questions	41
Student Activities	41
References	41
Chapter 3 Program Planning Models	43
<i>Anastasia Snelling</i>	
Effective Health Promotion Planning	43
Social-ecological Model	44
PRECEDE–PROCEED Model	45
Multilevel Approach to Community Health (MATCH)	49
Consumer-based Planning Models for Health Communication	49
CDCynergy	51
Making Health Communication Programs Work.	53
Health Promotion Planning Model for Community-Level Programs	53
Mobilizing for Action through Planning and Partnerships (MAPP)	55
MAP-IT.	56
Connecting Health Behavior Theories to Program Planning Models	56
Summary	57
Key Terms	57
Review Questions	58
Student Activities	58
References	58
Part Two: HEALTH BEHAVIORS	61
Chapter 4 Tobacco Use: Trends, Health Consequences, Cessation, and Policies	63
<i>Laurie DiRosa</i>	
Tobacco Use	64
Tobacco Use Statistics	64
Cancer	67
Cardiovascular Disease	69
Pulmonary Disease	69
Reproductive and Developmental Effects	70
Smokeless Tobacco and Chronic Disease	71
Harm Reduction	73
Cancer	73
Cardiovascular Disease	73
Pregnancy	74
Oral Complications	74

Secondhand Smoke Exposure and Chronic Disease 74

Political and Cultural History of Tobacco Use 76

 Warning Labels 76

 Purchasing Restrictions 77

 Taxation 77

1998 Master Settlement Agreement 78

Recent Efforts to Reduce Tobacco Use 78

 National Policy. 79

 State Policy 82

 Local Policy 83

Effective Programs That Discourage Tobacco Use. 83

 Healthy People 2030 83

 Population-based Strategies 85

 Effective Examples of Population-based Strategies 85

 Practical Examples of Worksite Initiatives 87

 School Initiatives 88

 Practical Examples of School Initiatives 89

Challenges to Reducing Smoking. 91

 Access to Treatment 91

 Addictive Property of Nicotine 92

 Tobacco Industry Practices. 93

Summary 93

Key Terms 93

Review Questions 95

Student Activities 95

References 96

Chapter 5 Eating Behaviors: Food Choices, Trends, Programs, and Policies 101

Maya Maroto

Eating Behaviors 102

 Taste 102

 Emotions 103

 Price 103

 Convenience. 103

 Health and Nutrition 104

 Culture and Familiarity 105

 Environment. 105

 Marketing 105

Nutrition, Eating Habits, and Health 106

 Heart Disease 107

 Cancer 107

 Stroke 108

 Type 2 Diabetes 108

 Obesity 109

Selected Healthy Eating Patterns. 109

Recommended Nutrition and Dietary Intake	110
History of Nutrition and Dietary Patterns	111
Pattern 1: Paleolithic and Hunter-gatherers	112
Pattern 2: Advent of Agriculture	113
Pattern 3: Industrialization and Receding Famine	113
Pattern 4: Noncommunicable Disease	113
Pattern 5: Desired Societal and Behavior Change.	114
Changes to the American Food Environment	114
Food Supply and Consumption	114
Where Americans Eat	117
The Food Industry: Friend, Foe, or Both?	118
Farm Subsidies: The Culprit?	119
Portion Sizes: Bigger but Not Better	119
Recent Efforts to Promote Healthy Eating	119
National Policy Actions	120
State Policy Actions	121
Local Policy Actions	121
Community Nutrition Efforts.	122
Worksite Wellness	122
School Food Environments.	123
Programs for the Individual	123
Summary	124
Key Terms	124
Review Questions	126
Student Activities	126
References	127
Chapter 6 Physical Activity Behaviors: Benefits, Trends, Programs, and Policies	135
<i>Jennifer Childress</i>	
Physical Activity	136
Recommended Physical Activity Levels	136
Benefits of Physical Activity.	137
Sedentary Behavior	140
What is Your Level of Activity?	141
Physical Activity Patterns.	142
Historical Patterns.	142
Physical Activity Behaviors and Barriers.	143
Individual	143
Recreation.	143
Built Environment.	144
Occupation	144
Commuting and Transportation Choices	145
Neighborhoods.	145
Social Environment	145

Efforts and Initiatives to Increase Physical Activity 146

Technology. 146

Tracking Activity 146

 Virtual Social Support. 146

Education Programs in Worksites, Schools, and Communities 147

 Workplace Health 147

 Schools 150

 Faith-based Organizations 152

 Other Settings 152

Policies That Promote Increasing Physical Activity 153

National Policy 153

State Policy. 155

 North Carolina’s Eat Smart, Move More Initiative 155

Local Policy 158

Community Policy. 158

Community Partner Initiatives and Multisectoral Strategies 158

Walk Friendly Communities. 159

 Rails-to-Trails 161

 Bike Shares 161

 YMCA Initiatives. 161

 Blue Zones Project 162

Summary 163

Key Terms 163

Review Questions 164

Student Activities 165

References 165

Chapter 7 Stress, Emotional Well-Being, and Mental Health 169

Marty Loy

The Origins of the Term *Stress*. 170

The Fight-or-flight Response 170

Stress Physiology 172

Eustress and Distress. 174

Life Stress and Illness 175

Coping: Stress Management Techniques 177

 Four Coping Opportunities. 178

Stress at Work 182

 Demand and Control 182

 Worksite Stress Management. 184

Mental Health in Communities 185

 Meeting Community Mental Health Needs 186

 COVID-19 187

Social Determinants of Mental Health 188

Stress Management with Children	189
Effects of Stress on Children	190
Stress Types Among Children	191
Stress Among College Students	191
Stress in a Digital World	192
Summary	193
Key Terms	194
Review Questions	194
Student Activities	195
Acknowledgment	195
References	195
Chapter 8 Clinical Preventive Services: Trends, Access, Promotion, and Guidelines	201
<i>Casey Korba</i>	
Benefits of Evidence-based Clinical Preventive Services	202
Recommended Levels of Preventive Services.	203
Patient Protection and Affordable Care Act	203
History of Preventive Services	203
The US Preventive Services Task Force (USPSTF).	204
USPSTF Recommendations for Asymptomatic People.	205
Member Composition.	206
Identifying Evidence-based Preventive Services	206
Benefits and Harms	207
The Advisory Committee on Immunization Practices (ACIP).	207
Vaccines: Myths and Misinformation	207
Health Resources and Services Administration (HRSA)	209
Promoting the Use of Preventive Services	209
Healthcare Coverage of Evidence-based Preventive Services	209
Other Preventive Services Provisions	211
Million Hearts Initiative	212
Nontraditional Sites of Care	212
Genetic Testing	212
Advances in Behavioral Science	213
Barriers to Increase the Use of Evidence-based Preventive Services	213
Educating the Public About Preventive Services	214
Research Limitations	214
Healthcare Service Barriers.	215
Summary	216
Key Terms	216
Review Questions	217
Student Activities	217
References	217

Part Three HEALTH PROMOTION IN ACTION 221**Chapter 9 National and State Initiatives to Promote Health and Well-Being . . . 223***Jennifer Childress and Jill Dombrowski*

Healthy People: 1979–2030	223
Healthy People 2030	224
US Department of Health and Human Services (HHS).	226
The Centers for Disease Control and Prevention (CDC).	228
National Institutes of Health (NIH)	230
U.S. Department of Agriculture (USDA).	231
Monitoring the Nation’s Health	233
Behavioral Risk Factor Surveillance System (BRFSS).	234
Youth Risk Behavior Surveillance System (YRBSS)	237
National Health and Nutrition Examination Survey (NHANES).	240
State Initiatives	241
Arizona	241
Cherokee Nation Health Services (Tahlequah, Oklahoma)	243
Utah	243
National Nonprofit Organizations	243
Association of State and Territorial Health Officials (ASTHO)	245
Trust for America’s Health	246
Local Programs	248
Summary	249
Key Terms	249
Review Questions	250
Student Activities	250
References	250

Chapter 10 Settings for Health Promotion 253*David Stevenson*

The Home	253
Family	254
Physical Space	254
Personal Training.	255
Physical Safety	255
Communities	255
Health Fairs	256
Targeted Community Initiatives.	256
Farmers’ Markets and Community Gardens.	257
Volunteer Opportunities.	257
Early Childhood Centers	257
Hygiene and Safety Habits	257
Physical Activity	258

Nutrition and Healthy Eating Habits	258
Health Assessments	258
Schools	259
Academics and Health.	259
School Policy Supporting Health	260
Teacher’s Roles	260
Healthy Food Choices	261
School Healthcare Services.	261
Health Promotion Initiatives	261
School After-hours	262
Coordinated School Health.	262
Professional Opportunities	262
Colleges and Universities	262
Safe and Healthy Environment	263
Coordinated Health Promotion	263
Physical Environment	263
Professional Opportunities	264
The Worksite	264
Leadership	265
Worksite Safety	266
Health Promotion	267
Health Coaches	267
Employee Assistance Programs	267
Technology and Social Media.	268
Measuring and Celebrating Success	268
Professional Opportunities	268
Healthcare Providers.	269
Physicians	269
Other Healthcare Providers	269
Faith-based Centers	270
The Internet	270
Access to Information and Data.	270
Tracking Personal Health Data	271
Social Media.	271
Summary	272
Key Terms	272
Review Questions	273
Student Activities	274
References	274
Chapter 11 Health Promotion-Related Organizations, Associations, and Certifications.	277
<i>Anastasia Snelling and Michelle Kalicki</i>	
Nonprofit Health Associations.	278
American Heart Association (AHA)	278
Other Nonprofit Health Organizations.	279

Professional Health Associations 279

 Nutrition 279

 Physical Activity 281

 Health, Wellness, and Education 283

 Scholarly and Professional Health Journals 285

Certifications 287

 Health Promotion Certifications 287

 Health Education Certifications 288

 Fitness-based Certifications 289

 Nutrition Certifications 290

 Health Coaching 290

 Academic Institute Certifications 290

Summary 291

Key Terms 292

Review Questions 292

Student Activities 293

References 293

Chapter 12 Trends in Health Promotion 295

David Hunnicutt

Trend #1: The Population Will Get Much Older in the
Next Three Decades 296

Trend #2: As Americans Age, Our Collective Physical Health Status
Will Steadily Decline If We Don't Do Things Differently 297

Trend #3: Physical Health Problems Won't Be Our Only Concern 298

Trend #4: Healthcare Costs Will Remain an Issue of Significant
Concern Far into the Future 299

Trend #5: Because of Its Potential, Prevention Will Become a
National Priority 300

Trend #6: Telehealth Will Gain Rapid Popularity 301

Trend #7: Physical Activity Will Become the Most Commonly
Prescribed Medicine 303

Trend #8: Efforts to Curb Obesity Will Intensify Greatly 304

Trend #9: Wearables, Apps, Big Data, and AI Will Dominate the
Wellness Arena 305

Trend #10: The Need for Talented Health Promotion Professionals
Will Skyrocket 307

Summary 307

References 308

Weblinks. 311

Index 321

TABLES AND FIGURES

Tables

- 1.1. Life Expectancy at Birth, at Sixty-Five Years of Age, and at Seventy-Five Years of Age **4**
- 1.2. Leading Causes of Death in the United States and Related Risk Factors (2020) **8**
- 2.1. Social Change Theory and Application of Constructs **25**
- 2.2. Processes of Change **31**
- 2.3. Constructs of the Health Belief Model **32**
- 2.4. Presented Theories and Their Constructs **39**
- 3.1. PRECEDE–PROCEED Model **48**
- 3.2. MATCH Phases and Steps **50**
- 3.3. CDCynergy Program Planning Model **54**
- 3.4. Key Questions for Each Stage of MAP-IT **56**
- 4.1. Provisions of the Master Settlement Agreement **79**
- 4.2. List of Harmful and Potentially Harmful Constituents (HPHCs) in Cigarette Smoke and Smokeless Tobacco **81**
- 4.3. Healthy People 2030 Objectives Related to Tobacco Use **84**
- 5.1. Leading Causes of Death: Number of Deaths (United States, 2020) **106**
- 5.2. Selected Dietary Patterns, Their Characteristics, and Disease Risk Impact **108**
- 5.3. Food Availability in Pounds per Person **115**
- 5.4. A Comparison of the 2020–2025 Dietary Guidelines for Americans and the Average American Diet **118**
- 6.1. Essential Components of Physical Education **151**
- 6.2. Community Preventive Services Task Force (CPSTF) Findings for Physical Activity—Interventions to Increase Physical Activity **159**
- 8.1. Select Preventive Screenings Examinations **202**
- 8.2. US Preventive Services Task Force (USPSTF) Grading System **205**
- 9.1. Healthy People 2030 Leading Health Indicators **225**
- 9.2. Examples of Tests Included in The National Health and Nutrition Examination Survey (NHANES) **232**
- 11.1. Nonprofit Health Associations **279**
- 11.2. Select Health Professional Associations **280**
- 11.3. Select Scholarly Journals **286**
- 11.4. Fitness-Based Certification Organizations **289**
- 11.5. Health Coaching Certification Organizations **291**

Figures

- 1.1. Social-ecological Model **13**
- 2.1. Theories, Concepts, and Constructs **24**
- 2.2. Transtheoretical Model: Stages of Change **28**
- 2.3. Health Belief Model in Summary **34**
- 2.4. Theory of Reasoned Action and Theory of Planned Behavior **35**
- 3.1. A Social-Ecological Framework for Nutrition and Physical Activity Decisions **45**
- 3.2. PRECEDE–PROCEED Model **49**
- 3.3. MATCH Model **50**
- 3.4. Health Communication Program Cycle **54**
- 4.1. The Health Consequences Causally Linked to Smoking and Exposure to Secondhand Smoke **65**
- 4.2. How Cigarette Smoking Causes Cancer **68**
- 4.3. Smokeless Tobacco Products **72**
- 4.4. Example of one of the 11 required images. **81**
- 5.1. Age-Adjusted Trends in Overweight, Obesity, and Severe Obesity Among Men and Women Aged 20–74: United States, 1960–1962 Through 2017–2018 **110**
- 5.2. MyPlate Icon **111**
- 5.3. Dietary Intakes Compared to Recommendations: Percent of the US Population Ages 1 and Older Who are Below, At and Above Each Dietary Goal https://www.dietaryguidelines.gov/sites/default/files/2021-11/DGA_2020-2025_CurrentIntakesSnapshot.png **112**
- 6.1. Physical Activity Recommendations for Adults (Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, Office of the Secretary, U.S. Department of Health and Human Services, 2022) **137**
- 6.2. Physical Activity Recommendations for Kids and Teens (Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, Office of the Secretary, U.S. Department of Health and Human Services, 2022) **138**
- 6.3. Physical Activity Recommendations for During and After Pregnancy **138**
- 6.4. Health Benefits of Physical Activity for Adults **139**
- 6.5. Percent of the Americans Who Meet the Physical Activity Guidelines **140**
- 6.6. Percent of Workday Standing or Walking is Required in Selected Occupations 2017 **141**
- 6.7. Percent of Jobs Requiring Heavy or Very Heavy Strengths, Selected Occupations, 2017 **142**
- 6.8. Percentage of US Worksites That Offered a Physical Activity Program by Worksite Size **148**

-
- 6.9. Percentage of US Worksites That Offered a Physical Activity Program by Industry Group **148**
 - 6.10. Type of Worksite Physical Activity Programs Offered to Employee **149**
 - 6.11. Level of Employee Participation in Worksite Physical Activity Program **149**
 - 7.1. Stress Response **171**
 - 7.2. Protective Adaptations **172**
 - 7.3. Effects of Stress on Health **173**
 - 7.4. Optimal Stress Zone **175**
 - 7.5. Holmes and Rahe Stress Scale **176**
 - 7.6. Lifetime Health Benefits of Reduced Exposures to Adverse Childhood Experiences **177**
 - 7.7. Four Coping Opportunities **178**
 - 7.8. Demand-Control Support Model **183**
 - 7.9. World Health Organization's Optimal Mix of Mental Health Services **186**
 - 7.10. Stress Among College Students **192**
 - 8.1. USPSTF Recommendation Process **210**
 - 9.1. HHS Organizational Chart <https://www.hhs.gov/about/agencies/orgchart/index.html> **227**
 - 9.2. CDC flu view webpage: ILI activity indicator map **229**
 - 9.3. Using surveillance systems to prevent and control chronic diseases **234**
 - 9.4. Example of BRFSS question: Days when physical health not-good **237**

FOREWORD

A decade ago, Dr. Snelling brought the foundational text, *Introduction to Health Promotion*, to our community. A lot can change in 10 years. While the prevalence of smoking has reached a 50-year low, we sit more than move and “socialize” through computer and phone screens more than in person. We now face a loneliness and isolation epidemic, as memorialized by Dr. Vivek Murthy’s (the surgeon general) advisory committee report.

The additional published research and societal changes (including those brought by the COVID-19 pandemic) warranted a second edition of Dr. Snelling’s text. Furthermore, as our health care system continues down an unsustainable path and professionals across the spectrum are showing a greater interest in harnessing behavior change science, the field of health promotion continues to grow in importance.

While this text is fundamental for students in the field of health promotion, it is also an important resource for the plethora of professionals who’ve come to recognize over the course of their career that health promotion is a fundamental and essential part of their own work as well as the sustainability of our health care delivery system. Doctors, nurses, pharmacists, health coaches—health professionals across the spectrum are appreciating that their formal education painted a limited view of the possibilities individuals face that impact their health and well-being.

The boundary between our ability to make healthy choices and experience positive emotions and the influence of our family members, neighbors, coworkers, and communities is murky. Though there is a connection—a strong one. We are all influenced by the cultures within which we live, work, and play. Cultures are the shared behaviors, beliefs, and attitudes of a given group of people. A strong understanding of the content in this text will assuredly help the reader navigate supporting individuals as well as cultures.

Richard Safeer, M.D.
Chief Medical Director, Employee Health and
Well-Being, Johns Hopkins Medicine
Assistant Professor of General Internal Medicine and Pediatrics,
Johns Hopkins University School of Medicine
Assistant Professor of Health, Behavior and Society,
Johns Hopkins Bloomberg School of Public Health
Author of *A Cure for the Common Company*,
*A Well-Being Prescription for a Happier,
Healthier and More Resilient Workforce*

PREFACE TO FIRST EDITION

The health promotion field emerged during the second half of the twentieth century as medicine and science became successful in treating infectious diseases with antibiotics, advancing maternal and child health, and improving sanitation practices. These gains significantly improved the quality and quantity of life for all. Yet, now we face the next medical crisis: chronic disease. Medicine and science research have continued to manage disease conditions through a number of procedures, surgeries, and pharmaceuticals. All of these approaches come with a very high cost to the individual through reduced quality of life and economic cost to organizations and the federal government responsible for providing health insurance. At this time, health care costs account for 18.3% of the gross domestic product. This means that the United States spends almost eighteen cents of every dollar on providing health care to Americans. Controlling these health care costs is a continuing priority for the nation. Consider that over 70% of all health care costs are related to chronic disease and that many risk factors for chronic disease are considered modifiable, such as tobacco use, physical inactivity, food choices, and managing stress. These modifiable risk factors are the core behaviors that the field of health promotion focuses on to improve the quality of people's lives and manage rising health care costs.

Changing individual and societal health behavior is a very complex process. Since the 1980s, more research has shown that for individuals to successfully adopt healthy behaviors, social, behavioral, and environmental factors also must be part of the process of change. The healthy choice must be the easy choice in our homes, schools, worksites, and communities. The vision is to live in a country where a culture of health is seen, practiced, and supported throughout the life span.

The unique contribution of this book is to introduce students to the individual and societal forces that have transformed the factors that influence one's health, including social and physical environments, medical advances, personal lifestyle choices, and legislation. The book identifies and discusses the innovative health campaigns, strategies, and policies that are being implemented and enacted to improve health behaviors and practices that ultimately improve the quality of life.

It is my desire that the writings in this book inspire you to either embark on a career in health promotion or, at the very least, provide you with an understanding of the ways in which many disciplines intersect with health promotion, so that whatever discipline you study, you will better understand how your work interacts with the promotion of health. Almost every discipline intersects with the field of health promotion. Further, health promotion professionals do not work in isolation. The nature of health promotion is to work across multiple disciplines to design and develop strategies that use the best knowledge we know and apply it to health behaviors. Table P.1 lists diverse areas of study and identifies the

Table P.1 Disciplines and the Relationship with Health Fields

Discipline	Contribution	Example
Communication and marketing	Social marketing campaigns	Campaigns to reduce smoking or promote physical activity
Public policy	Local, state, and national policy promoting health	Affordable Care Act
Human resources	Health benefits offered through employers	Worksite health
Biology	Understanding the changes in the body from food and exercise	Healthy behavior identification
Psychology	Understanding why people make the choices they do and how to facilitate behavior change	Health promotion models
Sociology	Understanding how human society functions and influences behavior	Health promotion models
Medicine and allied health	Monitoring health, identifying risk factors, and restoring health	Annual physicals; clinical preventive services
Economics	Behavioral economics	Encouraging healthy food choices

related work of health promotion, whether you study exercise or nutrition science to understand how to advise consumers on health behaviors to improve their health status or if you study communication or marketing to design health campaigns that inform the general public about health risks associated with smoking or drinking and driving or public policy to understand or evaluate how public health policy decreases health disparities by providing consumers with healthful foods or access to affordable health care.

This introductory textbook for health promotion students is designed and written to be distinctly different from other textbooks. It provides readers with an in-depth examination of the forces that have changed our lifestyles and environments over the past century, which in turn have resulted in changes in individual health behaviors that affect the onset of chronic conditions. During this same time frame, there were also considerable medical advances, improving early detection of disease and developing progressive treatments for chronic conditions. These changes are ones that health promoters must understand and address. Ultimately, the framework for the development of social and physical environments that support healthy lifestyle choices will guide the transformation of communities where people are empowered to make healthy choices, so they can live longer lives free of preventable disease, disability, and premature death.

The book is divided into three parts. Part 1, “The Foundation of Health Promotion,” introduces the framework of health promotion and provides the student with a number of key terms, models, and trends related to the field. Chapter 2 introduces health behavior change theories that offer constructs on how individuals approach personal behavior change, that is, the essence of health promotion—engaging individuals to actively promote their own health through daily actions such as being physically active or selecting healthy foods to eat. Program planning models (chapter 3) are essential tools to successfully reach large groups of people through social marketing campaigns to interventions to enacting policies to create environments in which people can practice healthy behaviors.

Part 2, “Health Behaviors,” describes those actions that promote health and prevent disease. These chapters introduce the short history of how tobacco use, eating, physical activity, and emotional health has evolved as a result of the changes in our social and physical environments. These chapters provide a comprehensive discussion of the health behaviors that influence the onset of chronic disease in our country and how and why these behaviors have changed over time. Chapter 8 highlights the important role clinical preventive services also have in promoting health by monitoring chronic disease development and overall health status. Health promotion professionals are promoting healthful living; hence, the inclusion of preventive services (immunizations and age-appropriate screenings) available through the medical community needs to be understood and promoted.

These health behavior chapters examine how changes in our environment and society over the past several decades have affected behaviors and how those changed behaviors affect health and disease. By understanding the historical perspective of each of these behaviors, health promotion professionals will possess a richer context for their work, understanding that multiple forces have shaped, and continue to affect, the health of individuals and our society. Health behavior change is complex; in order to advance innovative solutions, it is critical that health promoters fully understand the history of these behaviors. Within each chapter, examples of policies and programs that exemplify health promotion in action are provided.

Part 3, “Health Promotion in Action,” presents how state and federal governments engage in promoting healthful living for their consumers, what associations and certifications support the health promotion profession, where health promotion is taking place and the job opportunities available for this profession, and closing out with future trends in health promotion as we move through the twenty-first century. There are a plethora of national activities that promote health and prevent disease. The federal agencies monitor health status, provide broad guidelines, conduct research, and fund programs to promote health. Collectively, there are thousands of federal employees who work across disciplines to study or implement new approaches to improve the health of our society.

Chapter 10 discusses the setting where health promotion takes place, which further exemplifies that health promotion is beginning to be seen everywhere, such as in day care centers, schools, colleges, worksites, food stores, retirement homes, and communities. Again, thousands of professionals believe in the vision of a country in which people practice healthy behaviors every day because the healthy choice is the easy choice. Staying current within the discipline will be important after you graduate. Chapter 11 discusses associations, journals, and certifications that provide important information for your life beyond the borders of an academic institution. In time, reading a textbook or listening to a professor’s lecture will be in the past. But as a professional, you will need to stay current, and this chapter is full of associations and journals that will facilitate your continued professional development. The final chapter is a look into the future, predicting some trends that will help to create a culture of health to ensure that the Healthy People 2030 goals to “attain high-quality, longer lives free of preventable disease, to improve the health of all groups, to create social and physical environments that

promote good health for all, and to promote healthy behaviors across all life stages” will be achieved.

At the end of each chapter, the student will find a brief summary and list of key terms of the information presented in the chapter. After the summary and key terms are a list of student questions and activities. Both the questions and activities are written to extend the learning and understanding of the material presented in the chapter. By completing the questions and activities, students will gain a deeper understanding of the breadth and depth of the health promotion field. All references used in each chapter are at the end, and students are encouraged to seek out these articles, book chapters, and books for additional information.

My goal for this textbook is to enhance the academic preparation of students who are pursuing degrees in health promotion, public health, health education, and other degrees that address or affect the health status of individuals, communities, and societies nationally as well as around the world. Although this textbook focuses on behaviors, trends, and resources in the United States to promote health, many of them are applicable to cultures and settings around the world. There is a universal desire to live a healthful life, and this desire can be found in people of every age, gender, race, and ethnicity.

The book provides a foundation of knowledge for the health promotion professional. Many students are excited to learn such a field exists and ask where they can begin. My response is always with themselves! Being a role model and learning to practice what health promotion professionals teach is a great starting point. I do not expect that you will set a perfect example of health every day, but by practicing health-promoting behaviors, you will personally experience the process and the benefits and become healthy as a result.

An instructor’s supplement is available at www.josseybass.com/go/snelling. Additional materials such as videos, podcasts, and readings can be found at www.josseybasspublichealth.com. Comments about this book are invited and can be sent to publichealth@wiley.com.

Acknowledgments

I would like to first thank all of the contributing authors of this book whose expertise in their respective areas has enhanced the content in this book. Many of the contributing authors have spent time at American University, and the health promotion programs have been enriched as a result of their work. Also, I would like to thank all the faculty, staff, and students in the Department of Health Studies at American University for their encouragement and support along this journey.

I would also like to thank Wiley for producing this book with me. The entire team has been valuable in making this a reality.

Finally, this book is dedicated to my family, who inspire me to make a difference in people’s lives through my work. My husband, Roger; my children, Trevor, Anastasia, and Amelia;

my parents, John and Amelia Mustone; my siblings, John, Lisa, Paul, Mary Ellen, and Jessica; and my extended Mustone and Snelling family members. May we all live a life full of love, happiness, and good health!

To laugh often and much; to win the respect of intelligent people and the affection of children; to earn the appreciation of honest critics and endure the betrayal of false friends; to appreciate beauty; to find the best in others; to leave the world a bit better, whether by a healthy child, a garden patch or a redeemed social condition; to know even one life has breathed easier because you have lived. This is to have succeeded.

Ralph Waldo Emerson

PREFACE TO SECOND EDITION

Much has changed since the first edition of this book was published and more than ever, individuals, communities, and society, we need health promotion activities, programs, and policies to improve the quality of health for all. The COVID-19 pandemic, a once-in-a-century event, landed in the United States in 2020 and forced universal lockdown for most Americans. The term lockdown has brought on a whole new meaning to us and one that people do not wish to live through again. There are many key takeaways that will be studied for years to come. One outcome is that over a million people in the US alone died from COVID, and those who had pre-existing conditions suffered the most.

Related to health promotion, it is clear that promoting health holistically is evolving and many of the contributors have updated the chapters to reflect these experiences. The pandemic also shone a light on the health disparities that have been always existed but were only exacerbated as a result of the pandemic. The chapters in the book begin the discussion of issues around health disparities and innovative programs being implemented in communities to provide tailored programming to meet people in their own communities. Community engagement that leads to community-driven programs will be the transformation necessary to successfully address health disparities. Creating a society where health is attainable in every home, school, worksite, and community will take creative policy and program leaders who are ready to make a difference in this changing world.

Anastasia Snelling
September 2023

