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# Editorial: International perspectives on healthy settings: critical reflections, innovations and new directions

The settings approach to health promotion is widely understood to have developed in the 1980s, introduced by the Ottawa Charter (1), which stated that:

> "Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love." (pp.3-4)

As the body of literature has grown over time, there has been a growing consensus that the settings approach reflects an holistic and socio-ecological model of health; a salutogenic orientation; a systems perspective; an appreciation of the complex interaction between structure and agency; and a concern to draw on organisational development and related theories (2).

Fast-forwarding 30 years, the approach has clearly taken root and flourished – and the papers in this supplement issue of *Global Health Promotion* provide rich insights into how health promoting settings have been envisioned, created and sustained, both in Taiwan and around the world. In this editorial, I consider the international papers, which span a diversity of settings including cities, universities, prisons and sports clubs.

Focusing on universities, both Suarez Reyes and Van den Broucke (3) and Newton, Dooris and Wills(4) suggest that higher education institutions are important settings not only because they represent contexts populated by large numbers of students and staff, but also because they play a fundamental role in shaping society and generate graduates who will be tomorrow's decision-makers. The former presents the a systematic review exploring how the approach has been implemented in culturally different contexts, whereas the latter draws on instrumental case study research in two UK higher education institutions to explore how the concept of a healthy university has been operationalised.

Baybutt and Chemlal (5) explore the concept of a health promoting prison, noting that this setting offers a valuable opportunity to tackle health inequalities and social exclusion through investing in the health of disadvantaged and marginalised populations. Reporting on doctoral research and informed by English and French experiences using horticulture and nature-oriented interventions, their paper highlights the potential to achieve positive health and justice impacts. Shifting the lens to a less formal setting, Kokko and colleagues (6) focus on health promoting sports clubs, reviewing international research and drawing together findings informed by examples from Australia, Belgium, Finland, Ireland and Sweden. They identify two key research themes: activity-related research, concerned with investment in health promotion policy and practice by sports clubs and/or national sports organisations; and networking-related research, concerned to forge wider partnerships.

In their commentary, Rice and Hancock (7) broaden the focus to consider cities. They examine urban settings as places of equitable and sustainable action before exploring the implications for governance – calling for local government leadership balanced by an expanded vision of participatory and collaborative processes. Patrick, Dooris and Poland (8) continue this focus on settlements, but turn their attention to two dynamic yet contrasting movements. Having outlined the urgent challenges of ecological degradation, climate change and resource depletion that face humanity and the planet – and questioned the degree to which health promotion has meaningfully engaged with these issues – they compare Healthy Cities and the Transition movement and conclude by proposing ways forward.

As well as presenting tangible examples of innovative action, these articles and commentaries explore a range of themes and challenges that resonate with the original concept and its subsequent evolution (2, 9-13) and highlight potential new developments for health promoting settings.

Firstly, a number of the papers highlight the importance of practice and research moving beyond the 'generic' settings approach and taking into account the particular culture and context of a specific setting and focusing on that setting's core business. Suarez Reyes and Van den Broucke (3) suggest

that few health promoting university programmes have been tailored to take account of deep cultural factors such as history, religion and social context; Baybutt and Chemlal (5) argue that effective application of a whole system approach within the justice context requires a health promoting prison to be safe, secure and reforming and underpinned by a commitment to human rights, respect and decency; and Kokko et al (6) contend that health promoting sports clubs must use the 'language of sport' to ensure maximum engagement and traction and that future research must be more fully grounded in the culture of sports clubs, drawing on implementation science to deepen understanding of motivations, challenges and potentials and thus enhance delivery.

Secondly, there is a focus on the centrality of adopting a truly 'whole setting' approach that prioritises positive wellbeing, alongside an appreciation of the challenges involved in embracing complexity and moving beyond fragmented and linear thinking. As the starting point for their systematic review, Suarez Reyes and Van den Broucke (3) emphasise a conceptual understanding of health promoting universities that includes a focus on the improvement of health and wellbeing for the entire university community; Newton, Dooris and Wills (4) conclude that an appreciation of the complex connections and synergies between component parts is essential if 'salutogenic' health and wellbeing is to infuse a university and be viewed as a valued means of maximising its performance – yet also note that the scale and complex organisational structure of higher education often mitigate against a whole university perspective; and Baybutt and Chemlal (5) – similarly emphasising the centrality of salutogenesis – argue that the implementation of health promoting prisons requires multiple parts of the prison system to be engaged in a process of change and that, whilst challenging, evaluation must seek to engage with complexity and understand why and how whole system approach adds value. Integral to this 'whole setting' focus is the recognition that settings represent both physical places and social spaces, a point highlighted by Rice and Hancock (7).

Thirdly, echoing earlier calls for a joined-up approach (9), there is an appreciation of the value of connecting between settings, both conceptually and practically. Baybutt and Chemlal (5) emphasise the importance of addressing multiple health and social issues across the pathways of the wider criminal justice system before, during and after prison and suggest that the development of effective partnerships across public, private and voluntary sector agencies will be key to delivering a joined-up, whole system approach for health and justice; Kokko et al (6) highlight the necessity of forging effective partnerships between sports clubs and other settings such as homes, communities and schools; Patrick, Dooris and Poland (8) reflect on how the Transition movement has broadened beyond its initial focus on towns to embrace a range of place-based and organisational settings such as cities, neighbourhoods and universities; and Rice and Hancock (7: x) suggest that effective action to address current and future challenges requires local action in the settings where people lead their lives – with cities providing "the overarching setting and context for this by including their homes, schools and universities, workplaces, hospitals, and communities."

Fourthly, there is a realisation that the settings approach, and health promotion more widely, must forge connections with parallel agendas if it is to remain relevant in the context of 21st century challenges and truly radical (addressing the roots of these challenges). Rice and Hancock (7) focus on ecological sustainability and social equity, exploring how urban settings can implement appropriate governance arrangements to ensure equitable and sustainable action – and encouraging networks to explicitly make links; Patrick, Dooris and Poland (8) highlight the importance of engaging with both social and environmental justice and examine how Healthy Cities and the Transition movement could strengthen their focus on co-benefits, achieving 'win-wins' for public health, carbon reduction and ecological wellbeing; Baybutt and Chemlal (5) explore the interconnections between nature, health and sustainability and emphasise the importance of linking health, justice and social inclusion; and Suarez Reyes and Van den Broucke (3) and Newton, Dooris and Wills (4) suggest that the health promoting universities approach must focus on sustainability within and beyond the campus.

In conclusion, I am confident that these articles and commentaries will provide those working in health promotion and public health with valuable information and innovative perspectives on health

promoting settings practice and research around the world – as well as signposting new directions and priorities. I would like to thank the authors for their contributions, the reviewers for their valuable input and the International Union for Health Promotion and Education and the Health Promotion Administration of the Taiwan Ministry of Health and Welfare for making this supplement issue possible.

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