

Who benefits from the professionalization of health promotion?

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To the editor:

In 2007, Health Promotion Ontario (HPO) began working to advance the “profession” of health promotion (HP) in Canada through development of national competencies for health promoters. Their work was continued by the Pan-Canadian Network for Health Promoter Competencies¹ (“the Network”). Funded by the Public Health Agency of Canada, the Network aimed to address (1) the recommendation made by the Canadian Joint Task Group on Public Health Human Resources² for function-specific competencies (including “HP Specialists”); and (2) the marginalization health promoters face in practice. The current health promoter competencies were released in November 2015,¹ following a series of literature reviews and practitioner consultations.

This is admirable work, done by passionate, knowledgeable individuals. I echo their desire to advance HP in Canada and that greater appreciation for health promoters is warranted. However, their conceptualization of HP as a profession will hinder the integration of HP approaches across all areas of public health. This is a lesson we must learn from similar efforts in the UK. Recounting the evolution of HP in the United Kingdom, Orme and colleagues³ report that at one point “health promotion was essentially torn between following a narrow professionalization agenda, thereby becoming less effective, or pursuing its goal of developing effective partnerships and practices, thereby losing its professional status.”^{3,p.417} HP in Canada may be at a similar crossroads.

McQueen and Kickbusch report HP “has long sought to define itself, and this has been an admirable, if futile, pursuit.”^{4,p.1} As the “new kid on the block,” it is understandable that health promoters desire professionalization given that established

(and mostly regulated) professions comprise the bulk of the public health workforce. In fact, HPO includes the term “profession” in their citation of the World Health Organization’s definition of HP (even though the word is absent from the actual definition).⁵ From reviewing the available materials that have informed the Network’s activities, I am concerned that the professionalization of HP is occurring without thoughtful consideration of potential unintended negative consequences—namely, that the more HP is professionalized, the less it will be integrated across all areas of public health practice. If the professionalization of HP advances, I predict it will benefit a small group of health promoters at the expense of many.

Health promoters, their public health colleagues and the Canadian public are best served by improving the HP aspects of the Core Competencies for Public Health in Canada. We need to broaden these competencies for all, not create distinct ones for health promoters. “Health promotion is not a new and separate discipline, but a necessary and timely reconsideration of public health.”^{6,p.3}

Sincerely,

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