Fostering innovation in health promotion research: the critical role of the IUHPE

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The International Union for Health Promotion and Education (IUHPE) is the only non-governmental organisation (NGO) with a global membership of professionals, decision-makers, researchers and public health organisations involved in health promotion and health education. Its mission is to contribute to promoting health and health equity globally. One of its current strategic priorities is to support the development of health promotion systems (www.iuhpe.org).

Recent evolution in the field of health science has shown that a key element for a system’s capacity is a thriving research community, enjoying a sufficient level of resources and funding for the conduct of relevant studies that inform the definition of critical problems and systems’ responses to those problems. Essentially an action-oriented field, there are many indications that health promotion is the home of a global community of researchers that need to be better organised and mobilised. Indeed, the existence of scientific journals such as Health Promotion International and Global Health Promotion, dedicated to publishing original research results in health promotion; the creation of graduate-level training programs in health promotion research particularly at the PhD level; and the inauguration within the past 10 to 15 years of Academic chairs devoted to health promotion research and training, are all signs of the healthy development of a health promotion research community. Since 2011, the IUHPE has formalised its engagement for the development of a global network of health promotion researchers and research centres through the creation and support of a Global Working Group on Health Promotion Research. The long-term goals that this Global Working Group sets for itself are: (a) to contribute to building the theoretical foundations of health promotion; (b) to concretise IUHPE’s global leadership for convening researchers and strengthening support for health promotion research; (c) to contribute to the creation of a global network of health promotion research centres; and (d) to advocate for greater capacity and adequate funding mechanisms for health promotion research (1).

One element of the 2010–2013 work plan of the Global Working Group was to develop a supplement issue of Global Health Promotion about innovative research in health promotion. In September 2011, a guest editorial committee was launched; and two months later, a global call for abstracts was issued, inviting researchers to report on the theoretical, methodological and empirical innovations stemming from their research and relevant for health promotion. We hoped to publish original material, presenting innovative empirical or theoretical research on questions relevant to health promotion, which would illustrate the wide variety of studies relevant to health promotion. This issue of Global Health Promotion features the four research articles that were completed following this call for abstracts.

The guest editorial committee was quite thrilled by the enthusiastic response of the scientific community, because we received 35 abstracts from all parts of the world, and in the three official languages of the IUHPE (English, French and Spanish). Having in mind the need to compose a supplement issue, it was decided to limit to 12 the

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number of groups invited to submit a full version of their paper. Unfortunately, five of these groups were unable to complete their paper in time and only seven papers were finally sent to a group of reviewers especially recruited for this task. Blind peer-review is a strict and often harsh process. According to our reviewers, three papers did not meet the criteria we asked them to apply for their review, which were: (a) innovation in health promotion research; (b) valid methodology when applicable; (c) sound theoretical foundation when applicable; (d) evidence of capacity building for the field; and (e) quality and clarity of writing. Unfortunately, during this rigorous screening process we lost papers submitted in French and in Spanish, as well as papers originating from low- and middle-income countries. We worked through the summer and part of the fall of 2012 with the four successful groups of authors to help improve the quality of their papers.

Today, we are proud to introduce four papers to the readers of Global Health Promotion. The four papers that compose our collection provide excellent examples of innovations in health promotion research: there is a paper from Montreal, Canada; one from Bergen, Norway; and two from Queensland, Australia. Shareck and colleagues (2) report on a model for developing setting-based interventions to promote health equity, based on a synthetic review of the literature. Mittelmark and Bull (3) present a theoretical discussion of the concept model of positive health, based on a critical analysis of the work of Aaron Antonovsky. For her part, McPhail-Bell and her colleagues (4) critically examine the process and documents that helped prepare the 1986 Ottawa Health Promotion Conference, in which the Ottawa Charter for Health Promotion was adopted. Finally, Judd and Keleher (5) report on participatory action research that shows how evidence can be derived from practice to improve practice. Although the limited number of papers and participating researchers involved in this collection precludes us from drawing firm conclusions about what constitutes innovation in health promotion research, we also publish a commentary that identifies some salient dimensions for innovation in health promotion research (6).

It is somehow disappointing that only a very small number of papers made it to the end of the process initiated by our call for abstracts. We expected that a greater number of researchers, representing a wider range of disciplines relevant for health promotion, would be interested in participating in this project, as we believe that many more researchers than those who self-identified for this effort are conducting innovative studies that are relevant for the advancement of health promotion.

We are hopeful that this is only the beginning of the IUHPE initiative to mobilise and link together researchers whose work is critical for health promotion, and that the collection of studies presented in the issue will trigger those researchers’ interest in joining our network. We are firmly committed to developing the capacity for innovative research in health promotion and we believe that this can only be done through reaching out to colleagues in all relevant disciplines and inviting them to share their work.

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