

## **Keeping up to date - the eighteenth edition**

This summary of recent health promotion literature is intended to help:

- increase health promoters' access to the health promotion literature;
- increase health promoters' awareness of some of the current thinking and latest research findings in the field;
- increase health promoters' use of this information in practice.

*Keeping Up to Date* is produced four times a year. Assistance with accessing articles in journals/periodicals should be available through university, polytech, DHB or local libraries. However if you have difficulty accessing any of the papers, contact the Forum and we can point you in the right direction.

## **Contents**

Youth gambling problems: A public health perspective .....	1
Healthy eating, activity and obesity prevention: a qualitative study of parent and child perceptions in Australia .....	2
Oranga Kaumātua: perceptions of health in older Māori people .....	2
Alcohol brands in young peoples' everyday lives: new developments in marketing. ....	3
Whither health promotion events? A judicial approach to evidence .....	3
Food marketing to children in the context of a marketing maelstrom .....	4
The Bangkok Conference: steering countries to build national capacity for health promotion. ....	4

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**Title** Youth gambling problems: A public health perspective

**Author(s)** Carmen Messerlian, Jeffrey Derevensky and Rina Gupta, International Centre for Youth Gambling Problems and High Risk Behaviours, McGill University, Montreal.

**Context** Adolescents and young adults are increasingly exposed to gambling and associated problems. There is a lack of prevention and awareness programmes for them.

**Overview** Internationally, underage youth are exposed and succumbing to widespread availability of regulated and unregulated gambling. The lure of excitement, entertainment and financial freedom is particularly attractive to young people, who are vulnerable to risks and negative consequences including strained relationships, delinquency, criminal behaviour, poor academic performance, alcohol and other substance use problems, depression and suicide. A Youth Gambling Risk Prevention Model illustrates a continuum of gambling risk; primary, secondary, tertiary prevention intervention points; related prevention objectives and recommended health promotion strategies. The emerging field of youth gambling could use the considerable literature and prevention initiatives on adolescent alcohol and substance use. A Framework for Action is presented to guide public health action in the area of youth gambling. It is based on the Ottawa Charter's five pillars of health promotion, the foundation upon which the four public health goals relating to gambling can be achieved. These are denormalisation, prevention, protection and harm reduction. A table summarises recommended actions for each of the Ottawa Charter's 'five pillars.' A public health approach incorporates a multi-dimensional perspective, recognizes the individual and social determinants, draws upon health promotion principles and applies population-based theory. It is a proactive approach to addressing youth gambling.

**Comments** Very good, comprehensive overview of a public health approach. The model and framework are integrated and detailed. Fairly easy to read.

**Source** Health Promotion International, 2005, Vol 20, (1), pp 69-79

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**Title** **Healthy eating, activity and obesity prevention: a qualitative study of parent and child perceptions in Australia**

**Author(s)** K Hesketh, E Waters, J Green, L Salmon and J Williams, Centre for Community Child Health, University of Melbourne and Royal Children's Hospital, Victoria

**Context** Health promotion programmes to help children affected by obesity will be more effective if the views and understanding of children and their parents are incorporated.

**Overview** The study aimed to find out child and parent views on social and environmental barriers to healthy eating, physical activity and child obesity prevention programmes and appropriate modes of delivery. Children aged 7-8 and 10-11 from three demographically diverse schools in Victoria participated in focus groups. Activities included prioritising photographs of healthy and unhealthy foods and sorting photos of different types of physical activities. Parent focus groups discussed why was obesity in young people becoming significant, what roles did schools, parents and communities have and what could be done to encourage healthier environments and behaviours? The discussion combines the results and is illustrated with quotes. Themes include information and awareness about healthy/unhealthy food and exercise; contradiction between knowledge and behaviour; lifestyle balance re healthy/unhealthy foods; local environment role; barriers to a healthy lifestyle (eg unsafe roads, money, increasing fast food outlets), contradictory messages and myths, roles of the school and family, and timing and content of prevention strategies for childhood obesity. The school is seen as a stable setting for intervention strategies. Prevention strategies involving parents as well as children have greater likelihood of success. Concurrent and inclusive strategies will be needed across several settings to ensure consistent messages are relayed to children and parents.

**Comments** Fairly easy to read study. The quotes and discussion give interesting insights into children's and parents' beliefs and views to help inform programme planning.

**Source** Health Promotion International, 2005, Vol 20(1) pp 19 - 26.

**Title** **Oranga Kaumātua: perceptions of health in older Māori people**

**Author(s)** John Waldon, Te Pūmanawa Hauora, Massey University, Palmerston North

**Context** Oranga Kaumātua is a study considering the health and wellbeing of 400 Māori people aged 60 years and over who are important to contemporary Māori society.

**Overview** The study aimed to find out about the economic circumstances, health status, disability levels for older Māori and identify policy implications. The sample selection was biased towards older Māori more likely to participate in traditional or customary Māori society. The kaumātua were interviewed face to face by bilingual interviewers. Findings include discussion of Te Aō Māori - cultural identity, roles and demands; whānau roles and interaction; attitudes to aging; income; planning for retirement; self-perceived health status, and health risks and preventative care. Kaumātua presented an optimistic assessment of their health status. Positive views of aging were reported, with active and valued contributions at both whānau and community levels in leadership roles and roles of carrying their culture within their communities. Some felt burdened by the responsibilities that increase with age and were worried about income. The roles they are expected to undertake are both a risk and benefit to their health and wellbeing. Wide cross-sectoral planning needs to guarantee older Māori a positive place in society and reduce the impact of age-related disabilities. Older Māori are a taonga to all. The risk to the health and wellbeing of Māori society is the premature loss of kaumātua. Preventative strategies must take a broader approach and account for the social needs of older Māori.

**Comments** Study provides important information to support the health and aspirations of older Māori and their roles in contemporary Māori society. Easy to read, some tables.

**Source** Social Policy Journal of New Zealand, 2004, Issue 23, December, pp 167-180.

<p><b>Title</b> Alcohol brands in young peoples' everyday lives: new developments in marketing.</p> <p><b>Author(s)</b> Sally Casswell, Centre for Social and Health Outcomes Research and Evaluation (SHORE), Massey University, Auckland.</p> <p><b>Context</b> New developments in alcohol marketing are particularly important for young people, because of their use of new technology and the role alcohol brands play in their lives.</p> <p><b>Overview</b> The likely impact of marketing on young people should be considered in the context of other influences, including the physical and economic environment, access and price of alcohol, increasing exposure to mass media and marketing of consumer goods and decline in influence of family, community and nation state. Alcohol brand marketing uses many elements of youth culture including street and popular media, internet use, email and texting. This is relatively invisible marketing that policy makers may not be aware of or understand. A key function of marketing for industry players is encouraging and maintaining new drinkers. The youth sector is important because heavier drinking is concentrated in the late teenage and young adult years. Indirect functions may include positively influencing social norms about alcohol. In turn this affects the likely impact of health promotion activities and government willingness to impose controls. Alcohol marketing is a policy area urgently needing new thinking and new research to meet the current technological and cultural contexts in which alcohol is being marketed to youth. A new policy framework that considers the impact of alcohol advertising on the most vulnerable, especially younger drinkers, is needed along with a global level response to new trans-national marketing opportunities provided by internet and satellite communications.</p> <p><b>Comments</b> Draws attention to the urgent need for sophisticated understanding and responses to counter the sophistication of alcohol industry marketing. Straightforward to read.</p> <p><b>Source</b> Alcohol &amp; Alcoholism, 2004 Vol 39(6), pp 471-476.</p>	<p><b>Title</b> Whither health promotion events? A judicial approach to evidence</p> <p><b>Author(s)</b> Sandy Whitelaw, University of Glasgow, and Jonathan Watson, Department of Epidemiology and Public Health, University of Nottingham</p> <p><b>Context</b> Reviews the use of and evidence for 'health promotion events' such as No Smoking Day, World AIDS Day and Scottish Mental Health Week.</p> <p><b>Overview</b> Health events such as No Smoking Day have proliferated despite periodic unease about their effectiveness. An appraisal of the case for and against undertook a literature review using a judicial approach, defined as 'assembling sufficient evidence to lead to a confident course of action even though absolute proof is not available.'" Twenty-two health promotion professionals were interviewed on the use and value attached to health events. The review found there was an assumption the events must do something, even if at the modest level of raising public awareness. Most of those interviewed supported some events continuing, more for pragmatic reasons rather than for effectiveness in changing behaviour. The case against such events noted there was contrary evidence and a lack of high quality evaluative literature. The paper concludes there is some evidence that some of these events have some use within very specific assumptions and values. Health events continue to be initiated at the higher political levels on three specious principles – general faith in their effectiveness, fear of retreating from traditional activities and as a political cover – it looks like something's being done. Suggestions are made for selecting events that would contribute to a wider health promotion effort.</p> <p><b>Comments</b> Useful review to help decide is it worth putting lots of resources into a one day or week event and why do it? Readable.</p> <p><b>Source</b> Health Education Research, 2005, Vol 20, (2), pp 214-225.</p>
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<p><b>Title</b> Food marketing to children in the context of a marketing maelstrom</p> <p><b>Author(s)</b> Susan E Linn, Media Center, Judge Baker Childrens' Centre, Harvard University.</p> <p><b>Context</b> Childhood obesity is a major public health problem in the United States, with children targeted by marketing for foods high in sugar, fat, salt and calories.</p> <p><b>Overview</b> The article looks at the nature, depth and breadth of food marketing aimed at children in the US. It occurs in the context of other marketing messages including advertising for toys, clothing, accessories, movies, television programmes and video games and uses websites, children's computer and video games and books. Other methods include brand licences where an image or logo is leased or used, product placement in children's movies, and links or tie ins made between television programmes and food products on supermarket shelves featuring the television characters. These are designed to continually remind and encourage children to select those products. Children's requests for food products, misperceptions about nutrition and increased calorific intake have been linked to television advertising. Given their particular vulnerability to marketing, it is in children's best interest not to have marketing aimed at them at all. The US regulates marketing to children less than most other industrial democracies. The public health community needs to educate parents about links between commercial culture and childhood obesity. Several other counter measures are suggested. Individual parents should not have to bear the responsibility of shielding their children from the harmful effects of a \$15 billion industry. Marketing to children is a societal issue, not just a familial one.</p> <p><b>Comments</b> Easy to read review with examples of marketing and suggestions for action. The point about restricting marketing to children because of their vulnerability has also been made re young people and alcohol advertising (see Casswell this edition).</p> <p><b>Source</b> Journal of Public Health Policy, 2004, Vol 25 (3/4) pp 367-378.</p>	<p><b>Title</b> The Bangkok Conference: steering countries to build national capacity for health promotion.</p> <p><b>Author(s)</b> John Catford, Editor in Chief, Health Promotion International Journal</p> <p><b>Context</b> The World Health Organisation in partnership with the Royal Government of Thailand is organising the 6<sup>th</sup> Global Conference on Health Promotion in Bangkok on 7-11 August 2005.</p> <p><b>Overview</b> What is clear from history is any rapidly growing movement or organization needs to re-invigorate its purpose for existence, and build its capacity for success. This is vital if health promotion is to be truly a response to both national and global challenges. The Bangkok Conference theme is 'Policy and Partnership for Action: Addressing the Determinants of Health'. It will develop and endorse the Bangkok Charter for Health Promotion, updating the Ottawa Charter for contemporary times and issues. In preparation for the Conference, WHO has initiated a mapping exercise of countries' national capacity for health promotion. Eight broad domains are proposed – national policies and plans; national leadership; joined up government; programme delivery; national partnerships; professional development; performance monitoring and sustainable financing. These are outlined in detail. The tool can be presented diagrammatically using the eight points of a compass or spokes of a wheel. The 'National Health Promotion Capacity Wheel' could be described as the basic tool to help steer countries in building capacity to promote health in the future. The Bangkok Conference should critically examine its value and if it can assist global progress. A final challenge will be the need to develop a set of consistent measurement criteria.</p> <p><b>Comments</b> The eight domains mapping national capacity for health promotion will be a useful approach in New Zealand to identifying progress and gaps. Reasonable to read.</p> <p><b>Source</b> Health Promotion International, 2005, Vol 20 (1), pp 1- 6.</p>
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