

Newsletter

No 12 - November 1998

Health
Promoting
Hospitals

An International
Network Initiated
by the
WHO Regional
Office for Europe

Editorial

Dear readers, in the last Newsletter issue we were able to announce our newly set-up website (<http://www.univie.ac.at/hph/>) which proved to be attractive to a lot of users who are interested in Health Promoting Hospitals. We would like to invite you to make further use of our internet services (e.g. downloading of HPH material, information on current events like the next International Conference). Please let us also know if you have any suggestions for improvement or any information you might like us to include - we would be happy to do so. We are also happy to inform you that the preparations for the 7th International Conference on HPH, «Health Promotion and Quality: Challenges and Opportunities for Health Promoting Hospitals», Swansea, Wales, April 21-23, 1999, are well under way. The conference will highlight quality issues that are of interest to HPH, and the role Health Promoting Hospitals can play in healthy aging; we expect very interesting plenary and paper sessions and workshops on these issues. We would like to invite everybody who is interested in hospital development to visit the conference. Please be also informed that the Consensus Program of PHARE (a program of the European Union) will be sponsoring CEE delegates who want to attend the Conference (see page 7 for further details). We hope that as many people as possible will make use of this opportunity.

In this Newsletter edition we will present a first analysis of HPH community projects, derived from the HPH database, which proves to be a very valuable instrument for research on HPH. Further analyses will follow in coming newsletter editions.

We wish you a merry Christmas and a happy New Year!

Jürgen M. Pelikan, Hubert Lobnig,
Christina Dietscher

Open Care '98

The Open Care Conference in Oulu, Finland, provided opportunities to discuss concepts of integrated care, involving both hospital and home care.

The third Open Care Conference, Open Care '98, was held in Oulu, Finland, from September 23 -25, 1998, with «Health Promotion - A link Between Hospital and Open Care» as main topic. 170 delegates from 16 countries were present. The rather low number of Finnish delegates was a slight disappointment for the organisers (this was due to two other conferences which were held in Finland at the same time).

Open Care refers to a term that covers not only the integration of primary and secondary care, social and elderly care but also other aspects in society that contribute to the promotion of health and independent living of all its members. A society for all, a way of thinking that is also adopted by WHO. Therefore the overall themes of the congress addressed many different aspects of open care and health promotion.

Interestingly, the opening and the closing lectures by Dr. Mila Garcia-Barbero and Professor Johannes Vang, respectively, appealed for a better integration of services also from the point of view of health promotion. There is an obvious need for new thinking and new alliances.

The first conference day was dedicated to European perspectives on the «hospital at home»-topic. This subject was highlighted from different points of view (eg. economy, quality and continuity of care). The other, more technological topic that was discussed on the first day dealt with solutions for an accessible environment and society.

The second day included, among other topics, presentations of different Finnish models of HPH.

Ethical perspectives on different ap-

proaches towards care have been emphasised already at previous Open Care conferences, and the 1998 conference was no exception. Discussions focused especially on the rights of persons with disabilities in Western and transition societies. Health promotion in different health care settings and at different health care levels was also discussed in this context, as well as the related costs.

Care for elderly people is facing similar challenges in all developed countries. There seems to be a need of finding new approaches to support independent living at home. The impacts on Gerontechnology and other views were discussed in this context.

The subject of financing health care services is of major importance in many countries throughout the world, due to the increasing economic pressure. Thus, views on prioritisation of health care services were discussed as one of

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Conference reports

the main topics of the last conference day. According to surveys, disease prevention and health promotion are, however, highly valued among laymen, health care professionals and political decision makers.

Finally, it is worth mentioning that a group of participants who went on a post-conference tour to Kuusamo were awarded with diplomas for rapid shooting (a special type of wild water rafting). Hurray for the brave ones.

*Jarmo Karpakka
HPH-coordinator, Finland*

International Health Promotion Conference, Cardiff 23-25 Sept. 1998

- l «Working together for better health» was a big success. Approaches of health promotion in different settings, as well as the use of new technologies for health promotion, were amongst the central issues.

More than 1,000 delegates from 49 countries attended the *Working Together for Better Health* Conference, organised by Health Promotion Wales with the support of the World Health Organisation and European Commission. More than 300 presentations on a wide range of health issues were made. The key themes of the Conference were:

- l new approaches for a new millennium
- l enhancing health promotion by the effective use of global communications
- l effectiveness of health promotion activity
- l partnerships for health gain

Issues under discussion included settings for health promotion, such as hospitals, schools and workplaces, smoking, drugs prevention, health inequalities. Also, the potential role of new technologies, such as the Internet, in spreading health promotion mes-

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sages.

Themes that emerged strongly were the need for more and better training to produce the highly skilled people needed to tackle the challenges ahead, and the considerable scope that exists for greater international co-operation.

The contribution to be made by Health Promoting Hospitals was demonstrated at the Conference in two breakout sessions, where papers were presented. One of these sessions was chaired by Hubert Lobnig from the International Co-ordinating Centre for HPH. There was also an HPH exhibition stand with access to the HPH website. There were many enquiries about the HPH concept generally, and about the forthcoming 1999 International HPH Conference.

In his concluding speech, Dr Erio Ziglio, Regional Adviser with the World Health Organisation in Copenhagen, told the Cardiff Conference that health promotion should be at the heart of social and economic development.

He proposed that the current World Health Organisation definition of health promotion - «the process of enabling people to increase control over, and to improve, their health - should be broadened to include a community perspective». The definition would then read: «The process of enabling individuals and communities to increase control over the determinants of health and thereby improve their health».

Brenda Stephens, Cardiff

The Polish National Network of Health Promoting Hospitals

- l The Polish Network of HPH is still growing after 5 years of existence. Currently, the network focuses on the role of health promotion in facing health hazards.

The Polish National Network of HPH had already its 5th National Conference on Health Promoting Hospitals: The Conference took place from September 24 to 26, 1998, in Cracow. The main

topic of the Conference was «How health promotion is facing current health hazards».

The Conference was organised in four consecutive sessions:

Session I - *Health behaviours and cardiovascular diseases* - focussed on CVDs risk factors and forms of CVDs prevention, mainly through education of patients suffering from CVDs, particularly while hospitalised.

Session II - *Control of dependencies* - concentrated on tobacco control with stress on anti-tobacco education.

Session III - *Health promotion and other health hazards* - dealt with habits of nutrition, as well as the role of health promotion in diabetes prevention and therapy. Within the framework of the session, the question of nurses' activity and their professional «burn out» issue, were discussed.

Session IV - *Nosocomial infections and ways of control* - indicated that this is still an important problem, due to difficulties in managing the process of prevention.

The Conference ended with a panel discussion titled «The influence of health promotion on the quality of health care in the view of changing hospital activities». Health care reforms that have just been implemented in Poland, together with the implementation of a universal health insurance system that is based on the contracting of health services, are expected to change the situation within hospital care. These changes, at least at the beginning, may result in a negative health impact, but on the other hand they might also influence health insurance funds to invest more resources in health promotion.

During the Conference, the Council of the Polish Network of HPH decided to welcome three new hospitals as members of the Network, increasing the total number of HPH Member Hospitals to 48. According to the Network Statutes, the representatives of the Polish HPH Member Hospitals elected the new Polish HPH Network authorities for another two years during their meeting. The elections produced no essential change in the network authorities; the old coordinator of the Network is still in his position, and the Co-

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ordinating Centre of the Polish Network of HPH is still located at the Department of Health Promotion of the National Centre for Health System Management, WHO Collaborating Centre for Health System Management, in Warsaw.

Jerzy B. Karski, Warsaw

Targets and progress of the Piedmont Regional Network of HPH in Italy

The Piedmont Regional Network of HPH is defining structures and strategies.

The 2nd National Conference of the Italian HPH Network took place in Torino on March 27, 1998. During the meeting, a number of ongoing activities were presented by the co-ordinators of 4 working groups that belong to the regional network.

Group 1: Relationship between hospital and local community/ Links between hospitals and local primary care activities

Personal Health Document
A booklet has been designed which allows the patient to collect all relevant health documents systematically; it can be examined and updated by every health professional who is concerned with the patient. In the experimental phase, the booklet will be used for diseases that require long-term treatment and involve several health professionals (e.g. diabetes and neoplasia).

Continuous treatment of patients in different settings (hospital and primary care services)

For the continuous treatment of patients, the co-operation between hospital staff, family doctors and community nurses is of utmost importance, especially concerning hospital admission and discharge. In order to guarantee full co-operation of the Family Doctors' Association (FIMMG) in the

implementation and realisation of the project, representatives of the association have been involved in setting up the project.

Information exchange between different health operators

Electronic links have been installed as a means for exchanging information between hospital staff and family doctors, and questionnaires have been designed in order to allow the assessment of the needs and problems in the field of communication. At the end of November, 1998, the final project document and a project plan will be presented. January 15, 1999 will be the official start of the project on the level of the local subgroups.

Group 2: Smoke free hospitals

A Local Organising Committee was set up in each participating institution; these local committees act as information centres within their hospitals, survey the progress of work and assess the results achieved.

Questionnaires have been disseminated both to health professionals and patients in every institution that participates in the project.

A poster exhibition on the natural history of smoking is being prepared. The exhibition will be shown in the participating institutions throughout the whole period of the project.

Group 3: Humanisation of the hospital service/Projects against psychosocial distress

The development of a «Welcome protocol», aiming at reducing the distress of patients who are confronted with the unfamiliar hospital structures, has been defined as first target of the working group. The working team agreed to use a common patient questionnaire in all the participating institutions; a similar one will be designed for hospital staff. These questionnaires aim at finding out about the perceived causes of distress for both patients and health professionals, more accurately than other information sources. Based on these question-

naires, protocols and training programmes for hospital staff will be designed in phase II of the project. The collection of questionnaires in all the participating institutions is scheduled for the end of November 1998. A different questionnaire will be prepared for evaluating admission procedures in emergency departments, as this specific setting produces a different psychosocial impact.

Group 4: Child abuse and violence against women.

In 1997, the «OIRM S. ANNA», a specialised Hospital, organised two seminars in order to raise attention for the problem of child abuse and violence against women. They were attended by two hundred staff members of the hospital. In May and June 1998, a training seminar on «Taking charge of abused children» was held at the emergency department of the Children's Hospital. Other health care institutions in the region could be interested in building an information and operative network for dealing with child abuse and violence against women.

Piero Zaina, Torino

News from the German Network of Health Promoting Hospitals

The German Network of HPH celebrated its 3rd anniversary by becoming a legal entity (association).

The German network has gone official: since September 30, 1998, the network is registered as a legal entity (association) at the district court of Essen, Germany, with the statutes that had been decided upon in 1996.

The 3rd national conference of the network that took place on October 29, 1998, was organised by the Committee of the German Network, the Regional Network Berlin-Brandenburg and the



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hospital Neu Fahrland (Dr. Koch, medical director) as local host of the conference. The conference was very well organised. More than 200 visitors participated in plenaries and workshops of high quality. The feed-back from conference visitors was very positive.

In the frame of the 3rd National Conference, the network committee was re-elected and consists now of Elimar Brandt (Berlin), Achim Budnik (Essen), Sister Canisia Corleis (Hildesheim), Prof. Klaus-Diethart Hüllemann (Prien), and Ms. Weyers (Krefeld). The next election of the network committee will take place in 1999.

The German Network has now 31 member hospitals and 5 associated members. It was decided that member hospitals of the German Network of HPH have also to be members of the newly registered association of the network. Only in exceptional cases, network membership will be possible without membership in the association.

*Klaus-Diethart Hüllemann,
Prien/Chiemsee*

Health Promoting Hospitals Slovakia

- | **Starting from 1997, the Slovak HPH-Network started its activities with a current focus on child health, respiratory and cardiovascular health.**

The HPH movement in Slovakia started in 1997. We were introduced to the ideas of the International Network during the 5th International Conference on HPH in Vienna, which we were able to attend thanks to the support of the PHARE project. The concept of Health Promoting Hospitals quickly spread around health care institutions in the country, and the Children's University Hospital in Bratislava joined the International Network of HPH already in 1997. This hospital became the leading institution for the program in our country. Gradually, other hospitals started

to join the national network - the Institute of Tuberculosis and Respiratory Diseases in Nitra and the Institute for Preventive and Clinical Medicine in Bratislava became members in 1998. The Children's Hospital organised a large number of programs for mothers and patients, seminars for nurses and doctors, and press conferences. First of all, the hospital promotes the importance of breast feeding and proper child nutrition. They have published some articles in magazines and scientific journals. During the last year they also presented their ideas on TV three times. This hospital also promotes the BFHI program (baby friendly hospitals), which was set up by UNICEF.

The Institute of Tuberculosis and Respiratory Diseases is specialised in the prevention and early treatment of tuberculosis and respiratory diseases.

The Institute for Preventive and Clinical Medicine - a research institution - is engaged in the preparation of clinical guidelines for the treatment of cardiovascular diseases. They are also coordinating clinical audits in this field and are active in environmental issues.

At present, all our members are busy preparing new projects concerning the prevention and protection of health. We are planning to extend our national network of HPH, from which we are going to choose the most active hospitals, who will then join the international network of HPH.

Zora Bruchacova, Bratislava

The HPH-Task Force on Health Promoting Mental Health Services (HPMHS)

- | **The newly founded task force on health promoting mental health services already could establish links to new partners.**

Taking up the increasing interest in health promoting psychiatric hospitals, a task force on health promotion in psychiatry and mental health care was founded at the 6th International

HPH Thematic Task Forces

Conference on HPH in Darmstadt (April 30-May 2, 1998), by 12 founding members from six European countries.

Dr. Berger, medical director of the Philippshospital Riedstadt, was chosen as the co-ordinator of the taskforce, and Rainer Paul, Co-ordinator of the HPH-Project Philippshospital, as his assistant.

Integrative Aspects of the HP Approach in the Mental Health Care Sector

Organisational/Institutional Integration

The diversity of the group of founding members (representatives of hospital administration and hospital owners as well as representatives of hospital and outpatient services) shows that not only hospitals are concerned with health promotion in psychiatry:

Mental health disorders require an integrated approach, since processes of disturbed mental health often affect longer periods of time, and acute and sub-acute phases of illness alternate with phases that are relatively free of symptoms. Health promotion in the mental health sector must therefore be oriented towards the needs of outpatient as well as semi-inpatient and inpatient services, as health promotion effects can only be achieved by effective co-operation between the settings the patient will encounter in the course of his «career». In this way, the settings approach of health promotion develops into a concept of interacting settings. The taskforce itself shall further promote co-operation amongst those mental health care institutions that see health promotion as the core principle of their work.

Theoretical-conceptual integration

Many competing concepts and theoretical frameworks are being used in the mental health care sector, a situation which has divided the professional community. Given the background of health promotion, it should be possible to integrate the biological, pharmacological, social, cognitive, behavioral, systemic, psycho-dynamic, social-

HPH Thematic Task Forces

psychiatric and community based approaches in a way that a dialogue between experts on these different approaches can be started.

Activities of the Taskforce

So far, the task force has started activities in four areas:

Creating Visibility:

- | Presentation at the Meeting of the German Society for Psychiatry, Psychotherapy and Neurology (DGPPN) in Essen, Germany, June 1998.
- | Conference session on health promotion in mental health services at the Congress of the World Association of Psychiatric Rehabilitation, Hamburg, May 1999.
- | Conference session on health promotion in mental health services at the 1st World Congress of Psychiatry, Hamburg, August 1999.

Recruiting potential partners

- | Spontaneous requests for information from partners in Austria, France, Germany, Italy, Poland and UK-Wales
- | Co-operation with the German-Polish Society on Mental Health
- | Contact with different psychiatric organisations in Germany and in the UK
- | First contacts with internationally operating pharmaceutical companies who are interested in concepts of health promotion in mental health services
- | Co-operation with the German Society for Psychiatry, Psychotherapy and Neurology (DGPPN)

Funding activities

According to WHO policies, the taskforce is not empowered to charge additional fees from members. For this reason we currently put our energy into establishing a sound financial foundation. We are actively exploring the interest of the international pharmacological industry to fund the HPMHS Taskforce.

Defining membership criteria for the HPMHS-Taskforce

Setting up membership criteria is a long-lasting enterprise. So far, we have concentrated on the question whether membership in the regional/national HPH networks should be regarded a precondition for participation in the taskforce. After talks with WHO-Euro in September this year it became clear that this should not be the case. On this basis, we are now able to go into further details. Members of the task force will have to join the National/Regional Networks.

Perspectives for the near future

Completion of the above-mentioned activities, which have a long-term perspective, depends upon the following tasks:

- | Preparation of an information brochure
- | Setting up an e-mail address
- | Analysis of recent publications on HP in psychiatry (editing of abstracts from the international HPH conferences with regard to models of good practice and useful concepts)
- | Analysis of HPH database
- | Setting up a database of persons/institutions interested in the HPMHS-Taskforce (link to HPH-database);
- | Working out basic principles: What is a Health Promoting Mental Health Service? Development of a practical and easy-to-use health promotion manual.

Future aims

The HPMHS Task Force is, amongst others, aiming at introducing a change of paradigm in psychiatric and mental health care: towards a model that will take into account the promotion and maintenance of the resources and potentials of the patient. Professionals should become active partners for the patients, insisting upon participation and with a view beyond the walls of the institution. All those who are interested in

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participative, health promoting mental health services are invited to join the taskforce. A workshop on HPMHS that will be held at the 7th International Conference on HPH in Swansea in April, 1999, will provide a good opportunity for new partners to join us.

Hartmut Berger, Rainer Paul, Riedstadt

The Standing Committee of the Hospitals of the European Union (HOPE) and HPH

- | **At the HOPE 1998 Annual General Assembly (Vienna, June 26, 1998) HPH presented its concept, experiences and future perspectives.**

In the last years, and intensive partnership was set up between the HPH network and HOPE, an important European NGO that involves national hospital associations or political bodies from all member states of the European Union as well as from Norway, Switzerland and Cyprus in a European hospital association. The strong link between HPH and HOPE was developed out of the common vision, that hospitals should not only be the centre of curative services but also offer their potential for health care and hospital reform. Common topics so far were centred on: patient orientation, quality improvement, outcome orientation, the hospital as a healthy workplace, the hospital as an ally for public health. Based on these conceptual links, HOPE is acting as co-organiser of the Annual International HPH Conferences since 1994, and Prof. Kris Schutyser, secretary general of HOPE, strongly contributed to the development of these conferences as member of the Scientific Committee as well as by presenting papers and by chairing conference sessions. HOPE was also an important European supporting partner in the EU-project «Development of a supranational network of Health Pro-



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Building Bridges

moting Hospitals» (1995-1996), which was carried out by the LBI (HPH Co-ordinating Centre).

The annual general assembly of HOPE, which was locally co-organised by the Austrian ministry of labour, health and social affairs, took place in Vienna in June 1998. In order to strengthen the partnership and to offer HPH the possibility to present its concept and experiences directly to the national delegates of HOPE, Prof. Schutyser invited the Co-ordinating Centre to organise a session at this assembly. The presentations which were chaired by Mr. Denis Doherty (president of HOPE) started with an introduction of the concept, strategies and experiences of the International Network of Health Promoting Hospitals (presentation by Prof. Jürgen Pelikan, LBI, Vienna). A second part focused in more detail on the approach, the practical implications, the sub-projects and the results of Areiteion Health Promoting Hospital, Athens, one of the European Pilot Hospitals (presentation by Dr. Nicos Arcadopoulos, Areiteion Hospital, Athens). Thirdly, the Irish Network of Health Promoting Hospitals and its successfully applied strategies for national networking and alliance building were presented by Ms. Anne O'Riordan, Co-ordinator of the Irish Network of Health Promoting Hospitals, Dublin.

The discussions that followed showed the great interest of the national HOPE delegates in HPH. However, critical remarks concerning the degree of innovation HPH can provide, were also mentioned. Some delegates remarked that most of the sub-projects in Health Promoting Hospitals were also done in other hospitals outside the HPH network (e.g. hospital hygiene) – so the question came up why these projects should be called «health promoting». Other critical questions focused on the topic of evaluation: What are the results of HPH, especially of comprehensive projects of hospital development, and how can they be measured?

HOPE confirmed its role as ally for strengthening health promotion in and by hospitals in Europe also in the future, and the HPH network was asked

also to co-operate with the national HOPE representatives by exchanging information and expertise and also by developing national HPH policies.

Hubert Lobnig, Vienna

The PWG and Health Promotion for Doctors

I The labour situation of young doctors is one of the key topics of the Permanent Working Group of European Junior Doctors (PWG). This makes PWG an important partner for HPH.

The Permanent Working Group of European Junior Doctors (PWG) is an organisation which advocates the interests of the doctors in training of 24 European countries in what concerns the medical profession and the various authorities of the European Union. Since 1976, the PWG has sought to actively intervene in the panorama of the medical profession in the European area with the objective of contributing to the improvement of the conditions and organisation of junior doctors' work and education.

Among the PWG's initial objectives were the improvement of relations between its member organisations, advocacy for the interests of European junior doctors, and overcoming the distance between junior doctors in the EU and those of other European countries. The similarities in experiences and problems that the junior doctors of different countries have to face became evident right from the beginning. In the initial years, much time was spent on gathering information and exchanging ideas, and thus identifying the major areas of interest to the PWG.

Among these is the issue of manpower, which rapidly proved to be the most pressing. Several studies were made and the medical profession became aware of the need for careful long term planning for doctors' future requirements.

Other important areas of interest to the PWG are postgraduate training, continuing medical education, the working conditions of doctors in training and the future of medical work.

With the development of its ideas and policies on these issues, the PWG has been able to effectively influence the policies of other European medical organisations, mainly those with which it has formal relations.

One of the issues which have recently been of great concern to the PWG is the organisation of work in hospitals and its influence on the working conditions of doctors, certainly one of the most important factors to be mentioned when discussing Health Promotion for Doctors. In September 1997, the PWG organised a Conference on Future Medical Work, in Cologne, where it presented its policy statement on the issue. With this policy statement, the PWG hopes to stimulate a debate on issues of importance to all doctors in Europe. A booklet containing the proceedings of this conference, as well as the policy statement, is available upon request from the PWG's Secretariat.

We had previously adopted policy statements and recommendations in the field of manpower and postgraduate medical training. This policy statement is aimed at establishing recommendations on the future of medical work with the objective of ensuring the change perceived for the beginning of the coming millennium.

Last April, during the 6th International Conference on Health Promoting Hospitals in Darmstadt, we had the opportunity of presenting and discussing some of our concerns regarding doctors' working conditions and their influence on doctors' health promotion. It is a fact that, over the last decades, we have witnessed great technological breakthroughs in medicine and the very fast development of the European systems of health care. These systems currently offer citizens an enormous variety of care with a development potential that was unimaginable until recently.

This progress, along with a series of factors which include ageing, migration and mobility, and the growing expecta-

Buildig Bridges

tions of patients, has led to a progressive increase of healthcare costs.

In most European countries, the economic needs which lead to the redistribution of resources are prejudicial for the working conditions of junior doctors. These working conditions are of vital importance for the practice of the profession with the desired quality.

In the lighth of these facts, we may be tempted to think that the existence of a conflict between economic efficacy and the quality of services and working conditions is inevitable. If we are to make this line of thought change, we must improve the quality of the services provided as well as the working conditions and, in order to maintain economic efficacy, we will have to develop and implement new management concepts and reorganise the traditional culture and structure of medical work which is usually so strict and inflexible.

For the years to come, and under the scope of our Future Medical Work Project, we will continue to address issues related to the reorganisation of work in hospitals fostering the promotion of health for both patients and doctors.

In this context, the PWG was recently invited by a number of international organisations involved in the field of health care to take part in a network partnership related to the organisation of work in hospitals. The similarities between this project and the interests that European Junior Doctors have in restructuring the medical profession, which is reflected in the ideas developed in the Future Medical Work Project, led us to join the above mentioned network. Therefore, the PWG is currently co-ordinating a number of studies that are being made in some member countries, related to the reorganisation of medical work and the relations of doctors to other health professionals.

The Handbook of Policy Statements, commemorating the PWG's 20 years of existence, is available upon request from the PWG's Secretariat. It is a comprehensive set of documents which convey a clear idea of the history of the organisation and is, like previous publications, yet another confirmation of

Special Issues

the PWG's capacity of intervention in what concerns the medical profession in the European area.

Eduardo F. Marques, Lisbon

The Consensus Program on co-operation in the field of social protection

CEE delegates to the 7th International Conference on HPH can get support from Consensus.

This is good news to our partners in Central and Eastern European countries: We are happy to announce that the Consensus Program, a EU program that supports co-operation in Europe in the field of social protection (sub-program of the PHARE program), will support participation of CEE delegates to the 7th International Conference on HPH. Interested persons from CEE countries (preferably representatives of organisations in the field of social protection) can contact their local Consensus contact person for further information. A list of Consensus contact persons is available at the LBI, at National/Regional Network Co-ordinators and at the LBI website.

Christina Dietscher, Vienna

Like Parent – Like Child

Hospitals have access to a wide population. This can also be used for parent information.

The Grand River Hospital in Kitchener, Ontario, Canada, received a grant to develop a parental instructor's model preventing the learning of violence as acceptable behaviour by children in their first few years of life.

Children learn a lot through the observation of significant adults in their life. Research indicates that parents are an

important influence on their children's behaviour, and that bad (or good) characteristics/patterns are passed on from generation to generation; hence, «like parent, like child».

Some abuse occurs because people (primarily males) lack the skills to resolve conflict and stress in a positive way, and resort to abuse. Then, if the problem is a lack of skills among men (which leads to abuse), one of the solutions will be to provide appropriate skills. When appropriate skills are witnessed by children (primarily male), this will provide a positive example of how things can be resolved in a constructive manner. Ultimately this will work towards the curbing of the generational nature of abuse behaviour. This is particularly important to families in a prenatal situation because the age of children from birth to five years is the most impressionable. The intent of the project between Grand River Hospital and the Childbirth Educators of Waterloo Region is to help expectant parents review their own ways of handling feelings of anger and frustration, and to identify ways of improving their own behaviours by learning the skills to deal with the stresses and early or new parenthood. Prenatal Instructors are in an ideal position to provide education about abuse and its prevention, and to screen for high risk cases.

A detailed prenatal instructor's guide was developed on issues of the generational nature of abuse and how the prenatal program can be used to reduce abusive behaviour. An information brochure for the expectant parents was developed with a self-check questionnaire for fathers and a separate one for mothers.

Feedback from the pilot initiated in November, 1997, to the present, indicates that most expectant parents have found both the information and brochure helpful. Couples liked the separate questionnaire for mom and dad. This pilot has been conducted in Waterloo Region, an area covering about 1,360 square kilo-meters with a population of 405,435 (1996). This region has experienced a population growth at a rate slightly higher than the rest of the province.



Health Promoting Hospitals

An International Network Initiated by the WHO Regional Office for Europe

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Special Issues

This parental modelling program has the potential to be introduced into different groups, ante-natal programs and day centres.

Ted Mavor, Ontario

HPH Community Programs - Results from the HPH Database

I Do HPH community projects show a trend towards re-orienting health services?

Health Promoting Hospitals are active in at least four different areas: they develop programs for hospital patients, hospital staff, programs to improve the hospital as an organisation ("the learning organisation"), and last not least programs for their communities. In this article, we want to provide some results of an analysis of HPH community projects that was done by using the HPH database.

Out of the 347 subprojects from 18 countries who have member hospitals in the International Network of HPH, 148 (that is 43%) also target community issues. This high percentage shows that Health Promoting Hospitals are well aware of the fact that effective health promotion has much to do about co-operation and alliance-building. It also shows that HPH really is about re-orienting health services: more than two fifths of the projects that are done within the network target the co-operation between the hospital and its community and thus show a further development from classic in-patient-staff-relation in hospitals towards a wider health care perspective.

Most of the projects aim at providing general health information for the public (47 projects or 32%). But an almost equal number of projects (46 projects or 31%) aim at improving communication structures between hospital and community. The other projects deal with specific issues: nutrition (35 projects or 24%), tobacco (34 projects or 23%), and psycho-social stress (24 projects or 16%).

The most frequently applied methods in these projects include health promotion services outside the hospital (81 projects or 55%), training for professionals outside the hospital (57 projects or 39%), building healthy alliances (56 projects or 38%), contributing to health fairs/health action days (52 projects or 35%), and policy development (33 projects or 22%).

It is only natural that HPH community projects involve more partners from outside the clinic than projects that are done in the other areas of HPH: Whereas health professionals outside the clinic are involved in only 34% of all HPH projects, the percentage increases to 48% in HPH community projects. As for co-operation with other hospitals, there is an increase from 33% to 43%. It is a bit more remarkable that the percentage of medical hospital doctors who are involved in community projects is also higher than in the total number of projects (an increase from 55% to 62%). This is due to the fact that medical doctors can play an expert role in community projects, which seems to attract their interest.

*Christina Dietscher, Thomas Stidl,
Vienna*

Announcements

Announcements

National Conference on Health Promotion and Prevention, January 14-15, 1999, National Sports Centre Papendal (near Arnhem), The Netherlands

An initiative by the Netherlands Institute for Health Promotion and Disease Prevention (NIGZ) and the Dutch Society for Prevention and Health Education. Keynote lecturers are: Prof. Keith Tones, Metropolitan University of Leeds: How to audit health promotion; Prof. E.M. Rogers, University of New Mexico, USA: Successful strategies for implementation. There will be several workshops, among others «Health Promoting Hospitals» by the NIGZ and the Consumer and Safety Institute. For further information, please contact Mrs. Jorien C.H. Bakx, P.O. Box 500, 3440 AM Woerden, The Netherlands, phone: +31 348 437600, fax: +31 348 437666, e-mail: jbakx@nigz.nl

2nd European Convention in Safety Promotion and Injury Prevention: March 29-30, 1999, Edinburgh International Conference Centre.

Bi-annual conference organised by ECOSA (European Consumer Safety Association). Main topics: injury research, product safety and safety promotion. Among others: new trends in safety promotion and the role of safety promotion hospitals

For further information, please contact General Secretary ECOSA P.O. Box 75169, 1070 AD Amsterdam, The Netherlands, fax +31 20 511 4510, e-mail: ecosa@consafe.nl

7th International Conference on Health Promoting Hospitals, April 21-23, 1998, Swansea, Wales: «Health Promotion and Quality: Challenges and Opportunities for Health Promoting Hospitals»

Main conference topics will be quality issues, healthy aging and health promoting mental health care services. Please contact for further information:

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Further information on the conference is also available at the homepage of the LBI at <http://www.univie.ac.at/hph/>

4th European Forum on Quality Improvement in Health Care, May 25-27, 1999, Stockholm International Fairs, Sweden

For further information, please contact Marchella Mitchell. Phone: +44/171/3836478; fax: +44/171/3836869

31st International Hospital Congress «Linking Hospitals to the Future», May 31 - June 4, 1999, Copenhagen, Denmark.

For further information, please contact the International Hospital Federation: 4 Abbots Place, London NW6 4NP, UK. Phone: +44/171/3727181; fax: +44/171/3287433; e-mail: 101662.1262@compuserve.com