



# Newsletter

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## Editorial

Dear reader,

The 20<sup>th</sup> HPH conference in Taipei, Taiwan is approaching. More than 1.000 people have registered, and close to 800 papers will be presented during this largest HPH conference ever. Find out more about the generous support of the local host and the rich social program in this Newsletter, and visit updated program information online at

<http://www.hphconferences.org/taipei2012>.

In the Partners section, we inform you about an expanded WHO-Euro institute on environmental health in Bonn. And we introduce you to the World Medical Association's (WMA) statement on social determinants of health. The WMA president will speak at the Taipei HPH conference on this topic. In the network section, Tallin's childrens' hospital (Estonia) presents a photo project for children suffering from Leukemia; and the Montreal network announces its enlargement to a Quebec Network of HPH. Congratulations!

As always, your feedback and contributions to the Newsletter are heartily welcome.

Looking forward to seeing you in Taipei,

*Jürgen M. Pelikan,*

*Christina Dietscher, Vienna*

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## International HPH Network



This year the Scientific Committee has received more than 900 abstract submissions, and almost 800 papers will be presented at the conference. Up to Feb. 20, more than 1000 persons from 40 countries have registered, which is the largest number ever in the history of HPH!

The 20th HPH conference is also the first time this event is being held outside of Europe. Recognizing the impacts of the global economic recession on long-distance travel, the local host has worked very hard to reduce related fees and offer significant discounts in order to ensure the conference can proceed successfully. In addition to the main conference, there will be two pre-conference meetings on environment-friendly and on tobacco-free health care, as well as education-related activities, including a HPH summer school and Newcomer's school. The local host, Bureau of Health Promotion (BHP), Taiwan, is also very hospitable to offer free hospital tours and free, 2-day public transportation passes for sightseeing in the city. BHP sincerely welcomes everyone to come to Taiwan to join in this momentous occasion, and be part of HPH history!

### Online registration is open until March 31st!

The deadline for online registration of the conference is **March 31<sup>st</sup>, 2012** under the following link: <http://www.hph2012.com/default.asp?page=A0>.

Please note that the conference registration is **separate** from the abstract submission system; participants have to get new passwords for registration. For assistance with registration, please contact Mr. Edward Chen ([edward@willypco.com.tw](mailto:edward@willypco.com.tw)) of the conference secretariat, or Michelle Chen of the BHP ([mcs@bhp.doh.gov.tw](mailto:mcs@bhp.doh.gov.tw); [michelle2141@gmail.com](mailto:michelle2141@gmail.com)).

## Discount air fare and accommodation

The total cost of attending the conference is lower than you imagine! The local hosts have negotiated with **China Airline** to provide **competitive air fares** to Taiwan. Visitors can get contact information on the following website:

<http://www.hph2012.com/default.asp?page=J0>

Participants wishing to stay at one of the suggested hotels can now download reservation forms online (<http://www.hph2012.com/default.asp?page=D0>).

There are many hotels at various price levels to select from.

## Free Hospital Visits in Taipei City

BHP Taiwan has arranged free visits to 14 health promoting hospitals for the participants to choose from: 9 HPH hospitals in Taipei City, 6 in other counties / cities around Taiwan (with local sightseeing tours), and 2 Environment-Friendly Hospitals in Taipei. Seats are limited, so please register early to secure your spot!

## Free pre-conferences on Tobacco-Free United and HPH & Environment

BHP Taiwan has collaborated with Tobacco-Free United and Global Network for Tobacco-Free Health Care Services, and Health Care Without Harm, respectively, to host two parallel pre-conferences on April 11<sup>th</sup>, 2012. The venues are located at the main conference building. Each pre-conference is limited to 200 participants only, and each participant can only choose 1 event to attend, so please register soon at

[http://www.hph2012.com/default.asp?page=L0\\_1](http://www.hph2012.com/default.asp?page=L0_1)

## Entry Visa to Taiwan

Related information about entry visa to Taiwan is available on the conference website, such as the list of all Visa Exempt countries. Attendees from the following designate countries: Afghanistan, Algeria, Bangladesh, Bhutan, Burma/Myanmar, Cambodia, Cameroon, Cuba, Ghana, Iran, Iraq, Laos, Nepal, Pakistan, Senegal, Somalia, Sri Lanka, and Syria, please send a **copy of your passport** and **travel itinerary** to the conference secretariat ([hph2012@willypco.com.tw](mailto:hph2012@willypco.com.tw)) to apply for special landing visa.

## Weather in Taiwan

Average temperature in Taipei during April is around **18-25°C (64-77°F)**, while the average rain fall 177 mm. Some of the mountainous parts around Taipei may be a bit chilly after dark, so participants coming to Taiwan should pack extra clothing to keep warm.



Michelle Miauh-Shin, Taipei  
[msc@bhp.doh.gov.tw](mailto:msc@bhp.doh.gov.tw)

## News from HPH Partner Organizations



### WHO-Euro

*Expanded centre on  
environment and health*

Recently, WHO-Euro launched an expanded European Centre for Environment and Health in Bonn, Germany: The centre will be working towards responding to pressing health needs, as one out of five citizens in the WHO European Region dies from environment-associated diseases. The environmental burden of ill health varies from country to country and ranges between 14% to 54% and, according to a new WHO report, in some countries the risk of exposure is five times higher for the poor than for the rich. For example, within the European Union (EU), around 80 million people live in relative poverty: with incomes below 60% of the national median income level. Many of these people live in damp housing, with insufficient heating and inadequate sanitary equipment. Over 16 million people in relative poverty cannot afford to heat their homes in winter. Similar results are found for exposure to noise and second-hand smoke, and the incidence of

various injuries. The report indicates, as priorities for national action, environmental health risks that are greater and more unequally distributed in one country than in others.

Against this background, the expanded centre in Bonn will focus on four main areas: climate change and sustainable development, exposure to key environmental risks (air pollution, noise, chemicals, radiation, inadequate working conditions and poor housing), environmental health intelligence and forecasting, and the management of natural resources, including water and sanitation.

**Contact and further information:**

Dr Michal Krzyzanowski  
Head, WHO European Centre for Environment & Health  
mkr@ecehbonn.euro.who.int



In light of the increasing inequalities in health, the social determinants of health are one of the pressing health problems of our time. In October 2011, at the 62<sup>nd</sup> WMA General Assembly, the WMA launched the below printed statement on social determinants of health, and the WMA president, José Gomes do Amaral, will introduce the topic at the upcoming 20<sup>th</sup> International HPH conference in Taipei next April.

The social determinants of health are: the conditions in which people are born, grow, live, work and age; and the societal influences on these conditions. The social determinants of health are major influences on both quality of life, including good health, and length of disability-free life expectancy. While health care will attempt to pick up the pieces and repair the damage caused by premature ill health, it is these social, cultural, environmental, economic and other factors that are the major causes of rates of illness and, in particular, the magnitude of health inequalities.

Historically, the primary role of doctors and other health care professionals has been to treat the sick - a vital and much cherished role in all societies. To

a lesser extent, health care professionals have dealt with individual exposures to the causes of disease - smoking, obesity, and alcohol in chronic disease, for example. These familiar aspects of life style can be thought of as 'proximate' causes of disease.

The work on social determinants goes far beyond this focus on proximate causes and considers the "causes of the causes". For example, smoking, obesity, alcohol, sedentary life style are all causes of illness. A social determinants approach addresses the causes of these causes; and in particular how they contribute to social inequalities in health. It focuses not only on individual behaviours but seeks to address the social and economic circumstances that give rise to premature ill health, throughout the life course: early child development, education, work and living conditions, and the structural causes that give rise to these living and working conditions. In many societies, unhealthy behaviours follow the social gradient: the lower people are in the socioeconomic hierarchy, the more they smoke, the worse their diet, and the less physical activity they engage in. A major, but not the only, cause of the social distribution of these causes is level of education. Other specific examples of addressing the causes of the causes: price and availability, which are key drivers of alcohol consumption; taxation, package labeling, bans on advertising, and smoking in public places, which have had demonstrable effects on tobacco consumption. The voice of the medical profession has been most important in these examples of tackling the causes of the causes.

There is a growing movement, globally, that seeks to address gross inequalities in health and length of life through action on the social determinants of health. This movement has involved the World Health Organisation, several national governments, civil society organization, and academics. Solutions are being sought and learning shared. Doctors should be well informed participants in this debate. There is much that can happen within the practice of medicine that can contribute directly and through working with other sectors. The medical profession can be advocates for action on those social conditions that have important effects on health.

The WMA could add significant value to the global efforts to address these social determinants by helping doctors, other health professionals and National Medical Associations understand what the

emerging evidence shows and what works, in different circumstances. It could help doctors to lobby more effectively within their countries and across international borders, and ensure that medical knowledge and skills are shared.

The WMA should help to gather data of examples that are working, and help to engage doctors and other health professionals in trying new and innovative solutions. It should work with national associations to educate and inform their members and put pressure on national governments to take the appropriate steps to try to minimise these root causes of premature ill health. In Britain, for example, the national government has issued a public health white paper that has at its heart reduction of health inequalities through action on the social determinants of health; several local areas have drawn up plans of action; there are good examples of general practice that work across sectors improve the quality of people's lives and hence reduce health inequalities. The WMA should gather examples of good practice from its members and promote further work in this area.

### Contact and further information:

[wma@wma.net](mailto:wma@wma.net)

## News from HPH Networks, Task Forces and members



Last February, the „Institute of Photography“, an Estonian NGO, organised the First Conference of Photography in Estonia.

The First Lady of Estonia Evelin Ilves who was the patron of the Conference and is also the Patron of the Tallinn Children's Hospital Foundation, suggested the income of the ticket sales would go towards starting a photography group and purchasing digital cameras for the patients of the onco-hematological department of the Tallinn Children's Hospital. So 7 digital-cameras for proper age groups were selected and the group started in April 2011 guided by a tutor for photography.

The group gathered once a month. Together with different guests – actors from the Puppet Theatre, a magician, a zoologist, musician, artist and face-painter – Evelin Ilves always participated in the work of the group. The children took photos during the group work and independently at home. And the tutor was always there with useful hints about the process.

In December all the works were framed and the work of the group ended with an exhibition of the photos at one of Tallinn's largest hotels in Sokos Hotel Viru during Christmas time. After the exhibition in the hotel the photos were also exhibited at the hospital.

During this project we wanted to give more joy and action to the children who have to stay at the hospital for long periods. Our little patients enjoyed taking photos a lot. It was also emotionally a great time for their families as well for the personnel of the department. Everybody got involved in photography to 100% and it helped to overcome the sorrows and pain for at least that short time.

The tutor of the group said he was a little afraid when starting the work of the group, but in the end it was a great pleasure to work with the children and it was a pity it ended so quickly.

As the cameras were returned to the Foundation, we are planning a new group work starting this spring in another department.

Inna Kramer, CEO  
Tallinn Children's Hospital Foundation  
Lagle Suurorg  
HPHHS coordinator



### The Montreal Network migrates to the Quebec Network of Health Promoting Institutions

At a general meeting held on January 25, the members of the Montreal Network of Health Promoting Hospitals and CSSSs approved the migration of their group to the Quebec Network of Health Promoting

Institutions (also known as the Quebec HPH Network) as a way to let all regions in the province become full participants in the movement. Quebec has just over 280 health care and social services facilities for a population of 8 million people.

To mark this occasion, the network adopted a new logo along with new governance rules that aim to promote network cooperation both locally and regionally.

The good news was announced on February 3 during the Jean-Yves Rivard Conference, which was organized by Université de Montréal's Department of Health Administration in collaboration with other health care network partners and addressed the theme of quality improvement through Health Promoting Hospitals and CSSSs. Over 150 administrators, health professionals and researchers came to this event to talk about issues surrounding the implementation of the HPH approach in health care institutions. Mr. Jürgen Pelikan from the WHO Collaborating Centre for Health Promotion in Hospitals and Health Care in Vienna gave a presentation on HPH principles and some of the benefits for member institutions.

This event will have certainly inspired other institutions to follow in the footsteps of the 33 existing members and join the International HPH Network.

For more information about this network, read the brochure

[http://publications.santemontreal.qc.ca/uploads/tx\\_asssm\\_publications/isbn978-2-89510-615-9.pdf](http://publications.santemontreal.qc.ca/uploads/tx_asssm_publications/isbn978-2-89510-615-9.pdf)

*Louis Côté*  
*Coordinator of the Quebec HPH Network*  
[louis\\_cote@ssss.gouv.qc.ca](mailto:louis_cote@ssss.gouv.qc.ca)

## Events, publications, links



### Conferences & Meetings: *HPH and HPH partners*

#### **HPH events**

20<sup>th</sup> International Conference on Health Promoting Hospitals and Health Services (HPH)

**Health promoting healthcare in a changing world: Innovation in service provision, healthcare management and health system design**

April 11-13, 2012, Taipei, Taiwan

[www.hphconferences.org/taipei2012](http://www.hphconferences.org/taipei2012)

#### **Events of HPH partners and other organisations**

15th World Conference on Tobacco or Health (WCTOH)

**Towards a Tobacco-Free World: Planning globally, acting locally**

March 20-24, 2012, Singapore

<http://wctoh2012.org/>

The 13th Triennial World Congress on Public Health

**Towards Global Health Equity: Opportunities and Threats**

April 21-29, 2012, Addis Ababa, Ethiopia

Further information:

<http://wfpha.confex.com/wfpha/2012/cfp.cgi>

**5th Latin-American and 4th Inter-American Health Promotion and Health Education Conference**

April 10-12, 2012, Mexico City, Mexico

<http://conferenciapesmexico2012.com/>

2nd Asia-Pacific Conference on Health Promotion and Education

**Empowerment for Healthy Settings – Healthy City and Community, Healthy School and University, Healthy Hospital and Healthy Workplace**

May 4-6, 2012, Taipei, Taiwan

[http://www.nsha.org.tw/aphpe\\_web/](http://www.nsha.org.tw/aphpe_web/)

24th Congress of the European Association of Hospital Managers (EAHM)

**Innovative Hospital Manager**

September 27 and 28 September 2012, Athens, Greece

<http://www.eahm-athens2012.gr/>

### **International Conference on Communication in Healthcare 2012**

September 4-7, 2011

St. Andrews, UK

<http://www.each-conference.com/>

### **CleanMed Europe 2012**

The world's leading conference on sustainable healthcare

26th 27th 28th September in Malmö, Sweden

[www.cleanmedeurope.org](http://www.cleanmedeurope.org)

9th IUHPE European Health Promotion Conference

### **Health and Quality of Life – Health and solidarity Partnership in the current economic situation**

September 27-29 2012

Tallin, Estonia

<http://www.conferences.ee/iuheli2012/>



**Books, articles  
& reports**  
*HPH and HPH partners*

### **Reports**

Saltman R.B., Durán A., Dubois H.F.W. (Eds.) (2011): **Governing Public Hospitals. Reform strategies and the movement towards institutional autonomy.** Copenhagen: World Health Organization 2011, on behalf of the European Observatory on Health Systems and Policies  
[http://www.euro.who.int/data/assets/pdf\\_file/0017/154160/e95981.pdf](http://www.euro.who.int/data/assets/pdf_file/0017/154160/e95981.pdf).



**Links  
&  
Web-tools**

### **International HPH Secretariat**

and WHO Collaborating Centre for Evidence-Based Health Promotion in Hospitals

Director: Hanne TONNESEN (DK)

<http://www.hphnet.org>

### **HPH Conference Secretariat**

and WHO Collaborating Centre for Health Promotion in Hospitals and Health Care

Director: Jürgen PELIKAN (AT)

<http://www.hphconferences.org>

<http://www.hph-hc.cc>

### **HPH Task Force on Health Promoting Psychiatric Health Services**

Chair: Hartmut BERGER (DE)

<http://www.hpps.net/>

### **HPH Task Force on Health Promotion for Children and Adolescents in & by Hospitals**

Chair: Ana GUERREIRO (PT)

[http://www.hphnet.org/index.php?option=com\\_content&view=article&id=294%3Ahp-for-children-a-adolescents-in-a-by-hospitals-&catid=20&Itemid=95](http://www.hphnet.org/index.php?option=com_content&view=article&id=294%3Ahp-for-children-a-adolescents-in-a-by-hospitals-&catid=20&Itemid=95)

### **HPH Task Force on Migrant-friendly and Culturally Competent Hospitals and Health Services**

Chair: Antonio CHIARENZA (IT)

[http://www.ausl.re.it/HPH/FrontEnd/Home/Default.aspx?channel\\_id=38](http://www.ausl.re.it/HPH/FrontEnd/Home/Default.aspx?channel_id=38)

### **HPH Task Force "Tobacco-free United"**

Chair: Ann O'RIORDAN (IE)

<http://www.ensh.eu/ensh/racine/default.asp?id=980>

<http://www.facebook.com/group.php?v=wall&qid=357231931900>

### **HPH task force on alcohol and alcohol interventions**

Chair: Sverre NESVÅG (NO)

[sverre.martin.nesvaag@sus.no](mailto:sverre.martin.nesvaag@sus.no)

### **HPH task force on environment:**

Chair: Shu-Ti CHIOU (TW)

[stchiou@bhp.doh.gov.tw](mailto:stchiou@bhp.doh.gov.tw)

[http://www.hphnet.org/index.php?option=com\\_content&view=article&id=143%3Atof-on-hph-a-environment&catid=20&Itemid=95](http://www.hphnet.org/index.php?option=com_content&view=article&id=143%3Atof-on-hph-a-environment&catid=20&Itemid=95)

### **List of national / regional HPH networks**

[http://www.hphnet.org/index.php?option=com\\_flexicontent&view=flexicontent&Itemid=18](http://www.hphnet.org/index.php?option=com_flexicontent&view=flexicontent&Itemid=18)

## **Editors**

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## Call for papers for #55

If you have news about HPH projects, past or upcoming events & conferences, publications, health promotion strategies or health promotion research from regional HPH networks, HPH task forces, single health promoting health care organisations, or HPH partner organisations (WHO, etc.), you are heartily invited to contribute to the HPH Newsletter!

### Guidelines for submission

Please send contributions of **max. 200 words**, outlining your message, and, if possible, a web link to extended information, to Ms. Christina Dietscher, WHO Collaborating Centre for Health Promotion in Hospitals and Health Care, Vienna, Austria, preferably as an e-mail attachment to [vienna.who-cc@hphconferences.org](mailto:vienna.who-cc@hphconferences.org).

Deadline for contributions to # 53 will be **April 20, 2012**.