



# Newsletter

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## Editorial

Dear reader,

This Newsletter issue offers impressions on the very successful 20<sup>th</sup> International HPH conference in Taipei, Taiwan, and an announcement of the 21<sup>st</sup> HPH conference to be held in Gothenburg, Sweden, from May 22-24, 2013. Please reserve the date!

The Partners section presents the conclusions of the UN Rio+20 conference which links health with sustainable development. Furthermore, we present information about the European Commission's Eurobarometer study on patient involvement.

Finally, in the network section of the Newsletter, you will find information from the HPH task force on HPH and environment who held a pre-conference in conjunction with the 20<sup>th</sup> HPH conference in Taipei, and on the advocacy campaign "Health Professionals for a Tobacco-Free World" organized by "Tobacco-Free United" which collected more than 40,000 signatures.

As always, your feedback and contributions to the Newsletter are heartily welcome. Submissions for the next Newsletter can be sent in until August 16, 2012.

Wishing you a relaxing and health promoting summer,

*Jürgen M. Pelikan,  
 Christina Dietscher, Vienna*

## Content

<b>International HPH Network:</b>	
<b>Conferences 2012, 2013</b>	<b>1, 2</b>
<b>News from HPH Partners:</b>	
<b>WHO, European Commission</b>	<b>2, 3</b>
<b>News from HPH networks and task forces:</b>	
<b>Tobacco-free United</b>	<b>4</b>
<b>Events, publications, links</b>	<b>5, 6</b>
<b>Imprint</b>	<b>7</b>
<b>Call for Papers for HPH NL #57</b>	<b>7</b>

## International HPH Network



The 20th International Conference on Health Promoting Hospitals and Health Services was successfully held in Taipei, Taiwan, in April 2012. The local host, Bureau of Health Promotion, wishes to thank the HPH Network for granting Taiwan this prestigious opportunity to organize this historic event. Being the 20th Anniversary of the conference and also the first time the event was held outside of Europe, the conference represented an important milestone on the history of HPH, having broken the records of most attendees, most countries registered, and most abstracts submitted. The Taiwan Bureau of Health Promotion (BHP) received great support from national medical and hospital societies, including over 1,000 attendees from 125 hospitals, 36 colleges, and 14 health bureaus. Their participation contributed to a further expansion of the HPH knowledge base.



The conference also saw great enthusiasm from foreign attendees, particularly the European and American attendees. Even though facing difficulties such as long distance travel and financial issues, their enthusiasm was unforgettable. The conference also saw strong participation from Asian countries like Korea, Japan, Thailand and Singapore, represen-

senting the fast growth of the network outside of Europe. The local host also organized a preconference on environment-friendly healthcare together with Health Care without Harm (HCWH), which had a very good attendance. The results of the preconference are reported on the HCWH website and can be accessed at <http://www.noharm.org/>. It is hoped that future collaboration with HCWH may also contribute to the expansion of the HPH members worldwide.



It was a daunting task to provide so many programs (such as pre-conferences on smoke free and environment friendly hospitals), social events (HPH hospital visits), and hospitality (free accommodation for attendees with budget difficulty) to the attendees, including reducing the conference’s ecological footprint, and providing healthy meal services, not to mention catering to the need of 1,300 attendees! Nevertheless, the colleagues at BHP have learned greatly from organizing this event, and were rewarded by heartfelt thanks from the participants. Video summaries of the conference can be viewed online at:

<http://www.bhp.doh.gov.tw/BHPnet/English/NewsShow.aspx?No=20120514001>



**21<sup>st</sup> International HPH Conference – Save the date!**

The 21<sup>st</sup> International HPH conference will be held from May 22-24, 2013, in Gothenburg, Sweden. Save the date for the next HPH conference!

The conference program is currently being developed around contributions of HPH to developing and offering more health-oriented health services. In addition to the main conference, there will be pre conferences organized by HPH task forces.

Further information, including an option for online abstract submission, will be soon online at [www.hphconferences.org/gothenburg2013](http://www.hphconferences.org/gothenburg2013)



**News from HPH Partner Organizations**



**UN and World Health Organization**

*The Rio +20 Conference*

The United Nations Conference on Sustainable Development, Rio+20, took place from June 20–22, 2012. It offered a unique opportunity to both acknowledge and benefit from the inextricable links between human health and sustainable development. The conference built up on the 1992 Rio Declaration on Environment and Development which stated that “Human beings are at the centre of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with nature.” In this sense, health is understood as a precondition for a prosperous life, while healthy environments are regarded as prerequisites for good

health and well-being.

The final document of the Rio+20 conference recognizes the fundamental need to act on the social and environmental determinants of health to create inclusive, equitable, economically productive and healthy societies. The document gives special attention to equity and to the needs of the poor and the most vulnerable.

WHO/Europe, the Pan American Health Organization and WHO headquarters took part in the Conference and advocated for health as both a contribution to and a beneficiary of sustainable development. The following points were made:

### **Health in all policies is a key approach to sustainable development**

Reductions in air, water and chemical pollution can prevent up to one fifth of the overall European burden of disease. Great opportunities for progress lie in reducing consumption levels and fostering healthy and green developments in energy, transport, housing, urban management and agriculture, as well as in the health sector. Sustainable development calls for a new health governance approach, introducing the health dimension into decision-making processes across all public policy areas.

### **Good health is a prerequisite for achieving sustainability goals**

Universal health care is an important step in enhancing the health status of populations; it requires a multisectoral approach coupled with an overall strengthening of health systems. Promoting affordable access to prevention, treatment and care strengthens the fight against communicable diseases — such as HIV/AIDS, malaria and tuberculosis — and noncommunicable diseases — such as cancers and cardiovascular diseases — which remain a serious global concern, as well as emerging diseases and challenges arising from demographic change, including migration.

### **Health is a way of measuring the impact of sustainable development policies**

Monitoring progress towards sustainable development goals means being able to evaluate the economic, environmental and social dimensions of policy. Investment in health alone cannot solve the problems of sovereign debt, volatile food prices or the environmental impact of climate change. But people's health remains vitally important as a

measure of the impact of policies in all these areas and this should be fully acknowledged by those aiming to promote a fairer, greener and more sustainable approach to globalization. Not only are health outcomes readily measurable, health concerns are immediate, personal and local.

Further information is available at the following link:

<http://www.euro.who.int/en/what-we-do/health-topics/environment-and-health/Climate-change/news/news/2012/06/rio20-puts-health-at-the-heart-of-development-goals>



A qualitative Eurobarometer study on patient involvement, based on in-depth interviews with 5 doctors and 10 patients in 15 EU countries, was recently launched by the European Commission. One of the main aims of the study was to explore understandings of patient involvement.

The study concludes that patients and practitioners have partly different perceptions of patient involvement. E.g. patients would expect to be involved in treatment decisions while practitioners understand patient involvement less as shared treatment responsibility but often confine the role of the patient to taking care of healthy lifestyles and compliance.

Patients feel involved if practitioners spend time communicating about their condition and feel discouraged if this is not the case. The degree to which patients themselves want to be involved depends on their level of education, their condition (chronic conditions were linked to higher expectations of being involved), and age, with younger and middle-aged patients demanding more involvement than older ones.

Overall, both patients and practitioners were of the opinion that patient involvement would improve the quality of diagnosis and care. As the main risks of involvement, both groups saw the need to invest more time, and also the potential for conflict in case of disagreement between practitioner and patient.

Deficits in communication between practitioners and patients were identified as the main barrier to better patient involvement.

Further information is available online at:  
[http://ec.europa.eu/public\\_opinion/archives/quali/q1\\_5937\\_patient\\_en.pdf](http://ec.europa.eu/public_opinion/archives/quali/q1_5937_patient_en.pdf)

## News from HPH Networks, Task Forces and members



### Growing Environmental Awareness in Healthcare!

Compared to previous conferences, the 20th International HPH Conference saw a significantly higher number of environment-related submissions, presentations and related satellite events. These included one plenary session, 10 oral presentations and 10 posters, demonstrating the burgeoning awareness of the health sectors on mitigating and adapting to the diverse impacts of climate change.



A Pre-conference on HPH and Environment, co-organized by the Task Force on HPH and Environment and Health Care Without Harm, was held on April 11th. The Southeast Asian Launch of the Global Green and Healthy Hospitals Network also took place near the end of the event. On April 12th, the 4<sup>th</sup> Meeting of the Task Force on HPH and Environment, chaired by Dr. Shu-Ti Chiou, was held to discuss the progress of tool development for monitoring the effects of environment-friendly programs in hospitals. In addition, a Symposium on HPH and

Environment co-chaired by Dr. Chiou and Dr. Pendo Maro from Health Care Without Harm Europe was held on the same day. Various aspects of environment-friendly healthcare, such as chemical substitution, waste management, sustainable business and green purchasing, policy and best practice examples from Taiwan and Sweden, were presented. Dr. Chiou also updated the audience on the progress of the Task Force efforts from last year.



The minutes of the 4th task force meeting, press releases of the Pre-conference, as well as the presentation files of the Symposium and Pre-conference, are available for download on the TF website. Those who are interested in joining the Task Force are also welcome to complete the online application form from the web site:

[http://www.hphnet.org/index.php?option=com\\_content&view=article&id=143%3A1f-on-hph-a-environment&catid=20&Itemid=95](http://www.hphnet.org/index.php?option=com_content&view=article&id=143%3A1f-on-hph-a-environment&catid=20&Itemid=95)

Shu-Ti Chiou  
Task Force coordinator  
Chair, International Network of HPH  
Director-General, Bureau of Health Promotion, DOH, Taiwan  
stchiou@bhp.doh.gov.tw



Health professionals call upon policy makers worldwide to protect tobacco control policies from the interference of the tobacco industry in public health matters. Tobacco industry interference in government decisions has been recognised by the World Health Organisation as one of the greatest barriers to effectively protecting people against tobacco.

On the occasion of this year's World No Tobacco Day, more than 40,000 health organizations and individual health professionals from 60 countries have pledged their personal and organizational engagement to support strong tobacco control measures worldwide. Health organizations have demonstrated their organisations' commitment to implement a tobacco free policy by signing the TFU PACT. Individual Health Professionals have shown their personal engagement to help people stop tobacco consumption by signing the TFU CHARTER. Together they support a petition in which governments and policy makers worldwide are called upon to step up their efforts in the fight against tobacco related death and disease.

The Framework Convention on Tobacco Control sets a global framework to reduce tobacco related death and disease to prevent tobacco consumption and to protect people from the harmful effects of tobacco use in all its form. On World No Tobacco Day 2012, 175 UN countries (accounting for nearly 90% of the global population) have ratified the WHO Framework Convention on Tobacco Control (FCTC). Health professionals cannot accept that effective implementation of the Framework Convention on Tobacco Control (FCTC) is hindered through interference of economic players whose goal is to maximise profit through the dissemination of death and disease.

Therefore, health professionals urge Governments to take immediate action to suspend participation of representatives of the tobacco industry and related front organisations from the development, implementation and financing of public health policy measures. Furthermore, tobacco control legislation must be protected and prioritised in international trade agreements and investment laws. Health professionals worldwide consider it a scandal that the tobacco industry still has the possibility to interfere with countries' decision making process in matters of public health. It is simply outrageous that the tobacco industry can take Australia and Uruguay to court because of introducing better health protection measures. All Governments, and especially those of the Netherlands, Namibia, Philippines, Solomon Islands and Panama, are called upon to immediately exclude the tobacco industry from any decision making process relating to health issues and to adopt strict transparency criteria in any consultation processes!

It is only through a concerted effort of policy makers, researchers and practitioners together that this man-made epidemic can be stopped!

## Events, publications, links



### HPH events

21<sup>st</sup> International Conference on Health Promoting Hospitals and Health Services (HPH)  
May 22-24, 2013, Gothenburg, Sweden  
[www.hphconferences.org/gothenburg2013](http://www.hphconferences.org/gothenburg2013) (online soon!)

### Events of HPH partners and other organisations

Health promotion research: an international forum  
State of the art – Directions for the future.  
In conjunction with the 5th International Research Seminar on Salutogenesis.  
August 6-9, 2012  
Trondheim, Norway  
<http://www.ntnu.edu/healthforum>

Joint conference of the ESHMS and DGMS  
**Health inequalities over the life course**  
August 30 to September 1, 2012  
Hannover, Germany  
[www.eshms-dgms.2012.de](http://www.eshms-dgms.2012.de)

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, monographies**

Nilsson E. (2012): **Aspects of health-related quality of life: Associations with psychological and biological factors, and use as patient reported outcome in routine health care.** Doctoral thesis, Linköping University, Faculty of Health Sciences  
Further information: <http://liu.diva-portal.org/smash/record.jsf?pid=diva2:492046>

### **Journals, articles**

Whitelaw S., Graham N., Black D., Coburn J., Renwick L. (2012): **Developing capacity and achieving sustainable implementation in healthy 'settings': insights from NHS Health Scotland's Health Promoting Health Service project.** In: Health Promotion International 27 (1), 127-13, doi: 10.1093/heapro/dar038



### **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 M. PELIKAN (AT)  
<http://www.hphconferences.org>  
<http://www.hph-hc.cc>

### **Task Force "Mental health promotion in mental healthcare settings"**

Chair: Hartmut BERGER (DE)  
[Hartmut.berger@vitos-riedstadt.de](mailto:Hartmut.berger@vitos-riedstadt.de)  
<http://www.hpps.net/>

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

Chair: James ROBINSON (UK-Sco)  
[jrobins4@stafmail.ed.ac.uk](mailto:jrobins4@stafmail.ed.ac.uk)  
[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)

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

Chair: Antonio CHIARENZA (IT)  
[Antonio.chiarenza@ausl.re.it](mailto:Antonio.chiarenza@ausl.re.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)

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

Chair: Ann O'RIORDAN (IE)  
[oriordanann@gmail.com](mailto:oriordanann@gmail.com)  
<http://www.ensh.eu/ensh/racine/default.asp?id=980>  
<http://www.facebook.com/group.php?v=wall&qid=357231931900>

### **Task Force "Alcohol and alcohol interventions"**

Chair: Sverre NESVÅG (NO)  
[sverre.martin.nesvaag@sus.no](mailto:sverre.martin.nesvaag@sus.no)

### **Task Force "HPH & 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)

### **Task force "Health Enhancing Physical Activity"**

Chair: Mats BÖRJESSON  
[mats.borjesson@ki.se](mailto:mats.borjesson@ki.se)

### **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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Jürgen M. PELIKAN (Director, WHO Collaborating Centre for Health Promotion in Hospitals and Health Care)

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Christina DIETSCHER (WHO Collaborating Centre for Health Promotion in Hospitals and Health Care)

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## Editorial Board

---

Shu-Ti CHIOU (TW)

---

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---

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---

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---

## Editorial Assistance

---

Astrid LOIDOLT (WHO Collaborating Centre for Health Promotion in Hospitals and Health Care)

---

## Layout

---

Hermann SCHMIED (WHO Collaborating Centre for Health Promotion in Hospitals and Health Care)

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## Imprint

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WHO Collaborating Centre for Health Promotion in Hospitals and Health Care, Vienna  
at Ludwig Boltzmann Institute Health Promotion Research  
Untere Donaustraße 47, 1020 Vienna, Austria  
+43-1-21 21 493-21  
[vienna.who-cc@hphconferences.org](mailto:vienna.who-cc@hphconferences.org)  
<http://www.hph-hc.cc>  
<http://www.hphconferences.org>

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## Call for papers for #57

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 #57 will be **August 20, 2012**.