



Newsletter

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Dear reader,

The 24th International HPH Conference has passed and we are still under the impression of the beautiful conference venue and the inspiring presentations. All in all, the 1st International HPH Conference that took place on US soil has been very successful. Therefore, this issue will primarily focus on the highlights of the conference.

Furthermore, we are very happy to announce that the 25th International HPH Conference next year will be held in Vienna, in particular, at the beautiful campus of the University of Vienna. For further information, have a look at the neighboring column.

In the partners section, we introduce you to the two new HPH Task Forces whose proposals have been approved during the General Assembly meeting in New Haven (CT).

Last but not least, this issue refers to many interesting events and publication that might be relevant for your HPH activities.

Should you wish to contribute to the next newsletter issue, please contact us at vienna.who-cc@hphconferences.org. Further instructions can be found on page 7.

We wish you a health promoting summer!

With many greetings,

*Christina Wieczorek,
 Jürgen M. Pelikan*

Content

International HPH Network HPH Conference 2016, 2017	1-4
News from HPH Networks, Task Forces and members	
Mental health pre-conference workshop	4-5
New HPH Task Forces	5
Events, publications, links	5-7
Call for Papers for HPH NL #81	7
Imprint	7

International HPH Network



The 25th anniversary of the International HPH Conferences will be celebrated in Vienna, the place where it all started. The Austrian HPH-Network gladly offered to host the conference which is scheduled for **April 12-14, 2017**. Please don't forget to save this date!

The Scientific Committee has already started to draft the conference program under the working title "**Health Promoting Health Care in times of crises – lessons from the past, directions for the future**". Thereby, the conference aims to touch upon the lessons learned from the development and progress of HPH. However, it is also the aim of the conference to tackle urgent challenges for health promoting healthcare such as caring for refugees and migrants, effects of climate change or health care's impact on the environment.

More information about the program as well as onsite excursions will be available soon at: <http://www.hph-conferences.org/vienna2017>



Schloss Schönbrunn

As next year's conference takes place right before the Easter weekend, it also offers delegates the opportunity to stay in Vienna and spend some relaxing and exciting days in this beautiful city in the heart of Europe.



24th International HPH Conference – *Conference wrap-up*

For the 1st time, this year's conference took place in the United States of America. The local host, the Connecticut HPH-Network and the buildings of Yale University created an excellent and inspiring conference atmosphere. Close to 500 delegates from 35 countries in all continents participated in this event.



Yale University

The plenary program

Based upon the long experience of the local host, the conference focused on how to partner with and involve patients and families within health promoting healthcare. Accordingly, the plenary sessions covered the following main theme and sub-themes:

- 1) Creating a Culture of Health through Innovation and Partnership (main theme)
- 2) Creating Health Promoting Healthcare Delivery Systems through Innovative Partnerships in Policy
- 3) Involving Professionals and Clients in Developing a Health Promoting Organizational Culture
- 4) Innovative Health Promoting Direct Service Provision
- 5) To Promote Health and Well-Being. How do we Move On?

Each plenary session was chaired by a representative of diverse regional and national HPH-Networks, HPH task forces etc. as well as a representative suggested by the local host.

1) Creating a Culture of Health through Innovation and Partnership

Nittita PRASOPA-PLAIZIER from the WHO headquarters opened the first plenary. In her keynote, she focused on WHO's perspective and strategy to promote people-cen-

tered health services. Moving from a global to a local perspective, Patrick A. CHARMEL (President & CEO of Griffin Hospital) introduced the Planetree Model. In his speech, he convincingly emphasized the relevance of empowering patients and treating them as partners in order to advance patient-centered care. The final presentation in this plenary was given by Karen LUXFORD from the Australian Excellence Commission in Sydney. She moved the attention of the audience to the regional perspective, emphasizing that the quality of healthcare depends upon the environment, the techniques and the inter-personal relationships. She concluded in her keynote that hospital improvement efforts do not necessarily meet what needs to be improved from a client / patient perspective.

2) Creating Health Promoting Healthcare Delivery Systems through Innovative Partnerships in Policy

On Thursday morning, Susan SHERIDAN from the Patient Centered Outcomes Research Institute (PCORI) in Washington D.C. gave a very inspiring keynote on how to involve patients and families on a healthcare policy and systems level. She explained that patients and families need to be involved in research and practice. At PCORI, patient engagement is a fundamental requirement to get projects funded. At the moment, more than 30,000 patients are involved in diverse research and practice projects. She concluded that to create patient-centered healthcare systems depends upon "the willingness to tip the world upside down... just a little bit!"

After this keynote, five renowned experts Michael MCGINNIS (National Academy of Medicine, USA), Kenneth P. ANDERSON (American Hospital Association, USA), Shu-Ti CHIOU (Chair HPH Task Force "Age-friendly Health Care" and Health Promotion Administration, Ministry of Health and Welfare, Taiwan), Elvira MÉNDEZ (Asociación Salud y Familia, Spain) and Mats BÖRJESSON (Chair HPH Task Force "Health Enhancing Physical Activity" and Sahlgrenska University Hospital/Östra, Sweden) reflected in a panel discussion upon the speech of Susan SHERIDAN. They emphasized that health promoting healthcare delivery systems need to build upon an "orchestra of voices" provided by patients and families. Furthermore, the panel discussants agreed that there should be no decisions about people / patients without people / patients.

3) Involving Professionals and Clients in Developing a Health Promoting Organizational Culture

Plenary 3 started with an impressive organ music concert, for which Woolsey Hall was the perfect location.



Woolsey Hall

Patient involvement in hospitals is not only a dream for future healthcare systems but does work in practice. Cor CALIS (Board Member Planetree, The Netherlands) showed in his presentation how patient involvement was enabled in the Netherlands through legal rights for patients. He did not only explain the current situation in the Netherlands regarding patient involvement, but also shared his experiences as member of the board concerning involving patients in the boardroom. Following up on this presentation, Bernard ROSOF (Chair of IOM roundtable on Health Literacy, USA), focused on health literate healthcare organizations. Health literacy was understood as individuals' capacity to obtain, process, and understand basic health information and services. As such, he made a plea that health literacy of patients cannot be relegated to the side-lines of health care improvement efforts anymore. To close this session on involving professionals and clients on the organizational level, Cristina AGUZZOLI (HPH-Network Friuli Venezia Giulia, Italy) and Edward PHILLIPS (Harvard Medical School, USA) talked about the synergies between HPH and the Institute of Lifestyle Medicine.

4) Innovative Health Promoting Direct Service Provision

Aswita TAN-McGRORY opened plenary 4 on Friday morning. She emphasized the relevance of including patients within direct service provision, especially with regard to racially and ethnic-diverse patients. In her speech, she provided 7 recommendations on how to support tackling disparities for these patient groups. Thereafter, Michael BARRY (Informed Medical Decisions Foundation, USA), Ming-Yueh CHOU (Kaohsiung Veterans General Hospital, Taiwan), Libby HOY (Patient and Family-Centered Care Partners, USA) and Denise KLAIVANO (Patients for Patient Safety Canada) discussed the topic from different perspectives building up on both, their personal as well as their professional experience. Libby HOY for example argued that "involving patients and families brings a little "soul" to the clinical data". The others

supported this argument and similarly emphasized the relevance of involvement. Michael BARRY further elaborated that the problem in involving patients is about communication: communication from the clinical world to the patient world and vice versa. All in all, it was concluded that innovative health promoting direct service provision needs a perception of medicine that comprises science AND emotion.

5) To Promote Health and Well-Being. How do we Move On?

The final plenary was dedicated to provide some take-home messages. First, David KATZ (Yale-Griffin Preventive Research Center, USA) gave a very inspiring keynote on "Health Promotion: From Clinics, to Culture" and argued that lifestyle is the medicine. However, he raised the question about what is the spoon? He concluded that it is not the lack of knowledge about healthy living that most threatens people, but it is "the constant, wild misrepresentations of what we do know and our failure to use it". Thereafter, Sally FAWKES (La Trobe University, Australia) moved the attention of the audience back to HPH and the highlights of the conference. She also provided valuable insights into possible next steps for the network and relevant aspects to plan next year's 25th anniversary of International HPH Conferences.

Parallel sessions and posters

Besides the plenary program, this year's conference comprised 561 further presentations. 108 presentations were given during the 39 oral sessions and workshops, 64 presentations were subdivided into 20 oral mini sessions, and 389 posters were shown in the two poster sessions. Topics covered ranged from health promotion for babies, children and adolescents to age-friendly healthcare, thus covering the whole life spectrum. Other issues covered comprised workplace health promotion and physical activity, environment-friendly healthcare or tobacco cessation.

Side events and social program

As usual, a number of events were arranged besides the plenary program. This involved the HPH summer school, the HPH newcomer's workshop as well as several field visits at Stamford and Griffin Hospital which enabled participants to experience the Planetree Model in practice. Furthermore, as part of this year's pre-conference program, the Norwegian HPH-Network together with Dr. Larry Davidson from Yale University arranged a half-day workshop on "Promoting Recovery and Community Inclusion in Mental Health". A summary can be found under "News from HPH Networks". Next to this, the local host offered an outstanding social program, starting with some singing and dancing by representatives of the local tribes during the opening, the organ

music concert on day 2 as well as the conference dinner in the Yale Peabody Museum. During the conference dinner, delegates could enjoy food between dinosaur skeletons and other exhibits. To close this conference and to let people enjoy the wonderful sunny and warm weather, the farewell refreshments were served outdoors right in front of the Schwarzman Center.

Virtual Conference Proceedings

If this has woken your interest and you wish to learn more about the numerous presentations and posters, have a look at: <http://www.hphconferences.org/vienna2016/proceedings>

Please also be informed that you can still upload your presentation to the virtual conference proceedings!!! For instructions on how to upload your presentation, please go to <http://www.hphconferences.org/connecticut2016/proceedings>. Should you experience any difficulties, please contact us at vienna.who-cc@hphconferences.org.

News from HPH Networks, Task Forces and Members

Norwegian HPH Network

Mental Health Pre-conference workshop
By Prof. Larry Davidson and Dr. Inger Kari Hagen Nerheim!

The main goal of the mental health pre-conference workshop entitled "Promoting Recovery and Community Inclusion in Mental Health" was to update attendees on the latest developments in the USA in the transformation of mental health systems to the promotion of recovery and the community inclusion and citizenship of persons with serious mental illnesses. The first presentation, by Larry DAVIDSON, Ph.D., Professor and Director of the Yale Program for Recovery and Community Health (PRCH) and Chief Policy Advisor for the Connecticut Department of Mental Health and Addiction Services (DMHAS), covered the history and principles of the recovery movement, which began in the 1970s with the Mental Health Consumer / Survivor Movement and was fueled by a growing body of longitudinal research that showed that many people with serious mental illnesses recovered over time. Through the advocacy of persons in recovery and passage of the Americans with Disabilities Act of 1990, the U.S. government began to encourage states to transform their systems to be strength-based, person-centered, culturally-responsive, and attentive to the

histories of trauma that many persons with mental illnesses have experienced. Over the last 25 years, there have been many developments in operationalizing this vision of a recovery-oriented system of care, several of which were then described by the other presentations at the workshop.

Charles DIKE, M.D., Medical Director of DMHAS, and Janis TONDORA, Psy.D., Director of System Transformation for PRCH – both of whom are Assistant Professors at Yale – first illuminated the role of the hospital within recovery-oriented systems of care. This presentation emphasized the reductions in the use of seclusion and restraint achieved through de-escalation training, shifts in the central foci for acute inpatient care from medication stabilization to comprehensive biopsychosocial and neurocognitive assessments, and the collaborative development of person-centered recovery plans that include loved ones and other natural supporters in planning for transitions to outpatient care. Moving from inpatient to ambulatory arenas, Michael ROWE, Ph.D., Associate Professor at Yale and Co-Director of PRCH, and Paul DiLEO, FASCHE, Chief Operating Officer of DMHAS, discussed the expansion of the scope of care from stabilization and maintenance of one or more psychiatric conditions to addressing the medical needs of persons with serious mental illnesses while promoting their recovery and full citizenship within the community. Strategies for assessing and promoting citizenship and for integrating medical and psychiatric care in behavioral health homes were presented as key elements of current system transformation efforts. The medical and other community needs of this population, such as finances and nutrition, were then further elaborated on by Michael SERNYAK, M.D., Professor of Psychiatry at Yale, and Annie HARPER, Ph.D., an anthropologist who directs the financial health program of PRCH. Both presenters explored the changes in the scope of practice required by mental health professionals to attend to the social determinants of health that provide the context for recovery and citizenship.

Finally, two presentations focused on emerging areas of work within the broader recovery agenda: peer support and stigma and discrimination. Daryl McGRAW, M.A., Director of Recovery Community Affairs for DMHAS, and Chyrell BELLAMY, M.S.W., Ph.D., Assistant Professor and Director of Peer Services and Research at Yale PRCH, outlined the major components of the rapidly expanding workforce of persons in recovery who are trained and employed to provide peer support. They also addressed the major challenges to implementing peer supports with fidelity and integrity, and described the research evidence base that has accumulated to date, showing that peer support offers many benefits, especially to those persons who traditionally have not used mental health services in the past. A final discussion was then led by Miraj DESAI, Ph.D., an associate

research scientist at PRCH, who identified the ways in which the recovery and citizenship paradigm represents first and foremost a human rights agenda. On this basis, he then described the ways in which mental health care needs to be framed within a social justice framework and needs to address discrimination and combat the effects of internalized stigma within both the mental health system and the community at large.

Almost 60 people registered for this pre-conference workshop, most of whom were from Western European countries. HPH has had several preconference workshops targeting health promotion in the context of mental health and addiction services, organized by the Task Force on Mental Health and national network groups for mental health / addiction. The last two preconference workshops, in Gothenburg and Oslo, concentrated on the peer support contributions of the recovery movement and on a whole health perspective. This year's meeting at Yale University was an important step in revitalizing the attention for mental health issues within HPH, with a newly appointed Task Force on Mental Health and Addiction which will be targeting the same themes. It is hoped that future conferences will include more work from other countries as well as innovative strategies for furthering the recovery and community inclusion agenda.

New HPH Task Forces

Approval of Task Forces on mental health and the HPH standards
Welcome!

We are very happy to inform you that during the meeting of the General Assembly on June 8, 2016 the proposals to build two new HPH Task Forces have been accepted.

The first HPH Task Force is on "**Recovery based mental health and freedom from addiction**" and will be chaired by **Jan-Erik NILSEN** from the Norwegian HPH-Network.

The second HPH Task Force is on "**Updated WHO-HPH Standards**" and will be led by **Manel SANTIÑA** (former president of HPH-Catalunya, Spain). Should you be interested in joining this task force, please inform the HPH Secretariat at hph@hphnet.org.

Events, publications, links



Conferences & Meetings

HPH and HPH partners

HPH events

25th International Conference on Health Promoting Hospitals and Health Services (HPH)

Health Promoting Health Care in times of crises – lessons from the past, directions for the future

April 12-14, 2017, Vienna, Austria

www.hphconferences.org/vienna2017

Save the date!!!

Events of HPH partners and other organizations

19th European Health Forum Gastein

Demographics and Diversity in Europe – New Solutions for Health

September 28-30, 2016, Gastein, Austria

<http://www.ehfg.org/de/home.html>

CleanMed Europe 2016

Creating Healing Environments

October 19-21, 2016, Copenhagen, Denmark

<http://www.cleanmedeurope.org/attend.html>

40th World Hospital Congress

Addressing the Challenge of Patient-centered Care and Safety

October 30-November 3, 2016, Durban, South Africa

<https://www.ihf-fih.org/ihf-events>

9th European Public Health Conference

All for health – health for all

November 9-12, 2016, Vienna, Austria

<http://www.ephconference.org/future-conferences-128>

9th Global Conference on Health Promotion

Health Promotion in the Sustainable Development Goals (participation only by invitation!)

November 21-24, Shanghai, China

<http://www.who.int/healthpromotion/conferences/9qchp/en/>

12th Design & Health World Congress & Exhibition

European Healthcare Design – Revitalizing Health

July 12-16, 2017, Vienna, Austria

<http://www.designandhealth.com/nyheter/recent-news/world-congress-in-vienna-2017>



Books, articles & reports *HPH and HPH partners*

World Health Organization (2016). **World Health Statistics 2016. Monitoring health for the SDGs.** Geneva: World Health Organization.

As part of WHO's annual health statistics, the report of 2016 focuses on the proposed health and health-related Sustainable Development Goals (SDGs) and associated targets. The report indicates that in spite of major achievements that have resulted from the era of the Millennium Development Goals (MDGs), the world is still confronted with the challenges to reduce maternal and child mortality, to improve nutrition and to fight against infectious diseases. In addition, data also indicates that addressing non-communicable diseases and their risk factors such as tobacco use, mental health problems or environmental health issues is of major importance. The full report is available at:

http://www.who.int/gho/publications/world_health_statistics/2016/en/.

Guastello S & Frampton SB (2014). **Patient-centered care retreats as a method for enhancing and sustaining compassion in action in healthcare settings.** *Journal of Compassionate Health Care*, 1:2.

In this article, the authors outline that compassion and, closely related to this, empathy and kindness, are increasingly being recognized as essential dimensions of quality in healthcare. The article builds upon a case study that comprised a Planetree patient-centered care retreat. This retreat combines inspiration with education and training to support staff in connecting to their deeper motivations for being a caregiver. Besides this, the retreat offers tools and support for nurturing and eliciting compassion among all caregivers and leaders, and embedding compassionate human interactions into organizational processes and practices. Based upon this case, the authors emphasize the relevance of having a critical mass of employees participating in the retreat. If so, it is concluded that the "shared experience the momentum to bring about the change envisioned during the retreats builds until providing compassionate, patient-centered care is no longer the exception, but the expectation within the organization".



Links & Web-tools

International HPH Secretariat

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

Director: Hanne TØNNESEN (DNK)

<http://www.hphnet.org>

HPH Conference Secretariat

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

Director: Jürgen M. PELIKAN (AUT)

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

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

New! Task Force "Recovery based mental health and freedom from addiction"

Chair: Jan-Erik NILSEN (NOR)

Further information will be available soon!

New! Task Force "Updated WHO-HPH Standards"

Chair: Manel SANTIÑÀ (ESP)

Further information will be available soon!

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

Chair: Ilaria SIMONELLI (ITA)

children@hphnet.org

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 (ITA)

http://www.ausl.re.it/HPH/FrontEnd/Home/Default.aspx?channel_id=38

Task Force "HPH & Environment"

Chair: Chin-Lon LIN (TWN)

http://www.hphnet.org/index.php?option=com_content&view=article&id=143%3Atf-on-hph-a-environment&catid=20&Itemid=95

Task Force "Health Enhancing Physical Activity"

Chair: Mats BÖRJESSON (SWE)

mats.borjesson@ki.se

Task Force “Age-friendly Health Care”

Chair: Shu-Ti CHIOU (TWN)

stchiou@bhp.doh.gov.tw

List of national / regional HPH networks

http://www.hphnet.org/index.php?option=com_flexicontent&view=flexicontent&Itemid=18

Call for papers for #81

We heartily welcome your 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 organizations, or HPH partner organizations (WHO, etc.), for publication in the international HPH Newsletter!

Instructions for authors

Please send contributions of **max. 200 words**, outlining your message, and, if possible, a web link to extended information, to Ms. Astrid Loidolt, 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.

Deadline for contributions to #81 will be **August 15, 2016**.

Editors

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* This is the last issue advised by the outgoing HPH Governance Board.

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