



## Research and Best Practice

# Abstracts selected for publication

This year we continue the feature introduced last year at the 20<sup>th</sup> International HPH Conference, where a collection of scientific abstracts are selected for publication in Clinical Health Promotion. The abstracts represent posters presented at the 21<sup>st</sup> International HPH Conference in Gothenburg in May 2013. The selection of the abstracts was conducted by our Journal Editors, and the selection illustrates the methodological and international breadth of the research performed within the area of Clinical Health Promotion.

## *Two schools of thought: barriers and incentives to cycling among staff in a Dublin academic hospital*

Kirsten Doherty, Irene Gilroy, Nicole Donnelly, Wayne Matthews, Greg Conlon, Patricia Fitzpatrick, Anna Clarke, Daly Leslie, Cecily Kelleher

### Introduction

Recent medical journal articles have highlighted the contribution of active commuting, such as cycling, to exercise levels (1), and have recommended that health services do more to promote such exercise among their staff (2). Country comparisons have shown that those with the highest levels of active transport generally have the lowest obesity prevalence (3). Since 2006, this hospital has promoted cycling in staff through improved facilities and cycling events, while since 2009, national and local incentives have been introduced.

### Purpose/Methods

A staff survey of cycling was carried out at a tertiary referral hospital during Bike Week 2011. Questionnaires were sent electronically to staff with computer access, while paper copies were placed in the canteen. The survey was completed by 192 staff members. Analysis with SPSS established the proportion of staff who cycled to work, and as well as perceived barriers and incentives to cycling.

### Results

40.6% (n=78) cycled frequently/always, while 8.9% (n=17) cycled occasionally. From 2007–2010 there was a 37.9% increase in the numbers that started cycling. Intending cyclists were more interested in safety classes than those already cycling (21.6% versus 5.3%;  $p=0.001$ ), while cyclists placed more importance on facilities (34.7% versus 12.4%;  $p<0.001$ ) and bike maintenance classes (25.3% versus 2.1%;  $p<0.001$ ). Among those that never cycled there was a trend for more men (40%; n=4) than women (16%; n=14) to be concerned about weather ( $p=0.066$ ).



### Conclusions

These results are of international relevance. While this is a self-selected sample, it does identify two distinct groups of cyclists – seasoned and potential – with diverse priorities. The needs of each group should be catered for to increase the rate of cycling in those who live relatively close to work. Health service employers should lead by example and use best practice methods of increasing active transport among their own staff.

Contact: Kirsten Doherty, St. Vincent's University Hospital, Dept of Preventive Medicine, Dublin, Ireland.  
k.doherty@svuh.ie

### References:

- (1) Dobson R. Active commuting is important in raising exercise levels. *BMJ* 2006; 332:1352.5
- (2) Stott R. Contraction and convergence. Healthy response to climate change. *BMJ* 2006; 332:1385
- (3) Dijkstra L, Pucher J. Promoting Safe Walking and Cycling to Improve Public Health: Lessons From the Netherlands and Germany. *AJ Public Health* 2003; 93:1509-1516



## Research and Best Practice

### *Standing Up for the Health of our Workforce*

Kirstan Corben, Andrew Way

#### **Introduction**

Alfred Health has demonstrated leadership and innovation in response to emerging evidence regarding the health risk of occupational sedentariness, specifically prolonged sitting. Through a research trial among its workforce, Alfred Health has identified high levels of user acceptance of sit-stand workstations. Such a workstation retrofits to an existing workspace and enables a computer to be used in either sitting or standing position. This research contributes new knowledge highly applicable to other health services committed to achieving a healthy workplace.

#### **Purpose/Methods**

The overall aim of the research was to determine the level of user acceptance of sit-stand workstations over a three month period. More than 100 Alfred Health employees were engaged as participants in this research trial. Priority was given to those with high levels of exposure to prolonged sitting and therefore included strong representation from areas such as finance, health information services, human resources and payroll, information technology services as well as those in executive and administration roles.

#### **Results**

Based on self-reporting from the first 42 users to complete the three month trial period: (\*) >90% retained the sit-stand workstation for ongoing use (\*) Average sitting reduced from 90% to 56% of working time (\*) 83% agreed the sit-stand workstation benefited them, particularly via: Improved sense of wellbeing (65%) Ability to concentrate or focus (48%) Sense of productivity (47%) 98% would recommend a sit-stand workstation to their colleagues working in desk based roles.

#### **Conclusions**

Alfred Health has identified a high degree of user acceptance of sit-stand workstations, matched by substantial replacement of sitting with standing. Such a result shows great promise for organisations to act to reverse the negative impacts associated with occupational sedentariness, particularly from prolonged sitting. Further consideration will be given to the broader implementation of such workstations throughout the organisation, together with other opportunities to reduce sitting in meetings and other settings away from the individual workstation.

Contact: Kirstan Corben, Alfred Health, Melbourne, Australia. k.corben@alfred.org.au

### *Health promotion for all communities through "Health Challenge"*

Zenjirou Kikuchi, Fumihiro Saitoh, Kyota Negish

#### **Introduction**

Japanese Health and Welfare Co-operative Federation (HeW CO-OP JAPAN) is a co-operative that operates medical and long term care facilities. The aim is always working on a community plan that is continuous to living in peace in our familiar region through mutual aid and health promotion. The Tokyo Health Co-op is a member of HeW CO-OP JAPAN and consists of 50,000 members, including medical staff and community. The Tokyo Health Co-op is managed in the center of Tokyo, Japan.

#### **Purpose/Methods**

We conducted nine health promotion courses to improve individual health and lifestyle, under the name "Health Challenge". Each course continued for two months. There were 105 participants (15% of all 700 members in branch-community) in the area of Doshida-Oizumi, which is a branch of our co-op. Data was recorded daily, and after two months questionnaires were handed out and data analysed.

#### **Results**

The analysis of the data from the questionnaires showed that 90% of the participants completed their "Health Challenge"-course. They were able to reevaluate their behaviors and lifestyles: nutritional balance, exercise and tooth brushing after every meal. The 10% of participants who stopped had future plans for health promotion. The incentive and recognition of health promotion seem to have rooted in all community members. Moreover, opportunities to interact with the participants have increased through the personal contact when the questionnaires were handed out.

#### **Conclusions**

From our study we made three conclusions: 1) The participants were able to objectively reconsider their own health, which led to reviewing their lifestyle. 2) Recognition of health promotion was widespread in our community as a result of more than 100 participants. 3) Apart from health care, we have been cooperating on life style changes, which have contributed to developing a trustful dialogue concerning health in our community.

Contact: Fumihiro Saitoh, Oizumi Health Cooperative Hospital, Tokyo, Japan.  
fuisaitoh@gmail.com



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### *Västerbotten the Healthiest County 2020*

Lena Sjöquist Andersson, Lina Tjärnström

#### **Introduction**

The vision for Västerbotten County Council is to have “The world’s highest quality of health and healthiest population by 2020”. The county council has, since the 1980’s, worked close together with the local communities in Västerbotten to achieve a healthier population and has also a variety of activities related to health promotion in health care. Metrics for the vision have been developed and are used to follow up on the efforts that have been made.

#### **Purpose/Methods**

Västerbotten Intervention Program (VIP) is aimed at members of the community aged 40, 50 and 60 years. Factors related to cardiovascular disease are in focus in a health dialogue about lifestyle. The Salute program supports parents and children to a healthy lifestyle. It includes maternity-, child- and public dental care, school and social services. A programme called Tobacco-Free Duo reaches young people and prevents tobacco use. The employees of the County Council are reached through the initiative “Healthy Workplace”. Actions to support and create a healthy climate have been developed.

#### **Results**

Research shows that VIP can contribute to reduce differences in health, related to socioeconomic factors. Studies show that the Salute-program can increase collaboration to support healthier children. All communities in Västerbotten are engaged in the Tobacco-Free Duo programme and a reduced use of tobacco is observed. To reach the population, the website [halsa2020.se](http://halsa2020.se) has been created. The website offers a blog, chat, pedometer registration and a platform for exchanging experiences. During 2012 nearly 35 000 people visited the website.

#### **Conclusions**

The County Council of Västerbotten has a long tradition of public health work and health orientation of the health care system. The vision of being the healthiest county is an initiative that comes from brave politicians. Increasing efforts has been done during the last five years to reach the vision. The health development is constantly being monitored with research and it indicates that the health development is going in the right direction.

Contact: Lena Sjöquist Andersson. Västerbottens läns landsting, Sweden.  
[lana.sjoquist.andersson@vll.se](mailto:lana.sjoquist.andersson@vll.se)

### *The effect of free NRT on motivation to quit smoking*

Ellen Excelmans

#### **Introduction**

The high cost of NRT is a major obstacle in taking the first step toward smoking cessation. In this pilot project, nicotine replacement products were given to psychiatric patients who wished to stop smoking. This had a positive effect on the willingness to make an extra effort in the attempt to quit smoking.

#### **Purpose/Methods**

The motivation to quit smoking was assessed by a questionnaire at two times: before the free NRT was embedded in the treatment and after 6 months.

#### **Results**

Providing free NRT for patients, who want to quit smoking, enhances the importance of the quit attempt and the willingness to make a bigger effort in their attempt to quit smoking. Self-efficacy and readiness are not influenced by giving NRT to the patients for free.

#### **Conclusions**

We use these findings as an argument to provide a financial contribution to NRT for psychiatric patients who want to quit smoking. Quit rates are lower among psychiatric patients. If their willingness to make an effort enhances, quit rates could perhaps rise. The study showed that providing free NRT has a positive effect on the willingness of putting in a bigger effort in the attempt to quit smoking.

#### **Comments**

In Belgium there is no refund for NRT. This is a serious obstacle in attempting smoking cessation. With this study we wanted to prove that giving a repayment of NRT will increase the motivation to quit smoking.

Contact: Ellen Excelmann, VRGT, Berchem, Belgium.  
[Ellen.excelmans@vrgt.be](mailto:Ellen.excelmans@vrgt.be)

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## Research and Best Practice

### *The status of HPH activities in Korea and initiatives toward advancement*

Eunwoo Nam, Donwon Lee, Yunhee Jang

#### Introduction

The National HPH network of the Republic of Korea has 33 members and many of them are Regional Public Hospitals. They are important factors for the success of national health promotion projects as well as the community-based health care facilities. There should therefore be active support and cooperation from local and provincial governments. To help raise awareness about HPH activities among hospital executives and policymakers, further studies on Health Promoting Hospitals are necessary.

#### Purpose/Methods

This study aims to propose future directions for HPH activities in Korea, based on the result of a survey regarding current HPH activities, major obstacles etc. A questionnaire of 70 questions within 12 areas reflecting the reality of HPH in Korea, was developed. 5 HPH experts examined the validity of the questionnaire, after which the questionnaires were distributed to 34 people in charge of HPH projects. General frequency analysis and Radar Chart analysis were conducted to analyse the results by using SPSS 12.0.

#### Results

75.6% of HPH activities were handled by existing departments and 80% of HPH personnel were put in charge of both existing tasks and HPH projects. "A lack of governmental financial support" and "inadequate linkage between hospital's overall development direction and HPH activities", were identified as major obstacles. "CEO's active support" and "the opportunity for employees to participate in HPH projects" were identified as major facilitators with "developing specific action plans", "applying standardized management index" as necessary conditions.

#### Conclusions

Along with the development of HPH, hospitals are expected to become major players in national health promotion projects in Korea. This will be followed by a need to establish an independent department focusing on HPH activities and governmental financial support. To increase the support from CEOs, we propose HPH education and field trips to hospitals overseas, which will increase the managements awareness about HPH activities. It is also imperative to utilize an HPH manual tailored to the situation in Korea.

#### Comments

We hope that HPH activities will become more effective, be continuously pursued, and managed at a local level through the establishment HPH infrastructure around the HPH members of Regional Public Hospitals.

Contact: Dong Won Lee, Korea Association of Regional Public Hospitals, Seoul, Korea.  
hl2xpn@hanmail.net

### *Paediatrician-lead motivational counselling is effective for BMI control in 4-7 overweight children: a individually randomized controlled trial*

Anna Maria D Avoli, Elena Ferrari, Gino Montagna, Laura Bonvicini, Serena Broccoli, Paolo Giorgi Rossi, Gabriele Romani, Annarita Di Buono, Costantino Panza, Cinzia Cucchi, Alessandra Fabbri, Simone Storani, Marco Tamelli, Mirco Pinotti, Antonio Chiarenza

#### Introduction

Obesity is one of the leading causes of morbidity and mortality in the industrialised world. One of the risk factors for lifetime obesity is overweight and obesity in pre-puberty and adolescence. Healthcare services, particularly paediatricians, can be a point of contact for early prevention. Patient-centred and motivational counselling is recommended to change behaviours in children. However, the efficacy of a family paediatrician-lead counselling intervention in young overweight children is not clear.

#### Purpose/Methods

We conducted a randomised controlled trial to evaluate the efficacy of a family paediatrician-lead counselling in reducing the BMI of overweight (85th ≤ BMI percentile < 95th, CDC) children aged 4-7. The study was conducted in 2011-2012 and involved 75 out of 81 family paediatricians in Reggio Emilia Province, Italy. The children who were enrolled in the study attended a baseline and a 12-months visit, where BMI and lifestyle behaviour were assessed. The control group received the usual care and information leaflet. The intervention group received five counselling sessions, for which the paediatricians had been trained.





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### Results

187 children were randomly allocated to counselling and 185 to control; 95% of the children attended the 12-months visit. There were significant differences in variation of BMI score from baseline to 12 months between intervention (+0.49, 95%CI 0.31-0.67) and control group (+0.81, 95%CI 0.63-0.99). Counselling was particularly effective among females and among children with highly educated mothers. There were also an increased number of positive changes in dietary behaviours and physical activity in the intervention group than in the control group.

### Conclusions

The compliance was excellent. The family (children and parents) paediatrician-lead motivational counselling studied in this trial was concluded to be effective for BMI control compared to usual care, in overweight children aged 4-7. Lifestyle behaviours were also affected positively by the intervention.

### Comments

Our pragmatic trial, involving virtually all the Reggio Emilia family-paediatricians and a vast majority of eligible children, proved at the same time efficacy and effectiveness of the intervention. Paediatricians' satisfaction, assessed with an interview, was very high. Our results encourage the use of BMI measurement and motivational counselling in primary care practice for early intervention in overweight children.

Contact: Anna Maria Davoli, AUSL of Reggio Emilia, Reggio Emilia, Italy.  
benedetta.riboldi@ausl.re.it

### *Health Promotion in the Hospital: A Health Promotion Needs Assessment Survey of Nurses at Changi General Hospital, Singapore*

Jia Min Foo, Li Jiuen Ong, Magdalin Cheong

### Introduction

In the hospital setting, encouraging workplace health promotion can positively influence the physical, mental and social well-being of healthcare staff as well as the health of their families, communities and society. Nurses play an important role in health promotion; hence, a health promotion needs assessment survey for nurses was conducted in December 2012. This will help in the future development of a comprehensive health promo-

tion program to empower healthcare professionals at Changi General Hospital (CGH) to lead and promote healthier lifestyle.

### Purpose/Methods

The purpose of conducting the health promotion needs assessment survey for nurses was to explore the nurses' perceptions of health promotion, gain awareness of nurses' concerns about health promotion issues and determine the priority areas of health promotion in CGH. Survey forms were distributed to nurses in all outpatient clinics and inpatient wards. The survey questionnaires were designed to include different multiple choice and open-ended questions related to health to collect qualitative information from responses of nurses towards health promotion.

### Results

A total of 447 (11M: 436F) nurses participated in the survey. 76% of nurses had participated in past health promotion activities in the hospital. 55 % of those who had participated in previous health promotion activities reported these activities as "Beneficial". 34% of nurses responded that it was "Very Important" to support health promotion in the hospital. 92% of nurses indicated an interest to participate in future health promotion activities. 33% of nurses felt that all staff members were responsible for health promotion.

### Conclusions

It is encouraging to know that nurses are supportive and aware of the importance of health promotion in the hospital. At least three-quarters of nurses surveyed had participated in past health promotion activities in the hospital and more than 90% of nurses had indicated their interest and willingness to participate in future health promotion activities. For future health promotion and advocacy initiatives in the hospital, nurses can be nominated as health champions to promote a healthy lifestyle among healthcare staff.

### Comments

Special thanks to the Nurses at Changi General Hospital for their participation in the survey.

Contact: Jia Min Foo, Changi General Hospital  
Dietetics and Food Service, Singapore.  
jia\_min\_foo@cgh.com.sg



## Research and Best Practice

### *Full participation of disabled people in society*

Vilma Levinger, Snieguole Zadeikyte

#### **Introduction**

Around 10 percent of Lithuanians live with a disability. Disability or diseases caused by traumas and the associated psychological and social changes, significantly affect these people and their families. Such people need time to integrate into society. It is a serious problem from both a social and economic perspective, which has led to increased attention to the rehabilitation of sick and disabled people.

#### **Purpose/Methods**

The purpose of this study is to analyse the 20 years of experience, which Palanga Rehabilitation Hospital has in organizing integrated rehabilitation for people with disabilities. We also review the rehabilitation projects for disabled, which are carried out in Palanga Rehabilitation Hospital.

#### **Results**

Medical rehabilitation is an integrated application of medical rehabilitation measures with the purpose of restoring lost functions, or to compensate for permanent disabilities. Timely vocational rehabilitation and proper motivation can turn a person with a disability, from passive user and a dependent, into an active member of society. In PRL, patients can acquire 22 professions. The aim of active rehabilitation is to identify the problems and to show the patients the possible solutions, which is acquired by personal examples given by an instructor, who has experienced the same himself.

#### **Conclusions**

1. Rehabilitation – both medical and social – must be started as quickly as possible to ensure its full integration. Otherwise, termination of work activity and social support may lower disabled people's motivation to restore independence, and as a result, turn people into dependents of the society.

2. We believe that this, and all the subsequent projects, will help to increase employment among people with disabilities, improve their skills of finding a job, encourage their social integration, and help to change society's attitude towards people with disabilities

#### **Comments**

Palanga Rehabilitation Hospital is located in the resort of Palanga, 900 meters from the Baltic Sea. The hospital has 220 beds, and 256 employees. It is a specialized third-level hospital providing rehabilitation services to patients. It offers complex medical, professional and active rehabilitation services for patients who have suffered severe head or spinal cord injuries, various traumas, surgeries, or who are suffering from nervous and pulmonary disorders. The hospital is fully adapted for disabled people: equipped with lifts, ramps, adjustable furniture, sinks and handrails.

Contact: Vilma Levinger, Palanga Rehabilitation Hospital, Palanga, Litauen.  
vlevinger@info.lt