



Outstanding scientific abstracts from the 20th HPH Conference in Taipei 2012

As a new initiative to add to the visibility of the scientific work conducted within the International HPH Network, it has been decided to award and publish ten abstracts representing an outstanding scientific level. The selection of the ten abstracts was conducted prior to the HPH Conference by our Journal Editors, and the selection illustrates the quality and methodological breadth of the research performed within the area of Clinical Health Promotion. From the 20th International HPH Conference in Taipei, the following ten abstracts were awarded for their scientific content. The ten abstracts are categorised as Systematic Reviews, Randomised Clinical Trials (RCT)/Controlled Clinical Trials (CCT), Cohort Studies, Quality Management and Qualitative Studies.

Systematic review: Where do we stand in production of health education media and educational intervention?

Zahra Sepehri, Fatemeh Rakhshan, Akram Peigard, Mojghan Javadi, Niloofer Peimandar, Fatemeh Behbooyeh, Mansoor Sepehri, Oldoos Aloosh, Kambiz Keshavarz

Introduction

The aim of this study is to systematically analyse the types of educational media and the process of making educational health materials and educational interventions.

Purpose/Methods

A systematic review of all health education materials and educational interventions was done. After the announcement of gathering all products about health education, 2,926 media were selected from the posted materials that met the following criteria: described health, provided information to educate someone, and published between 2008 and 2009. The review focused on four main criteria and 70-90 alternative criteria (based on the type of media). Sixteen specialists calculated the score of products based on designed checklists. Then, data were entered in special software.

Results

In the section of health education media, the mean scores were under 50 (from 100) in all different media. The overall scores were: poster (39.03), pamphlet (43.03), film (43.03), radio teaser (41.03), television teaser (25.03), journal and bulletin (33.03), book (46.03), multimedia (37.03), website (42.91), and television program (39.03). In the section of educational interventions, the mean of the scores were 29.03, 31.03, 28.03, 20.00, 37.99 for workshop, classes, conferences, exhibitions and campaign, respectively.



Conclusions

Considering a global view on the results, despite our great educational potential, it seems that all of our health educators need to meet again and discuss health education principles and its process. Indeed, empowerment should consider health educators already at the first step of the process.

Contact: Zahra Sepehri, Zabol Medical University, Iran
sepehri_z@yahoo.com



Research and Best Practice

Systematic review: Applications of Motivational Interviewing in managing Type II Diabetes Mellitus: A systematic review

Su-Hsia Hsu, You-Yin Wang, Yueh-Yen Fang

Introduction

Motivational interviewing (MI) applies a patient-centred counselling protocol to guide patients towards the discovery of conflicts in their health behaviours and construct a health promotion pattern. MI was reported to enhance patients' knowledge and skills in disease control and prevention of complications. Its application in managing type II diabetes mellitus (DM) was investigated across literature. An integration of study results would assist in validating the effects of MI on health promotion of type II diabetes.

Purpose/Methods

This systematic review aims to evaluate the effectiveness of MI in health promotion of type II diabetes. Electronic databases, including CINAHL, Medline, PubMed, CEPS, Proquest, PsychInfo, Cochrane library, and related diabetic journals were searched for articles that utilized 'motivational interviewing' in patients with type II DM. The search period was between 2001 and 2011. Two reviewers extracted data independently. The Johns Hopkins Nursing Evidence Rating Scale was used to evaluate study quality.

Results

Five relevant studies that met the inclusion criteria were located from a review of sixty articles. Most studies supported that MI decreased the HBA1C level. As for body weight, it was reduced at the 6th month of intervention, but increased after termination of the experiment. MI was also good for promoting self-efficacy and decreasing depression level as well as fatalism.

Conclusions

MI may bring benefit in health promotion of DM patients. However, there is a need for further investigation to achieve a consistent result. Problems encountered among MI research include time limitation, intervention frequency and duration, consultation content, and varied MI definitions and its implementations.

Contact: You-Yin Wang, Kaohsiung Medical University, anuoboe@yahoo.com.tw

RCT: Brief Integrated Group Psychotherapy (IPT) for patients with schizophrenia from a day care unit: Preliminary efficacy study

Chun-Ya Kuo, Li-Ren Chang, Chih-Min Liu, Bao-Juan Yeh, Tze-Chon Tang

Introduction

The group cognitive-behavioural therapy (CBT) is effective in the treatment of schizophrenia. The integrated group psychotherapy (IPT), which integrates neuro-cognitive and social cognitive remediation with psychosocial rehabilitation, is a group CBT-based program. Patients with schizophrenia are noted with impairment of neuro-cognitive functioning and higher levels of behavioural organisation, including social skills and social and independent functioning. In this study, we aimed at comparing the efficacy of IPT versus treatment as usual (TAU) in schizophrenic patients of a day care unit.

Purpose/Methods

In a randomised trial, all patients with schizophrenia or schizoaffective diagnosis by clinical history, received evaluation for the treatment effects with and without a 12-week group IPT delivered by psychologists trained over one year with ongoing supervision. For a successive 12 weeks period, we measured those two groups of patients with standardized neuropsychological assessment: Positive and Negative Syndrome Scale (PANSS), and scales for evaluating mood symptoms and social skills before and after intervention.

Results

Because of the delayed clinical trial approval of the Research Ethics Committee from the National Taiwan University Hospital, the outcome and data analysis of this study, including the disease relapse rate, occupational recovery rate, neuropsychological findings, the comparison of Positive and Negative Syndrome Scale and other scales, will be postponed to July 2012.

Conclusions

According to previous related studies, finding of neuro-cognitive function showed that, compared to TAU group, the IPT group might have done significantly better in the scores for attention, verbal memory, and visual memory as well as for Beck Anxiety Inventory scores. The results will be analysed in July 2012. Then, the effects of IPT will be known and decided whether those preliminary results need to be duplicated in a larger sample to validate the claim of the benefits of the IPT group.

Contact: Chun-Ya Kuo, National Taiwan University, u8901029@gmail.com



Research and Best Practice

CCT: Effects of exercise intervention for hospital personnel who are at risk of metabolic syndrome

Chia-Te Lin, Fuh-Yuan Shih, Tai-Yuan Chiu, Yueliang-Leon Guo, Kuo-Liong Chien, Huey-Dong Wu, Kwan-Hwa Lin, Chao-Ying Chen, Chung-Chun Lai, Ni-Yun Hsieh, Chi-Hon Leng, Suh-Fang Jeng

Introduction

Epidemiological studies showed that recent changes in life style and eating habits might result in poor fitness and increased prevalence of metabolic syndrome. Hospital personnel in Taiwan tend to have a busy working schedule and limited time of physical activity which may have adverse impacts on their fitness and metabolism.

Purpose/Methods

This study was aimed to examine the effects of exercise intervention on the fitness and metabolic risk factors in hospital personnel in risk of metabolic syndrome. An open non-randomised trial was conducted on 21 hospital personnel with at least one metabolic risk factor. Thirteen participated in an intensive exercise program with classes scheduled three times a week for three months; eight participated in a home exercise programme with instruction scheduled biweekly for three months.

Results

All participants have completed the exercise intervention. The intensive exercise group showed significantly better cardiopulmonary index (change: 9.8 +/- 7.3 vs. 2.0 +/- 5.2 steps/min, $p=0.006$), flexibility (change: 6.3 +/- 4.0 vs. 1.8 +/- 3.4 cm, $p=0.03$) and heart rate (change: -9.0 +/- 9.8 vs. 3.5 +/- 12.5 beats/min, $p=0.055$) than the home exercise group after adjusting for pre-exercise status. The groups were comparable in the changes in all metabolic risk factors, however.

Conclusions

The intensive exercise program was more effective than the home exercise program in enhancing the cardiopulmonary endurance and flexibility in hospital personnel. Future research needs to increase the sample size and to employ a randomization controlled study design to increase the generalisability of our results.

Comments

Intensive exercise intervention appears to benefit cardiopulmonary fitness and flexibility in hospital personnel.

Contact: Chia-Te Lin, National Taiwan University Hospital, tareko579@gmail.com

Cohort study: Smoking cessation in the public oral health setting

Christine Morris, Jane Heron-Kirkmoe

Introduction

Tobacco smoking is the biggest single cause of premature death and disability in Australia. In 2006, SA Dental Service introduced a clinic based smoking cessation support program. Smoking cessation is a key organisational goal acknowledging the important role of clinicians in assisting smokers to quit.

Purpose/Methods

The aim of the program is to contribute to the improving client's oral and general health by providing information to increase awareness of support services available to clients who are interested in managing their tobacco dependence. The primary purpose is to provide a referral pathway to the local telephone counselling service, the Quit Line, for more intensive advice. Each smoker is offered tailored brief advice after ascertaining his or her interest in quitting smoking.

Results

8,500 brief interventions have been delivered since the inception of the program. Each year there is an increasing number of interventions indicating strong acceptance and support by clinicians. Dental teams use the most effective way to deliver a smoking cessation message through specialised training from Quit Line staff. Smokers are delivered a non-judgemental message that is tailored to their stage of interest in quitting. A referral pathway has been developed for clients who are interested in a call-back quit smoking service.

Conclusions

Over the course of the smoking cessation program dental teams have demonstrated their commitment to deliver an effective quit smoking message to improve oral and general health. Partnering with the South Australian Quit Line, smoking cessation counselling service has provided excellent training for clinicians and professional support for smokers. This program has shown that brief intervention is a useful technique for use in the dental setting to offer tailored smoking cessation advice to clients who smoke.

Contact: Christine Morris, SA Dental Service, christine.morris@health.sa.gov.au



Research and Best Practice

Cohort study: Protective and risk factors of Post Partum Depression among mothers in low social-economic areas in West Java

Sherly Saragih Turnip

Introduction

In contrary to social expectations, mothers who had just delivered a baby may feel deep sadness, fatigue, unworthiness and unhappiness with their conditions and their babies. This condition is called baby blues, and if the symptoms persist it may develop into post partum depression (PPD). Postpartum depression is found to be quite prevalent in many parts of the world and known to have deleterious effect for the babies, families and mothers.

Purpose/Methods

This study is intended to investigate the PPD among mothers who live in a low socio-economic area in Indonesia, as well as to identify the protective and risk factors of PPD. Data was collected from approximately 400 mothers who have given birth in the past year and who attended the primary health care. The Edinburgh Postpartum Depression Scale measured postpartum condition.

Results

The prevalence of PPD was quite high in the study area. Several factors were found to be protective and risk factors for the occurrence of PPD. Those factors include social, psychological, cultural and economical aspects.

Conclusions

In Indonesia, mothers are expected to take care of the children since the day they were born, manage domestic issues and serve their husbands. The condition of PPD is often denied and ignored by the mothers and their families. Therefore mothers who experience PPD often feel guilty towards their babies and families, which in turn could worsen their mental health condition. Health promotion is badly needed and should make use of the findings of protective and risk factors in the plan.

Contact: Sherly Saragih Turnip, Universitas Indonesia, sherly.turnip@gmail.com

Quality management: Organisational diagnostic tool for HPH Standard 4

Louis Côté

Introduction

Organisations are becoming increasingly aware of the importance of healthy workplaces. While the determinants of employee health have long been expounded in the scientific literature, relatively few tools fully meet the needs of healthcare establishments. The difficulty primarily resides in finding a tool that is comprehensive, psychometrically sound, easily administered, affordable, and available in different languages. The goal of this project was thus to develop a tool that enables such organisations to take an accurate snapshot of their organisation.

Purpose/Methods

This organisational diagnostic tool for Standard 4 was developed based on an extensive consultation (i.e. literature review and consultation with subject matter experts) and validation process. Existing tools were analysed according to the aforementioned criteria. A questionnaire was subsequently created using an item bank as no single tool met all the criteria. The questionnaire was then administered to employees of Anglophone and Francophone Montreal healthcare establishments.

Results

Statistical analyses subsequently demonstrated the validity and reliability of the tool. The next phase of this project will be to help healthcare establishments utilise this tool in order to develop effective intervention plans.

Conclusions

This tool can then be used to help organisations assess the effectiveness of their interventions. In the future, we hope this tool will be used internationally and will potentially serve as an invaluable part of the evaluation process with regard to Standard 4.

Contact: Agence de la santé et des services sociaux Mtl, louis_cote@ssss.gouv.qc.ca



Research and Best Practice

Quality management: Pain assessment: How to improve health care quality through staff empowerment

Raffaele Zoratti, Carlo Favaretti

Introduction

Quality measurement in health care is complex and in a constant state of evolution: recent changes in health care promotion standards are driving increased attention to assess patients' needs and to improve the quality of healthcare, both inside and between healthcare institutions. Evaluation of patients' satisfaction with care, especially pain management, is considered an indicator of quality of care, and this can be achieved through patient and staff empowerment procedures.

Purpose/Methods

Literature on pain management is extensive, but most studies deal with specific conditions while fewer studies deal with inpatients prevalence measures, when the prevalence of patients suffering pain while in hospital is still high. The aim of the study is to investigate the prevalence of pain and pain assessment among inpatients in the "Santa Maria della Misericordia" University Hospital in Udine, Italy, and how this tool can be improved to ameliorate our patients' care through staff empowerment.

Results

In 2005, our hospital established a Committee for Pain Management with the purpose to set up protocols and guidelines to implement pain assessment and pain management. The target of the study was to get an accurate documentation of pain assessment within 24 hours of the patient's hospital admission. The prevalence of pain assessment documentation in a sample of random clinical records went from 60% in 2009 to 70% in 2010, to 82% in 2011, with a net increase of 20% in two years.

Conclusions

This study is a baseline measure of pain assessment in our hospital and could be used in quality improvement work plans. Efforts must be made to implement the quality goal of pain management, so that all staff will become familiar with guidelines, procedures and outcomes. A strong collaboration is necessary between clinicians, nurses, healthcare services, researchers, and policymakers in order to achieve a long process of continuous improvement in patient health care and promotion.

Contact: Raffaele Zoratti, AOUD S.Maria della Misericordia, raffaele.zoratti@libero.it

Qualitative study: A new measure for the assessment of Estonian nurses' illness related risk of absenteeism

Eve Palotu, Marika Tammaru

Introduction

Challenges of the changing health care endanger its workers' health, which in turn affects staff performance. The application of a valid measure for risk assessment provides the opportunity to identify those at risk and implement targeted prevention. Nurse-WIS is a questionnaire used for risk assessment among nursing professionals. It identifies of the difficulties encountered by nurses at work in order to reduce illness related absenteeism.

Purpose/Methods

To adapt the Nurse-WIS for use in Estonia and to evaluate its applicability. The questionnaire was translated following the forward and back translation methodology. 15 Estonian nurses assessed its face validity. The questionnaire was completed by 209 nurses older than 45 years. The ability to distinguish between groups characterized by different levels of self-perceived health and the number of encountered environmental risk factors in the questionnaire was assessed. The ability to predict the illness related absence from work was evaluated.

Results

Cronbach's alpha indicated good internal consistency. 40 percent of the respondents had a medium or high risk of absenteeism; in accordance with the recommendations of the authors of the questionnaire, they would need intervention regarding their occupational health. The risk was significantly higher among respondents with long-term illnesses and among respondents with higher exposure to environmental risk factors. With a five-point increase in score, the risk of being absent from work increased 1.3 times.

Conclusions

The Estonian version of Nurse-WIS can be applied for the assessment of absenteeism risk among nursing staff. This study enrolled nurses older than 45 years who can be considered as being at a higher risk of illness related absenteeism due to their age. Additional studies are necessary to evaluate the applicability of the Estonian version for risk assessment among younger nurses. Research also needs to be carried out to assess the implementation of the score-based recommendations in an Estonian context.

Contact: Eve Palotu, The East-Tallinn Central Hospital, eve.palotu@itk.ee



Research and Best Practice

Qualitative study: An exploratory study of the satisfaction with antipsychotic medication of patients with schizophrenia in Hong Kong

Tai Wa Liu

Introduction

To improve the treatment outcomes of patients with schizophrenia, it is important to enhance their adherence to antipsychotic medication in order to reduce the chance of being re-admitted to pharmacological treatment. Overseas studies indicated that patients' satisfaction is correlated with their adherence to antipsychotic medication, but patients' satisfaction towards their antipsychotic medication has not been explored in Hong Kong.

Purpose/Methods

To investigate the factors related to the satisfaction with antipsychotic medication and the relationship between satisfaction and medication adherence of patients with schizophrenia in Hong Kong. This study utilized a qualitative research method using focus group interviews to explore issues relating to satisfaction level and medication adherence. A purposive sample was recruited from the psychiatric units of a regional hospital in Hong Kong. Two focus groups were conducted and 20 participants who were diagnosed with schizophrenia were recruited. The focus group interviews were transcribed and data were analyzed by content analysis in its original language (Chinese). Meanings were formulated from the significant statements and phrases that directly pertained to participants' satisfaction of antipsychotic medication and then organized into clusters of themes.

Results

The findings revealed that participants were most satisfied with the perceived benefits of antipsychotic medication. However, they were not satisfied with the information provided to them about the possible side effects caused by their antipsychotic medication and not being involved in treatment decision. Although participants were experiencing side effects, they continued to take their medication because the perceived benefits outweighed the side-effects burden. Furthermore, they would be more satisfied and willing to take their medication if they could be well informed and involved in treatment decision. Lower satisfaction was associated with lower adherence level of antipsychotic medication.

Conclusions

The findings suggest that mental health professionals should consider the factors influenced by the satisfaction of patients with antipsychotic medication in order to tailor medication regimes that are effective and acceptable to patients with schizophrenia.

Comments

Education and information about the antipsychotic medication and illness is important to promote patients' level of satisfaction. Patients should be involved in their treatment decisions in order to enhance their adherence to antipsychotic medication.

Contact: Tai Wa Liu, The Open University of Hong Kong, twliu@ouhk.edu.hk