

HEALTH PROMOTION IN ACTION: PRACTICAL IDEAS ON PROGRAMME IMPLEMENTATION

Health Promotion: Where Do We Start?

- From disease/conditions.
- From issues eg. Safety, environment, tobacco control.
- From lifestyles.
- From settings eg. workplace
 home
 schools
 clinics

WHY SETTINGS?

- Human health behaviour is determined by the physical and social forces which are present and interacting in any setting.
- Involves the target population as a whole in the context of their everyday life and in their unique environment.
- Holistic and comprehensive approach.

SETTINGS FOR HEALTH

- This approach to health promotion arose from the Ottawa Charter:

“Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love”.

SETTINGS FOR HEALTH

- The Settings For Health approach is concerned with creating health in our different settings.
- Examples of Healthy Setting are:
 - Healthy Cities
 - Healthy Villages
 - Healthy Islands
 - Health Promoting Hospitals
 - Health Promoting Schools

WHAT IS A HEALTHY CITY?

“A Healthy City is one that improves its environment and expands its resources so that people can support each other in achieving their highest potential... A Healthy City is conscious of health as an urban issue and is striving to improve it. Any city can be a healthy if it is committed to health”.

Healthy Cities

- The Healthy Cities project was the first settings project to arise from the Ottawa Charter.
- Over a thousand cities worldwide are working on this project.
- The Healthy Cities project was first initiated in Malaysia in 1994. Two cities, Johor Bahru and Kuching, were initially selected.
- Currently, many Healthy Cities projects are being undertaken throughout Malaysia, involving cities/towns like Kota Bahru, Kuala Terengganu, Georgetown, Kuantan, Malacca, Petaling Jaya, Miri, Seremban, Ipoh, and Kuala Lumpur.

The Aims of Healthy Cities Project

- To minimise health hazards in urban areas through integration of health and environmental protection measures in urban planning and management processes.
- To enhance the quality of the physical and social environment.

- To increase public awareness towards healthier behaviours, lifestyles and habits.
- To improve the provision of health services by developing appropriate urban health care systems.
- To upgrade the country's capabilities to improve urban health through better intersectoral coordination and participation.

The Ten Signs of a Healthy City

1. A clean, safe physical environment of high quality (including housing quality).
2. An ecosystem that is stable now and sustainable in the long term.
3. A strong, mutually supportive and non-exploitive community.
4. A high degree of participation and control by the public over the decisions affecting their lives, health and wellbeing.

5. The meeting of basic needs (for food, water, shelter, income, safety and work) for all the city's people.
6. Access to a wide variety of contact, interaction and communication.
7. A diverse, vital and innovative economy.
8. The encouragement of connectedness with the past, with the cultural and biological heritage of city dwellers and with other groups and individuals.
9. An optimum level of appropriate public health and sick care services accessible to all.
10. High health status (high levels of positive health and low levels of disease).

Health Promoting Schools

- A WHO programme first launched in Europe in 1991.
- HPS are schools that make efforts to influence & promote health.
- Schools as a healthy setting for living, learning and working.
- Engages health and education officials, teachers, students, parents & community leaders.

HEALTH PROMOTING SCHOOLS (HPS)

- Covers a wide spectrum of the population.
 - pupils, staff, families, community
- Covers 2 essential human rights.
 - Health
 - Education
- Wide reach, due to compulsory enrolment.
- A powerful way to influence health from an early age.

Program Bersepadu Sekolah Sihat (PBSS)

- In 1996, the MOH together with Ministry of Education carried out a HPS pilot project in 6 states.
- A revival of the School Health Programme (1967).
- PBSS became a national programme in 1997.
- Integrates & coordinates all the health activities in schools.

6 Major Elements

1. School health policy.
2. Physical environment.
3. Social environment.
4. Community relationships.
5. Personal health skills.
6. Health services.

Six Core Elements in PBSS

1. School Health Policy

- Food safety in canteens.
- Smoke-free & drug-free.
- Disease control (eg. Dengue-free school).
- Health education.

2. Physical environment

- Safe, healthy and clean.
- Free from threat of disease.

3. Social environment

- Fosters development of healthy attitudes and practices.
- Conducive for healthy mental development and stress reduction.
- Balanced development in the physical, emotional, spiritual and intellectual aspects.
- Deals with social problems eg. through religious/moral education & counselling.

4. Community involvement

- Obtaining the support and involvement of parents and outside community.
- Support can be material, financial or expertise.

5. Personal health skills

- Related to lifestyle practices.
- Through formal and non-formal activities.
- Areas of skills development
 - personal and oral hygiene
 - exercise and fitness
 - first aid and emergencies
 - healthy eating
 - social skills and stress management

6. School Health service

- Covers health promotion, health and nutritional assessment, treatment and referrals.
- Special programmes eg. Supplementary feeding and School Milk Programmes.

PRIMARY HEALTH CARE SETTING [PHC]

PHC is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live, work and constitutes the first element of a continuing health care process”.

(Mac Donald, 1993)

Primary Health Care Setting [PHC]

- ➔ PHC is an important setting for Health Promotion.
- Most people have contact with PHC practitioners.
- PHC practitioners are credible and qualified.
- PHC and health promotion is cheaper and better than hospital care.

- ➔ Focal areas for Health Promotion.
- Anti-smoking/Smoking Cessation.
- CHD/stroke prevention
 - opportunistic health checks
 - lifestyle advice and health interventions

Healthy Lifestyles

- exercise and fitness
- healthy eating
- stress management
- Safety promotion

→ Well Adult Clinics (WAC)

- Established under RM7 at all Health Clinics.
- Expanded scope of Family Health Services Programme.
- To cater to adults and adolescents with no known pathological conditions but may possess pre-disposing risk factors.
- Besides clinic-based, activities will also be extended to the community 3 times a year.

Well Adult Clinics

Specific objectives

1. To promote the adoption of healthy lifestyle practices.
2. To provide early detection of specific, underlying health problems and provide appropriate management plan.

Activities

- Health promotion
 - exercise
 - nutrition
 - smoking cessation
- Prevention
 - screening
 - Counselling
 - referrals

CONCLUSION

- Health Promotion can be approached in several ways.
 - disease , issues, lifestyle, settings
- Settings is a good approach
 - Considers the physical and social forces.
 - Involves the whole population in the context of their everyday life situation.
 - Holistic.

- School is a good setting.
 - Advocated by WHO (Health Promoting Schools)
 - Six major elements.
 - The Program Bersepadu Sekolah Sihat is a national programme that integrates and coordinates all the health activities in schools.

- PHC is accessible to most people & gives opportunities for health staff to promote health.
 - Health staff need to be role models and advocates of good health.
- Well Adult Clinics (WAC) caters for adults and adolescents.
 - WAC promotes healthy lifestyles and early detection and management of health problems.