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Abstracts for poster exhibition

Research as capacity building among women refugee

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The health situation amongst women refugees is often problematic. Crisis reactions, various symptoms, often of psychosomatic character, in combination with difficulties to communicate because of a foreign language make it difficult to meet their needs. Personnel in primary health care have experienced these shortcomings and therefore they have originated this project. The aim was to perform a need assessment in order to develop alternative ways to treat ill health and promote wellbeing amongst women refugees. The life situation among female refugee was explored using a participatory action research approach. A researcher, two health care personnel and one cultural broker from each of four ethnic groups worked to accomplish this project. Health personnel and cultural brokers were trained as co-researcher. They performed interviews, participated in analysis and writing of report. Improvement of routines in health care organisation better to meet refugee needs and a community development project were suggested in an action-plan. It was proposed that facilitators were appointed to help women refugee to fulfil their own initiatives.

The discrepancy between policy and practice in life style counselling in primary care in Sweden

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Lifestyle advice given by general practitioners (GPs) may be a cost-effective means to health promotion, however, not fully put into routine practice. The aim was to explore to what extent their patients are expecting and receiving advice concerning alcohol, tobacco, exercise and diet. A postal questionnaire was sent to a representative sample (n=9750) of patients who had consulted GPs in a county in Sweden. Exercise was the most (16 %) and alcohol the least (5 %) common type of advice. The patients received advice more often than they expected in all areas except alcohol. The patients reported the highest rate of unfulfilled advice expectation (38%) as well as the lowest rate of unexpected advice (1,7%) concerning alcohol. Male gender, poorer self-rated health, scheduled appointment and recurrent consultations were independent predictors of all types of advice. Continuity in the GP contact was only favourable for exercise and diet advice. The patients who reported advice were more satisfied with their call. Male patients with advanced illnesses are given priority. The GPs misjudge the expectations and needs of their patients and are too restrained in their counselling practice. Alcohol is the most disregarded area of advice in proportion to the patients' expectations and needs.

The Reykjavík University School of Health and Education – the first public health programme in Iceland

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The School of Health and Education at the University of Reykjavík was established in January 2005. The School

collaborates extensively with Columbia University in New York and Penn State University in Pennsylvania. The main focus is on teaching and research on social and emotional well being of children and adolescents. Co-operation is currently sought with various Icelandic and international research institutions.

The School offers two masters level programmes in public health. Firstly, a masters degree in public health (MPH) for people who will be leaders within organisations concerned with children and young people. Secondly, a masters degree (MEd) for future teachers who wish to focus on public health issues. Furthermore, the School offers studies towards a bachelors degree (BEEd) in sports/physical education. The first class of students starts in the autumn of 2005.

The programmes are designed for individuals who aim to become teachers or practitioners and pursue careers within the education system, social or health services. They share the wish to work on the well being and health of children and young people. The vision of the School is to produce public health practitioners and teachers who will work in varied settings on improving the health of young Icelanders and design and implement programmes that will benefit public health internationally.

Depression and its prevention

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Major depression and dysthymia are frequent, debilitating, and chronic disorders, which have their highest rate of onset during the late adolescent years, with approximately twice as many girls as boys experiencing MDD. The effectiveness of a program designed to prevent an initial episode of major depression or dysthymia among adolescents was investigated.

Participants were 86 fourteen-year-old 'at risk' Icelandic adolescents for the development of MDD. 'At risk' was defined as individuals who had never met criteria for a mood disorder but who exhibited substantial symptoms of depression or or a negative attributional style.

Participants who met inclusion criteria following the interview were randomly assigned to the prevention program or the treatment as usual group (TAU). The program was based on a developmental psychosocial model of development of resilience to factors associated with the occurrence of mood disorders. Students in the TAU condition were permitted to seek treatment elsewhere at any time.

Results indicated that the prevention program resulted in a significantly lower rate of major depression and dysthymia and a lower rate of all psychological disorders than did the control group. The study demonstrated that school personnel in the school setting can implement such prevention programs. The outcomes demonstrated that the program is effective in reducing initial episodes of depression and dysthymia among those adolescents most at risk for the disorders.

The Icelandic Workplace Health Promotion Network: Building Partnership and Competence in Icelandic Workplaces

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The nature of work is changing in Iceland, as in most of the western world. While before, work hazards were often related to physical strain, nowadays more people suffer from muscular-skeletal pain, due to work positions and repetitive movements, and from stress, due to mental strain and competitiveness of the workplace.

There is increased interest in the society in promoting health, including workplace health. Many employee organisations in workplaces are for instance pushing for improved cafeteria menus, exercise funds and walking groups, and some larger companies have started offering regular preventive services. In order to make these measures more effective, however, more general knowledge is needed regarding the link between occupational health, risk factors and health promotion.

The Icelandic Workplace Health Promotion Network was established in May, 2003. The aim of the network is to raise awareness of the importance of workplace health promotion and prevention by facilitating discussion, information transfer and partnership among stakeholders. Current network members include government institutions, unions, employers' organisations, ministries, public health organisations, interests groups, and workplaces. The activities of the network have focused on building awareness and responsibility among managers in workplaces, primarily through mini-symposiums and peer education in educational meetings held in workplaces.

The role of teachers and social workers as health promoting agents

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Introduction

Teachers and social workers play an important part as educators, care takers and role models for children and young people. Despite a great interest in producing health promotion materials to schools, day care units, kindergartens and other institutions for children and young people, little has previously been done to investigate which type of training teachers and social workers need to have to be able to work professionally with health topics.

Objectives:

The purpose of the project is to examine and strengthen the structure and the content of the health education at teachers' and social workers' training colleges.

Strategy:

In Autumn 2004, a survey was conducted at all education places of teachers and social workers in Denmark. The

survey included:

- A mapping of the content and structure of health education on several teachers' and social workers' training colleges
- A survey of the attitudes of the principals, teachers and students towards the health promotion education that is offered at the teachers' and social workers' training colleges
- An investigation of the students view of the health promotion training they have as part of their education
- Recommendations to further action to strengthen the health education in the future.

Results regarding social workers

- Social workers receive training in health promotion as part of their education
- Health promotion is a well defined part of the education. The reason being that there are formal rules about both structure and content of the education. Secondly, health promotion and the work in the social field are closely related topics.

Results regarding teachers

- Education in health promotion is not prioritized very high at the training college. Health promotion and health topics are not defined as a separate topic, but are merely defined as a part of other topics.
- There are no specially trained teachers in the health field and both teachers and students are uncertain about their role regarding health promotion.

Recommendations

To ensure that children and young people are guided or educated properly regarding health topics, more emphasis must be put on the structure and status of health education and health promotion at the education places of social workers and teachers.

Capacity Building with help from surveillance

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How can one use surveillance to motivate health promotion action?

Malmö is divided into ten districts with a district government in each district. To monitor and develop public health, a welfare report is conducted each year. The report is based on the eleven National public health objectives.

The welfare report serves as a platform for health promotion work in Malmö.

It contains 36 indicators with statistical material from different sources, describing the economical situation, social security, participation and influence in society, physical activity, eating habits, reproductive health etc. An index makes it possible to compare the ten districts, which shows large differences from one district to another.

Communicating the welfare report is crucial. It promotes a political discussion in the district government and among civil servants. A future challenge is to get politicians to use the welfare report as a necessary instrument in budget planning and for civil servants to use it as a tool for specific actions.

Another example is a survey conducted every third year covering the youth health situation. The results are presented on a CD together with exercises in health promotion methods. In this way the data's brought back to teachers and students.

A tobacco, alcohol and drug prevention strategy for Malmö 2002-2010 – from words to action

Anna Balkfors

The City of Malmö, MALMÖ, Sweden

Malmö is a transit area for alcohol and drugs.

Due to its geographical position about 70% of the illicit drugs entering Sweden passes through Malmö. As alcohol beverages are much cheaper in surrounding countries, there is a growing illegal business selling alcohol to youths.

This situation calls for action

In 2002 the City Council of Malmö stated an eight-year agreement together with 7 public and private actors. The uniqueness about this strategy is that it's a long-term, community based action programme that involves many partners with resources for implementation.

The vision is a city free from tobacco and alcohol related diseases and a city free from illicit drugs.

About 40 different groups are now collaborating within four areas:

Act on supply of drugs: e.g. education in responsible beverage service.

Act on demand: information and education to parents and school staff, social and emotional training to high-school students and act on public opinion.

Support the preventive work to sustain the action: e.g. support team, education and preventative actions during youth party holidays.

Information and evaluation: e.g. producing and communicating surveillance to motivate action.

Healthy Ageing

EU funded project 2004-2007

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By the year 2015, there will be 50% more people aged 80 and above than in 2000 in the present EU.

The aim of the project is to promote healthy ageing in later life stages. The project will be looking at different aspects of health and promote healthy ageing by development of an integrated holistic approach to health in later life. Data on health, impact of health determinants and older people at EU and member state level will be reviewed as well as effective intervention/literature, best practice, policies and strategies. Recommendations for policy and practice on healthy ageing at EU and member state level will be made and a report will be produced.

The project will facilitate and develop further healthy ageing partnerships for exchange of best practice. National implementation will take place during the first half of 2007. Target groups are policy makers, practitioners and NGOs focusing on older people, at EU- and member state level.

Countries involved are Austria, Czech Republic, Finland, Italy, the Netherlands, Norway, Portugal, Scotland and Sweden. Also AGE (European Older People's Platform), EuroHealthNet, WHO are involved. The project is initiated and coordinated by the Swedish National Institute of Public Health.

Shared responsibility for health care at home

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This paper will summarise the main findings from an ethnographic study of home care that took place in Reykjavik from 2001-2004. The purpose of the study was to describe the well being of people living at home who suffer from long term health problems that limit their ability to perform self-care activities. The study also focused on the experience of relatives who provide care and assistance, environmental conditions and official support from health care services. Data were interviews with people who need assistance, their caregivers and the RN's in charge of their care. A field-study was conducted focusing on the housing condition, community resources and home environment. A total of 30 households, each referred to as case studies were analyzed. This paper will focus on the home as a place of health care and the negotiation of the division of labour between relatives and nursing services. The paper will highlight both positive experiences and difficulties described by relatives. The nurses identified meeting the person and relatives were they 'are' as the core of their understanding of nursing practice in the home, while working conditions were described as difficult. These findings will be analyzed and discussed in light of theories on welfare services and the ethics of health care.

Focus Group Discussions as a method for public health research

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Focus Group Discussions are a data collection method that provides a forum for participants in which to discuss a wider range of ideas and issues than would arise in individual interviews. Focus groups encourage discussion and reflection on issues of public concern as well as the emergence of common or shared views. This method has been gaining popularity in health care research as it adds valuable information to other methods such as surveys and individual interviews when researching the lay and professional perspective on public health.

This poster will review focus groups as a method and will touch upon the following issues:

- the purpose of using Focus Group Discussions in public health research
- the methodological intricacies of conducting a good Focus Group Discussion
- when it is appropriate to use Focus Group Discussions as a method
- the limitations and potential problems with using Focus Group Discussions
- the methods of reporting Focus Group Discussions, i.e. note taking and interviewing the moderator of a Focus Group Discussion in order to supplement and validate results

PEP Professional Exchange Programme

For Professionals in Public Health, Health Promotion and Health Education

Björn Carlén

Swedish Assoc. of Public Health &, VÄSTRA FRÖLUNDA, Sweden

Are you curious about, for some weeks, working with public health in another European country?

PEP Aim

The programme will support and encourage individual members in the free exchange of ideas, knowledge, know-how and experiences by exchanging workplaces for some weeks.

PEP initiative by The Swedish Association and IUHPE

The Swedish Association of Public Health and Health Promotion is an institutional member (national scope) of the International Union for Health Promotion & Education (IUHPE). Almost 1 000 members are affiliated with the Swedish Association. Most of the members of this non-governmental organisation are health workers in county councils, municipalities and other local organisations.

According to IUHPE's strategic directions, 1998-2004, its mission is to "promote global health and to contribute to the achievement of equity in health between and within countries in the world". The Swedish association has initiated a workplace exchange programme in Europe and the IUHPE will be the platform for the exchange. The idea has been discussed at the IUHPE World Conference in Paris 2001 and at the IUHPE European Conf. A network of national contact persons/co-ordinators has been built up.

PEP in the future

PEP will be a possibility for professionals to experience another country - gain new ideas and knowledge - and in return host a colleague from abroad. The programme will start to administer some pilot exchanges, which will be evaluated.

The annual IUHPE European conferences will be a natural platform for discussing further development of PEP.

You are most welcome to join us in planning or taking part in the exchange!

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Communicative ability and support important when administrators at the local social insurance office meet disability pensioners

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The high rate of disability pensioners is alarming in many industrial countries today. In Sweden the rate was 9.5% of the population aged 16-54 years in March 2005. Through new legislation, which came into force 2000, disability pensioners in Sweden are able to go back to work without jeopardising their benefit. This 'resting disability pension' was used by 0.2% of all disability pensioners in Sweden during 2000 (n=771).

The treatment of disability pensioners at the local social insurance office has previously been shown to be important in order to make them interested in returning to work. The aim of this study was to identify what disability pensioners saw as important in the contacts with the local social insurance office.

Interviews were conducted in autumn 2002 with 17 disability pensioners suffering from musculoskeletal disorders who went back to work by means of 'resting disability pension' in 2000.

All respondents considered 'resting disability pension' as a positive possibility. Important factors in the contacts with the local insurance office were:

Good communicative ability - to be treated as the unique individual you are.

Support - to be encouraged to try and continue the work attempt, to solve problems together and to strengthen self-esteem.

Burdens of Birth in Guinea-Bissau

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Introduction

The disturbingly high global mortality rates of children less than five years of age have recently been given increased attention. Since 1990 reduction of mortality rates has slowed down and rates have even increased in some countries, in particular sub-Saharan Africa. In the Millennium Development Goals, the international community pledges itself to reduce child mortality by 2/3 by the year 2015, but progress is less than satisfactory.

Scholars, who have paid attention to the emotional burden of child deaths on mothers, tend to take mother love either to be self-sacrificing and unconditional or a question of survival, thus easily eroded in societies with extreme poverty and high expectancy of child death.

Objectives

Examine theories of mother love through examination of birth giving practices, conceptions of children, interpretations of diseases and death, and patterns of healthcare seeking and mourning.

Methods

Anthropological fieldwork conducted among the Papel population in Biombo region, Guinea-Bissau, in 1993-1998. Guinea-Bissau is one of the poorest countries in the world and in Biombo one third of children are likely to die before the age of five. The main methods applied were participant observation, interviews and surveys.

Results

Papel mothers do not neglect their children in terms of daily care or during illness. Nor do mothers fail to mourn children who die, irrespective of whether they are normal children, favourite children or children suspected to be dangerous spirit children, born without a human soul.

Conclusion

Mother love is not unilaterally self-sacrificing, nor is it simply a question of survival.

National Centre for Smoking Cessation – a strategic tool for capacity building at local level

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National Centre of Smoking Cessation was established in 2001 as a temporary joint project between the Ministry of Health, the National Board of Health and the Municipality of Copenhagen. It will close 30. September 2005.

The main task of the centre is to support the counties in establishing smoking cessation services that are well structured, evidence based, available and coherent. This is achieved through a number of activities: 1. Support the implementation of local smoking cessation projects supported by by a fund amounting 2,2 mio. Euro, 2. Facilitate

capacity building of county representatives responsible for smoking cessation services by involvement and networking 3. Facilitate development of national guidelines and materials to support the implementation of smoking cessation activities at all levels.

The set up of the National Centre for Smoking Cessation has been evaluated - and the last part of this evaluation will be finished at the end of September 2005. The presentation will give the results of the final evaluation focusing on a) success in terms of satisfaction of the regional and local keypersons, b) the success in terms of creating more and better services in an area controlled by the regional bodies, and give some recommendations for other countries.

Communication of results from 'Life and Health Young 2005'

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Background

The health and well-being of adolescents in Sweden is generally good.

However, in some areas the health has progressively been worse such as overweight, psychological health, alcohol use.

To optimally handle these health related problems shared responsibility and a developed collaboration between different instances is necessary.

In order to find out more about how to communicate results it was decided to get a consumer evaluation of how results from a large epidemiological study from 10.000 adolescents in Uppsala län was received.

Aim

The aim of this study was to get a consumer evaluation of how to communicate health related results and to increase knowledge about how to improve collaboration.

Method

Subjects

120 principals and vice principals at 67 different schools in Uppsala län was included.

Material

Two different questionnaires were sent by mail together with the reporting of the results of the epidemiological study.

The reporting of the results consisted of: a) information on health on each specific school as a powerpoint file b) information on health as a powerpoint file as a feedback to the adolescents c) A pamphlet with questions to discuss about health.

Questionnaire one and two consisted of questions concerning the opinion of this material, what health promoting activities each school work with today, opinion of how collaboration could take place, whether there were any other

areas of importance for health promoting, and presumptive use of the material.

Result

The result of this study is in progress and will be reported in the fall 2005.

Lifestyle and health of female flight attendants, nurses and teachers

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Health-related lifestyle, harassment at work, and self-assessed health of female flight attendants, nurses and primary school teachers were surveyed. A higher proportion of flight attendants than nurses or teachers, exercised on a regular basis, slept long hours, were smokers, 26% vs. 15% and 17% respectively; and consumed alcohol at least once a week, 40% vs. 21% and 16%. Flight attendants were on average somewhat taller, but weighed on average less, 63.8 kg vs. 72.4 kg and 72.7 kg respectively, and were less worried about their weight. Repeated sexual harassment at work was more common among the flight attendants, 31% vs. 8% and 4%; whereas bullying, physical violence and threats were less prevalent (12%) than among nurses (19%). Repeated exposure to sexual harassment, bullying, violence and threats was related to less physical and psychological well-being in all the groups. Teachers scored on average significantly lower than did the flight attendants on general health and physical well-being, while nurses did not.

Employers should take exposure to sexual harassment, bullying, violence and threats into account when they conduct workplace risk assessment and enhance healthy lifestyles among their employees.

Tobacco prevention and immigrant groups (TTI)

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The fundamental idea of the project was to examine and use various public health methods and thereby combine individual, group and community directed efforts and to coordinate such efforts in time and place. One of starting points of the project was the fact that smoking is more widespread in the majority of immigrant groups compared with those who are Swedish by birth.

The main project (TTI) addressed two linguistic and cultural areas, namely the Arabic language and culture area and the Serbian, Bosnian and Croatian language and culture area respectively. These comprise the two largest non-Nordic language areas in the City of Göteborg, Sweden.

The main project worked with six method areas:

- increased involvement, transfer of knowledge, norm and attitude changes

- smoke-free environments
- quit smoking support
- raised expectations
- children and young people
- workplaces

The project collaborated with 47 immigrant associations in Göteborg and took part in 130 meetings with representatives and members of these associations. Directly and indirectly the project reached about 18,000 people in the target groups with the message on the ill-health effects of tobacco smoking.

Experience from the project supports the principle that public health work with the goal of changing attitudes and behaviour requires broad efforts with a focus on both individual, group and community levels.

The TTI project was met with enthusiasm, warmth and respect. The project put tobacco smoking and its harmful effects on the agenda among many immigrant groups and their associations, offered cooperation and gave the associations attention.

The significance of creating partnerships is among the most important experience from the project. Both the project and the immigrant associations accepted a partnership and only when such a relationship was established, with a feeling that the work was two-sided and there were advantages for both parties, could the project's efforts be successfully implemented.

Changes in general practitioners' (GPs) perceived barriers to engaging in smoking cessation activities and the effects of a nation-wide quitline

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OBJECTIVES: To assess to what extent Swedish GPs engage in tobacco cessation activities compared with previous results from 1999 and to assess the effect of a nation-wide quitline. **DESIGN AND SUBJECTS:** A cross sectional study including a random sample of 967 Swedish GPs answering a questionnaire mailed to their home address in the spring of 2003. The results of the present study are compared with results from a similar study conducted in 1999. **MAIN OUTCOME MEASURES:** GPs self reported activities, perceived barriers for engaging in smoking cessation, and referrals to the quitline. **RESULTS:** Answers were retrieved from 621 (64%) GPs. Compared with 1999 GPs had increased their over all smoking cessation activities and were more aware of the complexity of smoking cessation support. Significantly more GPs experienced smoking cessation support as 'to time consuming' and preferred to refer smokers to counsellors specialised in smoking cessation. GPs referring patients to the quitline were more likely to be active in other smoking cessation activities. One out of five GPs had advised their patients to use oral tobacco as means to stop smoking. **CONCLUSIONS:** A paradigm shift regarding awareness of the complexity of smoking cessation support may be ongoing amongst Swedish general practitioners.

Emotional isolation – an underestimated public health problem in men

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OBJECTIVES: To assess the prevalence of emotional isolation in men in general and prostate cancer patients in particular and investigate to what extent it affects well-being.

DESIGN AND SUBJECTS: A cross sectional study using an anonymous postal questionnaire mailed home to all 431 prostate cancer patients diagnosed in Stockholm County over a period of one year aged 50-80 at the time of selection. Also, a random sample of 435 aged matched men from the same region was included.

MAIN OUTCOME MEASURES: Self reported sharing of emotionally taxing feelings and psychological and physiological well-being.

RESULTS: Having no one to confide in was reported by approximately one in five men. For those who reported to have some one to confide in the partner was usually the only source of emotional support. Emotional isolation was significantly related to several factors of psychological and physiological well-being.

CONCLUSIONS: Lack of emotional support in taxing situations may be an underestimated public health problem in men.

Television in bedroom of 7 year- old Icelandic children and parents' assessment of their body weight

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Background

Sedentary lifestyle and changes in dietary habits have been associated with dramatic increase in the prevalence of obesity and overweight among Icelandic children in recent decades.

Aim

The aim of the study was to explore the effect of conditions in the home environment and parents attitudes on children's body weight, diet and physical activity.

Method

Questionnaires were sent to 298 parents of all 7 year old children in 5 elementary schools in the capital area
Response rate was 81.6%.

Results

More parents considered their child to be underweight (20%) than overweight (12%). While about 43% boys and 22% of girls have a television in their own bedroom, a significant association between television in children's bedroom and perceived overweight was observed among girls only. Children who have a television in their room spend significantly more hours per week watching television than other children.

Conclusions

There is a discrepancy between the proportion of children considered overweight by their parents and observed prevalence of overweight and obesity among Icelandic children. The common practice of having a television in the bedroom of a child may increase the risk of overweight and sedentary behaviour.

Building community capacity through evaluation research

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Introduction. Empowerment is identified as the main concept in health promotion discourse. Central idea of this is that community capacity could be increased to address health and social needs. Building evaluation capacities may develop empowerment in communities. The study was carried out in Rapla, Estonia and involved three community programmes which applied empowerment evaluation methodology.

Methods. A consensus workshop method was conducted to create the measurement tool and to collect capacity indicators data. Four steps approach was used to assess each domain of community capacity. Altogether 36 indicators were analysed and assessed.

Results. Measurement demonstrated that community capacities were increased considerably during the empowerment evaluation process among the community workgroup, which has existed for a longer time and is initiated by community members. Capacities are weaker but still continuously developing within a workgroup, which is initiated by national programme and has strong political and financial support from national level. Capacities are fluctuating if there is no political nor financial support from national level.

Conclusions. The empowerment measurement tool elaborated by community members have proven to be applicable, relevant and also a rapid, simple and inexpensive tool that can be used in the evaluation of the community capacity change.

Clients' Needs in Vocational Rehabilitation

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This study is a Health Needs Assessment conducted as a case study in regional vocational rehabilitation service. Its purpose is to investigate relevant actors' definition of the clients' needs. The study falls into three parts: Document analysis, focus group interviews, and questionnaire.

Document analysis of law texts, regional authorities' policy papers, and information to the public revealed several needs. They could be classified into five categories (work, welfare benefits, personal clarification, qualified case management, and qualified rehabilitation). Relevant actors (decision makers, professionals, and clients) were interviewed in four focus groups. Hereby, another category (acceptance/respect) was identified. There was agreement between actors' views on most of the clients' needs, smaller differences in other, and disagreement in only few types of needs.

A questionnaire was presented to a representative sample of clients asking them to assess the importance of the already identified needs. Needs in the categories personal clarification, acceptance/respect, and qualified case management were ranked highest.

It is proposed that future development of methods in vocational rehabilitation concentrates on identifying and meeting clients' needs in order to increase their motivation for active participation in the rehabilitation process.

Determinants of fruit and vegetable intake among eleven-year-old schoolchildren.

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Objective:

To identify determinants of fruit and vegetable intake among eleven-year-old schoolchildren in the country with the lowest European consumption of fruits and vegetables.

Methods:

A cross-sectional survey was performed in 9 European countries in the autumn 2003 in the Pro Children cross-Europe survey, an integrated project supported within the EU's 5th framework program. This paper gives information about the Icelandic results. The survey was designed to provide information on actual consumption levels of vegetables and fruits in European school children and their parents and to understand the determinants of consumption patterns among the children. The children answered a validated self-administered questionnaire during

one school lesson, and brought home questionnaire to their parent(s). Multiple regression analyses were performed to determine the explained variance of the children's fruit and vegetable intake. The scales were put in the model stepwise, first background variables, then perceived physical-environmental scales, perceived social-environmental and last personal scales.

Subjects:

A total of 1235 children participated (participation rate 89%) in 32 randomly chosen schools.

Results:

Mean intake of fruits and vegetables was 95g/day and 60g/day respectively. Mean usual intake of fruits and vegetables was about once a day of each. Overall, 43% and 41% of the variance in children's fruit and vegetable reported intake was explained by the determinants studied. About 7% and 13% of the variance in fruit and vegetable intake was explained by the perceived physical-environmental scales, mainly by home availability. About 30% and 18% of the variance in fruit and vegetable intake was explained by the personal scales. For fruit the significant scales were; habit, knowledge, preferences and self-efficacy and for vegetable it were; preferences, habit, knowledge and liking.

Conclusion:

Interventions to increase fruit and vegetable intake among children should aim at environmental factors such as greater availability of fruit and vegetable as well as personal factors such as increasing knowledge in nutrition.

Public health policy of Stockholm County Council

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In 2003 the national assembly adopted a national goal of public health with 11 target areas. The work is based on the understanding of health determinants influencing public health.

With 1.9 million inhabitants and responsibility for health care, public transports and regional development, the county council has within its own areas of responsibility great possibilities to influence a variety of health determinants.

The public health status of the Stockholm region was reported in 'Public Health Report - 2003' a review of a 10yr development. Based on this the political majority of SCC decided to develop a regional policy of public health.

The overall goal of the policy is 'a good and equal health for all people living in the county', there are 5 target areas.

1. Improved living conditions

2. Improved environment
3. Improved working conditions
4. Improved lifestyle
5. Improved mental health

The experience from the policy process points to 4 necessary steps :

1. Assessment and Preparation : Identify Stakeholders, Advocacy, Analysis of Policy Environment, Formation of project
2. Policy formulation : Set goals and objectives, Strategy formulation /Mainstreaming of already existing policies and strategies, Intersectoral involvement
3. Approval and Ratification: Decision by appropriate political level, Dissemination of policy to all concerned through the appropriate channels of communication
4. Implementation and monitoring: Communication strategy and plan for implementation, Indicators for monitoring .

Currently the project focuses on the implementation phase. Indicators for monitoring are to be developed.

Possibilities of linking evaluation of the implementation process to evaluation programme within the area of sustainable development are being investigated.

Patient Education with Empowerment in Type 2 Diabetes Patients in Primary Care.

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Eighty-one male (aged 61±9 (mean±SD) years) and 71 female (aged 63±8 years) type 2 diabetes patients treated in general practice were included in the study. Patient education was carried out by a mobile team in the local communities in a Danish county. The intervention consisted of 3 periods of education during 12 months: One week (26 hours) at baseline, 2 days (16 hours) after 3 months, and one day (6 hours) after 12 months. The education was based on the empowerment vision and delivered by general practitioner, nurse, dietician, physiotherapist in groups of 10-12 patients.

Three months results:

Bodyweight decreased from 89.7±18.4 to 88.0±18.1 kg., p<0.001 and HbA1c from 7.8±1.4 to 7.3±1.1%, p<0.001.

There was no change in blood pressure (from 140.9±15.3/82.2±8.5 to 141.7±16.0/81.8±8.5 mmHg). Self-rated health increased ('overall health' p<0.001 and 'well-being' p=0.042). In the questionnaire, 39% of the patients reported increased physical activity but there was no overall change in the test of physical activity (p=0.119).

The first part of an education program with empowerment in a group setting with mobile education units in primary care was associated with improved glycaemic control, decreased bodyweight, and improvements in self-rated health in type 2 diabetes patients.

Maternal dietary intake and prepregnant weight related to excessive or suboptimal weight gain in pregnancy

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The relationship between maternal dietary intake in early and late pregnancy and excessive or suboptimal gestational weight gain was investigated.

Dietary intake of 495 healthy pregnant women was estimated with a semi-quantitative food frequency questionnaire covering food intake and lifestyle factors for the previous three months. Questionnaires were filled out at 11-15 and 34-37 weeks gestation. Dietary factors related to at least optimal and excessive weight gain during pregnancy were presented with logistic regression controlling for confounding.

Of the women, 26% gained suboptimal weight and 34% excessive weight during pregnancy. Women with at least optimal, compared with women with suboptimal weight gain, were more likely to increase their caloric intake (OR=3.32, CI =1.81-6.09, P<0.001) and drink more milk in late pregnancy (OR=3.10, CI=1.57-6.13, P= 0.001). The same dietary factors were related to excessive, compared with optimal weight gain. Furthermore, eating more sweets early in pregnancy increased the risk of gaining excessive weight (OR= 2.52, CI=1.10-5.77, P=0.029). Women overweight before pregnancy (BMI= 25.0-29.9) were most likely to gain excessive weight (OR=7.37, CI 4.13-13.14, P<0.001).

Women overweight before pregnancy need special attention and support in order to avoid excessive weight gain during pregnancy as too much weight gain is associated with associated pregnancy and delivery complications as well as increased risk of overweight and obesity after delivery.

Why Non-Pharmacological Prescribing of Antibiotics?

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Concern has increased worldwide with regard to the over-prescribing of antibiotics. According to research, a great deal of this use is for what has been called 'non-pharmacological' reasons. The reduction of unnecessary antibiotic use and exploration of the reasons for 'irrational prescribing' has become a public health priority.

Therefore the author studied the reasons cited by Icelandic general practitioners for their 'non-pharmacological' prescribing of antibiotics by a qualitative methodology with research dialogues with 16 Icelandic general practitioners guided by the Vancouver School of doing phenomenology.

The most important reasons for prescribing antibiotics in situations with low pharmacological indications (non-

pharmacological prescribing) were an unstable doctor-patient relationship due to lack of continuity of care, patient pressure in a stress-loaded society, the doctor's personal characteristics, particularly zeal and readiness to serve, and finally, the insecurity and uncertainty of the doctor who falls back upon the prescription as a coping strategy in a difficult situation. Relational factors in the interplay between the doctor and the patient are often a key factor. Continuity of medical care and a stable doctor-patient relationship may be seen as the core concepts in this study and the most important task for the GPs is to promote the patients' trust.

Testing Partnerships for Health

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The main object of this project is refining methods of partnerships for health. The project collects informations from different contracts of partnership for health, formed by the County of Roskilde, Denmark and partners in the years 2003 - 2005. The contract of every partnership are described according to purpose, partners, target group and intervention as well as procedures for contract, organisation, communication strategies, contribution of resources and criterias of success. The results of each partnership will be evaluated as well as the methodology used. Nine contracts of partnership have been formed by the County of Roskilde and different types of partners e.g. nongovernmental organisations of patients or leisure activities, institutions for mentally retarded persons and schools offering evening courses for adults. The results untill now show that these kind of partnerships for health presumably do enable activities, which would not have been established otherwise, and that the partners do obtain new knowledge about the each others conditions, interests, competences and resources. The results of the whole project will be published in a report in early 2006.

Psychosocial strain, health and organisational factors among employees in the Icelandic banking sector

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Objectives The aim of the present nation-wide study was to explore the connection between the organization of work and the well-being among personnel working in bank services in Iceland.

Methods The study was cross-sectional. In March and April 2002, a questionnaire was distributed to all employees in branch offices of the bank service having 10 employees or more throughout Iceland. The total response rate was 80%. The survey was based on the General Nordic Questionnaire for psychological and social factors at work. The data was analyzed using odds ratio and logistical regression.

Results The organization of work was clearly linked to the employee's psychosocial strain. The strain was closely connected to various types of health outcomes, especially chronic fatigue and mental disorders. The supervisors were more at risk for mental exhaustion and finding work mentally difficult and stressful than other professional groups in the banks.

Conclusions It is important, when introducing work health promotion programmes, to take notice of the mismatches between work organization and personnel that are manifested in this study, and consider the organizational aspects that are influential in that respect for all occupational groups, not least the supervisors.

The eye of technology and the well being of women and men in Icelandic work places

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Introduction: The study assessed the association between working under surveillance and electronic performance monitoring and the well-being among women and men in six Icelandic workplaces.

Methods: A questionnaire based on the General Nordic Questionnaire for Psychological and Social Factors at Work was delivered to 1369 employees of six companies where substantial EPM is in place in the time period from February to April 2003. The data was analyzed using odds ratio and logistical regression.

Results: The response rate was 72%, with close to equal participation of men and women. The employees who were working under EPM were more likely to have poor psychosocial work-environment, to have experienced significant stress recently, to be mentally exhausted at the end of the workday, to have significant sleep difficulties and to be dissatisfied in their job.

Conclusion: The development of the information and communication technology that allows employers and managers to monitor and collect different electronic data about the work process and productivity of the workers makes it important to follow the health condition of those who work under electronic performance monitoring.

Sexual health in Malmö

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The Sexual Health programme is the result of the increase of HIV/STI (Sexual Transmitted Infections), unwanted pregnancies and sexual violence in the 1990:s. The Department of Public Health in Malmö co-ordinates the implementation of the programme which involves for example:

- Developing the strategic work against prostitution: support practical efforts, stimulate collaboration with other stakeholders, arrange financing and produce a basis for evaluation.
- Promote and support sexual-education in schools: educate teachers, finance and evaluate local projects, publish educational material, try out new methods: a talk show called Sexboxä, student participation in Ansvar & Respektä, school policy making in SåSANTä.
- Support and collaborate with NGO:s in questions like anti-discrimination of gay and HIV-positive, female circumcision etc.

- Support politicians in policymaking.
- Develop collaboration both within the administration of the City of Malmö - different departments working with the same issue e.g. sexual violence - and with regional or state institutions e.g. health care, police and universities.
- Produce campaigns mostly around hiv/STI

Challenges:

How to turn project into ordinary practice? · How to support politicians with evidence-based information? · How to develop collaboration? · How to use scientific methods in practice?

Participation of Icelandic Nurses' in Smoking Cessation Counselling.

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Anonymous mail survey was conducted in September 2004. The purpose was to analyze self-reported attitudes, competence and participation of Icelandic nurses in smoking cessation counselling. A questionnaire with four and five point Likert scale was used.

Results: We report data for responders who were in frequent contact with patients/clients (n= 743). Over 62% asked always/almost always about smoking habits and 48% advised/informed about the importance of smoking cessation. Responders were asked to estimate the number of clients they had assisted in smoking cessation during previous year. Only 218 nurses (29%) answered this question. Forty one of them had assisted 12 or more clients. Barriers to providing assistance include: 'can not justify the use of time' (6%); 'not part of duty' (18%); 'insufficient time' (27%); 'insufficient knowledge' (30%) and 'insufficient training' (54%).

Conclusions: Nurses should play an important role in tobacco control. Most of the responders in this survey provide a good example by not smoking. A majority agrees that smoking intervention is an intrinsic part of their job. However, all too few incorporate this into their practice. Less than half advice/inform about the importance of smoking cessation and very few assist more than one patient monthly. It is necessary to find ways to increase the participation of Icelandic nurses' in smoking cessation counselling.

Health Related Quality of Life in Icelandic School Children

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This study evaluated generic health related quality of life (HRQOL) among 10-12 year old Icelandic school age children who were either with or without chronic health condition. The children and their parents answered self-report questionnaires. For the 480 children who participated, girls were found to perceive their HRQOL significantly higher than the boys, children who visited the school nurse over a one-week period and children who indicated they

were bullied by other children, perceived their HRQOL to be significantly lower than children who did not visit the school nurse over this time period or children who did not indicate they were bullied by other children in school. From the stepwise regression analysis, perception of health, school connectedness, health promotion, bullying victimization, visits to the school nurse and age, significantly predicted 43.8% of the variance of the girls' perception of their HRQOL. However, perception of health, school connectedness, chronic health condition/illnesses, bullying victimization and after school activities predicted 48.1% of the boys' perception of their HRQOL. Children with chronic health condition or illnesses, reported their HRQOL to be significantly lower than children without chronic health condition. Assessing HRQOL among 10-12 year old children might be helpful to take preventive action early on in children's life and development.

Health Related Quality of Life Among 10-12 year old Children with or without Chronic Health Condition/Illness(es): The Parents' Perspective

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The purpose of this study was to evaluate mothers' and fathers' perception of their child's health related quality of life (HRQOL) among 10-12 years old Icelandic children who were either with or without chronic health condition or illness(es). A total of 912 Icelandic parents participated in the study (510 mothers and 402 fathers) and 480 children (209 boys and 271 girls). The Icelandic fathers of children who visited the school nurse over a period of one week perceived HRQOL of their children to be significantly lower than the mothers. A gender difference was found between the parents; mothers perceived their children to have significantly higher school functioning than the fathers. Both mothers and fathers perceived their children with chronic health condition/illness(es) to have significantly lower HRQOL than parents of children without chronic health condition. The findings underline the importance for school nurses to develop and test interventions for school age children in Iceland, particularly those with chronic health condition or illness(es). In that way, preventive health care strategies could be further integrated into the health care services offered on a daily basis by Icelandic school nurses today.

Farmers' health and distance to primary health care

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Easy access to health care is a cornerstone in public health. Distance to primary health care is an important measure in this respect. General public health factors involving e.g. accident prevention and clean water may also

be dependent on distance to municipalities.

All farmers in Iceland in 2004, with a farm size above 100 sheep or its equivalent in milk production were sent a questionnaire (N= 2042, response rate 54%). In it they were asked about distance to the nearest health care centre, type of farming, occupational accidents, 38 common medical symptoms in the past 12 months, and treatment seeking for 30 common ailments.

Treatment seeking was not affected by distance to healthcare service. Furthermore, general cardiovascular, pulmonary, mental symptoms as well as occupational accidents did not vary. Those living further away had increased prevalence of stomach-aches, heartburns sweating and trembling.

Distance to primary health care among Icelandic farmers does not appear to affect their use of it. However, increase distance is associated with gastrointestinal symptoms which points to hygienic factor such as water. A concern that should be viewed in context with concerns of the Environment and Food Agencies on the quality of drinking water in rural areas.

Focus on Health and Social well-being in the Baltic Sea Region (2005 – 2007)

Arvid Wangberg, K-J Rognlien

The Public Health Program, , Norway

Providing a focus for intersectoral planning and intersectoral action, the project will establish a partnership across national borders. The purpose is to strengthen democracy and improve the living conditions of the population in the Baltic Sea Region.

Successful implementation of a sustainable public health policy requires a good foundation of data in order to develop good living and environmental conditions. Today the methods of recording data may differ or be deficient.

HEPRO will work to enhance the health of all communities and individuals in the region. One purpose is to place public health-challenges on the political agenda in the Baltic Sea region. Among other objectives, the project seeks: To integrate health considerations into spatial planning and development.

- To describe and test out active elements in a sustainable public health policy, based on spatial health planning.
- To carry out a survey of the population's state of health where data can be used across boundaries.
- To develop and implement training programmes in public health work.
- To carry out pilot projects with the aim to reduce differences in state of health.

The Public Health Program in Østfold, Norway

Arvid Wangberg, K-J Rognlien

The Public Health Program, , Norway

Public health is one of the priority initiatives of the regional government plan for Östfold County. The county council district has combined forces with 14 different municipalities in the implementation of the local regional plan's Public Health objectives in a Public Health Program, organized as a partnership. The partnership also includes the regional university, the regional hospital and the County Governor of Östfold.

The objective of the partnership is to reduce the overall risk load we are subjected to and illustrate that preventive and health promotion work leads to positive results for the individual and society.

The Public Health Program emphasizes the need for systematic strategies based on the following method:

1. Outlining of factors that are detrimental to the health
2. Setting objectives
3. Local Activity Plans
4. Implementation
5. Evaluation
6. Adjustment of the activity plans
7. Communication of experiences and recommendation for continuation

Diet and prevalence of overweight and obesity in Iceland - The Icelandic National Nutrition Survey 2002

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Aims: The aim of the National Nutrition Survey was to assess dietary habits, nutrient intake and lifestyle factors in Iceland. Changes in overweight and obesity were measured against changes in diet from the previous national survey in 1990 .

Methods: The Icelandic National Nutrition Survey was carried out in 2002. Twelve hundred and forty two individuals, randomly selected from the national population register, age 15-80 years, participated in the survey and the net participation rate was 70,6%. The dietary assessment method was a 24-hour recall interview by telephone. For quantification, participants received a booklet with 4 portion sizes of 49 dishes or foods, in addition to common household measures. All data were entered directly into an interview-based program, ICEFOOD, developed for this study. Body weight and height were self-assessed.

Results: Quite dramatic changes have occurred in Icelandic dietary habits since the last survey was carried out in 1990. Traditional foods like milk, fish and potatoes have decreased considerably and have to a large extent been replaced by pizza, pasta and soft drinks in the youngest age group. Total fat consumption has decreased from 41E% to 35E% and hard fat (i.e. saturated and trans-fatty acids), has decreased from 19E% to 16E%. Vegetable consumption has increased by about 40%, but is still lower than in other Nordic countries. Added sugar is 11E% on average, but among young people the intake is much higher, 21E% for young men and 15E% for young women, age 15-19 years. The consumption of carbonated beverages is very high in this age group, 886g for men and 436g for women, and soft drinks contribute over half the added sugar in young mens' diets and about a third of the diet of

young women. At the same time overweight and obesity are on the rise, especially among young men where the proportion of men over ideal weight (BMI>25) is almost three times as high as in 1990. Overweight and obesity are more common among men than women, 57% of all men and 39% of all women being over ideal weight. Men who are overweight are more content with their weight than overweight women, while 25% of women in normal weight range are discontent with their weight and want to be thinner. Self-assessed physical activity during the previous week was negatively correlated with BMI among men only. The only dietary factor positively correlated with BMI in this study is dietary fat among men, while sugar or the consumption of sugared beverages showed no correlation with BMI.

Conclusions: In spite of some positive trends in dietary habits in Iceland e.g. decreased fat and increased vegetable consumption, the prevalence of overweight and obesity is increasing. General overconsumption and low physical activity are the most likely causes of this increased prevalence.