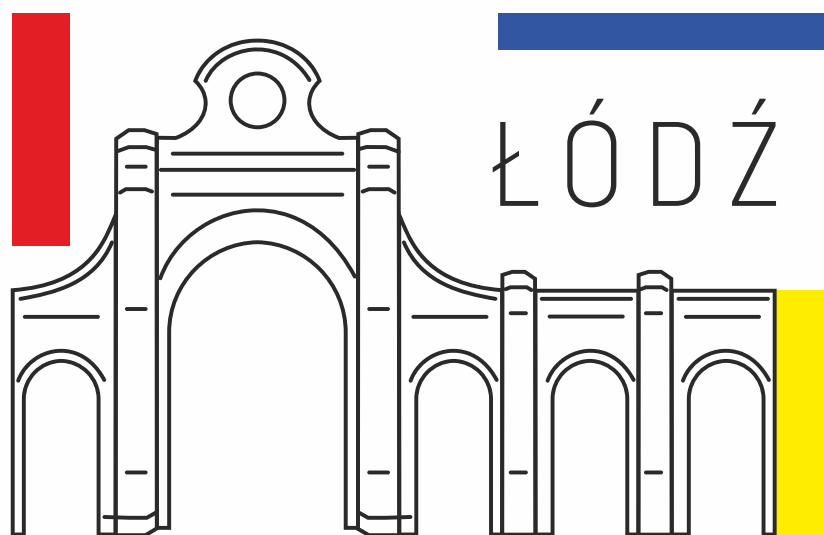


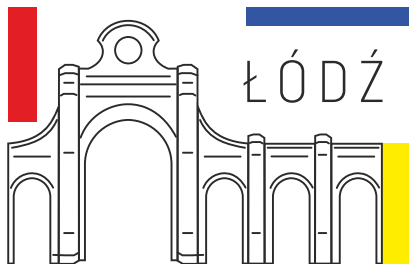
**12th IUHPE European Conference
on Health Promotion
→ 17-18.06.2024**



***Cultivating Change Through
the Lifespan***

Medical University of Lodz – Poland





12th IUHPE European Conference on Health Promotion

PARTNERS



PATRONAGE



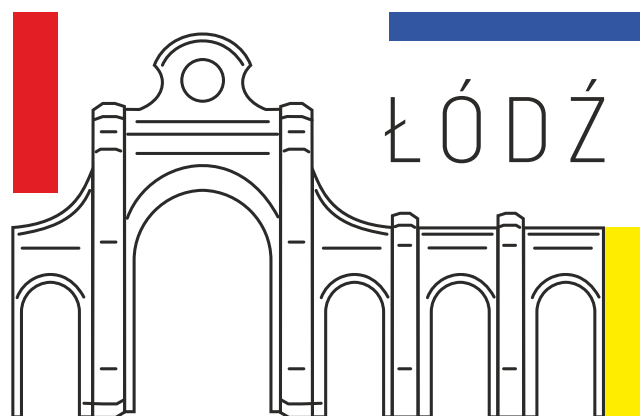
MAYOR OF THE CITY OF ŁÓDŹ
HANNA ZDANOWSKA

SPONSORS



MEDIA PARTNERS





It is our pleasure to invite you to the 12th *European Conference on Health Promotion*, organized by the International Union for Health Promotion and Education (IUHPE) in collaboration with the Medical University of Lodz, Poland. The conference brings together researchers, practitioners and policy makers from public health and health promotion, social work, education, and all levels of health care and management, and from all parts of the world. Its aim is to give its participants the opportunity to network, exchange experiences and advance the theory, research, policy and practice of health promotion.

The conference is organized around the theme of *Health Promotion: Cultivating Change Through the Lifespan*. This overall theme is developed in plenary sessions with high-level keynotes or roundtable discussions as well as throughout all the sessions in the event.

The conference discusses the rethinking of health promotion as a driver of change in the digitization age. It pays particular attention to the life-course approach as a comprehensive, temporal and societal perspective on the health and well-being of individuals and generations, and to adapting this model as one of the best practices in co-creating innovation in public health with and across countries. Young practitioners, undergraduates and PhD students, as well as other young researchers, in particular have space to share their experiences.



Host

Medical University of Lodz



The Medical University of Lodz (MUL) is the largest public medical university in Poland. It has over 70 years of medical tradition and there are 11 000 students attending different courses at MUL, including 900 foreign students. We educate future specialists in medical and health sciences.

MUL is considered a leader in the number of scientific publications and citations among medical schools in Poland. We guarantee high quality of teaching and scientific research in the medical and health sciences. We significantly contribute to the development of the health care system.

Foundation for the Medical University of Lodz



The FUMED Foundation for the Medical University of Lodz has been operating continuously since 2011. Our mission is to support the development and operation of the university through the promotion and integration of the academic community. We are actively involved in the life of the university, supporting its activities organizationally and financially.

Additionally, we deal with organization of conferences, conventions, symposiums, trainings and various types of special events.

Partners

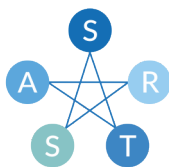
IUHPE



The **International Union for Health Promotion and Education (IUHPE)** has been operating for over 70 years. This NGO draws its strength from being a unique worldwide, independent and professional association of individuals and organisations committed to improving the health and wellbeing of people through education, community action and the development of healthy public policy.

IUHPE has proven to be relevant and resilient after periods of major change in the world's external environment and within the field of health promotion. Health promotion aims to empower people to control their own health by gaining control over the underlying factors that influence health. As long as these factors – peace, shelter, food, income, a stable eco-system, sustainable resources, social justice and equity – are not achieved, the IUHPE's existence and activities are vital to accomplish its mission to achieve global health and wellbeing between and within countries. The vision of IUHPE is a world where all people achieve optimum health and wellbeing.

Society for Theory and Research on Salutogenesis (STARS)



Society for Theory And Research on Salutogenesis

The IUHPE Global Working Group on Salutogenesis has the mission to advance and promote Salutogenesis. As part of its efforts, it founded the Society for Theory and Research on Salutogenesis www.stars-society.org with currently 2000 members. STARS is run by the IUHPE Global Working Group on Salutogenesis and the Center of Salutogenesis, University of Zurich. It provides a transdisciplinary platform for scientific exchange between researchers and practitioners in the field of Salutogenesis. STARS is co-organizing the regularly happening International Conferences on Salutogenesis.

UNESCO Chair Global Health & Education



The UNESCO Chair and WHO Collaborating Centre on Global Health & Education contributes to doing research and sharing available knowledge on health and education issues, and to support institutions and professionals in their work. At the global level, the work of the Chair is based on the strategies of UNESCO and WHO and supports these UN organisations in the development of their programmes and recommendations, as well as in the implementation of the Sustainable Development Goals (SDGs). At the national, regional and local level, it is involved in a range of enactment projects. By creating a global community, the Chair promotes the development of intersectoral policies and practices in the field of education and health.



Conference Chairs



Prof. Magdalena Wrześcińska
Medical University of Lodz, Poland



Prof. Paolo Contu
IUHPE/EURO Regional Vice-President
Università degli studi di Cagliari Sardinia, Italy

Scientific Committee



Prof. Magdalena Kwaśniewska, Co-chair
Medical University of Lodz, Poland



Prof. Stephan Van Den Broucke, Co-chair
IUHPE Vice President for Scientific Affairs
Université Catholique de Louvain, Belgium



Prof. Joanna Kostka

Medical University of Lodz, Poland



Karolina H. Czarnecka-Chrebelska, PhD

Medical University of Lodz, Poland



Prof. Altyn Aringazina

Almaty Management University AlmaU
Caspian University, Kazakhstan



Prof. Benjamin Harris

University of Oxford, United Kingdom



Patryk Stecz, PhD

Medical University of Lodz, Poland



Prof. Claudia Meier Magistretti

University of Applied Sciences and Arts Northwestern
Switzerland (FHNW), Switzerland



Prof. Diane Levin-Zamir

Professor of Health Promotion
University of Haifa, Israel



Erma Manoncourt, PhD

Paris School of International Affairs, France

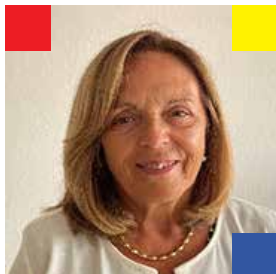


Prof. Igor Grabovac

Medical University of Vienna, Austria



Joint Organising Committee



Prof. Dolors Juvinyà Canal, Co-chair
University of Girona, Spain



Magdalena Kostyła, PhD, Co-chair
Medical University of Lodz, Poland



Jake Sallaway-Costello
University of Nottingham, United Kingdom



Liane Comeau, PhD
Executive Director of IUHPE, Canada
Université de Montréal, Canada



Prof. Anna Bonmatí Tomàs
University of Girona, Spain



Prof. Merita Berisha
National Institute of Public Health of Kosova, Medical Faculty
University of Prishtina, Kosova



Chrysanthi Tatsi, MSc

University of Crete, Greece



Prof. Didier Jourdan

Chair Holder of the UNESCO Chair "Global Health and Education"
and Head of the WHO Collaborating Centre for "Research
in Education and Health", France



Jarosław Rakoczy, MSc

Medical University of Lodz, Poland



Katarzyna Binder-Olibrowska, PhD

Medical University of Lodz, Poland



Prof. Karolina Kósa

University of Debrecen, Hungary

Keynote speakers



Aneta Andrzejczyk

The Deputy Director of the Office for Research, Strategies, and Development at the Medical University of Lodz, Poland
Medical University of Lodz, Poland



Hilaire Armstrong

Technical Officer, Youth Initiative and Strategic Partnerships
WHO Regional Office for Europe



Balázs Fürjes

InnoSTARS Managing Director



Dr. sc. nat. Saskia Maria De Gani

Department Head Careum Center for Health Literacy
Senior Researcher at Careum School of Health, Switzerland



Mikołaj Gurdata

Strategic Business Development Lead
EMEA Payer, Provider & Government



Prof. Maddalena Illario

Associate Professor
Federico II Department of Public Health, Italy



Prof. Didier Jourdan

Chair Holder of the UNESCO Chair “Global Health and Education” and Head of the WHO Collaborating Centre for “Research in Education and Health”, France



Prof. Tomasz Kostka

Medical University of Lodz, Poland



Prof. Diane Levin-Zamir

Professor of Health Promotion
University of Haifa, Israel



Prof. Paweł Ptaszyński

Medical University of Lodz, Poland



Prof. Lucyna Woźniak

Medical University of Lodz, Poland

Programme

Monday 17 June 2024

8.00-9.00 **Registration**

9.00-10.00 **Opening Ceremony** → Main Hall

Introduction to the Conference Theme: Health Promotion: Cultivating Change Through the Lifespan.

Co-Chairs: Prof. Magdalena Kwaśniewska, Poland & Prof. Stephan Van den Broucke, Belgium

Welcome

- Vice-Rector for Research Strategy and International Relations of MUL, Prof. Lucyna Woźniak, Poland
- Vice-President of the City Hall of Lodz, Adam Wieczorek, Poland
- President for IUHPE, Mr Sione Tu'itahi, New Zealand
- Conference Chair, Prof. Magdalena Wrzesińska, Poland
- Regional Vice President for IUHPE-Euro, Prof. Paolo Contu, Italy

10.00-11.00 **Plenary session: Promoting children's and young people's health in a changing world** → Main Hall

Moderators: Prof. Magdalena Kwaśniewska, Poland & Prof. Stephan Van den Broucke, Belgium

Speakers:

- Youth4Health Initiative – creating authentic and meaningful youth engagement in WHO/Europe's work and beyond. Hilaire Armstrong, WHO-Euro Youth for Health Initiative
- Working together to promote the health of children and young people in a world facing multiple crises
 - Creating supportive living environments and building health learning pathways. Didier Jourdan, University of Clermont Auvergne & UNESCO Chair for Global Health and Education, France

11.00-11.30 **Coffee break**

11.30-13.00 **Parallel sessions: Oral presentations**

1. Health Promotion and Prevention in and with Schools: European Perspectives, Approaches and Examples → Room A

Moderators: Stephan Van den Broucke, Belgium

- Health promotion in the school context: a global mapping of the literature on school health promotion. Didier Jourdan, France
- Health Promoting School implementation in Lombardy Region – Italy: an intersectoral reflective process to define core elements. Veronica Velasco, Italy
- Promoting Genuine Participation of Children and Young People in Education and Health Policymaking: lessons learned from the analysis of 55 case-studies from around the world. Silvia de Ruiter, Netherlands
- Health support needs of students from the perspective of school leaders. Results of the COVID-HL School Principal Study. Kevin Dadaczynski, Germany

2. Health Promotion among Children and Youth → Room B

Moderators: Jake Sallaway-Costello, United Kingdom

- Health promoting schools – Evaluating the effectiveness of a pilot ergonomics program for middle school children. Sara Maria Pani, Italy

- The Feeding Pattern is the Highest Risk Factor for Stunting in Toddlers. Kurnia Dwi Artanti, Indonesia
- Daily playful schoolwork design: a driver of positive school experiences. Helga Urke, Norway
- Implementation of a wellbeing awareness session in Moroccan primary schools: A pilot qualitative study with parents and teachers. Sarah Michaud, France
- Developing canteen staff' competencies towards a user perspective providing healthy meals for vocational school students. Liv Juncker Harsløf, Denmark
- Adolescents' experiences of sport education at upper secondary school level. Prerequisites for learning, health and personal development. Johanna Bergman, Sweden
- Benefits and challenges in implementing Youth participatory action research in Norwegian lower secondary schools. Ingrid Holsen, Norway

3. Health Literacy → Room C

Moderators: Merita Berisha, Kosovo

- Health literacy in primary care patients in Poland. Agnieszka Lipiak, Poland
- The IUHPE Position Statement on Health Literacy as an advocacy tool to promote health globally. Diane Levin-Zamir, Israel
- Evaluation results of the health literacy intervention Nebolus. Demian Frank, Germany
- Global to Local: Analyzing the Sharing and Adaptation of Massive Online Open Courses for Emergency Health on the OpenWHO Platform. Heini Utunen, Switzerland
- Enhancing Stroke Help-Seeking Behavior in Europe: A Clustered Controlled Trial Evaluating the Efficacy of the School-Based Intervention „HOBIT“. Ekaterina Volevach, Czechia
- Migrants' perceptions on sexual health and their sexual health education needs. Preliminary findings. Eleni Konstantinou, Greece
- Exploring understandings and perceptions of health literacy from the perspectives of children and adolescents - a meta-ethnography. Karolina Seidl, Austria

4. Health Promotion Practices → Room D

Moderators: Dolors Juvinyà Cana, Spain

- A house is more than a roof - it is a determinant of health: a case study in trachoma prevention across remote Western Australia. Melissa Stoneham, Australia
- Health promotion in deprived neighborhoods should focus on living environment instead of merely health and lifestyle. John Dierx, Netherlands
- Impact of front-of-pack nutrition labelling in consumer understanding and use across socioeconomic status: A systematic review. Marguerite Sendall, Qatar

5. Health Promotion Methods → Room E

Moderators: Lenneke Vaandrager, The Netherlands

- Participation as a key for promoting the well-being society in Austria. Irina Vana, Austria
- Photovoice: Students' Perspectives on Mental Health Promoting Resources at a University Campus. Cecilie Schacht Madsen, Denmark
- Investigating Volunteer Dynamics to Enable Improved Social Inclusivity in a Community Food Distribution Service in South-West London, United Kingdom. Marie Swettenham, United Kingdom

- The Dynamic Model of Health Assets. Yuliya Bodryzlova, Canada
- Breaking ground: Evaluating Lower Austria's first Regional Health Coordination Training. Ursula Griebler, Austria
- Assessing Communities for Scaling Up Community-Based Health Promotion: A Pragmatic Approach. Philipp Weber, Germany

6. Digital Health → Room G

Moderators: Karolina Czarnecka-Chrebelska, Poland

- Alcohol and Breast Cancer: the App „Secrets for Healthy Breasts“. Claudia Sardu, Italy
- Always on: evolving from a traditional social media campaign using new technology to extend reach and facilitate action. Christina Pollard, Australia
- European digital Health Literacy Strategy. Ana Inés, Rey Hidalgo, Spain
- A bottom-up approach to co-design an online digital health learning platform with end-users in Romania. Otilia Kocsis, Romania
- When health promotion meets arts: Evaluation of a VR-based alcohol prevention tool presented in an art exhibition. Robert Hrynyschyn, Germany
- Digital Leisure Time Use and Its Impact on Children's Subjective Well-Being: A Latent Class Analysis. Lars Bauger, Norway

7. Health promotion and Health care → Room H

Moderators: Magdalena Kwaśniewska, Poland

- Understanding the needs of patients with visual impairments - a step towards building equal and accessible primary health care. Katarzyna Binder-Olibrowska, Poland
- Functioning and Challenges in Individuals with Irritable Bowel Syndrome: a mix-methods survey. Natalia Plóciennik, Poland
- Strengthening health promotion and prevention in primary care : lessons learned from a Swiss academic center of general medicine and public health. Karin Zürcher, Switzerland
- Community Health Workers Address Vaccine Hesitancy Using Motivational Interviewing Skills. Patricia Valverde, United States
- Comparative study of health promotion actions in the context of primary care in the municipalities of Florianópolis, Santa Catarina, Brazil and Girona, Catalunya, SATALUNHA, Spain.
- Ivonete Teresinha Schuler, Buss Heidemann, Brazil

13.00-14.00 Lunch break

14.00-15.30 Parallel sessions: Workshops and symposium

Workshops

- Advancing Children and Adolescent Health Promotion: Planning and Testing Interventions. Marjorita Sormunen, Finland → Room A
- Empowering Young Researchers: Mastering Scientific Communication Techniques. Karolina Czarnecka-Chrebelska, Poland → Room B
- Professional health literacy of health professionals: What is the role of organizational conditions and educational training in this context? Saskia Maria De Gani, Switzerland → Room C

- Best practice portals and their role in addressing health inequalities. Yvette Shajanian Zarneh, Germany
→ Room D
- Health literacy policies – how can they be developed and implemented. Angelika Schlacher, Austria
→ Room E
- European perspectives on current trends and challenges in school health promotion.
Kevin Dadaczynski, Germany → Room G

Symposium

- Capacity building for effective health promotion practice: How to move forward in training, further education and developing a professional identity? Petra Plunger, Austria → Room H
 - Capacity building for health promotion: The case of health promotion training in Austria.
Petra Plunger, Anna Wahl, Austria
 - Capacity building for health promotion in Switzerland. The work of the health promotion working group at the Swiss Society of Public Health. Verena Biehl, Switzerland
 - The Bachelor's degree program in Health Promotion and Prevention in Switzerland. A practice-oriented curriculum based on the CompHP model. Alice Innauen
 - Further education program of the Austrian Health Promotion Fund and how participation change competencies in health promotion. Gert Lang, Petra Gajar, Austria
- Municipal health promotion and participation as a key strategy for health promotion across the lifespan from childhood to adulthood. Maja Kuchler, Germany → Room F
 - Participation as an important component of municipal health promotion. Patricia Tollmann, Germany
 - Develop health promotion with families in the kindergarten setting. Maja Kuchler, Germany
 - Development of a health promotion culture within the framework of student health management in universities. Janna Leimann, Germany
 - Participatory study on young people's understanding of health. Janna Leimann, Germany

15.30-16.00 Coffee break

16.00-16.45 Interactive Poster sessions → Exhibition space - Foyer

1. Health Promotion among Children and Young People

- Healthy and Happy Campus for Health Promotion Community. Sri Widati, Indonesia
- Health lifestyles profiles of the University of Andorra. Gemma Ribera Llonc, Andorra
- Coronavirus-Related Health Literacy of Polish School Principals and its Relation to the Health Promoting School Approach Implementation in Poland. Karina Leksy, Poland
- A Quantitative Study Examining the Effect of Perceptions of Gender Roles and Proactive Personality on the Relationship Between Work Volition and Academic Satisfaction among Undergraduate Students. Sultan Beles, Norway
- Suicide prevention for LGBTQ+ youth in Switzerland: an interpretive processual perspective. Tobias Kuhnert, Switzerland
- Empowering evaluation of the project „Io sto bene qui in montagna!“ to reduce child poverty in a mountain area. Claudio Tortone, Italy

- Physical activity promotion intervention at the university: old school learning methodology. Raquel Faubel, Spain
- Bridging Minds – A Situational Analysis of Mental Health Perceptions and Suggested Supports for Students across a Multi-Campus Irish University. Machailla McCabe, Ireland
- Eating behaviours of Polish and Portuguese young adults. Julia Bober, Poland
- Mapping Digital Public Health Interventions to Promote Mental Well-being among University Students: A rapid review. Claudia Pischke, Germany
- Adherence to the Mediterranean diet among Polish children. Validation of the updated version of KIDMED questionnaire. Julia Bober, Poland
- Can a mindfulness-based program be successfully delivered to youth with learning and socio-behavioural challenges? Cheryl Currie, Canada
- Psychological support in schools within the Health Promoting School approach: a strategical integration. Veronica Velasco, Italy
- Pandemic Babies: Unveiling the impact of pandemic unemployment on infant communication development in low-income US families. Mahala Swisterski, Canada
- Together at Social Sciences – Mental Health Promotion at the University Setting. Line Nielsen, Denmark
- Factors associated with mental health help-seeking intentions among university students in Kazakhstan: a cross-sectional pilot study. Raushan Alibekova, Kazakhstan
- Development and validation of a new instrument to measure parental health literacy in the context of early childhood overweight and obesity prevention. Verena Krah, Germany
- How universities implement the Health Promoting University framework: The study case of Xarxa Vives Network. Pol Comellas, Andorra
- Prevalence of gambling, study design and population of the experimental controlled study „GAPUnplugged” for the evaluation of the Unplugged program on gambling behaviours among 12-14 years old adolescents in Italy. Marco Martorana, Italy
- Factors associated with gambling behavior among 12-14 years old students in Italy: the role of parental gambling, norms and monitoring. Marco Martorana, Italy
- The impact of physical activity on mental well-being college students during pandemic. Ira Nurmala, Indonesia

2. Health Behaviors

- Age-friendliness of community and sleep quality: the role of mental health. Qianyi Xiao, China
- Pandemic and protective health behaviour: How do Brussels citizens view the Covid pandemic and future pandemics? A qualitative study. Sandrine Roussel, Belgium
- Exposure time to sedentary behavior and physical activity practice in full-time students during the SARS-CoV-2 pandemic. Matias Noll, Brazil
- Aspects of methodology of Behavioral Insights study on routine immunization in Kosovo among parents and healthcare workers, 2023. Florie Miftari Basholli, Kosovo
- Exploring how people despite economic difficulties achieve the World Health Organisation recommendations of physical activity, with a sense of coherence perspective. Lisbeth Johansson, Sweden

- Community-Based Physical Activity Promotion: Approaches to engage socially disadvantaged population groups. Lea Dippon, Germany
- Enhancing diets in Low Socio-economic Position Communities: Evidence-based strategies for stakeholder engagement. Hermine ten Hove, The Netherlands
- Subjective sleep quality before and after the COVID-19. Aleksandra Witkowska, Poland

3. Health Promotion and Health Care

- Healthy lifestyle counselling provided by primary care nurses to adult patients. Paweł Nowicki, Poland
- Inequity in Utilization of Maternal Healthcare Services and their Contributing Factors for Women with Disabilities in Nepal: Mixed Method Study. Prakash Shahi, United Kingdom
- Health Promotion in Primary Health Care in Brazil: possibilities and Limits. Ivonete Teresinha, Schuller Buss Heidemann, Brazil
- The Serbian version of the International Self-Assessment Tool for Organizational Health Literacy in Primary Health Care Services (OHL-PHC). Dušanka Krajnović, Serbia
- Informendo: Empowering Endometriosis Patients through Co-Creation of Resources. Elisabeth Noehammer, Austria
- Introduction of the Healthy Hospital Concept in Two Pilot Hospitals in Kosovo during 2023. Merita Berisha, Kosovo
- Public or private healthcare- preferences of Kosovar patients, 2022. Ardita Baraku, Kosovo
- Assessment of the urinary incontinence incidence in women. Julia Antos, Poland
- Association of Different Immunonutritional Biomarkers with Dementia. Serena Schecaniah Stephenson, Poland
- Comparison of methods for sarcopenia diagnosis in hospitalized older adults. Ganna Kravchenko, Poland

4. Health literacy

- Strengthening the health literacy of people with intellectual disabilities. Dariusch Afroukhte, Germany
- Awareness, knowledge and attitudes towards the perinatal depression among pregnant and postpartum women attending university hospital in Astana, Kazakhstan. Raushan Alibekova, Kazakhstan
- Association of positive mental health literacy with mental well-being among undergraduate students of Nazarbayev University in Astana, Kazakhstan. Raushan Alibekova, Kazakhstan
- Training matters: framework and guidance for core competencies of sexuality educators. Johanna Marquardt, Germany
- Evolution of COVID-19 related health literacy in Spain and associated factors. Maria Falcon, Spain
- An exploratory approach to identify digital, health and data literacy and learning needs in Romania. Otilia Kocsis, Romania
- Assessment of health literacy in cancer prevention projects in Portugal. Cristiana Fonseca, Portugal
- "Info without side effects": Empowering website users with a validated health info checklist. Ursula Griebler, Austria
- Development of a common understanding of health literacy in times of polycrisis. Saskia Maria De Gani, Switzerland

16.45-18.00 Plenary Roundtable: Health promotion as a driver of change in the digital age → Main hall

Moderator: Aneta Andrzejczyk, Medical University of Lodz

Discussants:

- Diane Levin-Zamir, University of Haifa & Clalit Health Services, Israel
- Mikołaj Gurdała, IQVIA
- Balazs Furjes, EIT-Health Innostars
- Lucyna Woźniak, Medical University of Lodz, Poland

Closing of the Day: Magdalena Kostyła, Medical University of Lodz, Poland

18.30-20.00 Welcome reception → Foyer

Tuesday 18 June 2024

8.55-9.00 Opening Welcome of the Day: Joanna Broy, EIT-Health Innostars → Main hall

9.00-9.15 The Healthier Together Initiative- EU on-line session → Main hall

9.15-10.15 Plenary session: Health promotion in the face of the polycrisis → Main hall

Moderators: Prof. Magdalena Kwaśniewska, Poland & Prof. Stephan Van den Broucke, Belgium

Speakers:

- Health Literacy: Rediscovering an underestimated resource to promote health and well-being. Saskia Maria De Gani, Careum Center for Health Literacy, Switzerland
- MedTech in Life Sciences. Paweł Ptaszyński, Medical University of Lodz, Poland

10.15-11.00 Interactive poster session → Exhibition space - foyer

1. Health Promoting Policy

- Collaborating to build local competence for Public Health Work. Ruca Elisa, Katrin Maass, Norway
- Lessons on mobilizing participatory healthy public policy with community-based tourism through healthy communities in Phatthalung Province, Thailand. Boonruang Khaonuan, Thailand
- It's a Jungle out there: The lived experiences of a new Public Health lecturer with previous commercial experience. A reflective autoethnography. Marie Swettenham, United Kingdom
- Contribution of the 15 years of work of the Health Promotion Chair of the University of Girona. Dolors Juvinyà Canal, Spain
- Does industrial forestry have an impact on public health? Steffen Torp, Norway
- Social sustainability in municipal policy plans in Norway, Olin Oldeide, Norway
- Registration of Health Promotion Practitioners: The Australian experience. Marguerite Sendall, Qatar
- Walk the line: Crisis in pandemic contexts as rite of passage between marginality and health agency. Cristopher I. Kobler Betancourt, Switzerland
- Health equity data: the case of Roma in Hungary's segregated clusters - a nationwide monitoring. Janos Sandor, Hungary
- Workplace Wellbeing from policy development to implementation an Irish perspective. Biddy O'Neill, Ireland

- Promoting the health of education professionals: The role of guidance and training in their occupational health and well-being. Min-Chien Tsai, France
- Creating structures for co-creation of local public health work: experiences from Trondelag, Norway. Ruca Elisa, Katrin Maass, Norway
- Infrastructure for Health promotion: the development of a shared knowledge system. Giuseppina Gelmi, Italy
- Strengthening Mental Health: Resilience, Sense of Coherence and Positive Mental Health in Mental Health Professionals in Girona. Susana Mantas Jimenez, Spain

2. Health Promotion Practices

- Field training for the development of strategies to promote physical activity in the framework of the Regional Prevention Plan 2021-2025 of the Lombardy Region. Lia Calloni, Italy
- The influence of green revitalisation of Łódź on the city residents' health and wellbeing. Joanna Ruszkowska, Poland
- Workplace yoga intervention and objective movement analysis to validate its effects – a pilot study. Magdalena, Fronczek, Poland
- Objective movement analysis in the case of dentistry ergonomics. Karolina Kopacz, Poland
- Analysis of metabolic risk and healthy behaviours among persons following plant-based diets. Martyna Mroziak, Poland
- Supporting mental health and wellbeing of an ageing prison population through creative nature-based interventions. Alan Farrier, United Kingdom
- „Parkrun is a place you can talk.” Strong and weak social ties between middle aged men attending parkrun in Ireland: reflexive thematic analysis. Allison Dunne, United Kingdom
- Motives for participation in parkrun and its impact on health and wellbeing for inactive women. Charlotte Benkowitz, United Kingdom
- Applying the settings approach to prisons: A case study from England. Michelle Baybutt, United Kingdom
- Intervention Strategies for Gambling Prevention and Control: A Comparison Between Scientific Evidence and Regional Legislation in Italy. Lia Calloni, Italy
- Scaling-up antenatal preventive visit for (future) fathers in Montreuil city, Seine-Saint-Denis, France: context and actors-related levers and barriers. Swati Perrot, France
- Factors influencing protective health behaviours to face Covid-19: review of reviews - Latest version, Lucie Carbon, Belgium
- Cervical Cancer Screening Knowledge and practices among adult women in Kosovo. Sanije Gashi, Kosovo
- Formative Evaluation of an early, cross-sector, outreach, and family-centered prevention of overweight programme (FrühstArt) – a study protocol. Katharina Ruettgger, Germany
- Cancer Prevention in the Workplace: A Case Study of a Pilot Experience. Cristiana Fonseca, Patrícia Pinto, Portugal
- Behavioural Insights about COVID-19 vaccination in Kosovo, study protocol and preliminary results. Florie Miftari Basholli, Sweden
- Prevention Can Never Create Health: Here is What does. Craig Becker, United States

- Factors influencing subjective wellbeing of economic and health domains in Southern Thailand. Thanawit Bunsit, Thailand
- Evaluation of EndoZone – a digital health promotion platform for endometriosis. Diksha Sirohi, Australia
- Chronic Health. Craig Becker, United States
- Serendipitous Health. Craig Becker, United States
- Finding common ground: how faith-health partners work together. Elizabeth Boutros, Australia
- Measuring mental health promoting behaviors – Development and validation of a scale to measure ABC -behavior. Charlotte Meilstrup, Denmark
- Monitoring the functioning of a health promotion network in the Italian context: a process perspective. Michela Ghelfi, Italy
- Storytelling as patient education among psychotic patients in a rehabilitation program. Márk Komóczy, Hungary
- Rural health promotion during the pandemic in a network of empowered nonprofessional health workers (health mediators) in Hungary. Karolina Kósa, Hungary
- A study on communication of the elderly by means of upper limbs. Xinru Zhu, Japan
- Empowerment, anxiety and stress levels among patients after cardiological incidents- a pilot study. Jarosław Dudek, Poland
- Psychometric characteristics of the Serbian version of the Newest Vital Sign test. Dušanka Krajnović, Serbia

11.00-11.30

Coffee break

11.30-13.00

Parallel sessions: Oral presentations

1. Workplace and Workforce for Health Promotion → Room A

Moderators: Liane Comeau, Canada

- The Influence of Job Resources and Demands on Burnout and Work Engagement of Italian Teachers: „the HBSC – Lombardy Teachers” Survey. Stefano, Delbosq, Italy
- Lifestyle advice from health workers in Kosova-Population based study. Sanije Gashi, Kosovo
- Professional competencies for health promotion – an unknown competence and a missed opportunity for public health in southern Sweden! Åsa Bringsén, Sweden
- Occupational Health and Well-being in the European MENTOR+ Project: A Cross-Country Survey Analysis. Ioanna Zygouri, Greece
- A Roundtable on Developing Global Settings for Health Promotion. Michelle Baybutt, United Kingdom
- Professional identity formation of health promotion practitioners in Switzerland. Verena Biehl, Switzerland

2. Health Promoting Policy → Room B

Moderators: Altyn Aringazina

- Challenges for multilevel governance of health promotion in a federal country – the case of Switzerland. Pin Stéphanie, Switzerland
- Filling a Gap – A Case Study in Building Advocacy Capacity in the Australian Public Health Workforce. Melissa Stoneham, Australia

- Building Organisational Capacity for Holistic Health Policy and Systems Research Institutions (HPSRIs): Insights from a Mixed-Methods Study in the Philippines. Harvy Joy Liwanag, Switzerland
- Addressing Health Disparities: Comparison of Predictors of Health among Adults Living with and without Physical or Psychological Disabilities. Grace Katharine Forster, Norway
- Cooperative planning as a mechanism of structural change in health promotion. Jana Semrau, Germany
- The Limitations and Potentials of Economic Evaluations in Community-Based Health Promotion: A Critical Review. Philipp Weber, Germany
- Doing Collaborative Health Promotion Research in a Complex Setting: Lessons Learned from the COMPLETE Project in Norway. Torill Larsen, Norway

3. Health Behaviours → Room C

Moderators: Diane Levin-Zamir, Israel

- The 500 kg weight reduction challenge: prevention of obesity by and for women with migration background. Marleen Mares, Netherlands
- Rethinking the built environment as a driver to improve physical, mental and behavioural health in custodial spaces. Helena Queiroz Pombares, United Kingdom
- Time to join the queue. Stepping into the shoes of community food project visitors in affluent communities. Marie Swettenham, United Kingdom
- Risk behaviours and factors associated with quality of life and mental health of Brazilian Federal Employees. Matias Noll, Brazil
- Cancer prevention and early detection among people experiencing homelessness: Co-designing the Health Navigator Model for Europe. Alejandro Gil-Salmeron, Netherlands
- Perceptions towards the adoption of a multi-risk factors cancer prevention educational tool among European Union citizens: a multi-country qualitative study. Ariadna Feliu, France
- Population-based cancer prevention education intervention through mHealth: a randomized controlled trial. Carolina Espina, France
- Wellbeing and sense of coherence in French-speaking breast cancer women: A cross-sectional study. Sarah Michaud, France

4. Implementing Health Promoting Policies among Children and Youth → Room D

Moderators: Didier Jourdan, France

- How can we assess the capacity of Danish health and childcare professionals to promote healthy weight development? Anneke Vang Hjort, Denmark
- Promoting health in schools: identifying forms and functions of the Health Promoting Schools interventions. Paul Veugelers, Canada
- Acceptance analysis of adolescent health promotion application (KONCO SREGEP) in remote area. Muthmainnah Muthmainnah, Indonesia
- Assessment of Water, Sanitation and Hygiene in Schools of Kosovo. Tahire Maloku Gjergji, Kosovo
- How do school health professionals understand culture? – a scoping review. Emmie Wahlström, Sweden
- Here is our ideal school! Students' perception of their wellbeing at school. Alessandra Mereu, Italy
- Implementation of Comprehensive Sexuality Education in Schools in Kosovo. Merita Berisha, Kosovo

5. Health Promotion among Elderly → Room E

Moderators: Joanna Kostka, Poland

- Enhancing elderly autonomy through promoting health literacy for regular physical activity? Health Literacy Survey of the French population 2019–2021. Bakary Cisse, France
- Fostering community-based health promotion for healthy ageing in Austria: status quo, development areas and stakeholder process. Petra Plunger, Austria
- Toward healthy ageing at work: Self-initiated change through the lifespan. Min-Chien Tsai, Taiwan
- Dynamic model of health assets for cognitive health of older adults: a secondary analysis of the longitudinal SHARE data. Yuliya Bodryzlova, Canada
- Association Between Resilience and Frailty among Chinese Older Adults. Junling Gao, China
- Co-Creating Well-Being: A Holistic Approach to Physical Activity Promotion in Aged Care Facilities. Annika Frahsa, Switzerland

13.00-14.00 **Lunch break**

14.00-15.30 **Parallel sessions: Workshops and symposium**

Workshops

- Contributing to the Global Participatory Process to Structuring the Field of Health Promotion Research. Didier Jourdan, France → Room A
- Implementing policies for local Health Promotion Work: sharing experiences. Ruca Elisa Katrin Maass, Norway → Room B
- Salutogenesis 101: Exploring my role in the River of Life. Jake Sallaway-Costello, United Kingdom → Room C
- Digital Health Literacy and its contribution to health promotion across generations. Diane Levin-Zamir, Israel → Room D
- The political determinants of health: An applied perspective. Marguerite Sendall, Qatar → Room E
- How can Higher Education facilitate the development of Health Equity competencies among learners? Gwendolijn Boonekamp, Netherlands → Room G

Symposium

- Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health in Europe: a qualitative study and considerations for the Patient Navigation Model. Katrin Schäfer, Austria → Room F
 - Promoting primary cancer prevention among individuals with mental ill-health in Europe – an introduction to the CO-CAPTAIN project – Hanna Mues, Austria
 - Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health: Findings from Austria – Katrin Schäfer, Austria
 - Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health: Findings from Poland – Magdalena Kostyła, Poland
 - Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health: Findings from Spain – Rosa Gomez Trenado, Spain

- Co-creation of tailored interventions: Co-adaptation and implementation of the Patient Navigation Model in the CO-CAPTAIN project as an example – Alejandro Gil-Salmeron
- Tackling obesity in shift workers: The EU project SHIFT2HEALTH. Marlies Wallner, Austria → Room H
- Night shift work and health with focus on nutrition and food choice. Marlies Wallner, Austria
- Night shift work and cancer risk: the evidence, research gaps and methodological challenges. Kyriaki Papantoniou, Austria
- Interventions in practice to optimize sleep & health in shift workers; a study on feasibility, effectivity and acceptability of a sleep strategy. Heidi Lammers-van der Holst, Netherlands
- Overview of the European „Shift2Health” project. Karl-Heinz Wagner, Austria

15.30-16.00 **Coffee break**

16.00-17.00 **Plenary session: Health promotion in the face of demographic change** → Main hall

Moderator: prof. Lucyna Woźniak, Poland

Speakers:

- Innovative approaches to health promotion for older adults. Maddalena Illario, Università Federico II di Napoli, Italy
- Innovative approaches to health promotion for older adults. Tomasz Kostka, Medical University of Lodz, Poland

17.00-17.30 **Closing ceremony** → Main hall

Co-chairs: Prof. Stephan Van den Broucke, Belgium, Prof. Magdalena Kwaśniewska, Poland

- Concluding remarks
- Conference Chair Prof. Magdalena Wrzesińska, Poland
- Regional Vice President for IUHPE-Euro Prof. Paolo Contu, Italy

Closure and invitation for the next World IUHPE Conference, Liane Comeau, Canada

20.00-23.00 **Gala dinner** (only for registered participants)



Abstracts

Monday 17 June 2024

Oral presentations

1. Health Promotion and Prevention in and with Schools: European Perspectives, Approaches and Examples

Health promotion in the school context: a global mapping of the literature on school health promotion.

Daniel Torrano, Kathelijne Bessems, Goof Buijs, Camille Lasalle, Bill Potts-Datema, Didier Jourdan

Introduction: The study of health promotion in school settings has gained significant recognition in recent years, as schools have been identified as a crucial environment for enhancing the health and well-being of children and adolescents.

As a result, scholarly interest in investigating health promotion in school settings has surged considerably in the past few decades. The study contributes to further strengthening the field of school health promotion in the European region.

Material and Method: This bibliometric study presents an overview of research literature on health promotion in school settings, utilizing metadata extracted from 4,328 publications indexed in the Scopus database over the past 35 years. The period of study was from 1986 with the introduction of the settings approach to health, until 2021.

Results: The findings demonstrate that health promotion in school settings is a growing research field that has gained significant momentum in recent years. The research in this field is widely distributed, with studies conducted in almost every country worldwide. However, research output is dominated by the United States and other English-speaking countries, with substantial disparities in international collaboration. The study also reveals a trend towards increased collaboration among research groups, leading to a densely connected research network landscape. However, the level of international collaboration varies, with European researchers collaborating more frequently than in the United States. The study also finds that geographical proximity is the primary driver of international collaboration, except for African countries. The research field is highly interdisciplinary, with two distinct bodies of research emerging: biomedical and behavioral/social sciences. Lastly, main research themes were identified, including specific health themes such as mental health, oral health and sexual health, as well as general health promotion and education in schools.

Conclusions: This research provides a comprehensive overview of the emerging field of health promotion in school settings and its progress over time, contributing to the organization of the research domain.

Health Promoting School implementation in Lombardy Region – Italy: an intersectoral reflective process to define core elements.

Veronica Velasco, Stefano Delbosq, Corrado Celata, Simona Chinelli, Laura Landonio, Simona Michelin

Introduction: The World Health Organization (WHO, 1998) and many international agencies have promoted the Health Promoting School approach for over 25 years. However, the implementation of this approach is not well defined and changes according to the countries and regions (Dadaczynski and Hering, 2021; Driessen-Willems et al., 2022). From a practical point of view, the tasks and requirements for a school that belongs or wants to join a Health Promoting School Network (HPS) are not always well defined. This study aims to define the peculiar characteristics of a Health Promoting School in the Lombardy Region in Italy.

Material and Method: Thirty-five representatives of the Network from different sectors and institutions have been involved: 13 school principals from HPS leader schools, 9 school district representatives and 13 health promotion professionals who coordinate the health units' activities in schools. Four open questions were administered online, and a thematic analysis with two independent coders was conducted.

Results: Three main themes emerged: vision of a HPS, school commitments, and network tasks. First of all, a HPS has to share a vision of the school. HPS vision is based on the whole approach, which should be considered for the health definition, the intervention strategy and the multiple targets, the HPS principles, the recognition of the link between health and learning, a focus on specific health behaviours, and long term aims related to health and citizenship. The school commitments regard health-linked school planning, good practices and program implementation, attention to the work process, and valuing important aspects such as need analysis, training, participation, evaluation, and involvement in network activities. The network tasks consist of encouraging bonds and relationships, sharing and disseminating the HPS model, promoting good practices and programs, and supporting school change.

Conclusions: This study contributes to the definition of HPS implementation. Participants underlined the importance of aspects related to both the implementation of the HPS model and the network functioning, as a relevant organizational system. This study represents the first step for a consensus process to define school commitments to join the HPS network in the Lombardy Region and to guide the activities of the coordinators of the network.

Promoting Genuine Participation of Children and Young People in Education and Health Policymaking: lessons learned from the analysis of 55 case-studies from around the world.

Goof Buijs, Tenia Prokalamou, Silvia De Ruiter, Aïmane El Gharchi, Lara Debes, Tin'ga Telou, Didier Jourdan

Introduction: Children and young people are critical stakeholders in their own education and health, and their participation is essential for creating effective policies and practices. However, many initiatives to engage children and young people in decision-making are tokenistic or fail to provide genuine opportunities for participation. This research project aims to address this gap by collecting case-studies at a global level and developing a roadmap for promoting genuine participation of children and young people in education and health policymaking. Objectives:

1. To critically review the dynamic and complex interaction of children and young people's participation on health and education issues.
2. To collect and analyse 50 case-studies from 30 countries.
3. To seek consensus about the conditions that will promote genuine participation of young people in education and health capacity-building developments.
4. To generate new perspectives and insights that will inform appropriate and effective responses (in terms of policies and practices).

Material and Method: This project is based on a mixed-methods approach, including systematic literature reviews, Delphi studies, case studies, and qualitative and quantitative analysis. The research is participatory, involving children and young people in all stages of the research process.

Results: In total 55 case-studies were collected from 27 countries (Australia, Brazil, Burundi, Canada, China, Egypt, England, France, Greece, India, Indonesia, Kenya, Lebanon, Portugal, Moldova, Mongolia, Netherlands, Nigeria, Oman, Pakistan, Romania, Scotland, Senegal, Spain, Switzerland, Taipei, Uganda). The analysis led to a description and categorization of the perspectives of education and health professionals regarding the participation of children and young people in health promotion worldwide. Four different practice models based on a comprehensive framework including ethical, political, related to the stakeholders involved and practical dimensions were identified.

Conclusions: This project has the potential to make a significant contribution to the field of children and youth participation by providing evidence-based guidance on how to create the conditions for genuine participation in education and health policymaking. The project's findings will inform the development of policies and practices that can empower children and young people to have a meaningful say in decisions that affect their lives.

Health support needs of students from the perspective of school leaders.

Results of the COVID-HL School Principal Study.

Kevin Dadaczynski, Melanie Messer, Marlene Meyer, Orkan Okan

Introduction: Findings indicate a high proportion of children and adolescents with mental health problems, which almost doubled in Germany during the Corona pandemic. Schools are a key setting for health promotion & prevention and research findings underscore the importance of school leaders in initiating and implementing holistic strategies. Hence, this study aims to explore perceptions of student's health support needs from the perspective of school principals during the COVID-19 pandemic.

Material and Method: Data were collected from a cross-sectional survey conducted in early 2021 with N=2186 school principals from Germany. Eight self-developed items were used to assess students' health needs. To examine differences in students' health support needs, sociodemographic data and health literacy (HL) of school principals, type of school, social class of students, and the implementation level of school health promotion were used. Next to univariate and bivariate analysis, multiple linear regression analyses were performed.

Results: Based on a principal component analysis, student's health support needs were categorized into mental health needs (e.g. stress) and health behaviour needs (e.g. physical activity), with the first category mentioned more frequently. Regression analysis revealed low social status of students, and low HL as significant predictors of a higher need for mental and behavioural support. Different patterns could be observed for type of school. While secondary school affiliation was associated with higher mental health support needs, primary school affiliation proved to be a predictor of increased need for health behaviour support.

Conclusions: The results of this study provide important impetus for school health promotion and emphasize the importance to strengthen HL of school principals. While there is a need for behavioural health support in primary schools, more support should be provided to secondary schools to promote student mental health

2. Health Promotion among Children and Youth

Health promoting schools – Evaluating the effectiveness of a pilot ergonomics program for middle school children.

Pani Sara Maria, Gaccetta Fabrizio, Cadoni Federica, Della Salda Andrea, Liori Arianna, Contu Paolo

Introduction: Ergonomics programs fit the World Health Organization's Health Promoting Schools (HPS) framework. Beyond the integration of ergonomics in school curricula, a crucial aspect is the evaluation of the effectiveness of the programs proposed to children. Often, ergonomics programs do not provide a measure of their impact. However, this is essential to guide resource allocation and implement and sustain the HPS approach. In our pilot study, we evaluated the effectiveness of the ergonomics program proposed to a sample of middle-school children of the Cagliari metropolitan area (Italy). We then used the results to plan a newly adapted second intervention.

Material and Method: The program was designed along the lines of the INAIL (Italian National Institute of Work Accident Insurance) scheme and proposed to 260 children aged between 10 and 13 years. It consisted of three phases: 1) assessment of students' background with a pre-intervention questionnaire (completed by 142 students); 2) displaying of the ergonomics training modules; evaluation of the weight of a sample of 160 backpacks and of students' perception to be able to sit by putting their feet on the ground; 3) evaluation of conceptual understanding of ergonomics concepts with a post-intervention questionnaire (completed by 107 out of 142 students that completed phase 1).

Results: There was a substantial improvement in the percentage of correct responses post-intervention, confirmed by the chi-square test, about ergonomics, backpack weight, and handling. Two out of nine questions showed a low percentage of correct answers pre- and post-intervention. Most backpacks exceeded the maximum allowed value; 20% of students could not put their feet on the ground while sitting.

Conclusions: The practical application of ergonomics pedagogy proved effective in the school setting and should be integrated into school curricula. The effectiveness evaluation led us to re-evaluate topics, questions' form, and the questionnaires' clearness and teaching style, especially for questions with pre- and post-intervention low percentages of correct answers. We are persuaded that our newly adapted program, tailored based on the pilot study results, has a greater chance of reaching its target audience and maximizing effectiveness.

The Feeding Pattern is the Highest Risk Factor for Stunting in Toddlers.

Kurnia Dwi Artanti, Dyah Silviananda Widhiastuti, Taufiq Hidayat

Introduction: Stunting is still one of the unresolved problems in the field of nutrition. Stunting is a growth disorder condition that tends to have a shorter body length or height compared to its age. This growth disorder occurs due to lack of nutritional intake and repeated diseases during the First 1000 Days of Life (HPK). This study aimed to analyze the effect of feeding patterns, history of measles infection, and completeness of immunization status on the incidence of stunting in children under five.

Material and Method: This research is an analytic observational study with a case-control study design. The sample size was calculated using the case-control sample size formula with a ratio of 1:1, so that 44 case samples and 44 control samples were obtained. The sample cases were toddlers aged 1-5 years who experienced stunting in the working area of Puskesmas Ponorogo Utara. The control sample was toddlers aged 1-5 years who did not experience stunting in the working area of Puskesmas Ponorogo Utara. The sampling method used was simple random sampling method. Risk factor analysis used the Odds Ratio (OR) value and 95% CI.

Results: The results showed that the risk factor for stunting in toddlers was the feeding pattern of 14.54 (95% CI = 3.11 <OR < 67.86). Meanwhile, history of measles infection (OR = 0.65; 95% CI = 0.10<OR<4.10) and immunization completeness status (OR = 0.42; 95% CI = 0.14<OR<1.25) not a risk factor for stunting in toddlers.

Conclusions: The conclusion of this study is that only the pattern of feeding is a risk factor for stunting in toddlers. Based on the results of the study, it is recommended to increase the dissemination of information about stunting and the pattern of feeding with balanced nutrition to toddlers so as to prevent stunting in toddlers.

Daily playful schoolwork design: a driver of positive school experiences

Helga Bjørnøy Urke, Jørn Hetland, Arnold Bakker, and Hege Eikeland Tjomsland

Introduction: Play is integral to healthy human physical, cognitive and emotional development. The value of play has been particularly emphasized in early developmental stages, but it represents an intrinsic motivation way of approaching learning that is valuable across ages. Individually driven play allows for practicing decision-making, and a meaningful exploration of and engagement in own interests. Such intrinsically motivated processes are desirable in the school context to encourage student learning, thriving and academic achievement. Based on proactive and play theories we introduce playful schoolwork design (PSWD) as a potential driver of school engagement, satisfaction and belonging. The present study hypothesizes that school engagement is higher on days when students playfully design their schoolwork (designing fun and designing competition), and that they in turn feel more school satisfaction and belonging on these days. We also hypothesize that on days when students are bored, the effect of playfully designing schoolwork on engagement is stronger.

Material and Method: One hundred students in 8th grade (ages 13-14) in a Norwegian public school participated in a daily diary study providing reports on their school experiences regarding PSWD, school engagement, boredom, school satisfaction and school belonging once a day for ten consecutive school days.

Results: Multilevel analyses found that daily PSWD, both designing fun and designing competition, was associated with daily school satisfaction and school belonging mediated through daily school engagement. Moderation analyses showed that daily designing fun (but not designing competition) was more strongly associated with school engagement on days when students reported high (vs low) levels of boredom. Similarly, mediated moderation analyses showed that daily designing fun (but not designing competition) was more strongly associated with school satisfaction and school belonging through engagement on days when students reported high (vs low) levels of boredom.

Conclusions: The results imply that increasing opportunities for playful proactive behaviour in the educational context may promote positive school experiences more often, for more students, especially on days when students are bored.

Implementation of a wellbeing awareness session in Moroccan primary schools: A pilot qualitative study with parents and teachers

Sarah Michaud; Adil Mansouri

Background: Primary schools represent an ideal place to educate children and their families about health. However, health promotion in schools is very little known in Morocco. Awareness sessions on wellbeing in schools will be offered in several primary schools across the country by the end of 2024. Prior to that, a two-hour pilot session, intended for pupils and teachers, was conducted at a primary school in Marrakech, Morocco. The aim of the study was to identify factors influencing the implementation of the pilot awareness session.

Material and Method: A qualitative study was conducted in May 2022 in Marrakech, Morocco. A thematic analysis was independently performed by two researchers. Emerging themes categorized according to the conceptual framework of Durlak and Dupré (2008), analyzing factors influencing the implementation of actions and programs including: 1) program nature, 2) characteristics of program providers, 3) organizational capacity, 4) program support system, 5) community context.

Results: Six semi-structured interviews were conducted, half with mothers and the other half with teachers who participated in the session. According to the participants, the main factors hindering the successful implementation of the session were time constraints for both the school and parents and, the lack of awareness of health promotion among parents. According to the participants, the main facilitating factors were the originality of the session and the strong interest from parents and teachers as well as the involvement of public health professionals involved in the project.

Conclusion: This study represents a first step towards the effective implementation of health promotion actions in primary schools in Morocco and allows the transferability of our results to other similar contexts.

Developing canteen staff' competencies towards a user perspective providing healthy meals for vocational school students.

Liv Juncker Harsløf, Margit Daal Aarslyng, Ida Hjortshøj Lindgren, Marianne Pia Lindahl

Introduction: Dietary patterns are strongly associated with vocational students' physical and mental health, essential for sustaining education. Vocational school canteens are, therefore, apparent health-promoting settings for supporting healthy eating. The canteens' display of healthy food, and choice architecture can change students eating habits. The canteen staff's communication with the students can be the key to maintaining healthy meals.

The study aimed to enhance the staff's competencies and motivation to engage in healthy cooking and meal presentation from the student's perspective. In addition, to develop a dialogical approach in the staff's health-promoting communication about the meals to promote the students' engagement in healthy eating and connectedness to the canteen.

Material and Method: This participatory action research design uses systematic inquiry and prioritizes co-constructing research in direct collaboration with those concerned for action and change. The grounded theory method was pervasive throughout the project. Seventeen canteen staff aged between 21 and 60 years participated in four iterative workshops concerning communication exercises, how to interact with the students, healthy food production, meal display, choice architecture, and nudging. The data collection methods comprised participating observations, photos, surveys, and field notes. Between the workshops, the canteen staff performed specific actions including performing 38 structured interviews regarding students' eating habits. One week was an intervention with nudging and primers to increase the sale of mainly plant-based today's dishes evaluated by bon-data. Three evaluation interviews were conducted after the fourth workshop.

Results: It was essential for the students to feel reassured that they could choose the new, healthier dishes. They appreciated that the dishes looked familiar and appealing by absorbing energy density through sauce, dressing, or juiciness. They preferred the content to be either meat or other protein and that they had different options to choose between. The staff's dialogic hosting invited students to dare to taste new dishes. The nudging experiment increased the sales of today's dish.

Conclusions: The canteen staff learned to interact with students using welcoming communication that reassured and changed the students' buying habits. They engaged in healthy food production and experienced greater job satisfaction, a prerequisite for the sustainability of health promotion.

Adolescents' experiences of sport education at upper secondary school level. Prerequisites for learning, health and personal development

Johanna Bergman, Maria Haak, Petra Nilsson-Lindström, Åsa Bringsén

Introduction: The positive relationship between sport and health is often taken for granted and frequently used as an argument to engage adolescents in sport and physical activity. However, research shows that health tends to be secondary in sport. Competitive culture dictates the agenda, even though research has also shown that sport settings could act as supportive environments for adolescents' health. Sport education at upper secondary school level can be a tool to empower adolescents and increase their subjective health, but previous research mostly looked at these environments from a performance perspective and there is a lack of knowledge from a health promotion perspective. The purpose of this study is therefore to explore adolescents' experiences of a sport education setting at upper secondary school level in relation to prerequisites for learning, health, and personal development.

Material and Method: A pilot study was conducted in an upper secondary school with sport education, in southern Sweden. The school does not apply any sport related talent selection. A guide with open ended questions was used. Pupils in year one shared their experiences through written narratives in relation to learning, health and personal development. 10 pupils participated, aged 15-16 years, a thematic analysis was conducted and member-checked.

Results: A communicative, experience and reflection-based learning strategy functioned as prerequisites for the pupils' learning, health, and personal development. The narratives included physical, psychological, and social aspects of health where a mutually influential relationship between the individual and the context was identified. The pupils' learning about their sport was related to knowledge about performance from a short- and long-term perspective.

Conclusions: The results indicate that the adolescents' experience of learning, health and personal development were dependent on communicative, experience and reflection-based learning strategies. Moreover, the method allowed pupils' voices to be heard and allowed new aspects of how sport education at upper secondary schools can be understood from the perspective of health and health promotion rather than solely talent development. The method will now be adopted in a larger study including more schools; hence a larger variety of sports and levels of sport participation will be included.

Benefits and challenges in implementing Youth participatory action research in Norwegian lower secondary schools

Ingrid Holsen and Olin Blaaid Oldeide

Introduction: Under the umbrella of public health initiatives and student participation in school, two municipalities in collaboration with researchers developed a youth participatory action research (YPAR) intervention, a Junior-researcher hub, in Norwegian lower secondary school. YPAR is a process where youth with support from adults produce research knowledge about issues of concern to them that contribute change in their schools and/or communities. Most empirical knowledge on the processes and challenges of conducting YPAR in the school setting stems from research in the US; only a few studies exist among European youth. In addition, what youth participation looks like in YPAR is rarely described.

Material and Method: During a 6- to 7-week period from October to December 2020, Junior-researcher was implemented in five ninth-grade classes (a total of 109 students aged 13–14 years) in two lower secondary schools in a rural fjord area in the western part of Norway. During the implementation period, two classes wanted to investigate and have a say on the possibilities of a homework-free school. Others identified improvement of school premises and more meeting places/leisure time activities outside school as their main topics for the project. The students were actively involved in all stages of their own research process, selecting research questions, what methods to apply, collecting data, and doing the analysis themselves with support from teachers. The present study investigated the experiences of implementing Junior-researcher from the perspectives of students and teachers in all five ninth-grade classes. We also observed two of the classes throughout the process.

Results: The findings showed that the Junior-researcher mostly promoted a sound experience of participation and knowledge production among the students. The teams that emerged were related to motivation and engagement, participation, and influence, democratic processes, role of teacher in YPAR, and learning outcomes and implications. The responses from both students and teachers and the observations pointed out that this way of learning also created challenges and tensions.

Conclusions: The YPAR study's strive for student autonomy, limited teacher involvement, and more unstructured learning methods were unfamiliar to both partners, and illustrated some of the challenges youth participatory approaches may face in a school context.

Health Literacy

Health literacy in primary care patients in Poland.

Barbara Gawłowska, Agnieszka Lipiak, Monika Karasiewicz, Richard Osborne, Ewelina Chawłowska

Introduction: Health literacy, defined as a person's ability to access, understand, appraise, remember and use health information, is a critical determinant of their health and well-being. It is then important to explore the strengths and weaknesses of people's health literacy to be able to develop tailor-made interventions embedded in various settings, including the healthcare system.

Material and Method: A population of primary care patients was surveyed with the use of the Polish version of Health Literacy Questionnaire (HLQ-PL). The questionnaire is divided into two parts and nine scales. In the first part (scales 1-5), respondents are asked how strongly they agree/disagree with given statements. In the second part (scales 6-9), they are asked to determine the perceived difficulty of particular tasks.

Results: A total of 153 respondents (mean age 54.2 years; SD 16.0; 60.1% female, 39.9% male), participated in the survey. In the study group, 41.2% had higher education, 70.6% inhabited large cities, and 68.0% had at least one chronic disease. In the first part of HLQ-PL, the highest scores were found in scale 4 (social support for health), and the lowest in scale 2 (having sufficient information to manage my health). In part two, the highest scores were in scale 9 (understand health information well enough to know what to do), while the lowest in scale 6 (ability to actively engage with healthcare providers). Generally, health literacy was higher in persons with higher education, younger individuals, women, and persons with fewer chronic diseases.

Conclusions: The use of a multi-dimensional measure such as HLQ-PL may allow for profiling populations' health literacy. The findings suggest that possible areas for improvement include the respondents' interactions with health professionals and the patients' perceived gaps in health knowledge. Potential focus groups of future research in this area might include persons with lower education levels, older people, men, and patients with multimorbidity.

The IUHPE Position Statement on Health Literacy as an advocacy tool to promote health globally.

The IUHPE Global Working Group on Health Literacy represented by the group's Core Group: Diane Levin-Zamir, Gill Rowlands, Kristine Sorensen, Tetine Sentell, Susie Sykes, Orkan Okan, Luis Saboga-Nunes, Stefania Velardo

As research related to health literacy mounts and increasing attention is given to health literacy in developing policies for health promotion and in the public health and healthcare systems, likewise does the need for a common ground between countries and institutions globally to advocate together for health literacy. The purpose of the revised (2023) IUHPE Position Statement on Health Literacy – A Vision for a Health Literate World is to support advocacy efforts on behalf of health literacy, globally. The revised and updated document builds on the dedicated work done in first version by the wider Global Working Group on Health Literacy takes into consideration lessons learned about the value of health literacy for health promotion, public health and healthcare since the COVID-19 pandemic, as well as emerging trends in digital health literacy and AI.

The overarching action areas to be described are: 1. Health literacy and health promotion policy; 2. Health literacy and appropriate evidence-based interventions; 3. The growing evidence base of health literacy research; 4. Building capacity in the workforce – sharing knowledge, applying an inter-sectorial approach.

The Position Statement was developed by the IUHPE Global Working Group on Health Literacy core group leadership who, in addition to their research expertise, also represent international partners and stakeholders. Following the ratification by the IUHPE Executive Board in September 2023, the dissemination plan of the document will be presented, the importance of the document for advocating for health literacy as a vehicle for health promotion will be emphasized, as well as the contribution of the Position Statement to strategic recommendations in policy, research and practice.

Evaluation results of the health literacy intervention Nebolus.

Demian Frank, Mareike Brockmann, Verena Krah, Kevin Dadaczynski

Introduction: Health literacy is fundamental to good decision-making for one's health throughout the course of life. Research shows that self-reported health literacy is considered inadequate for large proportions of populations in several European countries. The intervention Nebolus aims to promote navigational health literacy among program participants. Nebolus is an adaptable platform which allows health professionals to customize and implement interventions for communities according to their needs. Nebolus' efficacy on promoting navigational health literacy is evaluated in two studies.

Material and Method: Both studies have been realized as pre-post studies based on a set of self-developed items. Study 1 was conducted in May 2022 with school students from 5 schools. The intervention comprised 7 institutions that provide psychosocial support to adolescents. 148 datasets could be matched and were analyzed via one-way analysis of variance with repeated measures. Effect size was calculated via partial eta-square. Study 2 was conducted in October 2023 with university students from one university and comprised 10 university offices/services that provide health-related services for students. Data analysis for study 2 is ongoing.

Research results: Considering study 1, three dimensions on the self-developed navigational health literacy scale (find, assess, communicate) showed satisfying reliabilities. For each dimension as well as for the entire scale, effects of interaction were documented ($\eta^2p=0.04-0.22$), while effects for the entire scale were most significant. Data analysis of study 2 is ongoing and results will be presented at the conference.

Conclusions: First results demonstrate efficacy of Nebolus as an intervention program to promote health literacy among school students. Efficacy of the intervention among different age groups needs to be tested in order to investigate if Nebolus holds potential to promote health literacy through the lifespan. Results from study 2 will likely provide such further indications.

Global to Local: Analyzing the Sharing and Adaptation of Massive Online Open Courses for Emergency Health on the OpenWHO Platform.

Jamie Sewan Johnston, Nadine Ann Skinner, Anna Tokar, Elham Arabi, Ngouille Ndiaye, Matthew Strehlow, Heini Utunen

Introduction: The massive open-access online course (MOOC) format is a broadly embraced strategy for the rapid training of healthcare workers during emergencies. Yet, technical, linguistic, and cultural barriers limit access for many frontline health workers. There is tremendous potential for MOOC developers to increase the global scale and contextualization of learning; however, few studies examine MOOC adaptation and sharing to address these challenges.

Material and Methods: The World Health Organization's Health Emergencies Programme and the Stanford Center for Health Education's Digital Medic initiative collaborated to survey learners from four emergency health MOOCs on the OpenWHO platform to determine (1) how emergency health MOOCs are being used and shared by learners; (2) how health workers adapt content to meet local needs; and (3) how these adaptations help frontline health workers overcome barriers to using MOOCs. This study analyzes survey responses from 926 learners across four MOOCs with 96,395 total enrolled global learners.

Results: Of the enrollees indicating residence, half were from lower-middle-income countries (LMICs) (50%), and 9% were from low-income countries (LICs). The majority of survey respondents shared course content (88%) and used it in official training (61%). Respondents were more likely to share and use content for training in LMICs than in high-income countries (HICs) (91% vs. 81%, $P=.001$). Learners in LMICs shared content with more people on average than HIC learners (9.48 vs. 6.73, $P=.084$). Compared to HIC learners, they were more likely to adapt materials to distribute via offline formats or technologies, such as WhatsApp or SMS (31% vs. 8%, $P<.001$), to address cultural, linguistic, or other local contextual needs (20% vs. 12%, $P=.076$), and to meet local guidelines (20% vs. 9%, $P=.010$). Learners in LMICs also indicated greater accessibility challenges.

Conclusions: Overall, we found that OpenWHO MOOC content is highly shared across all regions of the world, especially in LICs and LMICs. However, content often is adapted and shared via alternative formats. Our findings identify a critical opportunity to modify the design and dramatically scale the impact of MOOCs to promote equitable access to critical health information during times of crisis.

Enhancing Stroke Help-Seeking Behavior in Europe: A Clustered Controlled Trial Evaluating the Efficacy of the School-Based Intervention „HOBIT”.

Ekaterina Volevach, Hana Maršálková, Martin Páleník, Robert Mikulík

Introduction: Pre-hospital delays in stroke treatment present a critical challenge, largely attributed to poor help-seeking behavior among stroke bystanders. Addressing the complexity of this behavior, we developed „HOBIT,” the school-based stroke intervention. This paper investigates the long-term efficacy of the HOBIT in improving determinants and behavior intentions related to stroke help-seeking behavior.

Material and Methods: The „HOBIT” is an e-learning featuring a 5-minute educational movie modeling acute stroke, structured as a pretest–posttest intervention. A parallel two-arm cluster randomized controlled trial with a 3:1 allocation ratio was conducted in 13 Czech secondary schools, from May to June 2023. The intervention group received the full education, including a follow-up test after 5 weeks, while the control group underwent only a pretest and follow-up. The main outcomes were determinants and behavior intentions of stroke help-seeking behavior. Determinants included knowledge, risk perception, outcome expectations and self-efficacy and were measured using 11 close-ended test questions. Behavior intentions were measured using 7 video vignettes that simulated stroke and stroke-mimicking symptoms. An unpaired t-test was used to compare differences in test scores between the control and intervention groups.

Results: Of 532 registered students, 379 (71% of the initial sample) were included in the analysis, with a mean age of 13.7 (95% CI 13.6-13.9), and 48% were female. The school attendance rate was the primary reason for sample attrition. Control and intervention groups showed no significant differences in demographics or baseline outcome variables. Knowledge and risk perception increased from 59% to 83% in the intervention group (absolute difference compared to the control group 16%, 95% CI 12-21, $P<0.001$). Outcome expectations improved from 85% to 90% (absolute difference 10%, 95% CI 5-15, $P<0.001$). Self-efficacy improved from 52% to 69% (absolute difference 10%, 95% CI 4-15, $P<0.001$). Behavior intentions improved from 54% to 67% (absolute difference 8%, 95% CI 2-11, $P<0.001$).

Conclusions: The implementation of the HOBIT intervention demonstrated a considerable improvement in all determinants of stroke help-seeking behavior. This suggests the potential to reduce prehospital delays in stroke and positions HOBIT as a cost-effective and sustainable intervention when implemented at the school level, compared to broader population-wide approaches.

Migrants' perceptions on sexual health and their sexual health education needs. Preliminary findings.

Eleni Konstantinou, Tiina Murto, Areti Lagiou, Christos Prapas, Marjatta Häsänen, Teresa Félix, Madalena Oliveira, Cláudia Bacatum, Eliisa Savola, Eva Lähteenmäki, Epameinondas Koutavelis, Marina Natsia, Sonia Duarte Lopes, Mirjam Rennit, Evanthia Sakellari

Introduction: All individuals have the right to sexual health and well-being. This can be achieved by providing accessible and comprehensive sexual education and services. The aim of this study was to explore migrant adults' perceptions about sexual health and their perceived needs for sexual health education. This study is part of the Erasmus+ project "ICEX-Innovative and Culturally Sensitive Educational Package for Migrants' Sexual Health Education" which is implemented in four European countries.

Material and methods: Focus groups among migrants aged 18-55 year were conducted in national or English language during summer-autumn 2023 after the participants' consent. Participation was voluntary and anonymous. Separated focus groups for men and women took place with facilitators of the same gender. The discussions were audio recorded and transcribed verbatim. The data was analyzed using content analysis.

Results: Ten focus groups (Finland n=2, Greece n=4, Portugal=2, Estonia=2) were conducted online or face to face with 54 participants in total from Asia, Africa, South America and East Europe. Participants' perceptions on the sexual health emerged the following themes and sub-themes: a) Health and Wellbeing (Mental health, Physical health, Social health); b) Sexual relations (Sexuality expression and acceptance, Intimacy, Meanings of sexual life, Sexual consent); c) Reproductive health (Family planning, Reproduction); d) Socio-cultural factors (Misconceptions, Silenced topic). Concerning participants' perceptions on migrants' sexual health education needs, the themes and sub-themes emerged were: a) Knowledge of anatomy and physiology of sexual function (Anatomy and physiology of sexual function, Self-skills on sexual health); b) Knowledge of reproductive health and safe sex behavior (Safe sex practices and prevention, Sexual health promotion, Contraception, Sexual abuse, Healthy sexual relationships); c) Different levels of communication (Language and Communication skills); d) Cultural sensitivity (Gender awareness, Cultural awareness); e) Materials and tools (Visual materials, Technology, Printed material).

Conclusions: This participatory approach has provided useful insights that can be used for the development of culturally responsive sexual health education among migrants addressing their own needs and health inequalities.

Exploring understandings and perceptions of health literacy from the perspectives of children and adolescents - a meta-ethnography.

Karolina Seidl, Lisa Affengruber, Isolde Sommer, Lisa Stauch, Daniela Rojatz, Anna Wahl, Ursula Griebler

Introduction: In the current literature the views of children and adolescents have rarely been integrated into existing definitions and conceptualizations of health literacy. Therefore, we address this research gap and explore the understandings and perceptions of health literacy from the perspective of children and adolescents aged from 8-19 years. Based on this, we developed a literature-based child- and adolescent-centered definition and conceptualization of health literacy.

Material and Methods: We carried out a meta-ethnography. We included studies that used both qualitative methods for data collection and for data analysis. We conducted an iterative search process, including electronic databases (Medline, CINAHL) up to May 2023. Pairs of reviewers independently screened 1596 abstracts and 97 full texts. Two reviewers independently assessed the methodological limitations of each study. Two reviewers extracted the first and second order constructs from the primary studies included. The review team reinterpreted the conceptual data of the primary studies and created higher order themes. We applied the constant comparison method and translated the studies into each other to arrive at a line of argument. One reviewer assessed the certainty of evidence, a second reviewer checked for completeness and accuracy. We sampled 29 full texts with rich data.

Results: Preliminary data analysis suggests that the health literacy of children and adolescents is profoundly shaped by both internal and external factors. Internally, age, personal experiences, gender, and social skills play pivotal roles in molding health literacy. Within this framework, multidimensional factors such as attitudes, role expectations, and individual health status further contribute to shaping health literacy. Externally, the social environment, encompassing family, friends, peers, teachers, and healthcare professionals, exerts significant influence. Importantly, there is a dynamic interaction between internal and external factors, highlighting the interplay between personal and social determinants in the development of health literacy. Moreover, access to clear and structured information from diverse sources, such as advertisements, the internet, and health campaigns, also plays a substantial role in shaping health literacy.

Conclusions: Existing health literacy models are too one-dimensional to be applied to children and adolescents and do not take into account the socio-ecological environment in which children and adolescents live.

Health Promotion Practices

Implementing parts of the Finnish Smart Family - lifestyle counselling method in six different EU- countries.

Nella Savolainen, Heli Kuusipalo, Päivi Mäki, Emma Koivurinta from THL, Taina Sainio, Kati Kuisma

Smart family is a lifestyle counseling method developed by researchers and professionals in 2006 in Finland by Finnish Heart Association. Scientific evidence and professional experience in the fields of nutrition, medicine, physical activity and behavioral and educational sciences have been considered in developing the method. It has been developed to prevent and tackle childhood obesity. It is an ongoing intervention – a lifestyle counseling program used in almost every municipality in Finland. It reaches approximately 90% of Finnish families in maternity-, child welfare- and school clinics. It is expanded to be used multi-professionally by all professionals working with families with children. The main idea of the Smart Family -method is a strength-based lifestyle counseling, where families are supported in multiple ways, not criticized. Supporting actions include strengthening health literacy, knowledge, self-efficacy, and parental skills of families with different practical tools and materials.

The “HEALTH4EUkids” Joint Action, started in 2/2023, aims to implement health promotion and prevention strategies for child obesity across European countries. Work package 6 aims to support the participating member states in implementing parts of the Smart Family -method in their countries. Participating countries are Greece, Slovenia, Poland, Croatia, Lithuania, and Spain. The settings where the implementation takes place, include f.ex maternity clinics, daycare centres and schools. The implementing countries aim to affect the competencies of the professionals working with the families. The implementation strategy involves 3 phases: pre-implementation, implementation, and post-implementation phase. In the pre-implementation phase in 2023, the pilot countries got more familiar with the Smart Family -method and developed an implementation plan for their work, where they identified the target groups, set exact goals and key performance indicators so that reaching of the goals can be evaluated. The implementation phase is starting in 2024. A Finnish team of experts is supporting the implementing countries with monthly meetings in understanding the scientific background, setting the goals and in choosing the implementing actions and materials.

A house is more than a roof - it is a determinant of health: a case study in trachoma prevention across remote Western Australia.

Melissa Stoneham, Christina Pollard

Australia is the only developed country with endemic trachoma, a disease that causes blindness. All cases of trachoma occur within the Australian Aboriginal and Torres Strait Islander peoples. The WHO developed the SAFE strategy to guide the elimination of trachoma globally. Much investment has focused on the S and A components of this strategy (Surgery and Antibiotics), with fewer interventions addressing the F and E components being Facial cleanliness and Environmental change.

The #endingtrachoma project works with 41 trachoma at risk remote Aboriginal communities in Western Australia (WA) and invests and focuses only on the F and E strategies. All communities are in the desert. Remote in WA can mean the community is anywhere from 4 to 37 hours' drive on dirt roads to the closest regional town. Most communities have very poor housing conditions and examples will be shown throughout the presentation. There are challenges in getting tradespeople and services to these communities due to their geography.

Our project visits these communities regularly. We work with Housing providers and Aboriginal Organisations who employ Aboriginal Environmental Health Workers (EHWs) to develop a sustainable approach to reducing trachoma – through environmental health change in community. Our point of difference is that we target inside people's homes with the aim to ensure they have functional health hardware and hygiene resources and skills to enable them to wash their face, hands and clothes.

To achieve this, we have forged relationships with Housing providers to reorient their thinking around housing. We have been successful in assisting the Housing Officers to view a house as a determinant of health rather than purely an asset. This policy change has been instrumental in ensuring household maintenance targeting health hardware, occurs as a priority.

The #endingtrachoma project builds the capacity of local EHWs to identify and where possible fix local plumbing issues, have hygiene yarns with people inside their homes, provides portable washing machine facilities' and hygiene kits.

This highly illustrative paper will discuss the project principles of prevention, no survey without service and capacity building and will discuss community-based outcomes and policy change.

Health promotion in deprived neighbourhoods should focus on living environment instead of merely health and lifestyle.

J.A.J. Dierx, B.A.M. Pouwels

Introduction: Recent reports show that in the Netherlands people living in deprived areas live nine years shorter and 25 years more in ill health despite the many lifestyle interventions targeted on and tailored to this population. On the contrary, instead of decreasing these health inequalities, they have been increased. It might therefore be suggested that the mostly topdown approach focusing on health as a goal does not align with the perspectives and focus of residents in deprived areas. The current study was performed to address this mismatch and learn what is most important for health from the perspective from the residents in a deprived area in the Dutch city of Den Bosch.

Material and Methods: The triple-I method was used to gain insight in the perspectives of residents of the deprived neighborhood 'De Hambaken' in Den Bosch on health and healthy living. In three evening sessions, 17 residents (2 male, 15 female, 30-45y, 50% with a migrant background) participated subsequently in a Structured Interview Matrix, a 'neighborhood safari' and a photovoice session in which participants categorized their photos into themes, prioritized these themes and decided what themes they wanted to focus on. All sessions were voice recorded, transcribed and verbatim and analyzed thematically with Atlas-ti.

Results: Residents mentioned topics on garbage cans polluting the streets, unattractive looking houses, unsafe streets because of speeding cars, unsafe and dirty playgrounds due to deteriorated equipment and dog excrements. On the other side, the renewed playgrounds at school and another one in the neighborhood were very positive elements. Besides drug (ab)use in relation to criminal behavior, none of the participants mentioned topics concerning health (physical or mental) or lifestyle related topics as exercise, food choices, smoking, alcohol, etcetera. In the end, participants chose to focus on tackling the garbage problem, cleaning the playgrounds and neighborhood from plastic pollution and connecting to the social housing company to plan repainting the facades of the houses in nice colours.

Conclusions: Health promotion from the perspectives of residents of a deprived neighborhood should not focus on lifestyle or health issues but on liveable and healthy living environment.

Applying Multi-Theory Model (MTM) in Determining Intentions to Smoking Cessation among male Health Worker Smokers in Kabul, Afghanistan.

Mousa Bashir, Farkhondeh Amin Shokravi, Anooshiravan Kazem-nezhad

Introduction: Globally, smoking causes lung cancer and a wide range of acute and chronic diseases. A fourth-generation behavioral framework, the multi-theory model (MTM) of health behavior change was used to predict the initiation and maintenance of smoking cessation among health worker smokers.

Material and Methods: By visiting different Health Centers, a convenience sample of male health worker smokers from west part of Kabul city, was invited to participate in this cross-sectional study. A valid and reliable 37-item MTM-based survey instrument was administered to the male participants who smoked. To explain smoking cessation behavior, stepwise multiple regressions were conducted. The entire value of the Cronbach alpha coefficient (α) of the subscales and the scale for the initiation of MTM variables was 0.80 and for the sustenance of MTM variables was 0.79.

Results: The study was completed by 170 participants. Participants were averaging 29.33 years of age (SD = 6.21). The average number of years smokers reported, (SD = 4.7), was 5.6. Smoking cigarettes was the median (SD = 5.21), with 5.64 cigarettes consumed per day. Changes in the physical environment (+0.2225, $P = 0.029$) and behavioral confidence (+0.441, $P = 0.014$) were significant predictors of smoking cessation initiation. The intention to sustain smoking cessation behavior was significantly influenced by emotional transformation ($\beta = 0.222$, $P = 0.017$) and practicing for change ($\beta = 0.217$, $P = 0.015$).

Conclusions: There was moderate variance in smoking cessation behavior among health worker smokers in Kabul's western part explained by two MTM constructs (behavioral confidence, physical environment) for initiation and two MTM constructs(emotional transformation ,practicing for change) for maintenance. Smoking cessation behavior can be assessed using MTM both at the initiation and maintenance stages. It is important to develop future interventions using MTM constructs aiming to change smokers' behavior in regard to quitting smoking.

Impact of front-of-pack nutrition labelling in consumer understanding and use across socioeconomic status: A systematic review.

Marguerite C Sendall, Anita Shrestha, Katherine Cullerton, Katherine M. White and Jenni Mayes

Introduction: An unhealthy diet is a leading contributor to the increasing burden of overweight and obesity. Front-of-pack labelling (FoPL) is being recognized as a policy strategy to promote healthier choices yet there is limited evaluation of FoPL to suggest if it is effective for all population subgroups. This systematic review aimed to assess the impact of FoPL on consumer understanding and usage across socioeconomic gradients.

Material and Methods: Six electronics databases were searched through a systematic search process using key terms for FoPL and socioeconomic status (SES) from 2011 to March 2022 to include studies evaluating the effectiveness of FoPL. A narrative synthesis was conducted, and the results were assessed according to the effects of FoPL on consumer awareness, understanding and usage across SES. The review included 36 articles.

Results: In general, people of all SES groups were aware of and more likely to pay attention towards FoPL than the nutrition information panel provided on the back of the package. However, the understanding and usage were relatively poor, particularly in low SES groups. While studies conducted in low SES populations suggest FoPL increased the purchase intention of healthy products, the stratified analysis across SES showed less beneficial effects in low SES individuals. The findings suggest simplified and easy-to-understand FoPL's such as Nutri -score and traffic light labelling are likely to be effective for all populations including low SES groups.

Conclusions: Overall, the review suggest FoPL's are more visible than the nutrition information panel and may guide healthier food choices for people of all SES backgrounds. It is unclear whether FoPL influences actual purchasing and food intake as there are insufficient studies comparing the effects among higher and lower SES populations.

Participation as a key for promoting the well-being society in Austria.

Gerlinde Rohrauer-Näf, Irina Vana, Lisa Schlee

Introduction: Multiple crisis have internationally set spotlight on the need of acting for healthy, better living conditions and wellbeing of people.

Material and Methods: In Austria a comprehensive multi-voice participation process on the future of health promotion policies, involving citizens, stakeholders and experts, was started. Its aim was to identify high impact measures for enhancing the living conditions in Austria and healthy live expectation.

Results: Main result of this process is a roadmap, which can guide decisions on how to promote healthy living in Austria in the next years. Recommendations are presented as ten bundles of measures for a health-promoting future in Austria. They take up the vision of the „Geneva Charter for Wellbeing“, promoting solutions for more equitable economies and solidarity and policies which takes the limits of the (natural) resources of the environment and challenges connected to climate change into account. Particularly noteworthy are the principles of health equity, which guided the entire participation process, and the impact the process has for empowering citizens involved. We have found that citizen participation in decision-making helps to strengthen health promotion policy and practice, support needs-based planning that reflects diverse interests, and strengthen commitment to health promotion in general. At the same time, we face the challenge of creating a deeper understanding of participation among decision-makers and providing resources for the equitable engagement of citizens and people with lived experience in decision making processes.

Conclusions: In our paper we will discuss the key principles of meaningful engagement and highlight the benefits and impacts of the participation process. We'll therefore build on the experience of the strategy process in Austria, focusing on the implementation of the process, the outcomes and some examples of the implementation of the results.

Photovoice: Students' Perspectives on Mental Health Promoting Resources at a University Campus.

Madsen Cecilie Schacht, Nelausen Malene Kubstrup, Meilstrup Charlotte Bjerre, Nielsen Line

Introduction: The global decline in mental health among university students, has become increasingly evident. Research has consistently demonstrated the adverse effects of mental health challenges like stress, anxiety, and depression on students' well-being and academic performance. As proposed in the socio-ecological framework of mental health promotion, mental health and well-being are shaped by the surrounding conditions including the interplay of place, space, and people. In this study, these interconnected factors are explored through the lens of the students themselves, shedding light on mental health promoting resources (MHPR) crucial for promoting mental well-being in the university environment. Thus, the aim of this study is to explore students' perspectives on MHPR that are crucial for enhancing mental well-being at campus.

Material and Methods: In this study the photovoice method is tailored to a university setting. Inspired by participatory action research (PAR), the students that engaged in this study was seen as active co-researchers. The empirical qualitative data was collected through photos taking by students, including associated titles and texts, and the thematic analysis was collaboratively conducted with students.

Results: This presentation will provide insight into pivotal factors that emerge as the primary components of MHPR from the perspectives of the involved students. The preliminary findings include factors that encompass: 1) Belonging, 2) Involvement in student activities, 3) Seamless information exchange, 4) Creating an inviting environment, 5) Outdoor spaces and balance, 6) Cultivating social bonds, 7) Accessibility and trust.

Conclusions: To our knowledge, this is one of the first studies to apply photovoice as a method to shed light on university students' perspectives on MHPR. The findings can inform future mental health promotion in the university setting.

Investigating Volunteer Dynamics to Enable Improved Social Inclusivity in a Community Food Distribution Service in South-West London, United Kingdom.

Marie Swettenham

Introduction: Food distribution services play a key role in ensuring and promoting health needs of vulnerable individuals and families through dignity-centric and gatekeeper free access to food. However, in practice, conflicting experiences, between health promotion approaches and meeting basic needs exist depending on the habitus of the population as proposed by Pierre Bourdieu. The purpose of the study was to investigate and understand the lived experiences of visitors and volunteers at a surplus food distribution project in a borough of London ranked as “affluent” by the UK indices of multiple deprivation (IMD). It aimed to understand key characteristics of visitors and understand the benefits to a community assumed as statistically affluent, during a time where food insecurity prevalence has sharply increased.

Material and Methods: A pragmatic patchwork ethnography study was undertaken investigating the lived experiences of visitors and volunteers to a food surplus project in South-West London, an area characterised by pockets of nested deprivation which appear to exist within affluent areas.

Results: Results, via thematic analysis, demonstrated volunteers could be grouped into four categories, consisting of, people attending alone, couples volunteering together, supporters attending as a carer for disabled volunteers and transient volunteers, attending less consistently. Based on the dynamics, ethnicity, and cultures of these volunteer groups, it is possible to create environments conducive to effective health promotion strategies, reflecting and mirroring the diversity of corresponding communities. Consequently, improved opportunities for health are developed, drawing on Bourdieu's' social capital to create inclusive communities to add depth to these findings.

Conclusions: The value of these findings is the ability to influence the dynamics of food aid projects, supporting the creation of health promoting environments. Consequently, an ability to deliver a dignity-centric, inclusive service with reduced stigma attachment can be developed.

This paper shares how focusing on demographics of volunteers enables communities to foster and grow an inclusive and equitable environment for all involved. The oral presentation will demonstrate the practical steps in translating these results and supporting evidence into community development practice, through enabling community participation and engagement.

The Dynamic Model of Health Assets.

Yuliya Bodryzlova, Grégory Moullec

Introduction: Existing conceptualizations of the origins of health are only partly suitable for conducting epidemiologic studies aimed at finding specific protective recourses regarding specific diseases, lifestyles, or health conditions. Consolidating current knowledge on health models may contribute to developing the framework for this epidemiological study.

Material and Methods: Data Source: MEDLINE, Books@Ovid, EBM, Embase, Health and Psychosocial Instruments, Global Health, APA PsycInfo, JBI EBP Database, and Biological Abstracts via OVID interface, provided by the University of Montréal. Study Inclusion and Exclusion Criteria: the inclusion criteria encompassed theoretical articles with original positive or general health models. Risk-related and ill health models and models for children and adolescents were excluded.

Data Extraction was made in the previously agreed chart. Data Synthesis: a narrative review. A new model has been proposed as a synthesis of results.

Results: Three types of health models were found (centered on the individual, environmental factors, and both). Based on the finding, the generic model was proposed. The proposed model links individual characteristics to environments by actions and links environments to individual characteristics back with support.

Conclusions: The Dynamic Model of Health Assets may guide large-scale epidemiologic research on resistance and resilience. The model's components are easy to operationalize. The inclusion of the group-level protective factors enables the construction of multilevel models.

Breaking ground: Evaluating Lower Austria's first Regional Health Coordination Training.

Ursula Griebler, Pauline Klingenstein, Ludwig Grillich, Sigrid Moick

Introduction: Starting from 2018, the University of Continuing Education Krems and „Tut gut!“ Gesundheitsvorsorge GmbH have jointly implemented the two-year academic program „Regional Health Coordination“, which trains students to become a Regional Health Coordinator (RHC). It is funded by the Lower Austrian Health and Social Fund.

Material and Methods: We evaluated the pilot-program and the work of the RHC in the first two years. The objectives of the evaluation were to provide 1) a basis for further development of the academic program and 2) an assessment of the achievement of the program objectives.

Methods: The evaluation ran from 2018 to 2022 and followed a mixed-method approach. Qualitative telephone interviews and focus groups with stakeholders, document analyses of annual RHC activity reports and repeated written community surveys in 13 municipalities were conducted.

Results: The evaluation showed that RHCs already bundled health promotion (HP) activities and worked on their HP network within the municipalities during the practical training period. HP was given a higher priority in some municipal administrations. The pilot program was consistently rated positively, and the curriculum was optimized. In the first two years after graduation, the RHCs developed and implemented HP measures and endeavoured to engage citizens. However, genuine involvement was rare. The results showed that future HP interventions should especially target older people, less educated and male citizens. RHCs were seldomly involved in health policy decisions, although they often worked with mayors. Personal characteristics, an existing network in the community and support from the local government were success factors for the work of the RHCs.

Conclusions: An academic training program for regional health coordination helped to improve community health promotion. RHCs play an important role in the coordination of community HP but should be stronger included in local policy decision-making. An existing network and the involvement in the local government facilitated the work of graduated regional health coordinators. Citizens should be more involved in planning and implementing HP measures.

Assessing Communities for Scaling Up Community-Based Health Promotion: A Pragmatic Approach.

Philipp Weber, Leonie Birkholz, Simone Kohler, Natalie Helsper, Lea Dippon, Klaus Pfeifer, Alfred Ruetten, Jana Semrau

Introduction: Community-based health promotion (CBHP) has shown promise for addressing public health challenges. Nevertheless, for CBHP initiatives to make a tangible difference to public health, they must be scaled up beyond pilot projects to reach more communities. To ensure effective scale up, it is essential to assess the initial situation of candidate communities using practical and straightforward methods, particularly with regard to the optimal allocation of resources. Established models such as the Community Readiness Model have proven to be too resource-intensive to evaluate a large number of communities quickly and in a resource-efficient manner. Therefore, this study discusses the use of pragmatic evaluation methods in various municipalities in Germany.

Material and Methods: First, candidate communities were requested to express their interests, which consisted of four vital components: a designated point of contact, an outline of the community's present health promotion activities, details of current funding programs, and a history of involvement in health promotion. Furthermore, the German Index of Socioeconomic Deprivation was used to evaluate each community's socioeconomic standing. The communities underwent an additional evaluation using a customized questionnaire designed to assess their CBHP experience. This questionnaire, based on nine key components of CBHP, helped produce a mean score for each community's experience in this area. Subsequently, the communities were categorized according to their geographical location and size.

Results: An extensive amount of pertinent information is gathered through the strategic utilization of resources. This made it possible to select a variety of communities with distinct characteristics to assess the scale up and implementation of CBHP. However, the self-evaluation of these communities may be of restricted validity if their prior experiences and objectives are not considered.

Conclusions: Policymakers and funding providers must consider the importance of scaling up CBHP. It is essential to assess the initial status of communities using simple, practical, and accurate methods, despite the uncertainty regarding the validity of the data collected. To address this issue, future research should examine cost-effective assessment methods (e.g., focus group discussions)

Alcohol and Breast Cancer: the App “Secrets for Healthy Breasts”.

Claudia Sardu, Alessandra Mereu, Paolo Contu, Sofia Cosentino, Fabrizio Angius, Clelia Madeddu, Elena Massa, Carola Politi, Matteo Frascini, Luigi Minerba, Julia Sinclair, Roberta Agabio

Introduction: Breast cancer is the most common cancer worldwide and its incidence is increasing. Globally, 1 in 8-10 women will develop this cancer during their lifetime and, although the effectiveness of treatment for breast cancer has improved, mortality is still very high. Modifiable factors are responsible for almost 30% of breast cancers, and alcohol consumption is one of the main factors. However, less than 20% of women identify alcohol as risk factors for this cancer. The lack of knowledge poses a serious obstacle to every woman's possibility to act to protect her health. The adoption of a healthy lifestyle obviously does not depend only on knowledge, but also social and cultural context, living conditions, commercial and economical determinants. However, knowledge represents an essential prerequisite for gaining control of the determinants of health. To make aware choices women should know the alcohol risk thresholds (1 alcohol unit per day) and should be able to correctly identify the number of alcohol units present in different kinds of alcoholic drinks.

Material and Methods: To increase women's knowledge, in 2023, a team of researchers from the University of Cagliari (Italy) developed the Italian version of the App „Abreast of Health”, created by Prof. Sinclair of the University of Southampton (UK). Using the app is very simple: you need to enter your data on exposure to modifiable risk factors (alcohol, smoking, weight and height...) and the app offers personalized suggestion to limit the risk of breast cancer. Health literacy friendly language and reassuring tones are the main strengths of the App. The effectiveness of the Italian version of the App, called “Alla salute! Secrets for Healthy Breasts”, was assessed through a randomized controlled trial.

Results: The App, compared to the Ministry of Health website, is significantly more effective in determining an increase in knowledge; furthermore, effectiveness is significantly higher in women with low education.

Conclusions: The App can be used free of charge and is currently available in English and Italian. Now, the challenge is to reach as many women as possible.

Always on: evolving from a traditional social media campaign using new technology to extend reach and facilitate action.

Christina Pollard, Hannah Samsa, Sharyn Burns, Meg Clarey, Lynne Millar, Rosa Alati, Getinet Yaya, David Lawrence

Introduction: Mental health promotion aims to increase mental wellbeing at a population level. This study examined the relationship between protective behaviours promoted as part of the Act Belong Commit social marketing campaign and mental well-being among West Australian adults. Campaign promotions changed from traditional media to multi-burst per year, led by broadcast media supported by always-on digital channels to increase awareness of the message and direct individuals to the campaign website, a mental well-being self-help quiz and mentally healthy activities.

Material and methods: A 15-minute cross-sectional computer-assisted telephone interviewing survey was implemented with adults (18 years plus) in September/October 2020, N=603 (mean age 49.4 years \pm 19.0 SD; 50% male). Key outcomes included the Warwick Edinburgh Mental Well-Being Scale (WEMBS) and Kessler 6.

Results: The mean WEMBS score was 52.6 (\pm 8.9 SD); 93% of participants reported no probable psychological distress. Increased frequency of chatting to others, spending time in nature, being physically active, visiting with family or friends, helping others, undertaking activities requiring concentration, or practicing spirituality and religious influence were each associated with higher WEMBS scores. Age and financial saving ability independently predicted mental well-being. Almost all participants agreed that prioritising mental health (94.6%) and physical health (93.5%) was critical for overall health. There was no decrease in overall campaign awareness because of evolving the campaign strategy. Over 80% of adults were aware of the campaign.

Conclusions: Findings reinforce the value of population-wide health promotion messages to encourage adults to prioritise mental well-being and promote specific protective behaviours and opportunities to engage in. Higher mental well-being scores were associated with increased frequency of participation in the mentally healthy protective behaviours promoted by the Act Belong Commit campaign. Study findings suggest that regular participation in specific, low-cost, evidence-based actions and activities are important for population mental well-being.

Programs should encourage participation in these mental health protective behaviours to increase the overall well-being of the population. Mass media campaigns are effective when reflecting contemporary media consumption patterns and incorporate digital media channels supported by online tools.

European Digital Health Literacy Strategy.

Ana Inés Rey Hidalgo, Mónica López Ventoso, Cristina Fernández García, Laura Pruneda González, Beatrice Avagnina, Adele de Stefani, Giada Cochetto, Marta Pisano González

Digital technologies are an increasingly useful tool for health promotion, by addressing preventable disease risk factors or supporting healthy ageing. However, barriers such as lack of training, and trust in digital tools hinder the uptake of these technologies.

A European Digital Health Literacy (dHL) Strategy has been developed to improve dHL for the benefit of all citizens, focusing on health promotion, disease prevention, treatment and self-care, and monitoring its impact on the quality of life and well-being, considering geographical, social and economic determinants of inequities in dHL. It aims to empower citizens to take an active role in managing their health and support person-centred care models using digital technologies. The Strategy is intended for citizens, professionals, managers, and policy-makers.

The EU dHL Strategy has been designed involving co-creation with citizens, extensive literature reviews, and expert feedback to develop inclusive policies. More than 1,400 EU citizens have been directly reached for the Strategy development to educate, motivate, and empower them to use digital tools to manage their physical, mental, and social health and well-being. The EU dHL Strategy provides recommendations for dHL interventions at micro, meso and macro levels, addressing self-care, promotion, prevention, and treatment. It has a dual core framework that includes four digital components (training and skills development, content and curriculum, evaluation and monitoring, and policy and strategy) aligned with the International Telecommunication Union Literacy Framework and four health information components (access, understanding, critical appraisal, and application of the health information) consistent with the WHO Health Literacy Model and the definition of health literacy itself.

The values of accessibility, collaboration, equity, ethics and privacy, gender, inclusion, participation, social environment and sustainability underpin the EU dHL Strategy. The Strategy calls for increased EU and national investment in dHL education, fostering the development of new solutions, and promoting a healthier EU through resilient health systems in the face of digital transformation.

Healthcare professionals and policy-makers will find specific recommendations, agreed with dHL experts and end-users to implement dHL actions, with an impact not only on healthcare systems and social services, but also on citizens at a societal and personal level.

A bottom-up approach to co-design an online digital health learning platform with end-users in Romania. Otilia Kocsis, Romania

Otilia Kocsis, Camelia Ungureanu, Niki Calina, Maria van Zeller, Basilis Kladis

Introduction: TRIO is an Erasmus+ project that empowers citizens of different ages through informal education in the areas of health, digital and data literacy. It develops a modular methodology and a digital learning platform, employing gamification techniques as a playful way of learning. In Romania the whole adult population needs support and education in order to acquire at least the basic skills in these domains, and a co-design workshop was implemented to identify the main difficulties in accessing health-related information via the internet, along with preferences regarding media and game types.

Materials and methods: The co-creation workshop in Romania involved 9 people (6 women and 3 men), including 3 individuals for each target group (18-35 years; 36-50 years and 51+ years). The research sessions were carried out per group with the help of a facilitator and without computers. The participants used cards that contained a goal and a practical description of the learning objective, and the main activities performed were: (i) Activity 1, a warm up activity; (ii) Activity 2, in which each group ranked 8 cards per domain based on the perceived difficulty to understand particular content or to access information (e.g. use available digital health services, identify which foods promote good health, identify the reliability of health information on the internet); (iii) Activity 3, in which each group was asked to rank 13 cards describing media types (e.g. image, graphs, text, social media, video conference, audio, chat) based on their preferences to get informed in the health domain; (iv) Activity 4, where each group matched a media type to the top ranked goal cards of Activity 2; and (v) Activity 5, where game types were matched to the top ranking cards of Activity 2 considering the media type selected in Activity 4.

Results: In Activity 2, the difficulties that gained consensus were: Identify which digital health services are available, Ability to use the digital services that are available, Make online health procedures, and Ability to use health information in real life. Overall, the biggest difficulty for all groups is „Identify why some health apps are more trustworthy than others”, followed by “Identify the accuracy of health Information on the internet”.

In Activities 3 and 4, the media types preferred by at least two groups to get informed in the health domain included: social media post, chat, podcast, video, image, video conference.

In Activity 5, the results showed that there was no homogeneity in the choice of games between the different groups. The most appreciated game types were: Quiz, Image pairing and True or false.

Conclusions: The co-design workshop allowed us to establish the priorities for the design and implementation of the online platform, validating the approach and understand the media format and game type suitability for the various age groups. One of the most important aspects that emerged is that participants prefer games with simple mechanics without the use of a lot of text and that they like variety instead of adopting a single game type.

When health promotion meets arts: Evaluation of a VR-based alcohol prevention tool presented in an art exhibition.

Robert Hrynyschyn, Patricia Lyk, Gunver Majgaard, Susanne Rockweiler, Sara Stehr, Christiane Stock

Background: Presenting health promotion in an art exhibition can increase visibility, engagement, and user experience. Moreover, the interdisciplinary collaboration between health and arts may promote a holistic approach to well-being. Therefore, this study explores user experience with a virtual reality-based alcohol prevention application presented in an art exhibition.

Material and Methods: The interactive virtual simulation “Virtual LimitLab”, providing adolescents with a learning environment aimed at strengthening alcohol resistance skills, was presented to the public (mainly school classes) in the art exhibition “On a Night Trip”, designed to stimulate reflection on drug use. Users explored Virtual LimitLab for about 15 minutes before completing an electronic questionnaire. The survey items focused on the hedonic user experience based on the User Experience Questionnaire and assessed the simulation’s preventive effects. Open questions collected qualitative data on the positive and negative aspects of the simulation.

Results: The preliminary data comprised 263 individuals. The hedonistic user experience analysis revealed a mean score of 1.6 (SD: 1.12), suggesting a favourable reception among users. Notably, 86% of the participants reported that the simulation had increased their awareness regarding the influence of peers on drinking behaviour. Additionally, approximately 65% of respondents found the simulation to be effective in illustrating the detrimental consequences of excessive alcohol consumption, and 60% of participants reported that their interaction with Virtual LimitLab improved their ability to make informed decisions when confronted with offers of alcohol by others. The qualitative responses provided by users underscored their appreciation for the interactive features, the realistic setting, and the innovative use of virtual reality as a medium for alcohol prevention. Concurrently, participants offered constructive feedback, suggesting improved graphics quality and a more robust portrayal of the negative ramifications of alcohol use. Furthermore, there was an expressed interest in expanded interactive opportunities and a more diverse range of scenarios.

Conclusions: Integrating Virtual LimitLab as a health promotion tool in an art exhibition is an innovative approach. The results indicate that Virtual LimitLab is a promising tool for alcohol prevention, generating awareness among visitors of the exhibition and encouraging interaction with the topic of alcohol use.

Digital Leisure Time Use and Its Impact on Children's Subjective Well-Being: A Latent Class Analysis.

Lars Bauger, Christian Møller-Skau, Elisabeth Gulløy og Catherine Anne Nicole Lorentzen

Introduction: The ways in which children and adolescents spend their digital leisure time, particularly their screen time, is a topic garnering increasing interest in both research and public discussion. Research findings on the association between screen time and children's well-being are mixed. Some studies suggest that screen time is negatively associated with the well-being of children and young people, while others indicate that screen time has minimal impact on their well-being. Notably, most of this research has been conducted on adolescents, with less focus on children. This study aimed to explore and identify various patterns of digital leisure time use among children, and to examine how these patterns correlate with their subjective well-being.

Material and Methods: The study sample comprised 5313 children aged between 10 and 12 years old from a region in Norway. We employed Latent Class Analysis (LCA) to identify distinct patterns of digital leisure time use among children. Once these patterns were identified and described, we investigated how they varied in terms of the children's Subjective Well-Being (SWB).

Results: The LCA identified five qualitatively distinct groups based on their patterns of digital leisure time use. Two of these groups were characterized by very high screen time, with the first group primarily spending their time on social media, and the second group engaging in a wide variety of digital activities. Additionally, two groups were characterized by moderate digital screen time, and the last group spent almost no time on digital devices after school. In terms of differences between the five groups, the children who spent the least time on digital devices had the highest SWB, while those who spent a significant portion of their leisure time on social media had the lowest SWB.

Conclusions: This study found that digital leisure time is a significant aspect of children's lives, and that different patterns of digital leisure time use are associated with variations in children's well-being. This underscores the need to differentiate between the types of digital activities children engage in, reinforcing the idea that not all screen time is equal.

Understanding the needs of patients with visual impairments - a step towards building equal and accessible primary health care.

Katarzyna Weronika Binder-Olibrowska, Magdalena Agnieszka Wrzesińska; Maciej Godycki-Ćwirko

Introduction: Awareness of needs of patients affects the quality of health care. People with visual impairment are more likely than the general population to experience inequalities in access to health services and their needs are not sufficiently researched. The aim of this study is to learn about the expectations and needs of adults with visual impairment using the services of primary healthcare in Poland in relation to selected aspects of their biopsychosocial functioning.

Material and Methods: A cross-sectional, mixed-methods study was conducted using the „Patient Value” questionnaire from the Quality and Cost of Primary Care in Europe project (QUALICOPC) and proprietary closed and open-ended questions covering sociodemographics, disability, health, technology and telemedicine. The responses of 219 participants from all over Poland were enrolled to statistical and content analysis.

Results: The results of the „Patient-Values Questionnaire” indicate that for the visually impaired and blind, the most important factors in primary health care are equality and accessibility. A qualitative analysis of respondents’ answers shows that accessibility is understood as the ease of making an appointment and architectural and technological facilities, as well as the psychosocial competence of medical personnel. Nearly all respondents find reasons to use telemedicine, but half are reluctant or undecided about remote contact with a doctor. The needs of the study population vary according to age, gender, health status, quality of life, social functioning and the degree of vision loss.

Conclusions: Understanding the diverse needs and expectations of patients with visual impairment is essential for inclusion and equal health opportunities.

Functioning and Challenges in Individuals with Irritable Bowel Syndrome: a mix-methods survey.

Natalia Plóciennik, Jarosław Rakoczy Katarzyna Binder-Olibrowska, Magdalena Wrzesińska

Introduction: Irritable bowel syndrome (IBS) is the most common functional gastrointestinal disorder. People of all ages are affected by disfunctions in biopsychosocial functioning and their quality of life is impaired. IBS is an economic burden due to work absenteeism, loss of productivity and increased use of health care services. The aim of this study is the semi-quantitative-qualitative assessment of biopsychosocial functioning of people with irritable bowel syndrome and identification of challenges faced by people with IBS.

Material and methods: 94 participants diagnosed with IBS (83 females and 11 males), aged 18 to 58 (Me=34.44; SD=9.46) were included. The research is quantitative and semi-qualitative in nature. Standardized questionnaires were used in the online survey (Satisfaction with the Life Scale - SWLS, Perceived Stress Scale - PPS-10), proprietary closed questions regarding sociodemographic data and quality of life, and open questions allowing to learn about the needs of patients with IBS.

Results: Low levels of life satisfaction (77%), quality of life (77%) and high levels of perceived stress (83%) were prevalent in the majority of respondents. Sociodemographic variables had no effect on the variables studied. Almost 40% of participants saw their engagement in the IBS treatment as key factor. The most common difficulties such as lack of holistic treatment (72%) and low effectiveness of treatment (57%) were reported. A half of respondents felt misunderstood by specialists.

Conclusions: Most of respondent reported a low levels of life satisfaction and quality of life, and high levels of perceived stress were reported by the most of respondents. It was confirmed that despite people with IBS experiencing barriers in access to health care, they have indicated the need to involve them in the process of strengthening health and well-being.

Strengthening health promotion and prevention in primary care : lessons learned from a Swiss academic center of general medicine and public health.

Katrin Zürcher Karin, Stéphanie Pin

Introduction. Strengthening health promotion and prevention (HPP) in primary care services is an international priority. In Switzerland, the strategy for the prevention of non-communicable diseases (NCDs) includes a focus on integrating HPP into care. This presentation aims to describe and analyze the capacity-building measures implemented by Unisanté, a university center for general medicine and public health, in the canton of Vaud (Switzerland) to reinforce HPP in primary care.

Material and methods. The analyze integrate several HPP capacity-building measures implemented by Unisanté in primary care services. Its distinguish between targeted professionals and measures' goals (change at the individual, community, organizational or systemic level). It is based on measures' documentation, data from their monitoring and the results of evaluations carried out for some of them.

Results. The interventions implemented involve various primary care professionals, but rarely within the framework of interprofessional approaches. The majority aim individual changes by dissemination of evidence-based preventive interventions (eg. EviPrev, a systematic HPP program for primary care) and continuing education programs (e.g. program for strengthening the intervention of HPP). A few measures aim to strengthen cross-sector collaborations (e.g. Physical Activity promotion in PRImary CAre – PAPRICA program or participative training for developing HPP abilities among social and health workers in institutions for disabled people). Organizational interventions are made possible within Unisanté, which combines general medicine, health promotion and prevention, undergraduate and graduate teaching and research. Therefore, there are many obstacles to the development and implementation of systemic measures.

Conclusions: Promoting better integration of PSP into primary care requires a multi-dimensional and multi-level strategy. This is facilitated by the organizational integration of healthcare professionals and HPP experts. However, advocacy at the national level is essential for reorienting health services in a sustainable way.

Community Health Workers Address Vaccine Hesitancy Using Motivational Interviewing Skills.

Valverde P, Garrett K, Martinez E, Esmundo S, Drisko J

Community health workers (CHWs) and health navigators are trusted messengers who can deliver accurate vaccine information about COVID-19 and other immunizations. CHWs can help improve access to care and can strengthen relationships and trust within the communities they serve. In 2021, in response to the rapid dissemination of COVID-19 vaccines, the Patient Navigation and Community Health Worker Training (PNCT) program developed an adapted motivational interviewing training (MI) to address conversations related to vaccine hesitancy. The training is an adaptation of a physician-initiated MI for vaccine hesitancy protocol originally developed and evaluated in research studies for infant, childhood, and adolescent vaccine conversations. It is specifically tailored for the audience of community health workers and health navigators. During the training, participants learn to recognize and tailor their conversations based on the four common client vaccine dispositions: accepting, accepting with questions, hesitant, and refusing. The four learning objectives of the training are 1) make a participatory COVID-19 recommendation, 2) recognize common vaccine dispositions, 3) tailor conversation based on disposition, and 4) demonstrate skills in using MI for hesitant patients.

The use of MI to improve COVID-19 and flu vaccination is an evidence-based approach. MI uses a person-centered communication style in which the messenger and client work together to explore reasons for accepting the vaccine, rather than the messenger directing the client to take the vaccine. Studies have shown that health care providers can reduce vaccine hesitancy by using MI techniques. Being culturally responsive in how one responds during MI is critical to maintaining a respectful and empathetic conversation.

The training was delivered in English and Spanish for 202 patient navigators in Colorado and for 80 Community Health Aides in Alaska. The first evaluation with a group of 21 trainees showed significant increases ($P < .001$) across confidence statements in using MI skills. Ninety-five percent of the attendees stated that they were moderately or very likely to apply the MI skills in their work and reported a 4 out of 4 in training satisfaction.

The second Alaska training of 50 community health aides showed considerable increases in confidence across MI skills, with 97% of respondents stating they were somewhat or highly satisfied with the training. One trainee stated, "It was good to hear examples and then do hands on exercises with each other." Trusted community messengers are key in rebuilding trust between communities and public health, and this training enhances their communication strategies.

Comparative study of health promotion actions in the context of primary care in the municipalities of Florianópolis, Santa Catarina, Brazil and Girona, Catalunya, SATALUNHA, Spain.

Ivone Teresinha Schuller Buss Heidemann, Dolores Juvinyà Canal, Glória Reig Garcia, Michelle Kuntz Durand, Kamila Soares Maciel

Introduction: Contemporary health promotion advocates empowering individuals to play an active role in improving quality of life. This concept has played a crucial role in deepening discussions on health promotion, even in the face of the ambiguities that characterize two predominant discourses: one highlights the biological model and the change in lifestyles, while the other promotes the emancipation of people for the transformation of reality. The aim of this study is to understand health promotion practices developed in primary care units in Florianópolis, Santa Catarina, Brazil, and Girona, Catalonia, Spain.

Material and Methods: Research with a qualitative, exploratory, descriptive approach in the Primary Care health districts of the municipalities involved. For data collection, public documents available on official websites, health system reports, and eight open, in-depth semi-structured interviews were used with nurses representing health districts. The data were evaluated using thematic analysis and were based on the health promotion concepts of the 1986 Ottawa Charter.

Results: In both cities, Florianópolis and Girona, it was found that the majority of professionals did not receive specific training in health promotion. With regard to health promotion practices, it was identified that participants in both locations recognize a significant connection with health education activities, but during the Coronavirus pandemic, a reduction was observed. In both contexts, health promotion practices are focused on individual and collective activities, covering chronic diseases, harm reduction, and specific groups. The motivation for action comes from the interdisciplinary approach and demands from the population.

Conclusions: Within the scope of the theme addressed in this study, we can see the challenge of overcoming the hegemonic model of health care, where the behaviorist approach still prevails, while the principles of the modern conception of health promotion are unknown or face resistance. Several limitations still persist with regard to the effective integration of health promotion as a feedback component in action planning, as well as in participatory practice within the community.

Workshops

Advancing Children and Adolescent Health Promotion: Planning and Testing Interventions.

Marjorita Sormunen, Hanna Putkonen, Laura Mikkola, Malla Peippo, Noora Rita

This workshop aims to explore critical issues related to children and adolescent health promotion interventions. The workshop will feature four eight-minute presentations following an interactive session where participants work in groups to analyze and discuss these real-world cases. This activity promotes critical and methodological thinking and problem-solving skills. Participants will act as co-creators of these interventions.

The first presentation will introduce an intervention aimed at promoting sun protection among adolescents. This research will highlight the planning and testing of a pioneering method (dosimeter) and strategies (communication channels and messages) to enhance sun protection practices with a focus on leveraging behavioral science and educational approaches to effect positive change.

The second presentation will center on the collaborative design and planning of a sexual health intervention with adolescents. By engaging youth in co-creation, this presentation will explore innovative methods for addressing the unique needs and preferences of adolescents, ultimately aiming to improve sexual health outcomes among this group.

The third presentation will examine parental perceptions of children's well-being threats in 2015 and 2023. This longitudinal quantitative and qualitative analysis will shed light on the shifting priorities and anxieties of parents over time, offering implications for health promotion interventions and parental education efforts.

The fourth presentation will investigate the changing roles of home and school in children's health learning development, comparing parental views in 2015 and 2023 using quantitative data. By examining parental perspectives on the contributions of home and school environments to children's health education, this presentation will offer valuable insights into the evolving dynamics of health promotion and education within these contexts.

Hence, the objectives of this workshop are:

- 1) To explore and discuss innovative interventions and strategies for promoting children and adolescent health.
- 2) To identify implications for future research, policy, and practice in the field of children and adolescent health and parental supervision and guidance.

The learning goals are the following:

- 1) Gain an understanding of the opportunities and challenges in planning and testing interventions for children and adolescents.
- 2) Identify potential strategies and approaches for addressing children and adolescent health promotion and parental involvement in it.

Empowering Young Researchers: Mastering Scientific Communication Techniques.

Karolina H. Czarnecka-Chrebelska

Objectives of the workshop:

Professionals working in public health must be able to communicate scientific content effectively to audiences of all ages and backgrounds. Failure to do so can be detrimental to both the practitioner and the audience. It's essential to assess the audience's level of knowledge to ensure effective two-way communication.

The objective of this workshop is to empower Young researchers in better communication, and proper analysis of the audience's needs in order to gain engagement in the audience or the community. Therefore, it's crucial to communicate effectively and tailor the information to meet the needs of the audience.

Training content / Which skills will you gain:

- Conducting scientific presentations, moderating discussions
- Analysis of the needs/expectations of the audience and adjusting the structure and content of the presentation regarding the type of performance: scientific, didactic or pitch-presentation
- Learning the principles of creating and preparing a presentation tailored to the needs of the audience, i.e. adjusting the level of complexity of the lecture to the target group,
- Developing communication skills in order to overcome the reluctance to take pro-health measures in the audience

The activities include presentations with audience interaction, panel discussions, and presentations made by the session participants.

Professional health literacy of health professionals: What is the role of organizational conditions and educational training in this context?

Saskia Maria De Gani, Robert Griebler, Rebecca Jaks, Christa Straßmayr

Session coordinator: Dr. Saskia Maria De Gani (saskia.degani@careum.ch), Careum Center for Health Literacy, Zurich;

Co-organisers: Dr. Robert Griebler, Gesundheit Österreich, Austria; Rebecca Jaks, Careum Center for Health Literacy, Zurich and Christa Straßmayr, Gesundheit Österreich, Austria

Health literacy (HL) is a major determinant of health. Thus, promoting HL among the population is a crucial public health issue. However, studies have shown that the majority of the European population is affected by low HL. Following the relational nature of HL, one approach to strengthen population HL focuses on the healthcare system, its organizations and its health professionals (HP). Therefore, organizations need to provide appropriate framework conditions that optimally align the requirements of the health system with the needs and abilities of its users to address and strengthen their HL. This means, that healthcare organizations need a certain level of organizational HL (OHL) to strengthen the HL of their patients and clients. On the other hand, HP need certain competences – conceptualized under the term of professional HL – to adequately address and promote the HL of their patients and clients, which need to be supported by organizational frameworks and training.

In this workshop, we will present a newly developed concept and measurement tool for professional HL as well as first results on professional HL from a quantitative pilot study for two German-speaking countries (Austria and Switzerland). We will also present findings on OHL in primary care and relate these findings with those on professional HL. Finally, a link is made to the framework curricula of HP. Initial findings will also be presented.

Objectives of the workshop and type of activities are:

- 1) to provide participants with an overview of the concept and measurement of professional HL, to present first results of the pilot study and to link them to findings on OHL and curricula of different HP,
- 2) to discuss the results and the role of OHL as well as the role of education and training in strengthening professional HL and
- 3) to work in small groups to develop follow-up measures and initiatives on professional HL that will allow the initiation of next steps.

Best practice portals and their role in addressing health inequalities.

Djoeke van Dale, Yvette Shajanian Zarneh, Alison Maassen

Background: To support policy and practice with evidence-based information, several best practice portals for public health interventions have been established at national and European levels. These portals share many common features, including selection criteria, assessment, and evaluation. However, they are also unique, particularly in their targets. While the long-established Dutch portal addresses the general population and „health promotion” broadly, the equally long-established German portal provides examples of good practice specifically for vulnerable population groups. The EuroHealthNet Health Inequalities Portal serves as a comprehensive database of policies, practices, research, and publications, while not subjecting uploaded interventions to rigorous assessment or evaluation criteria.

EuroHealthNet’s Technical Working Group on Best Practice Portals brings together nine member organisations responsible for national best practice portals. In this workshop we will highlight two national portals – the Netherlands and Germany – as well as the wider work of the EuroHealthNet TWIG and Health Inequalities Portal. Both remain open to further participation and active collaboration.

Objectives: – To present one European and two national approaches to support professionals and policymakers in Europe with best practices and policies to address health inequalities.

– To share experiences and to discuss possibilities to further develop best practice portals and other supportive policies to address health inequalities.

Method: After an interactive introduction, three presentations (40 min) will describe methods for identifying and curating best practices. After the presentations, the open space method will be used to facilitate discussion. Each corner of the room will contain a moderator and a flipchart with discussion questions. Each participant is free to choose to join any corner and to move freely between them throughout. Feedback will be collected by the moderators who will present the top three most important findings in a brief closing plenary. Participants will be invited to vote on the most inspiring workshop idea or insight.

Learnings: This workshop will give participants insights into:

- the different approaches of best practice portals across Europe addressing health inequalities
- the experiences of other countries supporting policymakers and practitioners to use best practices

Health literacy policies – how can they be developed and implemented.

Angelika Schlacher, Christina Dietscher, Miguel Telo de Arriaga, Christopher Le

Background: M POHL, the World Health Organization (WHO) Action Network on Measuring Population and Organizational Health Literacy (HL), was established in 2018 and has 23 participating member countries and five observer countries from the WHO European Region, as well as observers from Asia. The main objectives of M-POHL are: 1) to provide high-quality data on population and organizational HL and 2) to develop policy recommendations based on data generated. In 2023, a first project on evidence-based policies and practices was initiated by M-POHL and financially supported by the Swiss Ministry of Health. In this project a guide on how HL policies can be developed and implemented was drafted. This guide brings together insights from existing literature on national HL strategies, action plans and interventions, including an expert snowball search within the M-POHL network and among other partners, experiences and case examples collected from M-POHL members and other countries, and feedback collected in webinars with policy representatives and decision-makers.

Objectives of the workshop: As HL is considered critical to the achievement of health the topic is steadily gaining more interest from policy- and decision-makers. To support awareness-raising, the building of commitment and the implementation of effective policies to improve HL, this policy guide was drafted. It mainly addresses decision-makers in health policy and administration, but may also inspire researchers and other relevant stakeholders in the HL area.

Learning goals: Participants of the workshop can learn how evidence-informed policies and practice can be supported as the guide supports policy- and decision-makers as well as public administrators in reflecting, initiating, developing and implementing effective measures to improve population and organizational HL.

Type of activities: Presentation of the guide followed by a round table with country policy representatives sharing and discussing their national experiences in implementing HL interventions, how to influence priority setting concerning the focus of collecting, and mapping evidence on HL policies and interventions.

European perspectives on current trends and challenges in school health promotion.

Kevin Dadaczynski, Rafaela Rosario, Veronica Velasco, Kathelijne Bessems, Marjorita Sormunen

Schools have long been identified as ideal venues for implementing health promotion and prevention activities, not only for pupils but also for teachers and non-teaching staff (Sormunen et al., 2022). Given the variety of conceptual approaches, a vast array of activities can be found in school health promotion practice, ranging from comparatively simple and highly standardized interventions to complex projects on health-promoting school development addressing different target groups (Dadaczynski et al., 2022). Against the background of these and other current educational challenges, there is a need to reflect the position of school health promotion and to derive challenges and requirements for further development. This workshop is organized by the Schools for Health in Europe (SHE) Network and aims to (1) reflect and critically discuss current developments with regard to (a) concepts and intervention development, (b) implementation and (c) evaluation of school health promotion, (2) identify barriers and challenges with regard to the three dimensions mentioned above, and (3) identify key enablers, key priorities and actions to further develop school health promotion with regard to the three dimensions mentioned above. This workshop addresses key stakeholders from across Europe including researchers, practitioners and political stakeholders. Key learning outcomes include (1) increased awareness and understanding of the value of different approaches to school health promotion, (2) increased critical thinking in relation to current practices and research in this area, (3) learning about possible solutions for conceptual approaches, implementation strategies and evaluation methods. The workshop will start with a short input phase, followed by an in-depth exchange between the participants, which will include an interactive online platform (Slido) and a group discussion along the three topics (a) concepts, (b) implementation and (c) evaluation. Each topic will be facilitated by a member of the Schools for Health in Europe Network (Veronica Velasco/Italy, Kathelijne Bessems/Netherlands, Marjorita Sormunen/Finland). There will be a total of two discussion rounds, each lasting 25 minutes and allowing participants to exchange views on various topics.

Symposium

Capacity building for effective health promotion practice: How to move forward in training, further education and developing a professional identity?

Petra Plunger, Verena Biehl, Gert Lang, Alice Inauen, Anna Wahl, Petra Gajar

Objectives: Capacity building (CB) is a key issue in health promotion (HP) starting with the Ottawa Charter, comprising most prominently the development of knowledge and skills, but also commitment, partnerships, structures, systems and leadership to enable effective HP practice (WHO, 2021).

This symposium will focus on HP training and further education,

- identifying current topics regarding teaching content and formats, networking with HP organisations
- discussing leadership in HP training and further education.

Learning goals:

- explore models of providing HP training and further education: specific trainings a/o mainstreaming HP, their connection to IUHPE Core Competencies for HP, ASPHER Programme for Public Health Competencies
- explore the role of national HP or Public Health organisations in fostering training and further education

Type of activities: Four brief presentations outlining the topic and questions to be discussed, three parallel moderated group discussions, summarising the results and developing conclusions.

Capacity Building in HP in Austria and Switzerland

Presentation 1 will outline the case of HP training in Austria, outlining the results of a mapping exercise and the development of a discussion paper on HP training, and presenting first results from a survey on HP content in curricula of health management studies at and MPH studies.

Presentation 2 presents the work of the HP working group within the Swiss Society of Public Health, which focuses on CB in HP in Switzerland. Based on an interview study about the professional practice of HP, a mapping of existing undergraduate, postgraduate and further education programs in HP was conducted.

Examples of training and further education in HP in Austria and Switzerland

Presentation 3 gives an insight into the undergraduate program in Health Promotion and Prevention in Switzerland. The practice-oriented curriculum was developed based on the CompHP model. The program aims to promote professional identity formation of the students to strengthen the commitment of the future HP workforce.

Presentation 4 will focus on HP further education: The FGÖ runs several professional development programmes to broaden HP competencies, aiming at an effective provision of services by health promotion practitioners. Details of the programmes will be presented as well as results of evaluated trainings.

Titles and Authors of presentations:

- Capacity building for health promotion: The case of health promotion training in Austria. Petra Plunger, Anna Wahl
- Capacity building for health promotion in Switzerland. The work of the health promotion working group at the Swiss Society of Public Health. Verena Biehl
- The Bachelor's degree program in Health Promotion and Prevention in Switzerland. A practice-oriented curriculum based on the CompHP model. Alice Inauen

Further education program of the Austrian Health Promotion Fund and how participation change competencies in health promotion. Gert Lang, Petra Gajar

Municipal health promotion and participation as a key strategy for health promotion across the lifespan from childhood to adulthood.

Dörte Kaczmarczyk, Maja Kuchler, Janna Leimann, Patricia Tollmann, Eike Quilling

Municipalities are important for shaping health-promoting living environments. The municipality includes a variety of settings, making it possible to reach people throughout their lives. The setting approach particularly aims on the empowerment of the target group.

The research group „setting-orientated health promotion“ investigates in research and practical projects in different settings how setting-orientated health promotion can be successfully developed and implemented with the respective target group in the different phases of life. Qualitative and participatory methods and the evaluation of participatory processes are central to this.

The symposium will focus on the different phases of life from infancy through adolescence to adulthood. Reports will be given on the opportunities and challenges experienced in the projects in different settings. The plenary session will discuss how the lessons learnt on participation can be taken into account in practice.

Contributions:

1. Participation as component of municipal health promotion

As an introduction the diverse possibilities of municipalities as an umbrella setting for promoting health will be highlighted. A starting point to empower citizens and derive needs-orientated strategies for the various settings is community engagement.

2. Develop health promotion with families in the kindergarten setting

Together with families and network partners, professionals in six kindergartens have developed health promotion actions over the past three years. The research team accompanied the participatory process with a qualitative research design and shares the success factors for family involvement in this contribution.

3. Participatory study on young people's understanding of health

As a basis for the conceptualisation of target group-specific strategies, the consideration of subjective perceptions of health is crucial. Participatory methods such as photovoice are used to analyse the students' understanding of health and their needs with regard to a health-promoting design of the setting.

4. Development of a health promotion culture within the student health management

This contribution reports on the design of student health management in the university setting, in which student participation is central. In the project, the health status and needs of students are regularly surveyed and individual sub-areas are researched in greater depth in a participatory manner.

Titles and Authors of presentations:

- Participation as an important component of municipal health promotion. Patricia Tollmann, Eike Quilling
- Develop health promotion with families in the kindergarten setting. Maja Kuchler, Eike Quilling
- Development of a health promotion culture within the framework of student health management in universities. Janna Leimann, Eike Quilling

Participatory study on young people's understanding of health. Dörte Kaczmarczyk, Janna Leimann, Eike Quilling

Interactive Poster Sessions

Health Promotion among Children and Young People

Healthy and Happy Campus for Health Promotion Community.

Sri Widati

Health promotion is the process of empowering people to maintain, improve and protect their health through increasing awareness, willingness and ability, as well as developing a healthy environment. Health promotion should be carried out in all settings such as household settings, hospital settings, workplace settings and educational settings including universities. We often refer to health promotion in university settings as Health Promoting University (HPU). The article will describe about the HPU in Airlangga University Indonesia from beginning until the result of the effort. Metode: We did HPU by advocacy, mediate and enable the stakeholder in the Airlangga university Indonesia. We did advocacy the leader of university to support the HPU. Mediating all of stakeholder to do the HPU based on 3 criteria, that are system and infrastructure, zero tolerance and health promotion program. Enabling the staffs and the students to conduct the activities for raising up the HPU indicator. Result: In 2017 Airlangga University of Indonesia became a member of AUN-HPN (Asia University Network-Health Promotion Network). Since then the HPU at Airlangga University has begun. Various efforts were made based on 3 HURS criteria (Healthy University Rating System), namely that are system and infrastructure, zero tolerance and health promotion program. For systems and infrastructure, Airlangga has started making regulations regarding a green campus, zero smoking and a healthy curricula. Airlangga also makes healthy infrastructure such as safe and clean buildings, healthy waste disposal sites (organic and inorganic separation), compost management, facilities for the difable such as hand railings, parking and toilets for the difable. Airlangga also develops zero tolerance for No smoking, No drugs, No gambling, No bullying, No sexual harassment. Formed officers for reinforcement No smoking and No sexual harassment. Airlangga also organizes health promotion program activities such as periodic physical examinations, education on healthy life and well being for staff and students. Formed Soby (Happy & Healthy Friends --- Buddy means friend) was also formed from students for students. While students accompany other students who have problems so they share their problem, discuss and get solutions. We run the Training of Trainer to train Soby as a peer educator. All of the activities can not exist if the leader did not approve and support the HPU program. So in the first step, we did advocation to the leader of the university, mediate the all of stakeholder in the univerity, and enabling staff and students for the succes of HPU. Conclusion: HPU is toolsand method to reach community becoming healthy and happy. HPU can be succes if the leader support the program, the stakeholder did the activities for supporting and the staffs and students empower to do it so.

Health lifestyles profiles of the University of Andorra.

Gemma Ribera Llonc, Pol Comellas Sáenz, Sara Esqué Boldú

The adoption of healthy lifestyles directly influences people's well-being and quality of life. Approximately two-thirds of the global mortality rate is caused by non-communicable diseases, mainly as a direct result of cardiovascular problems, diabetes, cancer or respiratory system dysfunctions (WHO, 2011).

In the case of the university students we find that they have greater awareness of the adoption of future risky behaviours. From a comprehensive approach to development, young adults are immersed in a dynamic period of transition in which a set of biological and social changes occur that can have repercussions on health issues for future stages of life (WHO, 1977).

In the specific case of the Principality of Andorra, the World Health Organization does not have data available that provides information on the general state of health of the population. In fact, the few data published to date have been reported by studies managed at a national level, such as the national health survey dating back from 1997 or the most recent one dating from 2011, in which the characteristics of university students are not specified.

In this work, we propose to study the health lifestyle profile of the University community in relation to lifestyles. In the context of the University of Andorra we have two different profiles: the students (between 600-700 students expected) and the university staff (between 50 – 60 employees). The aim of this project is to analyse the lifestyles of students and employees, which will allow us to draw up health promotion recommendations, thus contributing to improving their health.

The measuring instrument will be a validated scale The Healthy Lifestyle Scale for University Students (Wang et al., 2012), which consists of 38 items divided into 8 dimensions (social support, physical exercise, diet, health responsibility, stress management, risk behaviours, regular behaviour and appreciation of life).

The study is presented following different phases including the literature review in relation to validated measurement instruments to study lifestyles (December 2023-February 2024), the collection, processing and analysis of employed data (March – June 2024) and of student data (September 2024-February 2025), and finally raise health promotion recommendations.

Coronavirus-Related Health Literacy of Polish School Principals and its Relation to the Health Promoting School Approach Implementation in Poland.

Karina Leksy, Rafaela Rosário

Introduction: Evidence confirms the significant role of school principals' health literacy in school health promotion. Therefore, the presented study aims to evaluate Polish school principals' coronavirus-related health literacy and the associations between Polish school principals' health literacy and the implementation of the Health Promoting School approach in Poland.

Material and Methods: The present study was conducted as part of an international study on the global COVID-HL network (www.covid-hl.eu) in eight provinces in Poland between June 2021 and December 2021. Principal axis factoring and one rotation were used for the exploratory factor analysis of Health Promoting School implementation. Pearson correlations were performed between the mean total score for Health Promoting School implementation and its dimensions.

Results: This study shows significant associations between Polish school principals' health literacy related to COVID-19 and Health Promoting School implementation. Research results showed that the highest level of Health Promoting School implementation was directed at pupils. Principals perceived themselves as having the highest health literacy on the 'accessibility' subscale and these respondents had significantly higher odds of implementing learning opportunities for students. The study suggests that principals with adequate health literacy may be more likely to implement Health Promoting School strategies effectively in schools.

Conclusions: This research could provide insights into the complex interplay between health literacy and the Health Promoting School approach and inform the development of more effective strategies for promoting health and health literacy in schools.

A Quantitative Study Examining the Effect of Perceptions of Gender Roles and Proactive Personality on the Relationship Between Work Volition and Academic Satisfaction among Undergraduate Students.

Sultan Beles

Introduction: Work volition refers to the ability of individuals to make career decisions in spite of the obstacles they experience. Academic satisfaction is a measure of how happy students are with the education they are receiving and has a determining effect on individuals' well-being levels. Thus, the aim of this research is to examine the relationship between university students' work volition and academic satisfaction in terms of perceived gender roles and proactive personality.

Material and Methods: This research has a quantitative research design and utilizes cross-sectional survey data obtained from undergraduate students enrolled at public universities in Turkey. The sample consists of 632 students, 222 males and 410 females, studying at the undergraduate level. Data was collected using the Work Volition Scale-Student Form, the Academic Satisfaction Scale, the Proactive Personality Scale-Short Form, and the Socialization of Gender Norms Scale. The study will examine the impact of perceived gender roles and proactive personality on the relationship between work volition and academic satisfaction using a structural equation model. In addition, hierarchical regression analysis will be used to examine multiple correlations between variables. SPSS 28 and SPSS AMOS 28 will be used to conduct these analyses.

Results: Since this study is within the scope of a master's thesis, analysis is in progress.

Suicide prevention for LGBTQ+ youth in Switzerland: an interpretive processual perspective.

Tobias Kuhnert; Niolyne Bomolo; Raphaël Guillet; Céline Bourquin; Laurent Michaud; Stephan Kupferschmid; Andreas Pfister

Introduction: Studies show that the LGBTQ+ population, particularly youth, is especially vulnerable to suicidal thoughts and behaviour. However, in Switzerland, qualitative studies on this topic are missing. Our study investigates the processual dynamics, background, and subjective meaning of suicide attempts of LGBTQ+ youth and explores their help-seeking behaviour. Furthermore, the burdens and resources associated with processes of becoming a LGBTQ+ subject are explored. By better understanding the processes towards suicide attempts, we aim to identify how to improve health promotion and suicide prevention.

Material and Methods: From 2021 until 2024, we interview LGBTQ+ youth in the German- and French-speaking parts of Switzerland who have tried to end their lives between the ages of 14 to 25. Applying a multi-perspective approach, we interview persons from their social environment if agreed. Recruitment is based on 'theoretical sampling'. Data collection and analysis follow Grounded Theory methodology. As of November 2023, the sample consists of 40 persons: 7 bisexual / lesbian cis women, 4 bisexual / gay cis men, 15 transgender / non-binary persons with various sexual orientations, 3 heterosexual cis persons and 11 persons from their respective social environment.

Results: Through preliminary analysis, the processes towards suicide attempts of LGBTQ+ youth and processes of becoming a LGBTQ+ subject were identified as intertwined, multifactorial, and often starting in childhood. Some phases of the processes of becoming a LGBTQ+ subject (e.g., dealing with normative expectations, coming-outs / transitioning) were found to strongly influence suicidal processes, thus reflecting the connection between these two processes. Together with personal and interpersonal factors, structural factors (e.g., access to affirmative and sufficient health care, school climate, pressure to perform in school) were significant for the processes towards suicide attempts and processes of becoming a LGBTQ+ subject, as well as for help-seeking.

Conclusions: Preliminary findings underline the need for health promotion and suicide prevention strategies addressing structural factors, e.g. improving general living and health conditions of LGBTQ+ youth using a health in all policies approach. The complexity and multifacetedness of LGBTQ+ youth's suicide attempts highlight the necessity to adopt a life course and processual perspective in setting-oriented health promotion and suicide prevention strategies.

Empowering evaluation of the project “Io sto bene qui in montagna!” to reduce child poverty in a mountain area.

Claudio Tortone, Mara Grasso, Alessandro Migliardi, Giovanni Borgarello, Giorgio Salza

Introduction: “Io sto bene qui in montagna!” was a project aimed to reduce child poverty (0-6 age) in a disadvantaged mountain area. The leader was Torre Pellice Municipality and other partners were valley municipalities, institutions and health, social, cultural and education services. The project's main objectives were: creating equity oriented educational policies and reaching more vulnerable children and families, through the strengthening of intersectorial collaboration, and activating community development to reinforce social support and networks.

Material and methods: The participatory action research, with the empowering evaluation approach, included both quantitative and qualitative methods. We started with focus groups with professionals and laboratories with families and the community, applying Laverack domains approach, to respond families' needs, enhancing their resources, and to initiate community empowerment programmes. Then, with a pre and post questionnaire, we asked families to evaluate the accessibility and the quality of 3 services and 3 well-being promotion activities. 101 families responded to both questionnaires. Between the two questionnaires and after the post one, we did communities laboratories with services' professionals to discuss and reflect about the main results. We identified possible strategies to deal with the main critical aspects and to strengthen the services' network.

Results: The project managed to spread a more knowledge of the services and the well-being activities, especially among families with a medium or low educational level. The services' evaluation was good, with an average of 8 on a scale from 1 to 10. The families suggested some useful proposals. We used different strategies to contact the families but it has been difficult involving the families, specially the disadvantaged ones. The COVID-19 pandemic has worsened the situation but probably also the methods used were not so appropriate for the target.

Conclusions: The context offered a lot of opportunity for the children and their families. It is important to improve the organization and the promotion of these services to allow also the more disadvantaged families to have access to the activities. It also important to strengthen the responsive parenting and the intersectorial collaboration between all the educative, cultural, health and social services.

Physical activity promotion intervention at the university: old school learning methodology.

Raquel Faubel

Physical activity (PA) is a modifiable lifestyle factor contributing to mental conditions and non-communicable diseases with a huge impact on healthcare systems. And it also helps to improve health outcomes as health-related quality of life and well-being. PA promotion is a priority issue on public health not just for its epidemiological relevance but also for its social gradient.

Under the “One Health” perspective, it’s crucial to find opportunities in our daily life to develop PA and also, for sustainability mobility and active transportation.

It’s well known that walking regularly improves our health. Benefits of walking go beyond its impact on clinical variables because it has also a social impact both on individual and also community level. Those benefits are important at any age, and it acquires a special relevance on college students due to the stablishing of lifestyles during this stage for the adult life. On the other hand, relationship between walking and learning has been manifested since the ancient classical Greece with the Peripatetic School of Aristotle (384–322 a. C.), due to the existence of a walkway where Aristotle had the habit of walking while talking.

The main objective of this study is to implement and to assess an intervention “Walking Minds” for physical activity promotion aimed to college students. Walking Minds is also an active teaching-learning methodology based on walking and wandering and, in addition, a strategy for the critical perception for urban knowledge. Design and assessment of the intervention has been developed following the model RE-AIM (Reach, Effectiveness, Adoption, Implementation, and Maintenance.) and the protocol Intervention Mapping for the mapping of the intervention.

The intervention has been implemented in a 2-hours practical lesson structured in three phases with a minimum of one hour of walking in a safety area close to the campus. Assessment has been designed as a quasi-experimental study (pre-post) collecting data in three different times in order to analyze long-term effects. Results of this study shows that Walking Minds could be a feasible intervention in three facets: PA promotion, teaching methodology and urban knowledge.

Bridging Minds – A Situational Analysis of Mental Health Perceptions and Suggested Supports for Students across a Multi-Campus Irish University

Machailla McCabe, Margaret McLoone, Renagh Linnane, Dr. Gail Cummins & Dr. Richéal Burns

Introduction: The absence of conceptual operationalisations of student mental health leads to a deficiency of effective mental health promotion strategies. This is particularly problematic in young populations specifically student populations who are most vulnerable to the impact of emerging mental ill health issues. This research acts as a baseline for establishing students' views of what they perceive mental health to mean to them. It also identifies potential supports and challenges students face in relation to their mental health by placing their 'voice' as a central focus in this 'student-centred' research.

Material and Methods: Data was collected through means of semi structured focus groups and an online questionnaire utilising the Qualtrics survey package. Ethical approval was granted from the ATU, Sligo Campus Ethics Committee. Following piloting and inter-rater reliability checks, students registered within the Atlantic Technological University (ATU) were invited to participate. Reflexive Thematic Analysis was applied to analyse data while utilising NVivo 12 as a data management system.

Results: A total of 655 valid responses from consenting current students in ATU and STACS were recruited for this research. A third of students (33.21%; n=218) had a previous diagnosis of a mental health disorder(s) with two thirds reporting they had no previous mental ill health diagnosis (66.79%; n=437). Overall qualitative findings resulted in a wide array of subthemes within the field of mental health and mental ill health amongst students.

Conclusions: Findings specifically demonstrates students potential solutions to support mental health at various levels: Institutional, Individual and Governmental. In conclusion findings show that many students do know what they want and what is needed for them to be supported appropriately in their college endeavours.

Eating behaviours of Polish and Portuguese young adults.

Julia Bober, Klaudia Wiśniewska, Katarzyna Okręglicka, Ewelina Gaszyńska

Introduction: Understanding the eating behaviours of young adults is essential for promoting healthy lifestyles and preventing nutrition-related health issues during Lifespan. This study focuses on Polish and Portuguese young adults, investigating cultural and socio-economic factors that influence their dietary choices. This study aims to provide an overview of eating habits among Polish and Portuguese young adults, identifying factors influencing their eating behaviors.

Material and Methods: A cross-sectional study was conducted with participants over 18 years old, Polish and/or Portuguese nationality. A structured questionnaire collected quantitative data on dietary patterns, meal frequency, food preferences and factors influencing food choices.

Results: Initial findings revealed a variety of eating habits influenced by cultural, social and economic factors. The study identified patterns of food preferences, eating and drinking behaviours. Alarming trends in consumption of pre-made meals and the impact of digital media on dietary choices were also shown.

Conclusions: This study provides insight into the dietary behaviors of young adults and their determinants. The results are expected to influence public health initiatives, guiding the development of targeted interventions to promote healthier lifestyle in the study population. Future research should look further into the specific aspects identified in this study to improve health promotion strategies for young adults.

Mapping Digital Public Health Interventions to Promote Mental Well-being among University Students: A rapid review.

Vanessa Wenig, Paula Matos Fialho, Eileen Heumann, Maria Müller, Claudia R. Pischke

Intorduction: University life offers substantial opportunities for personal growth. However, various factors associated with the university lifestyle, such as academic pressure and financial constraints, have been shown to intensify psychological distress and contribute to increased alcohol and substance use among students. We aim to map existing digital public health interventions and evaluate their effectiveness for enhancing well-being and health behavior and for reducing symptoms of mental illness among university students.

Material and Methods: We conducted a rapid review following the methodological framework proposed by the Cochrane Rapid Reviews Methods Group and PRISMA. The literature search was performed in Ovid MEDLINE using keywords relating to university students, mental well-being, mental health, and digital public health interventions. Only articles published between June 2018 and November 2023, written in English and reporting results of randomized controlled trials or observational studies were considered. The selection process was conducted following a two-step approach: 1) screening of titles and abstracts by two independent reviewer; 2) screening of full texts by three independent reviewers.

Results: Following the Cochrane Rapid Review Methods Recommendations, we are currently in the data extraction phase. We identified 1,134 potentially relevant articles in our primary search. After removing duplicates, 1,132 articles remained for screening. One thousand and ninety-eight articles did not meet the eligibility criteria, leaving a final selection of 25 articles for data extraction. Complete results of the rapid review will be presented at the conference.

Conclusions: This rapid review will improve our knowledge of existing digital public health interventions targeting mental well-being and health behaviors in university students and deliver results regarding their effectiveness. The results will enable universities to choose evidence-based interventions for the promotion of student health for implementation.

Adherence to the Mediterranean diet among Polish children. Validation of the updated version of KIDMED questionnaire.

Julia Bober, Ewelina Gaszyńska

Introduction: Mediterranean diet is known for its positive impact on health. Research on its adherence among children, especially in non-Mediterranean regions like Poland, is limited. Accurate assessment tools are crucial for understanding dietary patterns among children. The KIDMED questionnaire has been widely used for evaluating adherence to the Mediterranean diet. This study aims to validate an updated version (2.0) of the KIDMED questionnaire in population of Polish kids. Planned study aims to evaluate the reliability and relevance of the updated version (2.0) of the KIDMED questionnaire in the context of dietary behaviours of Polish children. The study aims to provide a solid tool to precisely measure the adherence to the Mediterranean diet in this demographic group, contributing to a further understanding of children's nutrition.

Material and Methods: The cross-sectional study will be conducted with 350-500 Polish children between the age of 6 and 12. Participants, along with their parents or guardians, will complete a modified KIDMED questionnaire that includes modifications to reflect Polish dietary patterns. The validation process will include internal consistency and test-retest reliability. The scheduled date for conducting the survey is late 2023/early 2024.

Results: Initial results are expected to show a high level of internal consistency and satisfactory test-retest reliability for KIDMED questionnaire among Polish children. Parallel relevance analyses are expected to show significant correlations between KIDMED scores and key components of the Mediterranean diet, supporting its validity as a tool for assessing dietary adherence in this population.

Conclusions: The results of this study will have implication for future research on dietary patterns in kids and are expected to provide a validated tool for assessing adherence to the Mediterranean diet among Polish children.

Can a mindfulness-based program be successfully delivered to youth with learning and socio-behavioural challenges?

Cheryl Currie, Mahala Swisterski

Introduction: Mindfulness-based interventions (MBIs) in schools strengthen the health and well-being of adolescents. Few studies have explored ways to implement and evaluate MBIs within alternative schools. Alternative schools offer a flexible learning environment designed to meet learning and socio-behavioural needs that cannot be met in regular school settings. The objective of this study was to adapt an evidence-based MBI program for an adolescents attending an alternative school, and test the intervention.

Material and methods: In 2021-2022 we worked with school administrators, teachers, and school social workers to adapt an evidence based MBI for youth (the Learning to Breathe program) for an alternative school environment. Based on our work with school partners, we made the following adaptations: (1) incorporate apps to deliver some of the mindfulness practices in session, (2) enhance trauma-informed messaging during program delivery, (3) have school staff that students are familiar with in the room, (3) provide youth with small tangible items to remind them to practice mindfulness outside sessions. We piloted the adapted program with a grade 9 class and grade 10 class in an alternative school. Youth were engaged in six one-hour mindfulness sessions delivered once per week. Pre and post data were collected to assess impacts on mindfulness, emotional regulation, bullying, and health behaviour.

Results: Quantitative and qualitative data indicate youth were engaged in the adapted version of the program, that their understanding of mindfulness as a tool for stress and coping increased, and that incorporating digital technology (apps) to deliver segments of the intervention promoted independent use of the digital tools by youth outside the sessions. The findings indicate that the adapted program enhanced emotional regulation and reduced bullying among students in an alternative school environment.

Conclusions: The findings of this study suggest youth attending an alternative school benefited from a mindfulness program adapted to suit the unique learning and socio-behavioural challenges they experience.

Psychological support in schools within the Health Promoting School approach: a strategical integration.

Veronica Velasco, Luca Biffi, Concetta Cannataro, Laura Ferrari, Marina Ghislanzoni, Giuliana Mazzoleri, Fiorella Sangiorgi, Stefania Vizzardi, HPS Psychological Support Group

Psychologists are present in the majority of schools in many countries, and there's growing recognition of their role. They provide effective school health services, promote students' health and learning, and impact the whole school community well-being (Jimerson et al., 2006). However, there is no shared definition of school psychologists' role. Moreover, this service is often not linked with health promotion policies and strategies. Many studies on the effectiveness of school psychology agree that an organizational and consultative approach addressed to the school community as a whole would be preferable to traditional approaches focused on working individually with children (Farrell, 2009).

This study aims to define psychological support functions at school integrated within the Health Promoting School, one of the most recognized approaches to health promotion in schools.

A research-action process has been developed in Italy with the Lombardian Health Promoting School Network. A group of 15 school representatives (school principals, teachers, and school district representatives) and 9 health promotion professionals was involved. Literature analysis, local good practices analysis, and group discussions were realized.

Psychological support was defined as activities to promote the well-being of all persons who are part of the school system and prevent the occurrence of forms of psychological and physical discomfort or malaise. This support aims to prevent and fight educational poverty and school dropout and guarantee the right to study. It includes actions of organizational support for the educational institution, school staff, students, and families. It carries out functions of prevention, evaluation, and intervention through activities of counseling, training, supervision, research, and support for the implementation of interventions. Some crucial elements of school psychologist practices were identified: link with school planning, whole-school approach, internal resources engagement, school-community strategies, focus on well-being and health, evidence-based actions, inequalities attention, trans-disciplinary approach, collaboration with health services, integration with health promotion policies.

This conceptualization of psychological support functions has been considered to develop tools for schools and psychologists. It supports the integration of different strategies and actors to promote health in schools. The results will be used by the Lombardian Health Promoting School network to define regional and local activities.

Pandemic Babies: Unveiling the impact of pandemic unemployment on infant communication development in low-income US families.

Mahala Swisterski, Cheryl Currie

Introduction: The home environment has significant impacts on how infants grow and develop. Sudden unemployment was common during the COVID-19 pandemic, creating stress in families, particularly within low-income homes. From a health promotion perspective, unemployment benefits during the pandemic may have helped eased tensions in low-income homes and improved developmental outcomes for infants living in these homes, relative to infants living in homes that did not receive these benefits. The objective of this study was to test this hypothesis by examining whether infant communication development differed between low-income homes that did and did not receive unemployment benefits during the COVID-19 pandemic.

Material and methods: This study used data from the Baby's First Years Study, which collected longitudinal data from approximately 600 mother-infant dyads living in low-income homes between 2018-2021. Families were recruited from hospitals in low-income neighbours across several US cities. Women with self-reported incomes that fell below the US poverty line were invited to take part. Data were collected in-person between 2018-2020, and transitioned to telephone in 2020 due to the pandemic. The outcome variable, infant communication, was measured with the Ages and Stages Questionnaire at age one and the McArthur-Bates Communication Development Index at age two and analyzed on a continuous scale. The exposure variable, pandemic unemployment, was a categorical variable that measured whether any member of the household received unemployment benefits during the pandemic. Data were analyzed in Stata using a bootstrapped linear regression model and generalized estimates equations. The model was adjusted for confounders including infant sex, maternal education, maternal marital status, and parity.

Results: Approximately 40% of families in this study received unemployment benefits during the pandemic. When averaged across all dyads, receiving unemployment benefits during the pandemic was associated with improved infant communication development scores in low-income homes (β : 0.14, 95% CI 0.01 to 0.28, $p = 0.04$) after adjustment for confounders.

Conclusions: The findings of this study suggest infants living in low-income homes that received unemployment benefits during COVID-19 pandemic had stronger communication development outcomes than infants living in low-income homes that did not receive these benefits.

Together at Social Sciences – Mental Health Promotion at the University Setting.

Nielsen, Line; Madsen, Cecilie Schacht; Bermejo, Elena; Koushede, Vibeke; Meilstrup, Charlotte Bjerre, Nelausen, Malene Kubstrup

Introduction: For many young individuals, their academic years are generally regarded as a positive phase in their lives, both socially and academically. Regrettably, there is a growing population of young people facing mental health challenges or dealing with diminished mental well-being. Existing research on the mental well-being of university students has predominantly focused on psychological distress and the utilization of support services by those encountering mental health issues. There is a pressing need for additional research to explore effective strategies for promoting mental health and well-being within this academic context. The objective of this complex intervention is to promote mental well-being among students by 1) increasing mental well-being literacy among students and staff and 2) to foster a mental health promoting study environment.

Material and Methods: 'Together at Social Sciences – ABCs of Mental Health at the University' (ABC-uni) is an adaptation of the ABCs of Mental Health (ABC) to the university setting. ABC is the first universal research based public mental health promotion initiative in Denmark. ABC-uni applies a whole university approach encompassing students, faculty, and other stakeholders. It integrates elements such as an elective course on mental health promotion, an online module promoting mental well-being literacy featuring podcast interviews with experts and students, capacity building in mental well-being literacy and mental health promotion for staff, and a photovoice-based mapping of mental health resources on campus.

Results: The elements of the complex intervention is under development and are being pilot tested during 2023-2024. At the conference, we will present preliminary experiences and findings.

Conclusions: Universities play an important role in promoting mental well-being at the individual, group and university level. The salutogenic approach applied in the ABC-uni may provide valuable experiences that can support this.

Factors associated with mental health help-seeking intentions among university students in Kazakhstan: a cross-sectional pilot study.

Torgyn Bakenova, Raushan Alibekova, Byron Crape

Introduction: Mental health of youth is a major public health concern around the world, especially among college students, who are more likely than other age bunches to encounter mental well-being issues. Around 20% of young people worldwide experience mental health disturbances, with suicide being the leading cause of death among 15-29 year-olds (WHO, 2021). Understanding help-seeking intentions is important in order to identify modifiable factors that can increase engagement in psychological counseling. The purpose of this research was to identify factors associated with mental health help-seeking intentions among university students in Astana, the capital city of Kazakhstan.

Material and Methods: A cross-sectional survey among students of Nazarbayev University, Eurasian National University and Astana Medical University (n=99) was conducted in 2022 using online questionnaire. Standardized scales were used to measure main study variables, including General Help-Seeking Questionnaire, 6 item Kessler Psychological Distress Scale, Attitudes Toward Seeking Professional Psychological Help-Short Form, and psychosocial variables based on the Theory of Planned Behavior. Descriptive analysis, bivariate analysis and multivariate logistic regression analyses were performed using Stata software version 12.

Results: 71.72% of students were classified as having a probable serious mental illness using the self-reported scale on psychological distress. In general, students reported good attitudes toward professional psychological help; however, it was not associated with help seeking intention in our sample. Students were more likely to seek help from an intimate partner (mean value 5.1; ± 2.0), followed by friend (mean value 4.9; ± 1.7) and mental health professional (mean of 4.6; ± 1.8). Age, major, awareness about availability of counseling centers on university campus, and barriers related to the fear of being hospitalized involuntary and not knowing what to talk about during the counseling session, were independently associated with help-seeking intention.

Conclusions: Our findings indicate the need to improve mental health literacy of university students of younger age, especially those with non-medical major. Developing communication skills of students, such as ability to understand and express own mental health needs and concerns, is recommended in order to facilitate help-seeking intentions. Future research is recommended, involving larger sample size, to increase the strength of our study results.

Development and validation of a new instrument to measure parental health literacy in the context of early childhood overweight and obesity prevention.

Verena Krah, Katharina Rüttger, Stephanie Stock, Kevin Dadaczynski

Introduction: Parental Health Literacy (HL) is an important determinant of early childhood overweight and obesity prevention. Parents often seek health information for their children to make parental health-related decisions. This leads to an increased need for finding and processing relevant health-related information. In this context, parents can be described as “surrogate information seekers”, which therefore gives them an important role in the development of their children’s health. However, there is no valid and reliable instrument for measuring health literacy that covers the particularities of parenting. The aim of this study is to describe the development and validation of a new instrument to measure parents’ abilities to access, understand, and apply health information for their children’s well-being and healthy lifestyle.

Material and Methods: The initial development of the item pool is based on the conceptual understanding of Sørensen et al. (2012) and the four-step approach of information processing (finding, understanding, evaluating, and applying health information). Based on information derived from the existing literature, two additional dimensions (interaction and knowledge) are included and considered for item development. The instrument will be developed based on the following steps: (1) literature review, (2) expert consultations in the form of a Delphi Study, (3) cognitive interviews with parents, and (4) validation study. The validation study is embedded in a project that aims to stabilize the weight development of children with overweight and obesity aged 3-6 years by providing home-based coaching sessions supported by a web application. A sample of 812 German parents participating in this project will receive the instrument at baseline and at the end of 12 months. The instrument’s psychometric properties will be evaluated using exploratory factor analysis and internal consistency. To examine criterion validity, associations with other constructs such as child dietary intake, parental feeding practices, and parental quality of life will be tested.

Results/Conclusion: Once available, the new tool for assessing parental HL will fill an existing gap in Public Health research and practice. It will not only enable empirical research, but also the need-driven development of interventions and their evaluation.

How universities implement the Health Promoting University framework: The study case of Xarxa Vives Network.

Comellas P, Juvinyà-Canals D, Esqué S.

Introduction: Since the publication of the Ottawa Charter, the number of interventions to promote people health in specific settings has increased. At the same time, we have come to new understandings of young adults as a critical period for achieving optimal health status in future stages of life. In this sense, the Health Promoting University (HPU) framework for action has become an important catalyst from which to interpret these principles beyond the individual boundaries. In this sense, we examine the opportunities and challenges of the implementation of the HPU framework across universities within a local network.

Material and Methods: This work reports on a qualitative study examining the implementation of health promoting universities initiatives in some institutions in Andorra, Catalonia, Valencian Community, Sardinia (Italy) and the Balearic Island. It draws upon insights from the settings-based approach to health promotion to examine the usefulness as well as the practical opportunities of the health promoting university construct as an adaptative framework to better understand ways in which health promoting universities initiatives and interventions could be displayed within the university setting. The primary data for the study were collected by semi-structured interviews with 7 representatives of local projects. Additional information was extracted from publicly available university management plans and the communications undertaken shared openly on the websites. The interviews were carried out remotely, and the data were analyzed using an inductive approach based on ten categories previously assessed in an earlier phase of the project.

Results: Four major themes were identified. First, universities frequently utilize social media and technology platforms to promote healthy habits beyond the physical context. Second, there is an implicit need to base HPU actions on empirical data. Third, there are benefits in establishing collaborative contacts with health agents outside the university setting itself. Finally, the adoption of the HPU framework has not been equally understood between universities even when they are part of the same HPU network.

Conclusions: The perceptions reported by the representatives interviewed will allow the universities from the XVU to better understand the factors influencing the implementation of the HPU concept.

Prevalence of gambling, study design and population of the experimental controlled study “GAPUnplugged” for the evaluation of the Unplugged program on gambling behaviours among 12-14 years old adolescents in Italy.

Marco Martorana, Emina Mehanović, Erica Viola, Alberto Sciutto, Serena Vadrucci, Mariaelisa Renna, Giulia Giraudi, Maria Ginechesi, Claudia Vullo, Chiara Sacchi, Chiara Andrà, Matteo Pezzutto, Cristina Scalvini, Adalgisa Ceccano, Pietro Casella, Fabrizio Faggiano, Federica Vigna-Taglianti, and the GAPUnplugged Coordination Group

Introduction: Early onset of gambling behaviour poses a risk for development of problematic gambling later in life. Nevertheless, scarce studies on gambling prevention interventions were conducted on early adolescents. During the 2022/2023 school year, we conducted an experimental controlled study (“GAPUnplugged”) to evaluate the effectiveness of the Unplugged school-based prevention program with the addition of a new gambling unit in preventing gambling behaviours among 12-14 years old students. This paper aims to describe the prevalence of gambling behaviors, the study design, and the sample of participants in the study.

Material and Methods: The study took place in Piedmont and Lazio Italian regions and involved secondary school students. A self-completed anonymous questionnaire was prepared for baseline and follow-up surveys. The baseline questionnaires were administered between November 2022 and January 2023 both in control and intervention group. The intervention group received then the 13 units of the “Unplugged” program with the gambling component (February-April 2023). Finally, after 4 to 8 weeks from the completion of the program, the same evaluation questionnaire was administered in control and intervention classes (May-June 2023).

Results: Twenty-nine schools accepted to participate in the study. Sixty-three classes (1325 students) were allocated to the intervention arm, and 61 (1269 students) to the control arm, for a total of 124 classes and 2594 students. At baseline, 998 students of 59 classes in the intervention arm (drop-out rate 25%) and 876 students of 59 classes in the control arm (drop-out rate 31%) filled the questionnaire (1874 students of 118 classes overall). Gambling behavior at least once in the last 12 months was reported by 54.9% of students, 35.4% gambled at least once in the last 30 days, 12.4% gambled on regular basis and 29.9% gambled sporadically.

Conclusions: This appears to be the first experience of evaluating a new component focused on a different risk behaviour, added to a curriculum previously shown as effective on other risk behaviours. The prevalence of adolescent gambling behaviour appears to be very high. A strengthening and enforcement of regulations and interventions preventing underage gambling are of great importance today for limiting the spread of this risk behaviour.

Factors associated with gambling behavior among 12-14 years old students in Italy: the role of parental gambling, norms and monitoring.

Marco Martorana, Erica Viola, Alberto Scitutto, Emina Mehanović, Maria Ginechesi, Claudia Vullo, Adalgisa Ceccano, Serena Vadrucchi, Mariaelisa Renna, Giulia Giraudi, Chiara Sacchi, Chiara Andrà, Matteo Pezzutto, Cristina Scalvini, Pietro Casella, Fabrizio Faggiano, Federica Vigna-Taglianti, and the GAPUnplugged Coordination Group

Introduction: Gambling among adolescents is becoming a serious public health problem. The first involvement in gambling appears to occur in early adolescence, between 11 and 12 years of age. A better understanding of factors related to the phenomenon is important to correctly address the problem. Parents act as role models and influence the development of their children's habits and behaviors during adolescence. This study aims to elucidate the role of parental factors on adolescent's gambling in a sample of Italian 12-14 years old students.

Material and Methods: During 2022/2023 school year we conducted an experimental controlled trial to evaluate the effectiveness of the Unplugged program (plus a new gambling unit) in preventing the behavior among 12-14 years old adolescents. For the present analyses, the baseline survey of the study was used. The survey involved 1874 secondary school students of Piedmont and Lazio between November 2022 and January 2023. Participants filled a self-completed anonymous questionnaire including questions on sociodemographic characteristics, gambling and other risk behaviors, risk perceptions, attitudes, beliefs, normative perceptions, family and parental factors, and psychosocial characteristics. Multilevel logistic regression models will be used to estimate the association of parental factors with adolescent's gambling in the last 12 months.

Results: The analytical sample included 1848 students. Mean age was 13.1 years. Overall, 55.7% of students (54% of females and 56% of males) reported gambling in the last 12 months. In preliminary bivariate analysis, parental gambling, gambling with parents and other family members, parental permissiveness to drink, smoke and gamble, low parental monitoring, low parental support and receiving money from parents were significantly associated with the probability of adolescents' gambling in the last 12 months. Multivariate regression analyses are ongoing.

Conclusions: Parental factors, particularly permissive norms, appear to be important correlates of gambling behavior among adolescents. These results highlight the importance of the ecological context as determinant of gambling behavior and the need to address parental and family factors in health promotion programs. Family-centered interventions should promote health behaviors in parents and support them in conveying messages of disapproval of gambling behavior toward their children.

The impact of physical activity on mental well-being college students during pandemic.

Ira Nurmala, Jayanti Dian Eka Sari, Farapti, Dianna Suzieanna Mohamad Shah, Airil Haimi Mohd Adnan, Nisrina Auliyah Laras Karindra, Laila Wahyuning Tyas, Yuli Puspita Devi

Introduction: The COVID-19 virus is spreading rapidly throughout the world, and all countries are limiting mobilization and imposing lockdown rules to prevent the spread of COVID-19. Many countries have reduced physical activity due to the COVID-19 pandemic. Physical activity in students also decreased because learning activities were carried out at home. Reduced physical activity during the pandemic increases mental well-being problems in college students.

Material and Methods: This research was an analytic observational study with a cross-sectional approach. Data were collected through questionnaires to as many as 400 respondents to active students. The research was conducted online by distributing questionnaires via a Google form. Statistical analysis using linear regression was performed with IBM SPSS 26.

Results: Most respondents were male (68.5%), average age of 19.89 years old, did activity outside campus (95.8%), traveled less than 2 hours to campus (73.5%), and traveled to campus by bicycle (48.0%). The majority of respondents had adequate mental well-being (64.5%) and moderate physical activity (38.8%). Physical activity was related to students' mental well-being levels during the pandemic era ($p\text{-value} = 0.05$, $r = 0.148$).

Conclusions: Distance learning was implemented to prevent the spread of the COVID-19 virus. Physical activity in college students decreased during the pandemic, so mental well-being problems increased. Physical activity in college students correlated with mental well-being during the pandemic era. Therefore, institutions need to participate in increasing student physical activity during the pandemic to maintain student mental well-being.

Age-friendliness of community and sleep quality: the role of mental health.

Huiting Yang, Limei Huang, Shuning Tang, Jixiang Xu, Fangting Lin, Yujie Wang, Xiuqin Chen, Yunhui Wang, Junling Gao, Qianyi Xiao

Introduction: Poor sleep quality is a prevalent and significant health issue associated with aging. The relationship in Age-friendliness of community (AFC), mental health and sleep quality is still unclear.

Material and Methods: This cross-sectional study included 3099 participants aged ≥ 60 years who were selected using multistage stratified cluster sampling, in Shanghai, China, from May to December 2020. The Pittsburgh Sleep Quality Index (PSQI) was adopted to assess the sleep quality, and the validated Chinese version of the Age-friendly Community Evaluation Scale was used to measure AFC. Mental health indicators in this study include depression and reliance. The serial multiple mediation model was used to examine the mediating role of resilience and depression in the relationship between AFC and sleep quality. Multivariable linear regression models were used for the association between each AFC dimension and sleep quality among participants with different mental health level.

Results: Resilience and depression completely mediated the relationship between AFC and sleep quality through three paths: (1) the independent mediating role of resilience (effect= -0.023, 95% CI: -0.035 to -0.011), (2) the independent mediating role of depression (effect= -0.039, 95% CI: -0.052 to -0.028), and (3) the serial mediating role of resilience and depression (effect= -0.014, 95% CI: -0.019 to -0.010). Of the five dimensions of AFC, Transportation (adjusted beta= -0.546, FDR $p < 0.001$), Social Inclusion and Health Services (adjusted beta= -0.401, FDR $p = 0.018$), and total AFC (adjusted beta= -0.596, FDR $p = 0.003$) were found to have negative associations with poor sleep quality only in participants with high mental health level, but not in low or medium mental health groups.

Conclusions: AFC was associated with sleep quality through influencing resilience and depression. Measures to improve the Transportation environment of community and measures related to enhance social inclusion and health services may improve the sleep quality of elderly people with good mental health conditions. For elderly individuals with moderate or low mental health, a community perspective may not be the recommended approach, and providing health education and services that can enhance the resilience of older adults may be a way to improve sleep quality.

Pandemic and protective health behaviour: How do Brussels citizens view the Covid pandemic and future pandemics? A qualitative study.

Sandrine Roussel, Nathan Nguyen, Amélie Avignon, Aurélien Cornil, Dominique Vanpee, Stephan van den Broucke

Introduction: SARS-CoV-2 crisis is an opportunity to be better prepared for similar episodes. Considering them from a behaviour perspective might be relevant. Indeed, difficulties arose in „translating” measures into behaviours. The research is part of a prospective participative study funded by Innoviris that aims to elaborate scenarios of a new pandemic in Brussels, focusing on behaviours. This part tackles the following questions: (1) What were the factors blocking/encouraging protective behaviour (i.e., compliance with government rules, vaccination, or self-behaviour) during the Covid episode? (2) What roles should citizens, government or other bodies play in maintaining “a good health”?

Material and Methods: A qualitative study, using semi-structured interviews, was carried out with Brussels citizens. Citizens’ groups were interviewed twice by a pair of researchers with different backgrounds: once about the Covid-19 crisis, and once about future pandemics. A thematic analysis was conducted, associating the Canadian model of health determinants and emerging categories.

Results: Fifty-one citizens took part in seven „double” focus groups and three individual interviews between March and July 2022. Surprisingly, the visions of the future mainly consist of a transfer of the participants, with the same age, into the future. While citizens did stress the need for better preparedness by drawing up plans, they also emphasized the difficulty of being ready and the possible need to learn anew, or even integrate the concept of ‚risk’ inherent to life. Different views of what a good crisis management should be were highlighted: specific at-risk groups versus “for everyone” management; renewed confidence in a democratically elected government versus new forms of participation governance to ensure trust in the decision; partly overlapping with convince versus coerce, spheres of influence on health (taking care of oneself, one’s entourage, „personified” strangers, the common good or the environment) matching with “appropriated” health education for the first four. The relevance of these choices is sometimes modulated by the “pathogen”.

Conclusions: The visions cover a broad spectrum which, alongside other sources (literature review, databases), provides interesting material for scenarios that depend on the choices made by both politicians and citizens, before and during the pandemic.

Exposure time to sedentary behavior and physical activity practice in full-time students during the SARS-CoV-2 pandemic.

Lauryane Fonseca Terra; Sílvia Ferreira, Márcia Regibna, Priscilla Rayanne e Silva Noll; Matias Noll

Introduction: The aim was to assess the association between the time exposed to sedentary behavior and levels of physical activity in full-time adolescent students.

Material and methods: A mixed-methods case study was conducted with full-time high school students. With a population of 169 students, the sample was determined using a confidence level of 95.0% and a margin of error of 5.0%, in addition to heterogeneous distribution. Thus, the sample consisted of 119 students (52.9% female; 15.9 ± 0.9 years old), with 12 selected for interviews. The Barriers to Physical Activity questionnaire, International Physical Activity Questionnaire, and a structured interview were administered. Qualitative analysis was based on the Poisson regression model with robust variance, and content analysis for qualitative data. The average time exposed to sedentary behavior was 4,377 (minutes per week), and the average time spent on physical activity was 683 (minutes per week). Adolescent students had a ,low' level of physical activity (44.4%, $n=52$), with a identified association of females with ,low' physical activity ($p=0.035$). Barriers associated with ,low' physical activity level included „laziness“ (PR 1.463; CI 1.031-2.076), „lack of time“ (PR 1.546; CI 1.111-2.151), „preferring other activities“ (PR 1.521; CI 1.073-2.155), „lack of motivation“ (PR 1.573; CI 1.102-2.245), „lack of nearby places“ (PR 1.576; CI 1.077-2.307), and „no means of transportation“ (PR 1.619; CI 1.005-2.606). The barriers „too many tasks“ and „lack of time“ were reported by both sexes as the main ones. There was no association between time exposed to sedentary behavior and physical activity level or the number of reported barriers.

Conclusions: This study is pioneering in assessing the association between barriers to physical activity, levels of physical activity, and time exposed to sedentary behavior in full-time students. In addition to informing the development of actions and programs to reduce physical inactivity, it may contribute to future research on barriers to physical activity.

Aspects of methodology of Behavioral Insights study on routine immunization in Kosovo among parents and healthcare workers, 2023.

Florie Miftari Basholli¹, Merita Berisha, Mejreme Bajqinovci, Sevdie Spahiu, Ardita Baraku, Sebahate Pacolli Krasniqi, Lejlifere Shabanaj Kraniqi, Rina Hoxha, Floriana Mehmedaliu, Genc Bajraktari, Edita Goranci Haxhiu

Introduction: Despite being considered one of greatest achievements of modern medicine, vaccination rates for some regularly scheduled vaccines, recently have declined. Important indicator of regular vaccination coverage for three doses of DiTePer vaccine, in Kosovo fell from 97% to 87%. The evidences show that understanding of perceptions and attitudes towards regular vaccination has high impact on addressing the gaps in vaccination.

AIM. The main aim is to describe steps in the methodology used for conducting the Behavioural Insights research on routine vaccination in Kosovo among parents of children 0-6 years old and healthcare workers.

Material and methods: The research approach is quantitative survey – face-to-face interview at the place of the respondent's residence, using the Tablet Aided Personal Interview (TAPI) method. The interviews are conducted "in-home" of the respondent for the parents/caregivers and in healthcare facilities for healthcare workers. Data are collected and recorded electronically, using secure electronic platform and programming the electronic version of the survey questionnaires. Methodology developed through close cooperation among experts from UNICEF, WHO, National Institute of Public Health of Kosova (NIPHK,) local and international research company. Secretary General of the Ministry of Health, appointed reference group for monitoring and overseeing research. Ethical approval was obtained from the Scientific Committee of NIPHK and Medical Doctor's Chamber of Kosovo.

Results: Data gathering will be completed by mid of December 2023; following steps have been completed: desk review, ethical approval, methodology, piloting. Questionnaires have been piloted with 20 respondents in the municipality of Prishtina and Peja, for testing questions and script in terms of general perception, understanding and overall assessment. Questionnaires are well perceived, healthcare workers commented that questions in general are clear, but complained on the length of interview (15-20 minutes).

Research results are expected to be announced on a round table organized with relevant governmental, healthcare and policy makers at the end of February 2024 and qualitative complete findings, will be presented during June 2024 at the 12th IUHPE European Conference on Health Promotion.

Conclusions: Findings will generate evidences related to determinants of population's vaccination behavior and improve outcomes

Exploring how people despite economic difficulties achieve the World Health Organisation recommendations of physical activity, with a sense of coherence perspective.

Lisbeth M. Johansson Rn, Eleonor I. Fransson, Hans Lingfors, Marie Golsäter Rn

Introduction: In health promotion, the salutogenic model of health is one base. The salutogenic concept of sense of coherence views a person's inner trust and their view of life, which may improve their ability to detect and use their disposal resources. A combined focus on resources and stressors may could enable a higher health and sense of coherence. The present study is based on interviews in the context of targeted health dialogues with people achieving the recommended physical activity level despite economic difficulties. The world health organisation recommended levels for physical activity for adults are at least 150 to 300 minutes per week of aerobic PA of moderate intensity or at least 75 to 150 minutes per week of vigorous intensity, or a combination of these.

The aim was to explore how people despite self-reported economic difficulties comprehend, manage and find it meaningful to achieve the recommended level of physical activity.

Material and Methods: Deductive content analysis based on sense of coherence as the main category, with the three generic categories of comprehensibility, manageability and meaningfulness was used.

Results: The findings reveal a pattern of a process where the dimensions of sense of coherence interacts in the direction of the ease pole on the health continuum and maybe helps the participants achieving the recommendations for physical activity. The participants comprehend their knowledge of the health benefits of physical activity and a physical activity plan. Despite their challenges, they utilise their resources in order to manage to apply their knowledge and plan for physical activity. They have an intrinsic motivation to perform physical activity. It becomes meaningful to them and they experience the benefits of physical activity.

Conclusions: The present study proposes a possible process in achieving the recommended physical activity level among people with different challenges such as economic difficulties. The findings may be used in health promotion work such as targeted health dialogues reducing health inequalities when supporting people who are not get achieving the recommended levels of physical activity.

Community-Based Physical Activity Promotion: Approaches to engage socially disadvantaged population groups.

Lea Dippon, Natalie Helsper, Simone Kohler, Leonie Birkholz, Philipp Weber, Klaus Pfeifer, Alfred Rütten, Jana Semrau

Introduction: Community-based physical activity promotion has the potential to reduce health inequity. However, the success of this effort relies on involving socially disadvantaged people. In the community-based physical activity promotion project KOMBINE, six pilot communities developed measures in cooperative planning processes with stakeholders from practice, policy, and research as well as socially disadvantaged people. This analysis examines approaches to engage socially disadvantaged people in the cooperative planning process and in the development of measures.

Material and Methods: In order to identify the various approaches at the 'process' and 'output' level, we conducted a document analysis. For this purpose, we analysed meeting minutes from sessions, conversations, and workshops regarding approaches to engage socially disadvantaged people in the cooperative planning process ('process'). Furthermore, we examined the approaches used within the action plans with specific implementation steps ('output').

Results: Participation of socially disadvantaged people in the cooperative planning process was achieved through facilitators (e.g., district managers), associations/clubs (e.g., Caritas, sports clubs), existing networks (e.g., Poverty Conference), or informational events. In the action plans, specific implementation steps considered approaches to involve socially disadvantaged people, e.g. through focus groups or selecting disadvantaged neighbourhoods for the implementation. Additionally, specific measures were developed to engage socially disadvantaged people, such as providing training for them to become exercise instructors.

Conclusions: The identified approaches to engage socially disadvantaged people are characterized by early involvement, often with a combination of various strategies and a sufficient amount of time. It is critical to reflect that participation extends beyond mere interviews, enabling equitable involvement of socially disadvantaged people in decision-making during the planning and implementation of measures. An analysis of the effects of these approaches to reach socially disadvantaged people at the 'outcome' and 'impact' levels is currently being conducted.

Enhancing diets in Low Socio-economic Position Communities: Evidence-based strategies for stakeholder engagement.

Hermine ten Hove

Introduction: Vulnerable communities, particularly those with a low Socio-Economic Position (SEP) in high-income contexts like The Netherlands, face significant disparities in life expectancy and health outcomes compared to higher SEP groups (Van Raalte et al., 2011). These communities are disproportionately affected by health risks such as elevated rates of overweight and obesity, as well as heightened vulnerability to health crises such as the COVID-19 pandemic (Artinian et al., 2010; Michie et al., 2009; Onwezen & Galama, 2021). Low SEP groups encounter a complex array of barriers that hinder their ability to attain positive health outcomes. These barriers include suboptimal dietary habits, limited access to effective interventions, reduced intervention effectiveness (Michie et al., 2009), and higher attrition rates due to interventions that do not adequately address their unique needs (Roumen et al., 2011). Addressing these health inequities necessitates the development of interventions that promote healthy and sustainable behaviours tailored to the needs of vulnerable individuals and specific groups. This research seeks to identify key insights and novel strategies to support low SEP consumers in accessing and adopting healthier and more sustainable dietary practices.

Material and methods: In August 2023, an exploratory literature review was conducted to inform a comprehensive factsheet, tailored to practitioners, containing evidence-based recommendations for designing collaborative interventions aimed at improving the dietary habits of low SEP consumers. To supplement the findings from the literature review, a series of 11 semi-structured phone interviews were conducted from December 2023 to January 2024. These interviews involved stakeholders from organisations focused on promoting healthier and more sustainable dietary choices, as well as those actively engaged in addressing social equity and improving access to health services for low-SEP groups, with the overarching goal of fostering social capital.

Results: The discussions during these interviews were centred around understanding the specific needs of low SEP consumers, providing valuable insights into critical criteria for developing and implementing effective interventions in the Netherlands. Key themes emerged, including the need for active involvement of low-SEP groups in all phases of intervention development, and prioritizing building on existing initiatives and networks over creating new ones. These insights were integrated with findings from the literature review, highlighting the importance of applying intervention principles with the specific needs of low-SEP groups at the centre when designing and implementing interventions to reach intended health goals.

Conclusions: This research highlights the importance of collaborative efforts to bridge the gap between evidence-based strategies and real-world interventions. There remains a critical need for continued exploration of community participation mechanisms, particularly in the context of achieving healthy and sustainable dietary practices. Furthermore, application of and documenting these evidence-based principles to interventions, specifically among low SEP groups in high-income contexts, is needed. These efforts are integral to fostering meaningful and lasting positive change in public health outcomes.

Subjective sleep quality before and after the COVID-19

Aleksandra Witkowska, Małgorzata Pikala, Monika Burzyńska

Introduction: Sleep is crucial for overall health and well-being. Simultaneously its health value are underestimated. The aim of the study was to assess differences in sleep quality before and after Covid-19.

Material and methods: The study used an anonymous questionnaire distributed online. The tool contained 44 questions. Data was entered into Microsoft Excel and Statistica. The study group consisted of 101 people, including 68 women and 33 men. The average age was 23-years. More than half were married. Almost half of the respondents lived in a city. Half of the group had secondary education. Two thirds of the respondents were working population.

Results: After suffering from Covid-19 respondents admitted greater difficulty in falling asleep (6.9% vs 9.9%; $p < 0.05$), which was cause of taking medications. The subjects woke up more often at night after illness (28.0% vs 44.5%; $p < 0.05$). Drinking caffeinated beverages was the most common way to deal with anxiety. The ease of falling asleep decreased with age. People in formal relationships and living in the countryside devoted less time to sleep and suffered more often from sleep disorders. Respondents with secondary education spent less time sleeping, but they fell asleep more easily and woke up more often at night than the other groups. Respondents who worked had problems falling asleep more often.

Conclusions: The study showed the need to educate society about sleep disorders and ways of dealing with difficulties related to falling asleep.

Healthy lifestyle counselling provided by primary care nurses to adult patients.

Paweł Nowicki, Szymon Wilczyński, Małgorzata Znyk, Dorota Kaleta

Introduction: Apart from diagnostic, nursing, rehabilitation, and treatment services, the primary care nurse also has the competence to provide health prevention. Our study aimed to examine the correlates of counseling provided by primary care nurses with the health status/ health behaviors of nurses and the barriers in the advice provided.

Material and methods: In 2022, we conducted a cross-sectional survey among 331 nurses employed in the primary care sector in Lodz. The research tool was an anonymous questionnaire. The Bioethics Committee at the Medical University of Lodz gave a positive opinion of the project (RNN/315/18/KE).

Results: Eighty percent of the nurses in our study provided advice on diet and physical activity to primary care patients. Over 70% of the survey participants performed minimal anti-smoking interventions in smokers, 67.7% in alcohol drinkers, and 56.8% in e-cigarette users. The correlates of counseling in the field of diet and physical activity turned out to be the knowledge and skills which enabled nurses to provide advice (OR=2.17; $p<0.05$). The correlates of the conducted minimal anti-smoking interventions in smoking patients were: subjective assessment of overweight and obesity in nurses, knowledge and skills in conducting counseling (OR=1.92; $p<0.05$), and measuring body weight, height and BMI (OR=2.18; $p<0.01$). Similarly, among nurses who were more likely to provide minimal anti-smoking intervention to e-cigarette users were those who were knowledgeable and skilled in e-cigarette use (OR=1.79; $p<0.05$), who measured weight, height, and BMI (OR=2.54; $p<0.001$), who smoked tobacco (OR=2.44; $p<0.01$), and who had a family history of coronary artery disease (OR=1.65; $p<0.05$). The correlates of anti-alcohol counseling turned out to be: the presence of coronary artery disease in the family (OR=1.65; $p<0.05$), knowledge and skills in providing advice on healthy lifestyle (OR=2.17; $p<0.01$), and taking measurements of body weight, height and BMI (OR=1.75; $p<0.05$).

Conclusions: The results of our survey indicate that nurses' participation in healthy lifestyle counseling in adult patients is unsatisfactory. Further training of nursing staff is required to increase their knowledge on healthy lifestyles.

Inequity in Utilization of Maternal Healthcare Services and their Contributing Factors for Women with Disabilities in Nepal: Mixed Method Study.

Prakash Shahi, Bibha Simkhada, Rajeeb Kumar Sah

While globally efforts have been made on the topic maternal healthcare services and women with disabilities, relatively little is known about the use of these services in Nepal or the factors that influence the use of these services by women with disability.

Persons with disability constitute 16% of the world population. The United Nations' Convention on the Right of Persons with Disabilities guarantees persons with disabilities have the same right to the highest attainable standard of health as those without disabilities including maternal healthcare service. But one of the world's most marginalised and underprivileged groups of people are women who live with disabilities. Despite recent improvements, disabled women still lack equal access to healthcare, which means that their healthcare requirements are not being satisfied in comparison to those of non-disabled women.

In Nepal, 2.2% of entire population are disabled, with 299,893 (2%) females are disabled among total female population. The experiences and barriers that disabled women in Nepal have when accessing maternal health services have not been well studied. It is very difficult to find reliable data or information about the utilisation of maternal healthcare services. As a result, disability policy is frequently insufficient, which has an impact on maternal healthcare services and support for women with disabilities. This study aims to identify the inequity in utilization of maternal healthcare services and their contributing factors among women with disabilities in Nepal.

This study's plan is to employ an exploratory sequential mixed-method study design, which will explore the issue and frame research in terms to generate and prioritize potential survey item response. At the very first phase, systematic review and the policy context analysis is ongoing to understand the current situation and to guide in qualitative data collection.

Health Promotion in Primary Health Care in Brazil: possibilities and Limits.

Ivonete Teresinha Schuster Buss Heidemann, Michelle Kuntz Durand, Aline Megumi Arakawa-Belaunde, Sandra Mara Corrêa, Leandro Martins Costa Do Araujo, Kamila Soares Maciel

Introduction: Health promotion, with its set of strategies linked to social determinants, aims to reduce inequalities in people's life situations, to improve quality of life and equity. Professionals and managers who work in primary care must be guided to understand the expanded vision of health, in order to develop health promotion actions aligned with social determinants. Objective: know the possibilities and limits of health promotion actions developed by professionals who work in Primary Health Care.

Material and methods: It was conducted by a qualitative approach of the participant action type, based on Paulo Freire's Research Itinerary, which corresponds to three moments: Thematic Investigation; Encoding and Decoding; and, Critical Unveiling. The themes were investigated in a health unit with the development of a culture circle with 20 professionals, from a municipality in southern Brazil, in the first half of 2021.

Results: The participants revealed possibilities for the involvement, bonding, and strengthening of the interpersonal relationships of the professionals who work in the context of primary care. Promoting welcoming in primary care has favored care and teamwork, as well as improved access. They also highlighted that care planning, the use of technologies in the process of communication, and the orientation of the population enhance the levels of problem-solving capacity and the organization of services. As limits, the lack of professional recognition, and the scarce material and human resources were revealed, conditions that generate tensions for health care. The reduction in the number of professionals and the low salary are pointed out as elements that boost the motivation of the health team for the development of the work. The participants revealed that due to COVID-19, the flow of care had as a priority the pandemic situation, which affected health care in primary care, and prevention and health promotion actions were canceled.

Conclusions: The study demonstrated that empowerment and professional involvement are fundamental to promoting comprehensive and problem-solving care. However, limits of the teams are observed when exercising their activities, these are related to the lack of human and material resources, and the expansion of public health policies is urgent.

The Serbian version of the International Self-Assessment Tool for Organizational Health Literacy in Primary Health Care Services (OHL-PHC).

Krajnović D, Čavrak J, Grahovac A, Milošević Georgiev A, Todorović A, Zdravković N, Šesto S, Nikolić K, Milenković J, Stević I, Straßmayr C, Levin-Zamir D

The International Self-Assessment Tool for Organizational Health Literacy in Primary Health Care Services (OHL-PHC) was developed within the M-POHL-HLS 2022 Project and was based of OHL concept as “the degree to which primary care organizations equitably enable/empower people, through organizational structures, policies and processes, to find, understand, appraise and use information and services to inform health-related decisions and actions for themselves and others”. This instrument is a learning tool for organizational health literacy (self-) assessment to stimulate strategic planning and improvement activity within primary healthcare organizations. A linguistic adaptation and cultural validation of this questionnaire is presented for its use in Serbian settings.

OHL-PHC tool (available in English) has 7 dimensions (standards), 15 sub-standards and 65 indicators (statements), including sub-indicators. The indicators operationalize concrete observable or measurable elements. The self- assessment is based on the degree of fulfilment of 4 categories offered for each indicator. We employed a three-stage process with a “team approach”, and cognitive interviews as additional quality assurance. We used a “think-aloud” and on time “verbal probing” technique to produce OHL-PHC_Srb. The relevance and applicability of each indicator and the overall tool were assessed by an interval scale (from 0-10, least to relevant/applicable).

Three forward translations were compared and synthesized by an expert committee, and back translation was compared to the original to allow additional changes in the draft version of the linguistically adopted tool. Five experts individually reviewed this version and made cultural adoptions. Consensus meeting allowed us to improve the translation by removing certain ambiguities, providing contextual clarifications or rephrasing some items to be more culturally appropriate. All indicators were found relevant but 26 were not comprehensible, and 12 adaptations were needed. To further adapt the tool into the Serbian context, we conducted cognitive interviews with purposive sample of 10 experts from various positions: technicians (2), competence unit manager (1), interim (1) and practicing community pharmacists (6). Interviewees generally judged the tool to be relevant and applicable to their context. Although OHL-PHC_Srb was considered somewhat lengthy, it is culturally valid and suitable for implementation in primary healthcare organizations in local context, including community pharmacies.

Acknowledgment: This research was funded by the Ministry of Science, Technological Development and Innovation, Republic of Serbia, through a Grant Agreement with the University of Belgrade -Faculty of Pharmacy No: 451-03-47/2023-01/ 200161.

Informendo: Empowering Endometriosis Patients through Co-Creation of Resources.

Elisabeth Noehammer, Nina Lorenzoni

Introduction: Globally, about 10% of females in childbearing age suffer from endometriosis, a chronic disease which causes massive pain and subsequent major losses of quality of life in all areas, and often also infertility. As endometriosis literacy and awareness are low in society and the medical personnel, patients are often on their own. Moreover, symptoms are highly diverse which leads to large time gaps between symptoms and diagnosis.

Aim: The aim of the project is to evaluate information needs of patients, their social contexts and medical personnel based on the perspective of the patients as experts. Evaluating existing information and co-creating improvements is a combination of participation, empowerment, and fostering networks.

Material and Methods: After ethical clearance, we held four 4-hour workshops (two online, two in cities in Austria) with 10-15 participants each. Participants were recruited via social media channels of the funder, the university, personal contacts, gynecologists and specialists for Endometriosis, a public conference on Open Innovation in Science, plus self-help groups. The workshops were used as co-structured space to discuss information needs from the patients' perspective and what they would want partners, families, other important others, and medical personnel to know about endometriosis. Also, we discussed four existing brochures per workshop (8 in total; length, topical focus and editor varied) and their pros and cons to develop specific guidance for their improvement and discussed better dissemination strategies and required changes in the health system.

Results: Endometriosis patients are in urgent need of health promotion and empowerment through high-quality information. (The long duration until) diagnosis, the treatment options and symptoms of endometriosis are often perceived as traumatic. Participants report losing trust in themselves and the medical system and how only persistence and self-help groups helped them overcome (some) of the obstacles faced. Barrier-free information is unavailable.

Conclusions: All aspects of health promotion and preventions are called for, including advocacy on the policy level, and raising the topic in medical and public education.

Funded by: LBG PPIE Exploration Call

Introduction of the Healthy Hospital Concept in Two Pilot Hospitals in Kosovo during 2023.

Merita Berisha, Naser Ramadani, Mejreme Rexha, Florie Miftari Basholli, Genc Bajraktari, Drita Zajmi, Fekrije Hasani, Ilir Mecini, Fabian Cenko

Introduction: As part of the „Healthy Settings” WHO movement, „Health Promoting Hospitals” aims to integrate health promotion values and standards into the structure and hospital culture, benefiting patients, staff, and the community. The current version, „2020 Standards for Health Promoting Hospitals and Health Services”, includes 5 standards, 18 sub-standards and 85 statements. This work presents how we introduced the concept of healthy hospitals in two pilot hospitals in Kosovo, conducted first self-assessment and produced the first action plan with interventions.

Material and methods: For initial self-assessment in two general hospitals of Peja and Gjakova during the period July – September 2023 in Kosovo, 5 standards, 12 substandards and 20 statements were selected. Seven workshops were held which were supported by the IHS project, SDC funded Project. After first informative meeting, the National Institute of Public Health, Ministry of Health, two hospitals with the support of IHS experts from Optimedis partner, developed the self-assessment process and the annual action plan.

Results: During the self-assessment we found that 7 standards were met completely, 10 were met partially and 3 were not met at all, described below.

HPH Standard 1 “Demonstration of organizational commitments for HPH”: two (2) standards were met partially;

HPH Standard 2 “Ensuring access to the service”: one (1) standard was met completely, one (1) partially and one (1) was not met;

HPH Standard 3 “Improving people-centered health care and user involvement”: four (4) standards were met fully, five (5) partially and two (2) were not met;

HPH Standard 4 “Creating a healthy workplace and a healthy environment”: one (1) standard was met fully and one (1) partially;

HPH Standard 5 “Health promotion in a wider society”: one (1) standard was met fully and one (1) partially.

Based on the findings we developed annual action plan.

Conclusion: The initial standards applied were chosen in accordance with the hospital’s criteria sets to ensure that the meeting them could aligns with the specific conditions of each hospital. The annual action plan of two hospitals aims to achieve fully all 20 standards that were assessed and serve as a model to be expanded to other hospitals in Kosovo.

Public or private healthcare- preferences of Kosovar patients, 2022.

Ardita Baraku, Adnora Nurboja, DAgron Hoxha, Diana Sojeva, Igballe Shalaku, Shkelzen Kurtaj, Nysret Imeri, Granita Lala, Merita Berisha, Naser Ramadani

Introduction: The objective of this study is to assess the preferences of patients regarding the use of public or private health institutions since there is no public health insurance in Kosovo. The findings will contribute to defining areas of intervention for promoting and enhancing the health of the population, in line with the Health Sectorial Strategy 2023-2030.

Material and Methods: The data is an extract from the qualitative-quantitative research, conducted in June-July 2022, approved by the Chamber of Doctors of Kosovo and carried out by the National Institute of Public Health of Kosovo, on the opinion of citizens on health care in Kosovo 2022. The questionnaire consisted of three parts: socio-demographics, knowledge/opinions about health reform and patient preferences on public/non-public healthcare providers. From randomly selected 985 respondents, 440 (44.7%) had been ill in the last 6 months and had visited a doctor – and were interviewed. The data were registered and processed through Excel 2010, and are presented through numerical and percentage values.

Results: From 440 patients, 67% used only public healthcare institutions, 25.3% only non-public institutions, 5.7% combined institutions and 2.0% did not answer. Financial reasons 39.4%, trust 36.5%, proximity to residence 13.5%, and issues concerning the organisation of the health system 10.6% (such as respecting the referral system), were the main reasons for using the public healthcare system. For the private healthcare system, the main reasons were the trust in these institutions 50.8%, fast access to services 31.7%, lack of services in the public sector 15.8%, and issues concerning the health system 1.7% (such as health institutions not working during night hours).

Conclusions: Trust, finances, and fast access to services are important factors in the selection of healthcare providers. Patients prefer the public health system and the referrals from one system to another are low. It is recommended to expand the working hours, services and staff in the public system, to reduce the need for patients to use the self-financed, expensive, non-public healthcare system, and to allow sufficient resources to concentrate on patient health education and health promotion.

Assessment of the urinary incontinence incidence in women.

Julia Antos, Katarzyna Glibov

Introduction: Urinary incontinence (UI) is defined as its involuntary loss. The affliction is often considered embarrassing. It represents a challenge, not only medically, but also socially. Urinary incontinence affects women and men of all ages and all over the world. The aim of this study was to assess the incidence of urinary incontinence in women, identify risk factors, assess awareness of methods to prevent this condition.

Material and methods: The study covered 22 women between the ages of 20 and 55. The study used the PFDI - 20 questionnaire to assess the respondents' quality of life, and the ICIQ - Fluts LF questionnaire to assess the severity of symptoms declared by the subjects. The WHR index was used to measure body fat distribution. Tanita scale, height indicator, centimeter and fold meter were used to perform anthropometric measurements.

Results: The average age of the respondents was 36 years old. Urinary incontinence was found in 38% of the respondents, most of whom had stress urinary incontinence. Urgency, overflow, extravesical and mixed urinary incontinence were reported less frequently. The prevalence of incontinence increased with the number of past births, number of past pregnancies, BMI, WHR index and skinfold size.

Conclusions: Urinary incontinence affects women of all ages. The greatest influence on the onset of this condition is the number of past pregnancies and deliveries, the type of delivery, the occurrence of obesity or overweight, and the frequency of physical activity.

Association of Different Immunonutritional Biomarkers with Dementia.

Serena Schecaniah Stephenson, Tomasz Kostka, Bartłomiej Soltysik

Introduction: Malnutrition is the root of numerous complications ranging from physical disability to mental health problems like dementia. The aim of this study was to identify the relationship between different biomarkers and dementia among hospitalized geriatric patients.

Material Methods: For this study, patients 60 years old and above were recruited from January 2017 to December 2023 at Central Veterans Hospital in Lodz, Poland. After screening, 2409 patients (1720 Women and 689 Men) were enrolled into the analysis. Different biomarkers of blood indicators included such as NLR, LMR, PNI, LCR, PLR, SII, CAR, DAR, CALLY and HALP were established based on patients' calculations. NLR (number of neutrophils divided by the number of lymphocytes), LCR (Lymphocyte count divided by CRP), LMR (lymphocyte count divided by monocyte count), PLR (platelet count divided by lymphocyte count), SII (multiplying platelet count by the neutrophil count and dividing by the lymphocyte count), PNI $[(10 \times \text{serum albumin [g/dL]}) + (0.005 \times \text{lymphocytes}/\mu\text{L})]$, CAR (CRP divided by albumin), DAR (d dimer divided by albumin), CALLY $(\text{Albumin} \times \text{Lymphocyte}) / (\text{CRP} \times 104)$ and HALP $(\text{hemoglobin (g/L)} \times \text{albumin (g/L)} \times \text{lymphocytes (/L)} / \text{platelets (/L)})$. Laboratory parameters, including a full blood count (white blood cell count, neutrophils, monocytes, lymphocytes, and platelets), were analyzed using the Sysmex XN 2000 analyzer. Mini Mental State Examination (MMSE) was used to assess cognitive functions. Statistical analysis was performed by using Statistica 13.1.

Results: In the whole study group, the median age was 83 (77-88). From the analysis, it shows that NLR, PNI, LCR, CAR, DAR, HALP and CALLY were marked significantly different in the cognitively impaired group than in the normal group ($p < 0.05$). Consequently, ROC curves were calculated. PNI and DAR demonstrated the best sensitivity and specificity but calculated AUC were rather modest.

Conclusions: Inflammatory/immune markers are easily assessable and may be significant in detecting nutritional disorders in demented people. Further prospective studies should assess their potential predictive value for clinical prognosis in cognitively impaired older adults.

Comparison of methods for sarcopenia diagnosis in hospitalized older adults.

Ganna Kravchenko, Bartłomiej Sołtysik, Agnieszka Guligowska, Tomasz Kostka

Introduction: According to the European Working Group on Sarcopenia guidelines on sarcopenia diagnosis and treatment there is an algorithm, which includes SARC-F questionnaire, handgrip strength test and, if needed – measurement of appendicular skeletal muscle mass (ASSM).

The purpose of our research was to compare different instrument for sarcopenia diagnosis in older hospitalized patients (separately in women and men).

Material and methods: The selected study population included older patients aged 60 and above, hospitalized in the geriatric department of the Central Veterans Hospital located in Lodz, Poland. After screening 78 patients (58 women and 20 men) were enrolled. Every participant was assessed with SARC-F questionnaire. Handgrip strength test and bioelectrical impedance analysis (BIA) by Akern analyzer were performed for every patient. Consecutively we compared number of participants with sarcopenia diagnosed with each method separately in both sexes.

Results: The median age of the patients was 83 ± 8.6 years, 83 ± 8.4 years in women, 79 ± 8.9 years in men. In women according to SARC-F questionnaire the risk of sarcopenia (defined as ≥ 4 points) was revealed in 35 out of 58 participants (60.3%). When assessed by handgrip strength test sarcopenia was found in 30 women (51.7%). ASSM lower than 15 kg were revealed in 22 women in a group (37.9%). Significant difference was found between assessment by Handgrip and BIA with $p=0.01$.

In men SARC-F showed the risk of sarcopenia in 11 out of 20 participants (55%). Results of handgrip strength test were lower than 27 kg in 9 patients (45%). The same number of sarcopenia cases was diagnosed by BIA with no significant difference between methods.

Conclusions: In current guidelines assessment of ASSM is not advised for routine performance. Nevertheless our study showed advantages of BIA in sarcopenia diagnosis in hospitalized older women.

Strengthening the health literacy of people with intellectual disabilities.

Dariusch Afroukhte, Stefanie Schniering, Claudia Wilhelm, Kerstin Gemes, Birgit Pohler, Janina Kranert, Pia Khan, Katharina Wilharm, Wiebke Rodewald, Annika Lehmann, Tabea Zillmann, Miriam Richter

Introduction: Compared to the general population, people with intellectual disabilities (PWID) are vulnerable in terms of health, as they are more susceptible to illness. Simultaneously they face structural barriers in the healthcare system and have often reduced health literacy. At the same time differentiated methodological, didactic educational support programs to strengthen health literacy are missing. This is where the project comes in: With the aim of countering the health-related imbalance, Nursing Experts (Advanced Nurse Practitioners/Clinical Nurse Specialists) support PWID in the development and implementation of individual prevention plans. The individualized and participatory approach promotes health literacy by strengthening empowerment and social participation.

The aim is to improve individual health, resilience and health-related quality of life through stronger social participation in prevention and health promotion programs in four areas of prevention (nutrition, stress, exercise, addiction).

Methodologically, the concepts of specific case management and specialized care expertise are used. Empowerment, self-efficacy and resilience are strengthened and health literacy is promoted.

Material and methods: The intervention is accompanied by a mixed-methods-evaluation. To strengthen the participation of PWID, an important component of the evaluation is the inclusive research approach, in which the target group perspective is included.

Results: Analyses of the first completed group show that improving the health situation over a period of one year per group is difficult, but many processes were initiated, e.g. for better nutrition and more exercise. While the topic of addiction was less of a priority for participants. Regarding health literacy strengths were identified, exercises were done to strengthen one's own will and reduce anxiety. The ability to establish social contact was strengthened. Regarding the promotion of health literacy, it can be stated that PWID is a very heterogeneous group with different knowledge, motivations and goals, which is why the different starting points must be addressed. For people with high motivation, a lot could be achieved, for others it is important to take small steps.

Conclusions: The experience points out health care needs of PWID, which can be met through specialized care expertise and adequate case management. To reduce care deficits, it is necessary to structurally strengthen health literacy through individual and group-based services.

Awareness, knowledge and attitudes towards the perinatal depression among pregnant and postpartum women attending university hospital in Astana, Kazakhstan.

Meruyert Makhambetova, Karlygash Togyzbayeva, Gauri Bapayeva, Byron Crape, Raushan Alibekova

Introduction: Perinatal depression (PD) is a serious mental disorder that affects women during pregnancy and the postpartum period. The objectives of this study were to assess the level of awareness, knowledge, and attitudes towards perinatal depression among pregnant and postpartum women, and to identify socio-demographic factors associated with perinatal depression literacy.

Material and Methods: An online anonymous cross-sectional survey among perinatal women (n=120) from obstetrical departments of the University Medical Center's National Research Center of Maternal and Child Health in Astana was conducted during the period of December 2022 – March 2023. The knowledge and attitudes questions were adapted from the Australian Perinatal Depression Monitor (Highet et al., 2011).

Results: Majority of respondents agreed that PD is a serious mental health issue (89.08%), however 30% of participants believed that PD is a normal part of having a baby. The majority of women correctly identified most of the PD symptoms, but only half of the sample (55.93%) reported that difficulty in responding to the baby's cues is a sign of PD. Biological origins such as changes in hormones were considered as main causes of PD by majority of participants (90.76%). Majority disagreed on negative stereotypes in regard to PD; nevertheless, 11.86% of participants believed that PD is a sign of weakness, and 6.84% agreed that women with PD can't be good mothers. More than half of the sample (66.39%) reported knowing a woman who had experienced perinatal depression; however, only 6.72% of participants reported visiting a doctor with a complaint for depression during their current or recent pregnancy. Almost 41% of respondents chose their spouse/partner as the first choice to seek help from if they had perinatal depression. When asked about how perinatal depression is addressed in healthcare organizations, the majority of participants (46.61%) reported that it is not addressed at all.

Conclusion: The study results showed that PD knowledge among women is limited and there are still gaps and misconceptions regarding its symptoms, causes, and treatment. These findings can help to development educational interventions aimed to improve mental health literacy of women, which in turn may improve health outcomes of women and their babies.

Association of positive mental health literacy with mental well-being among undergraduate students of Nazarbayev University in Astana, Kazakhstan.

Guldana Akisheva, Raushan Alibekova, Byron Crape

Introduction: The increase in the prevalence of mental disorders in young adults requires more attention on improving mental health and mental health literacy (MHL). Although majority of previous studies focused on recognition and prevention of mental illnesses, very few studies were focused on positive mental health literacy (PMeHL), part of MHL which defines knowledge about how to obtain and maintain good mental health. Therefore, the aim of this study was to examine the relationship between positive mental health literacy and mental well-being of undergraduate students in Kazakhstan.

Material and Methods: The data was obtained from a cross-sectional study based on a survey of 122 undergraduate students aged 18–22 years at Nazarbayev University in Astana city. WHO-5 Well-Being Index was utilized to evaluate mental well-being, and Mental Health Promoting Knowledge-10 item scale (MHPK-10) was used to assess PMeHL. The relationship was evaluated using a multiple linear regression model adjusting for possible covariates, including socio-demographic and lifestyle characteristics of students. Statistical threshold was determined at $p < 0.05$.

Results: The sample included 35% of males and 65% of females, with the mean age of 19.5 years. PMeHL had a positive impact on mental wellbeing, where every increase in the score of PMeHL was significantly associated with increase in the score of mental well-being by 0.23, while adjusting for gender, age, family's support, father's education level, and physical exercising behaviour. Additionally, gender differences were observed in mental well-being, where mean of mental well-being was equal to 2.80 for males and 2.27 for females. Gender, physical exercising behaviour, father's degree of education, family's support were found to be sufficient in predicting mental wellbeing of undergraduate students.

Conclusions: Current study determined the positive impact of PMeHL on undergraduate students' well-being. Additionally, family's support and physical exercising behaviour have shown an advantageous effect on establishing better mental wellness. The results of the study can be used in public health campaigns that are focused on the improvement of adolescents' mental health.

Training matters: framework and guidance for core competencies of sexuality educators.

Johanna Marquardt

Sexuality education is a vital approach for supporting children and young people in their sexual and general development. It enables them to increase their knowledge of sexual and reproductive health and rights and to develop their decision-making, communication and risk-reduction skills, as well as positive and responsible attitudes to sexuality and relationships. Sexuality education supports children and young people in understanding and communicating about their emotions, bodies and actions, in critically reflecting upon their own behaviour and in taking autonomous and well-informed decisions regarding their sexuality. Sexuality education also contributes to the prevention of (sexual) violence, HIV and other sexually transmitted infections and unwanted pregnancies. In this regard, sexuality education connects the aim of preventing sexual and reproductive ill-health with the broader aim of well-being throughout the life-course. Many countries want to provide sexuality education in schools but have a lack of teacher-trainings.

Federal Centre for Health Education Germany has devolved a framework (2017) and an operational guidance (2021) to support teacher-training as capacity-building is a crucial factor which facilitates an effective implementation of sexuality education. The training of sexuality education is an essential part of capacity-building. Training supports the process of developing necessary competencies in educators which, in turn, increase the quality of education.

The presentation focuses on sexuality education and the competencies they should have, or develop, in order to conduct sexuality education. Educators' competencies in the areas of attitudes, skills and knowledge are considered and described in detail. It provides operational guidance to support the training of sexuality educators. The presentation will talk about how to design, develop, and implement training programmes for sexuality educators. It is primarily focused on sexuality educators in school settings, although much of the content is also relevant for those providing CSE within nonformal settings.

The operational guidance aims to encourage and support providing an increase in training, by furnishing a simple and clear overview of how training may be best planned and implemented. It also contains practical tips for sexuality educators relating to CSE in the classroom, check lists, as well as recommended resources and links to additional materials and guidance.

Evolution of COVID-19 related health literacy in Spain and associated factors.

María Falcón, Carmen Rodríguez-Blázquez, Martina Fernández-Gutiérrez, Pilar Bas-Sarmiento, Maria João Forjaz, María Romay-Barja

Introduction: To describe the evolution of COVID-19 related health literacy (CHL) in Spain from June 2020 to October 2021 and to analyse its associations with knowledge, attitudes and preventive practices.

Material and Methods: Two independent samples, each one representative of the population in terms of age, gender and education, completed an online survey about CHL, trust in institutions, preventive behaviours and COVID-19 related knowledge. CHL was measured with the COVID-19 Health Literacy Questionnaire. Bivariate analysis (Spearman and Mann Whitney) was performed.

Results: In the first survey the mean CHL-Q index was 33.89 (SD = 9.4) with a 57.8% of the sample with a sufficient CHL level. One year later CHL was 33.55 (SD=9.67) with a 57.2% of the sample with sufficient CHL. Adherence to preventive practices, COVID-19 knowledge and trust were high in both surveys but decreased in the second one. CHL showed a significant correlation ($p<0.001$) with knowledge ($r=0.176$) and number of preventive measures adopted ($r=0.125$) in June 2020, and October 2021 ($r=0.181$ and $r=0.208$, respectively). CHL was higher in those who trusted scientists, used facemask, hydroalcoholic gel and avoided crowded places in the two surveys ($p<0.001$).

Conclusions: CHL is associated with health behavior, knowledge and trust. Health policymakers should adopt national strategies to enhance health literacy at individual, organizational, and political levels.

An exploratory approach to identify digital, health and data literacy and learning needs in Romania.

Otilia Kocsis, Camelia Ungureanu, Niki Calina, Dieuwertje van Boekel, Willeke van Staalduinen, Basilis Kladis

Introduction: TRIO is an Erasmus+ project that empowers citizens of different ages through informal education, in the areas of health, digital and data literacy by developing a modular methodology. This educational methodology includes a manual, a curriculum and a complete set of tools for adult educators, supported by a digital learning platform to ensure adaptation to the dynamic needs of users, technology and context. In Romania the Information Health System is in a very incipient phase, and citizens are not using/accessing their electronic health record regularly, as the whole adult population needs support and education in order to acquire the necessary skills.

Materials and methods: In order to investigate the needs and gaps regarding digital, health and data literacy skills in Romania we performed a desk research and conducted an interview with a total of 12 citizens from different age groups (18-35, 36-50, 51+ years) and educational backgrounds (e.g. education, agriculture, engineering, financial administration, project management, etc.) and 3 experts with experience in occupational health, medicine and local public administration.

Results: The desk research showed that although health spending in Romania increased in the last decade, it remains the second lowest in the EU. Eurostat data (2021) shows that: (i) only 28% of the Romanian adult population have basic or above basic digital skills; (ii) only 40% of the individuals are using the internet to seek health information; (iii) information and data literacy rates in Romania are very low (48%). Furthermore, recent research shows low health literacy makes it difficult for citizens to protect themselves from illness, Romania having very high rates of avoidable deaths from both preventable and treatable causes.

The analysis of the interviews showed that: (i) there is a number of disadvantaged groups when it comes to basic accessibility to medical services in Romania, including people with low income and/or low education level, older people (>51 years old) and people living in rural areas; (ii) older people consider the internet as not useful in order to make health decisions; (iii) citizens don't know how or are not able to make any changes to the content or accessibility of their personal electronic health record; (iv) >75% of the participants are not using any health apps or health monitoring digital devices; (v) >75% of the participants are interested in using an online platform and/or manual to improve their digital, health and data literacy skills; (vi) >50% of the individuals in Romania have poor skill in regard to this trio of literacies. The main barriers preventing people from using digital health tools include: poor access to digital services and devices, low literacy of the population in regard to basic digital skills, the absence of medical information portals, insufficient education on health and digital issues, and costs of healthcare services and equipment.

Conclusions: In conclusion, the TRIO learning platform should focus on establishing a set of basic educational modules at the intersection of the three dimensions of digital, health and data literacy in order to meet the needs of Romanian citizens.

Assessment of health literacy in cancer preventions projects in Portugal.

Cristiana Fonseca, Patrícia Pinto, Cristiana Castro

This study aims to assess the health literacy aspects within cancer prevention projects in Portugal, with a specific focus on the „Connect” initiative, a project that aims to disseminate the European Code Against Cancer. The research will evaluate how this project implemented across 500 schools in Portugal aligns with the key recommendations on health literacy for the youth.

The assessment includes various dimensions of health literacy, including the incorporation of social determinants, the use of participatory methods, the use of inclusive language, the inclusion of vulnerable groups, the stimulation of behavioural change and the diversity of communication strategies. The study explores the effectiveness of these components within the „Connect Yourself” project, with an emphasis on enhancing health literacy among the youth in the context of cancer prevention.

By examining the project’s adherence to established health literacy principles, the research aims to identify strengths and areas for improvement that will contribute for a more comprehensive understanding of cancer prevention among the target audience. Furthermore, the study seeks to offer recommendations for boosting health literacy within cancer prevention initiatives, acknowledging its crucial role in promoting informed decision-making and behavioural changes among the youth population. The findings aim also to inform future initiatives and underline the importance of health literacy in effective cancer prevention efforts.

“Info without side effects”: Empowering website users with a validated health info checklist.

Ursula Griebler, Christina Kien, Irma Klerings, Benedikt Lutz, Eva Krczal, Dominic Ledinger, Iris Mair, Robert Emprechtinger, Filiz Keser Aschenberger, Bernd Kerschner

Introduction: The internet is an important resource for health information. However, almost half of Austrian internet users have difficulties in deciding, whether the information they found online is trustworthy and objective. The ability to assess health information depends on the individual health literacy. According to the latest health literacy survey in 2019 almost half of Austrians have insufficient or problematic health literacy. We aimed to develop and validate a checklist to aid laypersons in evaluating online health information.

Material and Methods: We searched for existing checklists and conceptual research for health information assessment and extracted all items/indicators. After we categorized, deduplicated and translated items into German, six health information experts identified the most pertinent items in a modified Delphi process (“item-shortlist”). The item-shortlist was tested by laypersons for comprehensibility and applicability (cognitive tests, n=19) and usability (assessment of 15 selected health information websites, n=20). The research team applied the item-shortlist to 100 health information websites and two researchers independently assessed the objective certainty of evidence for each health information.

Results: We extracted a total of 1740 items from 73 documents. After all reduction and modification steps, we tested a shortlist of 23 items. The claimed strength of evidence of the health information website relative to the objective certainty of evidence for the specific health topic was used as outcome measure to test the predictive validity regarding the correctness of the health information of each item as well as a set of items. We created a final checklist using laypersons’ qualitative results, effect estimates of each item, inter-reliability measures among laypersons, among experts, and between laypersons and experts. The final checklist contains 7 items: no advertising, balanced presentation of information, limited use of professional jargon, from an independent organisation, citation of sources, mention of scientific validation and presence of a publication date. The checklist together with explanatory videos is published on the project webpage <https://www.infos-ohne-nebenwirkung.at/>.

Conclusions: Developing a checklist for assessing online health information that can be understood and used by laypersons is a great challenge. Further testing is warranted to strengthen its validity.

Development of a common understanding of health literacy in times of polycrisis.

Elena Guggiari, Dr. Anna-Sophia Beese, Dr. Saskia Maria De Gani

Introduction: The current global disruptions such as the COVID-19 pandemic, geopolitical challenges or climate change have shown that in times of polycrisis the demand on competences in dealing with health-related information, services, and challenges – thus on health literacy – are enormously high. So far, the common understanding of health literacy in Europe includes the knowledge, motivation, and competences of individuals to find, understand, appraise, and apply health-related information to make sound decisions for one's own and other people's health. However, a shared understanding of health literacy considering the current dynamics and challenges in times of polycrisis is lacking. Thus, we launched a participative development process to reconceptualize the current concept of health literacy in times of polycrisis and established a common understanding of health literacy in the Swiss context.

Material and Methods: On behalf of the Swiss Federal Office of Public Health and in collaboration with health literacy experts and the Swiss Alliance of Health Literacy, we conducted an extensive literature review, six semi-structured expert interviews, two reflection workshops with an extended advisory board and multiple feedback rounds. The members of the extended advisory board had different backgrounds in research, practice, and policy and represented all three language regions of Switzerland.

Results: A concept paper on health literacy including seven principles of health literacy and two working definitions of health literacy and health literacy enablers was developed. Health literacy is thereby understood as “a bundle of competences to proactively deal with health-related information, services, and challenges and, thereby, empowers people to manage their and other's health and well-being”.

Conclusions: Health literacy enablers are defined as “practices, processes, structures, and policies of various actors within and beyond institutional, sectoral, or regional boundaries through which people are empowered to develop and strengthen their health literacy”.

Tuesday 18 June 2024

Interactive poster session
Health Promoting Policy

Collaborating to build local competence for Public Health Work.

Ruca Maass; Monica Lillefjell

Introduction: The majority of Public Health and Health Promotion work is carried out in local contexts such as municipalities, neighborhoods and public institutions, implying the need for local collaboration and competence-development: top-down strategies need to be combined with bottom-up knowledge- and competence-building. In order to enable effective approaches, involvement of stakeholders and co-creation of solutions emerge as crucial approaches. Co-creating systematic local approaches demands the establishment of structures that enable collaboration between research and practice, and ensure commitment over time. In Norway, the 10-year national "Program for Public health Work" has motivated the establishment of working processes and -forums that gathers actors from municipalities, regional authorities as well as from a range of research institutions and -disciplines. The aim of this presentation is to describe the structures and processes established in this context, and outline factors critical for sustained collaboration.

Material and Methods: To assess activities and describe the emerging structures network; extensive data-gathering from a wide range of sources was applied; including relevant documents and internal papers (meeting agendas/notes, internal communication), participatory observations; in-depth interviews and joined workshops. Emerging findings were constantly communicated back to collaboration partners to validate and contextualize findings.

Results: The explicit aim of the Program to "develop new ways for collaboration" contributed to the establishment of permanent structures for the ongoing co-creation of local approaches within public health. Each municipality was obliged to apply the "Trondelag Model for Public health Work" to structure approaches, and was assigned a research partner who followed them through the whole process. A cross-sectoral project group including representatives from regional authorities, research and municipalities was established. Municipalities were invited to participate in competence-building workshops twice a year. Workshops addressed common challenges with the aim to exchange experience and joined learning activities.

Conclusion: Critical factors for success included explicit commitment from municipal leaders and regional authorities, who coordinated and partly funded collaboration activities. Other critical factors included time, resources and local competence-building(joined learning activities; the utilization of a systematic working model and the close collaboration with research partners. Especially opportunities for exchanging experiences and learn from each other were valued by municipal partners.

Lessons on mobilizing participatory healthy public policy with community-based tourism through healthy communities in Phatthalung Province, Thailand.

Boonruang Khaonuan, Chamaiporn Thongphet, Supandee Maneelok, Sukanjana Kamlangmak, Suttama Suwanmanee, Akarat Suwannarat

Community-based tourism was a participatory healthy public policy announced through the National Health Assembly process. In Phatthalung province, the policy has also been driven. This study was a qualitative research which aimed to evaluate and extract lessons learned from driving participatory healthy public policy in case of community-based tourism. The researcher collected data in Pa Payom, Khuan Khanun, and Sri Banpot districts, Phatthalung Province. Both quantitative and qualitative data were collected.

The study revealed that people in the community worked cooperatively among their network, and regarded community-based tourism as their joint target of development. As a result, community self-managed of community key figures was an important and success for mobilizing participatory healthy public policy. Moreover, it has resulted in a health-literate community. The community participation of households, it was an important factor in the implementation of community health system development. The community health statute was promulgated. People in the communities have changed their health for good health. Environmental management that was healthy and safety in the communities. It is advisable to enhance self-managed community to become an important mechanism for sustainable health promotion and development in the communities. In addition, religious leaders and public health officials should take a role as facilitators and learn together with the community about the change health behavior and health risks.

It's a Jungle out there: The lived experiences of a new Public Health lecturer with previous commercial experience. A reflective autoethnography.

Mrs Marie Swettenham

The concept of “working class academic” has gained traction in its understanding and application in the last 10 years. Crew (2020) developed the theory of working-class academics as those gaining academic qualifications later in life accessing education through untraditional routes.

In Public Health, this manifests through the appointment of University lecturers with business and commercial experience, changing direction to work in academia, instead of the more traditional academic or health practice route into the role.

This study aimed to provide a reflective autoethnography by the author into their lived experience of the first year as a lecturer in Public Health in the United Kingdom. It reflected upon how a commercial background in business ownership within finance, with work experience in hospitality, business networking and marketing developed confidence and transferrable key skills as a lecturer.

Results discovered novel and high level abilities in meeting Higher Education Academy (HEA), key competencies such as A5, engaging in professional practice through commercial CPD, V4, acknowledging the wider context of higher education through applying business concepts to academic practice and K6, the implications of quality assurance to an exceptional standard.

Factors such as advanced time management developed in commercial practice, and the ability to network both academically and externally within the role added to skillsets of the author, enabling innovative approaches and solutions demonstrating an ability to create inclusive supportive environments for colleagues and students.

Moreover, perspectives in reorienting health services, congruent with health promotion paradigms such as the Ottawa Charter (1986) demonstrated the application of wider skillsets within public health promotion.

The value of these findings allows an open discussion on how to attract future lecturers to academia, benefiting from the talent pool and highly functioning skillsets within which they operate, to ensure the development of real world experiences, ensuring Public Health and health promotion goals, through key policies and charters can be recognised and achieved widely.

The oral presentation will demonstrate how it is possible to approach this practically and inclusively whilst protecting the reputation and standards that lecturing in public health requires.

Contribution of the 15 years of work of the Health Promotion Chair of the University of Girona.

Dolors Juvinyà-Canal, Maribel Arévalo-Masero, Carla Casals-Alonso, Sílvia Espinal-Utgés

Introduction: The Health Promotion Chair of the University of Girona fosters the transfer of knowledge and research in the area of health promotion through four areas of action: training, research, publications and knowledge dissemination and transfer. It enjoys the support of DIPSAUT, an independent public health body of Girona Provincial Council. Objective of this study is to analyse the contribution of 15 years of the Chair's work.

Material and Methods: Descriptive through data collection from the 2008-2023 annual report review.

Results: The training area corresponds to the organisation of courses, symposia, seminars, conferences and webinars. 112 training actions have been identified, 48 of which have been carried out in online format. Highlights include the organisation of 4 Mediterranean Symposium on Health Promotion with the participation of 400 professionals and 80 speakers of different countries, and the organisation of the 11th IUHPE European Conference on Health Promotion. As regards the area of research, which encompasses the evaluation of programmes and projects, along with the design of and participation in research projects, 70 actions have been carried out. As far as the area of publications is concerned, 19 books have been published and 24 editions have been produced of BepSalut, an electronic newsletter, which has 330 subscribers and a readership of approximately 1300. In the area of knowledge dissemination and transfer, 152 actions have been carried out in the form of symposia, consultancy work in the area of health promotion and participation in national, European and international work networks. The Chair is an active member of seven networks and coordinates the secretary's office of the HPH Catalonia network of health promoting hospitals and the Working Group on Salutogenesis in Spanish. Since 2017 the Chair is member of the IUHPES's Global Working Group on Salutogenesis. Also is member of the WHO Planetary Health Action Board.

Conclusions: The Health Promotion Chair plays a leading role in health promotion and is an important asset thanks to the work it carries out in its areas of action. Through the Health Promotion Chair it is possible to drive forward, plan and evaluate health promotion activities in the form of both training and scientific dissemination and/or knowledge transfer, forging and promoting alliances to boost health promotion.

Does industrial forestry have an impact on public health?

Steffen Torp, Solvor Nesbakken, Grete Rønningen

Introduction: The United Nations declares that the global degradation of ecosystems represents a danger to human health. Deterioration of forests is one of several threats against the natural systems. In addition, nature, including forests, is important for health and well-being of people. In Norway's forestry, clearcutting is the most common harvesting method of timber and entails that all trees in a forest area are felled. The consequences of clearcutting for ecosystems and people are poorly investigated. The aim of this exploratory study was to investigate people's experiences with clearcutting, and how it had affected their health and wellbeing.

Material and Methods: Qualitative data from six persons who used forests for recreation and who had experienced clearcutting were collected by semi-structured interviews. The data were analyzed in accordance with Graneheim & Lundman's qualitative content analysis.

Results: The following themes were identified: Emotional reactions to clearcutting, with the three subthemes Grief on behalf of oneself, Grief on behalf of nature and Emotional avoidance; and A desire to influence, with the two subthemes Action strategies and Powerlessness. Although the interviewees saw some positive effects of clearcutting, this type of forestry was clearly not regarded as neither an environment friendly nor human friendly forestry method. The interviewees described emotional reactions such as grief and poor mental wellbeing when beloved forests were clear-felled. The grief was partly because of a personal loss of place and recreation area that was important for their physical and emotional wellbeing. Another part was grief on behalf of the nature itself, that is, the loss of habitats of animals and plants and a worsening of the climate on planet Earth. The interviewees held that emotions related to loss of nature were under-communicated in public discourses. They felt powerless and unable to influence forestry because of what they experienced as an impenetrable industry.

Conclusions: Clearcutting of forests may result in poor wellbeing. There is a need for more focus on planetary health promotion, including healthy public policy promoting forest management that considers the people's need of nature experiences and possible negative health consequences when forests are totally and abruptly cleared.

Social sustainability in municipal policy plans in Norway.

Olin Oldeide, Malin S. Johansen, Elisabeth Fosse

Following the UN's sustainability goals there is a need for action at all levels of society. Previous research has demonstrated that there is a lack of knowledge of how public actors understand and implement key concepts, such as social sustainability in planning (1). The Norwegian Public Health Act requires that public health is anchored across all policy sectors in municipalities' plans and strategies and efforts to improve the population's health and living conditions (2). The following study explores how the concept of social sustainability is understood in key local policy documents in Norway. The document analysis consists of a thematic analysis (3) of the three key municipal planning documents in the 43 municipalities, which make up a county in Norway. The findings from the study will give insight into how local policymakers have understood the concepts and thus give insight into how social sustainability is operationalized and addressed locally. The findings will also give insight into how the concept of social sustainability is linked to other health promotion concepts in local policy planning.

The analysis shows that the key principles of sustainability and social sustainability are included, but there are large variations in how well-integrated the principles are in the policy documents. The analysis reveals that the concept of social sustainability consists of three main areas: Firstly, social sustainability is essential for creating sustainable local communities through creating attractive living conditions for its inhabitants. Secondly, social sustainability is linked to population development, especially the centralization tendencies in rural Norway. Thirdly, the three dimensions of social sustainability (social-, environmental- and economic sustainability) are viewed as important to be regarded together. The findings also show that the municipalities acknowledge a link between local health promotion and the goals of sustainable development.

Registration of Health Promotion Practitioners: The Australian experience.

Marguerite C Sendall, Andrew Jones-Roberts, Lucy Wickham, Dimitri Batras and Tia Lockwood

Progress in addressing population health and sustainable development is underpinned by a globally recognized and responsive health promotion workforce, benchmarked by agreed core competencies and contextualized to the policy and practice environment. The existing health promotion competencies build on World Health Organization charters and social development goals to define the knowledge and skills required to promote health and wellbeing and address health inequities. International efforts in reaching consensus about competencies, such as the Galway Consensus Conference Statement and the IUHPE Global Accreditation System have facilitated health promotion workforce development at a global, regional and country level. This workshop will critically consider what skills and capacities are required to address current and emerging health, wellbeing and equity challenges, how to strengthen health promotion competence and capacity in implementing multisectoral action and inclusive governance for health equity and sustainable population health and wellbeing eco-systems.

OBJECTIVES OF WORKSHOP: The objective of this workshop is to share information on regional and global developments on health promotion competencies and competency-based quality assurance systems. Presenting Australia as a case study, this workshop will critically consider impact to date, and promote dialogue and discussion about future developments required to meet emerging global health challenges. This workshop has four objectives: 1) review progress on competency-based quality systems (IUHPE), 2) share Australia's experience of the implementation of quality assurance systems, 3) explore the relevance and impact of these systems on building effective, accountable and inclusive governance and 4) promote critical discussion about current developments and future innovations. This workshop is more important than ever to promote the purpose and value of health promotion competencies and competency-based quality assurance systems to practitioners, government and non-government organizations and at the regional and global levels more broadly.

TYPES OF ACTIVITIES: The approach for this workshop is participant centred, activity based, highly interactive, pedagogically robust, and the structure will be logical and easy to follow. A suite of learning activities will cater to diverse learning styles and prior knowledge. The specific components of this workshop are small and interactive group activities, focused and localized scenario-based activities, hands-on and technology-based activities, and participant-led and practice relevant activities.

Walk the line: Crisis in pandemic contexts as rite of passage between marginality and health agency.

Cristopher I. Kobler Betancourt; Annika Frahsa

Introduction: Studies have revealed unequal experiences of hardship during the Covid-19 pandemic, exacerbating pre-existing inequalities, in various European countries and beyond. Our study is part of a trans-disciplinary project “The pandemic society in Switzerland: Polarization and Public health” (2022-2025) that looks at the intersection between health equity, pandemic preparedness, and societal division in the context of COVID-19 from epidemiological, social sciences, and community health perspectives. In this social anthropological sub-project, we retrospectively explored how different socio-demographic- and socio-cultural communities experienced the pandemic in the canton of Bern, Switzerland.

Material and Methods: From Mai to September 2023, we, supported by trained peer researchers, conducted seven semi-structured focus group discussions with 53 participants, representing a wide age range and who are part of different communities: among those interlocutors from rural and urban areas, with different religious denominations, with and without immigration experience, from European countries and the Global South, documented and undocumented immigrants, and people who identify as LGBTQ+. For data interpretation, we applied reflexive thematic analysis following Braun & Clarke to verbatim interview transcripts, supported by MAXQDA software.

Results: For this presentation, we will use the social anthropological concept of liminality to illuminate how participants transformed during the COVID-19 pandemic as an ambiguous time of great uncertainty. Results from the focus group discussion hint towards a shared and heightened experience of uncertainty during the pandemic across all groups. While the experience of uncertainty was very prevalent and relevant for participants of the different diverse communities, disruption of everyday day life appears to have acted like a catalyst triggering different coping mechanisms and processes. This ultimately resulted in diverse outcomes of pandemic experiences, especially in communities defined by the literature as “traditionally” marginalized. While for some participants, COVID-19 reinstated fear and uncertainty and states of social inequality, for others it represented a transformative process and rite de passage towards self-empowerment, health agency, and healing.

Conclusions: Those findings can help to better understand marginality itself and its intersections with agency, and health outcomes. Further, provides insights into how governments and institutions might provide “a system of care rather than control” for diverse community needs in future pandemics.

Health equity data: the case of Roma in Hungary's segregated clusters - a nationwide monitoring.

Janos Sandor, Feras Kesabji, Karolina Kosa

While Europe is furthering its work on the European Health Data Space, it is important to keep in mind the needs of people in vulnerable situations. Health equity data can help clearing up many unclarities when designing social inclusion policy on the national level. Take the example of people live in segregated clusters (SC) which are parts of settlements where lower levels of education and poor income can be observed. This is reflected in a poorer health status in Hungarian statistics overall.

The Hungarian National Health Insurance Fund (NHIF) and the Department of Public Health and Epidemiology (University of Debrecen) have collaborated to develop a unique method that utilises available data to produce health indicators for individuals residing in segregated clusters. It was named HOGIS, the Hungarian Online GIS (Geographic Information System). By linking the geographical definition of SCs to the NHIF database, which covers the entire country, we were able to compute indicators for SCs without violating personal rights. The project's protocol was approved by the Hungarian National Authority for Data Protection and Freedom of Information. The project processed data from 2011, 2019, and 2020 and evaluated the SCs individually, as well as individual settlements, districts, counties, regions, general medical practices, and the entire country overall.

185 health indicators were mapped and tabulated for each territorial unit, ranging from individual settlements and general medical practices to counties, and the entire country, using an online GIS service. The inequality indicators were calculated for each aggregation level and compared to indicators of people living in non-segregated areas of the same geographical unit (CA, complementary area). This project provides a country-wide demonstration of local inequalities in healthcare use in segregated communities. It is a significant step forward in identifying and addressing health disparities for individuals residing in SCs in Hungary.

Workplace Wellbeing from policy development to implementation an Irish perspective.

Biddy O'Neill

The World Health Organisation defines a healthy workplace as one in which workers and managers collaborate to use a continual improvement process to protect and promote the health, safety, and wellbeing of all workers. Improving the health and wellbeing of Ireland's workforce is one of the priorities in the National Health and Wellbeing Plan. In response to this the Healthy Workplace Framework was launched in 2021 which was developed in partnership with key stakeholders and is underpinned by robust evidence and public consultation.

The Framework integrates and aligns with other government policies and strategies, including the legal obligation to comply with health and safety legislation. It also advocates for the implementation of health and wellbeing initiatives in the workplace which will have multiple benefits for both employees and employers. It provides strategic direction and flexible guidance that can be adapted in any organisation to help create and sustain a healthy workplace. It aims to support the growth of effective approaches to enhancing health and wellbeing in the workplace setting.

The Framework identifies high level objectives including raising awareness of the importance of workplace health, driving engagement in health improvement in the workplace, building implementation structures, and transforming organisational cultures. In addition, it highlights the need for supports for workplaces, the sharing of good practice, and the need to drive quality improvement to ensure sustainability. Since the launch of the Framework an Options Appraisal was commissioned to explore options to guide implementation, an evidence review on culture change and wellbeing published and a tender process completed for the development and delivery of the first National Survey on Workplace Wellbeing. The development of the Healthy Workplace Website was identified as a priority by workplaces and launched in May 2023. The aim is to provide content on workplace related health and wellbeing as well as interactive tools to support workplaces deliver and evaluate wellbeing interventions in their organisations. The full implementation plan is currently under development and is overseen by a national group.

This presentation will explore the learnings to date and consider the challenges with implementation of workplace wellbeing from a settings perspective.

Promoting the health of education professionals: The role of guidance and training in their occupational health and well-being.

Min-Chien Tsai, Catherine Chabot, Nicola J. Gray, Didier Jourdan

Introduction: Increasing challenges amongst education professionals in recent years is a cause of great concern. The research question of this study is, what are the resources that affect the occupational health and wellbeing of education professionals. during the crisis

Material and Methods: This study is based on an online survey and semi-structured online follow-up interviews with survey respondents. In order to limit the impact of cultural factors, consortium meetings, translation, retro-translation, and pre-testing of the questionnaires were conducted. The online survey was distributed through the global community of the UNESCO in Global Health & Education. Open questions in the questionnaire were quantitatively coded by two researchers, with an interrater reliability of .93 after two rounds of pre-test coding of 30 responses were conducted and inconsistencies were resolved by discussion.

Results: The global dataset derives from 1,335 survey respondents in 40 countries/territories. This presentation will give an account of the data collected through the survey. The impact of mental health and wellbeing from the infection control measures were coded as positive impact (1%), no impact or not much affected (59.6%), mixed impact (0.1%) and negative impact (23.6%). The results of this study revealed that 1-having the guidance needed with enough time ($\beta = -.12, p < .001$), 2-having training on understanding the impact of the pandemic on schools ($\beta = -.29, p < .001$), 3- having training on remote teaching ($\beta = -.11, p < .01$), and 4-having training on maintaining wellbeing for students and staff ($\beta = -.24, p < .001$) were all significant negative predictors of the impact of mental health and wellbeing. The more guidance and training staff have received, the less negative the impact.

Conclusions: This global dataset showed clearly that guidance and training on “how to do their jobs well” influenced mental health and wellbeing. This suggests that promoting mental health in the workplace requires organisational measures, not just individual capacity-building. It is the whole work ecosystem that must be health-promoting.

Creating structures for co-creation of local public health work: experiences from Trondelag, Norway.

Ruca Maass; Monica Lillefjell

Background: The majority of Public Health and Health Promotion work is carried out in local contexts such as municipalities, neighborhoods and public institutions, implying the need for local collaboration and competence-development: top-down strategies need to be combined with bottom-up knowledge- and competence-building. In order to enable effective approaches, involvement of stakeholders and co-creation of solutions emerge as crucial approaches. Co-creating systematic local approaches demands the establishment of structures that enable collaboration between research and practice, and ensure commitment over time. In Norway, the 10-year national “Program for Public health Work” has motivated the establishment of working processes and -forums that gathers actors from municipalities, regional authorities as well as from a range of research institutions and -disciplines. The aim of this presentation is to describe the structures and processes established in this context, and outline factors critical for sustained collaboration.

Methods: To assess activities and describe the emerging structures network; extensive data-gathering from a wide range of sources was applied; including relevant documents and internal papers (meeting agendas/notes, internal communication), participatory observations; in-depth interviews and joined workshops. Emerging findings were constantly communicated back to collaboration partners to validate and contextualize findings.

Results: The explicit aim of the Program to “develop new ways for collaboration” contributed to the establishment of permanent structures for the ongoing co-creation of local approaches within public health. Each municipality was obliged to apply the “Trondelag Model for Public health Work” to structure approaches, and was assigned a research partner who followed them through the whole process. A cross-sectoral project group including representatives from regional authorities, research and municipalities was established. Municipalities were invited to participate in competence-building workshops twice a year. Workshops addressed common challenges with the aim to exchange experience and joined learning activities.

Conclusions: Critical factors for success included explicit commitment from municipal leaders and regional authorities, who coordinated and partly funded collaboration activities. Other critical factors included time, resources and local competence-building(joined learning activities; the utilization of a systematic working model and the close collaboration with research partners. Especially opportunities for exchanging experiences and learn from each other were valued by municipal partners.

Infrastructure for Health promotion: the development of a shared knowledge system.

Corrado Celata, Anna Paola Capriulo, Giusi Gelmi, Antonio Russo

In Italy, the main document for health promotion is the National Prevention Plan (PNP). Each of the 20 regions of Italy has control over its own health policies. Each region adapts the PNP into a Regional Plan (PRP) following the national guidelines according to its own context. One of the innovations of the current PNP is the focus on equity. Not using equity in health promotion risks widening the gap between vulnerable and non-vulnerable people. It is known, in fact, that those who have more means can benefit more from the services offered.

The impossibility of a thorough knowledge of health risk factors and how they vary according to territorial and socio-economic characteristics, decreases the action that public policies could have to promote health of individuals and the population.

One of the policies that the Region of Lombardy uses to address this lack, is to act on infrastructures through the preparation of a shared knowledge system. It is useful to explore potential health inequalities in order to orient the planning choices and the resources allocation.

The system is an open source platform to facilitate linkage between different sources and to summarize information and surveillance systems (infectious diseases, chronic diseases and road accidents, household and accidents, lifestyles, perception of health status, use of health services, etc.). This makes it possible to identify needs and risks in the population.

This process is made possible through the formalization of network with other stakeholders (e.g. universities, research organizations) for the collection and mutual exchange of data. The shared reading of this information allows it to be analyzed from different perspectives and facilitates its dissemination in the respective fields of action.

The provision of integrated data in open access form, providing multilevel and multistakeholder access (from policy-maker to citizen). It also aims to increase the institutions' and populations' health literacy levels by promoting empowerment and capacity building.

The regional system uses the knowledge produced by the platform to plan through an equity-oriented perspective. In doing so, in its governance role, it engages the different agents and directs programmes from an equity-oriented perspective.

Strengthening Mental Health: Resilience, Sense of Coherence and Positive Mental Health in Mental Health Professionals in Girona.

Dolors Juvinyà, Emiliano Castro, Susana Mantas

Introduction: The promotion of mental health from a positive perspective and, in accordance with the salutogenic approach, seeks a balance between preventive actions and those that enhance the health of people and communities, considering assets relevant to health. In this sense, the conceptual and metric constructs of positive mental health, the sense of coherence, resilience and perceived health of professionals in the work context are proposed. The aim of this study is to assess positive mental health, sense of coherence and resilience of professionals; relate the three constructs with the number of years worked, perceived health status and job satisfaction.

Material and Methods: Non-experimental, observational, transversal and analytical quantitative study. The relationship between sociodemographic and work variables, Perceived Health, Resilience scales, Positive Mental Health and Sense of Coherence is described. The study population is made up of 104 Mental Health professionals from Girona.

Results: The professionals obtained high scores on all scales. Statistically significant differences were found between the number of years worked, perceived health status and SOC. A statistically significant negative relationship was found between the number of years worked and the attitude of helping others (less predisposition towards social issues). Statistically significant differences were found between job satisfaction, SMP+ and SOC. Professionals who declare they are more satisfied with their work obtain high scores on the SOC and SMP+ scales. A significant positive relationship was found between perceived health status and global SOC and by dimensions. The professionals' high scores on the SOC scale were related to the absence of health problems. The positive relationship between the scales used was confirmed.

Field training for the development of strategies to promote physical activity in the framework of the Regional Prevention Plan 2021-2025 of the Lombardy Region.

Calloni L, Parisi G, Torri A, Ghilotti P, Locatelli CG, Gelmi G, Celata C

Physical activity is an essential element for developing a healthy lifestyle, as well as a protective factor for preventing Noncommunicable diseases (NCDs). For these reasons, physical activity promotion is relevant to all the different policies and guidelines for prevention and health promotion, highlighting the importance of developing cross-sector strategies. These cross-sector strategies integrate health policies with other policies, such as cultural, economic, environmental, social, sporting and tourist policies, to create supportive environments for health promotion. In this sense, one of the goals of the Lombardy Regional Prevention Plan 2021-2025 is promoting physical activity with a systemic approach, through both upstream and downstream actions to encourage the role of communities and to produce a structural change in living contexts. Based on these regional policies, specific actions were planned such as the dissemination of best practices, the development of validated regional programs (Pedibus, Walking Groups, etc.) and the construction of permanent local laboratories for physical activity, aimed at promoting the development of intersectoral and participatory work among local actors, such as universities, local authorities, health company, sports associations, sports facility managers. They were structured through two devices: an organisational structure in each Health Protection Agencies (ATS) and the development of specific networks in all the territorial districts, to define system bridging paths that enhance health system workers, scientific societies and professional associations. Regional active training on physical activity was realised to support these actions and to enhance territorial specificities, promote intersectionality, engage different stakeholders and share best practices on movement promotion. This training has allowed us to achieve two different goals. In fact, in the first phase, shared guidelines on permanent local workshops on physical activity have been developed. These permanent local workshops play a key role in implementing adapted physical activity. During the second phase, regional replicable evidence-based best practices have been explored, focusing on the stakeholders' engagement process. This kind of organisational process helped to develop a regional facility oriented to promote cross-sectoral system actions for different targets, according to life-cycle logic and aimed at responding to different purposes (communication, research, intervention).

The influence of green revitalisation of Łódź on the city residents' health and wellbeing.

Joanna Ruszkowska, Katarzyna Pawlak-Sobczak

Introduction: The links between quality of living conditions, social relations and mental health are more often emphasized issues not only in key WHO and European Union policy documents especially when huge cities are concerned but also by the Global People-Planet-Health Movement.

Łódź is the fourth largest (in terms of population) city, located in the centre of Poland. It was for years a neglected, post-industrial town with a relatively high percentage of poor, unemployed and older population mostly with health deficiencies. "The Development Strategy of the City of Łódź 2030+" is an example of a multidimensional project which contributes to the modification of Łódź image today. The aim of this study is to present the impact of the city's revitalization processes on the improvement of health and wellbeing of its inhabitants.

Material and methods: The prepared presentation is based on the case study method, which uses in-depth analyses of various materials, including analysis of existing materials, surveys, interviews and external observations.

Results: Urban space in Łódź has changed significantly over the last decades. The area of city greenery is growing (100000 new trees and 7000 bushes in 2023) and the number of cycle paths is increasing (currently amounts to 240 km, tripled since 2012). In 2022 71% of the representative group of Łódź residents indicated that it is a good place to live, which was also the highest result until 2012. Three out of four residents of Łódź rate the changes in the city centre as positive. Above all, they appreciate the changes in the field of greenery, recreation, public space, as well as the sports, cultural, safety and education offer. They also positively assess the availability of bicycle routes and public transport. Every third inhabitant feels that they have a great impact on what is happening in the city, and most of them share the concept of co-creating the city and its development directions.

Conclusions: Green revitalization of Łódź seems to have an impact not only on the aesthetic and touristic qualities of the city but also on health and well-being of its inhabitants.

Workplace yoga intervention and objective movement analysis to validate its effects – a pilot study.

Magdalena Fronczek, Karolina Kopacz, Piotr Kusznierek, Łukasz Kopacz, Krzysztof Sylwestrzak, Gianluca Padula

Introduction: Yoga as a physical activity or complementary medicine is widely practised. Yoga programmes are easy to implement in workplaces and positively improve health and reduce work-related stress. However, like other exercises, yoga can be associated with joint and musculoskeletal problems, therefore the correctness of the exercises should be evaluated objectively with movement analysis. This study aimed to biomechanically evaluate workplace yoga interventions to draw attention to the proper execution of exercises.

Material and methods: Six people (3 women, 3 men) performing sedentary office work were examined concerning a sitting position ergonomics. Angular position and muscle tension were evaluated objectively with the optoelectronic system BTS SMART DX 7000 (BTS Bioengineering, Italy) combined with FreeEMG1000 (BTS Bioengineering, Italy). Five yoga-based workplace exercises were introduced and examined two times with objective movement analysis: after the first performance of each exercise, and after the ergonomics correction to improve movement pattern biomechanics.

Results: Each examined person needed ergonomics correction of the basic sitting position and to properly execute the introduced workplace yoga exercises.

Conclusions: Based on the results, it was concluded that:

1. Yoga-based intervention could be a useful form of exercise in the workplace to avoid prolonged immobility in a sitting position.
2. Workplace yoga intervention should be objectively evaluated and fitted individually according to proper ergonomics and movement biomechanics.

Objective movement analysis in the case of dentistry ergonomics.

Karolina Kopacz, Magdalena Fronczek, Solomiia Krusthil, Łukasz Kopacz, Piotr Kuszczneruk, Gianluca Padula

Introduction: Dental care requires a lot of physical endurance. This work involves many hours of work in a forced position and performing repetitive, non-symmetrical movements, which additionally require precision and concentration. Dental workers most often struggle with various types of diseases of the musculoskeletal system.

Material and methods: The research was carried out in two stages. The aim of the first study was to verify what pain conditions dentists most often struggle with and what their nature is. To this purpose 30 dentists were examined, 15 women and 15 men aged 20-50. The average length of work was 6 ± 3 years. The dentists completed a questionnaire, which included questions about the intensity and location of pain, and knowledge of the principles of ergonomics. In the second stage, 5 people were selected and their muscle tension and body position were examined after adopting an ergonomic position. Based on the muscle tension analysis, the dentist's position was corrected and the examination was performed again. Muscle tension was analyzed with FreeEMG1000 (BTS Bioengineering, Italy), and the position of the dentist with the optoelectronic system BTS SMART DX 7000 (BTS Bioengineering, Italy).

Results: Most people experienced pain in the lumbar spine, followed by the cervical spine and the shoulder joint. In the study group, 37% of people marked the degree of pain in the range 1-4/10, 30% people marked the degree of pain in the range of 5-7/10 and 33% of people marked the degree of pain in the range of 8-10/10. All subjects required position correction taking into account the results obtained from the optoelectronic system and kinesiological sEMG.

Conclusions:

1. The most common painful area for dentists is the lumbar spine.
2. The occurrence of pain is not depending on the application or non-application of the principles of work ergonomics, because all respondents (100%) answered affirmatively to the question regarding the occurrence of pain related to the work performed.
3. Despite knowing the principles of ergonomics, it is advisable to use objective methods of assessing muscle tension to optimize muscle effort.

Analysis of metabolic risk and healthy behaviours among persons following plant-based diets.

Martyna Mroziak, Oliwia Grygorczuk, Ewa Rębowska, Stanisław Łęgocki, Sylwia Kamińska, Anna Jegier, Anna Lipert, Wojciech Drygas, Magdalena Kwaśniewska

Introduction: The proper dietary pattern is crucial for health promotion and public health. Metabolic risk factors raise the probability of developing diabetes, coronary heart disease, stroke. Data on metabolic risk and knowledge concerning healthy behaviour among persons following plant-based diets are not sufficiently researched.

Purpose. The aim of the study is to assess metabolic profile and healthy behaviours in the group of vegetarians and vegans living in Lodz, Poland. Special attention was paid to the differences between the group of vegetarian and vegan participants of the study

Material and Methods: The study subjects comprise a group of 150 adults who were following a plant-based diet for at least 12 months (100 vegetarians, mean age 34,5 yrs and 50 vegans, mean age 33,2 yrs). All the participants were extensively reviewed, including detailed dietary recalls, physical activity level, smoking and alcohol consumption, knowledge of the healthy behaviours. Anthropometric measurements included weight, height and waist circumference. Metabolic biomarkers included measurements of HDL-cholesterol, triglycerides, glucose, insulin, HbA1C.

Results: Most of the analysed parameters were comparable between the vegetarians and vegans groups. However, vegetarians had higher triglycerides concentrations as compared with vegans (0,98 vs 0,82 mmol/L, respectively), higher hsCRP (1,24 vs 0,77 mmol/L), glucose (4,87 vs 4,71 mmol/L), body mass index (23,1 vs 21,9 kg/m²) and insulin (39,9 vs 34,9 μmol/l). Both groups had comparable mean systolic and diastolic blood pressure (109/67 vs 109/66 mmHg).

Conclusions: Although all participants following plant-based diets had relatively beneficial metabolic profile in the studied population, better results were observed among vegans. There is a need to perform further studies on the association between plant-based diets and health. Moreover it is important to elaborate effective strategies regarding knowledge on healthy lifestyle and well balanced diet among both vegetarians and vegans.

Supporting mental health and wellbeing of an ageing prison population through creative nature-based interventions.

Alan Farrier, Michelle Baybutt and Jo Sayers

Back On Our Map (BOOM) is a UK based-project supported by the National Lottery Heritage Fund and led by the University of Cumbria and Morecambe Bay Partnership. BOOM aims to re-engage communities in South Cumbria, England with their natural environment, by restoring the landscape and reintroducing and reinforcing locally threatened or extinct native species. As part of the project, BOOM staff worked alongside the existing Greener on the Outside for Prisons project (an established nature-based therapeutic horticulture programme) within a local prison which had a distinctive demographic of mainly older men, some of whom had reached UK retirement age. BOOM developed a special tree and plant growing nursery where prisoners approaching the end of their sentences helped to restore endangered fauna and flora. They also engaged in tree-planting sessions within the prison grounds. Over 100 prisoners participated overall, with a selection of these also going on to take part in accredited courses (the John Muir Award and Level 1 NVQ Horticulture) and engage in creative, arts-based activities related to nature as part of the project.

Researchers from the Healthy and Sustainable Settings Unit, based at the University of Central Lancashire (Preston, UK) carried out a series of focus groups with prisoners and staff who had taken part in prison-based BOOM activities in 2022 and 2023. In total, 18 prisons were interviewed in four focus groups. These focus groups were narrative-based and gave participants space and time to discuss their experience of taking part in the project. A thematic analysis of this data has drawn out key themes in relation to the health and wellbeing benefits of the project for an ageing prison group. This presentation explores these themes, which incorporate connectedness to nature, mindfulness, respect and a sense the therapeutic benefits of creative activities within a nature-based context, which seemed to particularly resonate with this demographic. We argue that these findings have implications for future prison-based prisons project involving older prisoners, who are the fastest growing group in the prison population, and whose particular health and wellbeing needs are not currently entirely understood or met within the UK prison system.

“Parkrun is a place you can talk.” Strong and weak social ties between middle aged men attending parkrun in Ireland: reflexive thematic analysis.

Dunne, A, Quirk, H, Bullas, A, Haake, S.

Introduction: Social support is a well-established determinant of health. Health promotion research and practice tends to focus on the support received from family and close friends (strong social ties), yet evidence suggests that social support can also be obtained through relationships involving limited emotion and intimacy (weak social ties). For men in Ireland, there is an increased risk during middle age of social isolation, poor mental wellbeing and suicide. This could be mitigated through improved social support, with social ties developed by participating in community initiatives. One such initiative is parkrun, a free, weekly, 5 km run or walk, organised by volunteers in 22 countries, with over 100 sites across Ireland. The research question is: what type of social ties are experienced by middle aged men participating in parkrun in Ireland?

Material and Methods: Online semi-structured interviews were conducted in 2022/23 with 39 men aged 45-64 years, who run, walk or volunteer at parkrun in Ireland, recruited purposively via social media and event visits in rural and urban communities. Men with a range of parkrun experience, from new attendees to event directors, gave interviews lasting a mean of 32 minutes. Reflexive thematic analysis was used to explore the social interactions experienced during parkrun participation. This abstract presents findings from one theme relating to social ties: ‘men who attend parkrun can choose the level of sociability.’

Results: The social ties theme has two subthemes: (1) ‘deep connections can occur between parkrun participants’ (strong ties) such as social support after a cancer diagnosis or during treatment for depression; and (2) ‘parkrun friends have a special type of friendship’ (weak ties) demonstrated by casual conversations about the parkrun route or weather conditions. Improvement to mental wellbeing was linked by interviewees to both types of tie.

Conclusions: Social interactions at parkrun for middle aged men in Ireland allow them to form strong and weak social ties: these are beneficial to mental wellbeing. Community initiatives like parkrun can offer health and wellbeing benefits beyond those gained from the activity itself; this makes them valuable health promotion opportunities for middle aged men at risk of poor mental wellbeing.

Motives for participation in parkrun and its impact on health and wellbeing for inactive women.

Charlotte Benkowitz, Steve Haake, Paul O'Halloran, Alice Bullas, Helen Quirk

Introduction: Increasing physical activity is a global health priority, especially for women who are typically less active than men. One community-based physical activity initiative is parkrun, which organises free, 5 km events every Saturday morning attracting participants across the lifespan. The aim of this research was to study a cohort of inactive females and compare those who became active with those who remained inactive after participating in parkrun.

Material and methods: Data from a Health and Wellbeing Survey in the Australian parkrun population (n=34,055) was used. The sub-set of data consisted of 966 female parkrun participants who identified as inactive (less than 30 minutes of activity per week) at parkrun registration. Participants were categorised as those who remained inactive at the survey timepoint and those had become active (30 minutes of activity at least three times per week). Logistic regressions explored differences in motives for initial participation at parkrun and the perceived impact participating has on participants health and wellbeing between these groups.

Results: Seven of the 21 motives to participate in parkrun from the survey were significantly more likely to be chosen by participants who became active including: to be active, to be outdoors, to compete against myself and to gain a sense of personal achievement. Others such as to manage my weight and to have fun were equally likely to be chosen as true by both groups. Participants who had become active since parkrun registration were more likely to report that parkrun had a positive impact on almost all elements covered in the survey. For example, active participants were five times as likely to report that parkrun participation had a positive impact on their fitness, twice as likely to report benefits of parkrun participation on their mental wellbeing and three times more likely to report benefits to their happiness and life satisfaction.

Conclusions: Findings suggest becoming active through participating in community-based physical activity initiatives brings benefits beyond physical health and fitness. When promoting physical activity initiatives such as parkrun it is important to highlight participation provides wide-ranging benefits to women's health and wellbeing to help motivate those who struggle to become active.

Applying the settings approach to prisons: A case study from England.

Michelle Baybutt, Alan Farrier

This presentation will reflect critically on the evolution of prisons as a key setting to address health inequality and presents a case study illustrating opportunities and challenges of implementing a settings-based approach to health promotion.

The settings approach to health promotion builds on the Ottawa Charter, which stated that “health is created and lived by people within the settings of their everyday life; where they learn, work, play and love” (WHO, 1986). The approach reflects an ecological model of health promotion and focuses on whole system change, through creating supportive environments and facilitating multiple interconnected interventions concerned to improve the wellbeing of places, people and planet.

Greener on the Outside for Prisons (GOOP) is an innovative prison-based therapeutic horticulture programme that, through the settings approach, connects place and people with planet. GOOP is unique because it draws on the combined theory of the settings-based approach to health promotion and key principles of the whole-prison ‘healthy prisons’ concept, to embed sustainable culture change by utilising the systems and processes already in existence in each prison. Alongside the conceptual framework of the settings approach, a central focus on human experience underpinned by an epistemology that draws on critical realist and constructionist perspectives enables a dual position to explore meaning within complex systems of prison settings, thus presenting a more dynamic vision of the reality experienced by prisoners’ engaged with therapeutic horticulture to be achieved.

The health profile of people in prison is complex, with co-occurring physical and mental health problems. Accessing people in the places where they live their lives and make choices is a key public health approach. Using a case study of GOOP, this presentation argues that prisons therefore offer a prime opportunity to address the disproportionate health and social circumstances of prisoners and a way of tackling inequalities utilising a settings-based approach that promotes health, facilitates community integration and reduces reoffending.

Intervention Strategies for Gambling Prevention and Control: A Comparison Between Scientific Evidence and Regional Legislation in Italy.

Gabellini E, Campana V, Capriulo AP, Calloni L, Torri A, Vimercati N, Celata, C.

Gambling is a complex and multifaceted phenomenon, characterized by numerous risk factors that depend not only on the individual characteristics of the players but also on the social and community context (Moreira et al., 2023). Therefore, it assumes relevance on the agenda of institutions and public decision-makers, who are called upon to define and implement prevention and intervention programs, especially concerning pathological forms of gambling (Ladouceur et al., 2017). The literature suggests that policies and programs are most effective when they take into account different gambling characteristics and levels of risk, acting on both individual and contextual and community risk factors (Rehm et al., 2019). In particular, the contextual, community, and intersectoral dimension becomes important in further studies that value a comprehensive and systemic prevention approach, capable of developing primary prevention interventions, as well as control and regulatory policies aimed at promoting public health and addressing equity issues (Castrén et al., 2018; Henkel & Zemlin, 2016; Rintoul et al., 2013).

This contribution aims to identify the presence of indications and strategies considered effective by the literature within the Italian regional laws related to the prevention and control of gambling, in order to identify strengths and weaknesses and outline perspectives for intervention useful to the work of institutions and public decision-makers. The study involved a qualitative analysis of legislative documents using a grid constructed from a literature review of the last 5 years on the topic of pathological gambling prevention. The literature analysis led to the identification of two umbrella reviews (Velasco et al., 2021; McMahon et al., 2019), revealing four main categories of prevention and control: supply reduction strategies, demand reduction strategies, risk reduction strategies, and harm reduction strategies. The intersection of these categories with regional laws shows coherence between the macro-areas studied at the research level and the interventions outlined in the regulations themselves: all laws delve into themes and measures related to the considered strategies.

In the future, it is hoped that greater attention will be given to evidence-based strategies, fostering dialogue between the scientific and political-institutional spheres to enhance effective, efficient, and sustainable programs and actions.

Scaling-up antenatal preventive visit for (future) fathers in Montreuil city, Seine-Saint-Denis, France: context and actors-related levers and barriers.

Swati Perrot, Ines Moloufoukila, Louise Pagès, Pierre-Etienne Manuellan, Vincent Kaufmann, Pauline Penot, Johann Cailhol

Introduction: The PARTAGE study demonstrated the relevance of preventive medical visits offered to all partners of pregnant women registered at Montreuil hospital maternity unit. Such visits are being scaled-up since February 2023 across the city of Montreuil. All healthcare professionals are encouraged to inform (future) fathers about this new offer. Visits are organized either at Montreuil hospital, or at municipality-owned clinics, in a holistic approach, including aspects on healthy environment for the child to come. This paper reports preliminary findings of the scale-up evaluation.

Material and Methods: The evaluation is based on the realist approach and uses mixed methods. An Analysis of the actors involved in scaling up was conducted, including fathers and their partners, healthcare professionals and local institutions. Collected data include primary data (interviews, focus-groups, notes of meetings' observations) and secondary data (meetings' reports). The evaluation protocol was approved by the Sorbonne University ethics committee.

Results: Both national and local contexts are favorable for scaling-up: the „1000 first days” framework underlines a French political will to emphasize health promotion during perinatal period and early childhood; at local level, both the city's department of health's and the hospital's commitment towards health promotion are strong. Actors's analysis revealed constraints for healthcare professionals, related to lack of clarity on the visit payment scheme. Future fathers made limited use of the visits, revealing a need to increase their capacity to seize this opportunity for their own health, and also for their future child's health. In parallel, a way to systematically identify future fathers is still needed and face sensitive barriers.

Conclusions: Sustained collaboration with National Health Insurance (CNAM) is needed to scale-up this paternal antenatal visit, yet the visit does exist in theory, in the French public health code. Regarding the need for increasing fathers' demand, healthcare professionals should systematically propose this visit to future fathers. Furthermore, a proactive approach towards fathers, starting by the most vulnerable categories, could accelerate the dynamics of normalizing this visit.

Cervical Cancer Screening Knowledge and practices among adult women in Kosova.

Sanije Hoxha-Gashi, Mirëinda Hatashi, Musli Gashi, Merita Vuthaj, Vjosa Reçica, Besarta Hoxha, Fitore Ramadani, Besnike Hoxha

Introduction: Cervical cancer is one of the most common types of cancer among women. Low levels of awareness and knowledge of the disease, unavailability and inaccessibility of screening services, cultural beliefs, and perceived susceptibility contribute to the low cervical cancer screening rates. This study aimed to assess the level of knowledge and practices related to cervical cancer screening among adult women in Kosova.

Material and Methods: A population-based survey was conducted among 1580 women aged 18–69 years from April 2018 to June 2019 using the WHO STEPs instrument survey. Cervical cancer screening status was assessed by asking whether participants had ever undergone Pap smear (cytology) test procedures. This method is important in the differential diagnosis of malignant, benign, precancerous, and inflammatory lesions. Several questions regarding the place of examination, communication of screening results, follow-up, and treatment were asked. Reasons for not taking a cervical cancer test were assessed as well.

Results: Less than a third (30.6%) of women aged 18–69 years had undergone screening for cervical cancer on at least one occasion. The proportion for women aged 30–49 years was 42.1%, which is an NCD Global Monitoring Framework indicator. This is well below the target proposed by the Cervical Cancer Elimination Initiative for 70% of women to be screened using a high-performance test by the age of 35 and again by the age of 45.

Conclusions: The low cervical cancer screening rates imply that more health education campaigns should be provided for adult women in Kosova related to cervical cancer prevention.

Formative Evaluation of an early, cross-sector, outreach, and family-centered prevention of overweight programme (FrühstArt) – a study protocol.

Katharina Ruettger, Verena Krah, Dusan Simic, Stephanie Stock, Kevin Dadaczynski

Introduction: In Germany, 14% of girls and 8% of boys from 3-6 years are overweight or obese. These rates have become worse due to the Covid 19 pandemic. Being overweight in early childhood often continues into adolescence and adulthood, and can result in a multitude of physical and psychological health conditions. Obesity prevention efforts of German healthcare providers through lifestyle changes have generally not been satisfactory.

Material and Methods: Therefore, an interdisciplinary network of researchers and practitioners has developed a structured, early, cross-sector, outreach, and family-centered intervention that aims for the prevention of overweight. The intervention will be tested within a 12-month multi-arm randomised controlled design to identify the impact of the intervention compared to the current usual care. Children with overweight or obesity (N= 812) aged 3-6 years and their families will be included in the study. Families allocated into the intervention group will receive home-based coaching sessions, supported by an e-health platform. The control group will receive a one-time healthy lifestyle counseling from a pediatrician. Employing a mixed-methods approach, quantitative and qualitative implementation data will be collected. Parents, coaches, and service providers will be invited for a semi-structured interview two and ten months after the baseline to identify barriers and facilitators of the intervention as well as the feasibility of implementation strategies. In addition, quantitative indicators will be collected throughout the study and used to score implementation quality in four dimensions (dosage, fidelity, quality of delivery, and participants' responsiveness), matched with the results of the summative evaluation data.

Results/conclusion: The expected findings from this formative evaluation will help to optimise implementation quality in the future and inform health practitioners by reducing the evidence practice/policy gap in that field, as well as highlighting implementation challenges. The factors which contributed to implementation quality, as well as the relation between implementation quality and programme outcomes, will be discovered. This study will help to improve our understanding of key determinants of intervention implementation and its association with intervention effectiveness. If proven effective, this programme might be applied more broadly within the country resulting in effective change in the health status of children.

Factors influencing protective health behaviours to face Covid-19: review of reviews - Latest version

Lucie CARBON, Aurélien CORNIL, Catherine GRENIER, Nathan NGUYEN, Sandrine ROUSSEL, Stephan VAN DEN BROUCKE, Dominique VANPEE

Introduction: In 2019, SARS-CoV-2 hit most of the world's countries, taking the entire world by surprise. Responses varied, epidemiological situations did not stabilise in the same way everywhere, and citizens' health behaviours differed widely, sometimes within the same country. This last point is of particular interest. This review of reviews drawn lessons from the previous crisis to identify appropriate health-protective behaviours for future crises. The research project is funded by Innoviris.

Material and Methods: A review of reviews method was conducted using a PRISMA-compliant umbrella review in Pubmed and Scopus databases, selecting systematic reviews and meta-analyses on protective behaviours and Covid-19, published until May 2023. Only peer-reviewed, reviews and meta-analyses were included. To be considered for selection, the reviews had to be written in English, not refer to a specific population, and refer explicitly to protective behaviours. Reviews that concerned other diseases than Covid-19 were also included.

Results: A total of 36 articles were screened, 8 of which met inclusion criteria and covered SARS-CoV-2 or other diseases such as influenza, Ebola, SARS, MERS, Zika and HIV. They provided relevant information on factors influencing protective behaviours. The most frequently cited factors were concerned with individual determinants of protective behaviours such as demographic characteristics, socio-economic status, level of education, perceptions and beliefs, and anxiety, or with social determinants such as social pressure, influencers or herd behaviour. Other determinants that were identified included crisis communication, health education and the mandatory nature of measures.

Conclusions: This review enabled us to identify several barriers and facilitators to the adoption of protective health behaviours in response to a health crisis. The findings allow us to draw up guidelines for better management of future crises in terms of promoting protective health behaviours.

Cancer Prevention in the Workplace: A Case Study of a Pilot Experience.

Cristiana Fonseca, Patrícia Pinto

The ELOS Project is an innovative initiative dedicated to preventing cancer in workplaces, adopting a systemic approach that accounts for the personal, professional and social characteristics of both employees and companies. Implemented over a six-month period, the project incorporates individual and group interventions across three crucial phases: needs assessment, cancer prevention activities and evaluation.

The project's initial phase involves a needs assessment that includes questioning the worker about their beliefs and health lifestyles but also analysing the workplaces characteristics. Subsequently, tailored cancer prevention activities are implemented to address identified needs. The final evaluation phase measures key indicators, providing valuable insights into the project's overall effectiveness in promoting employee well-being and healthy lifestyles.

This study focuses on the pilot phase of the ELOS Project, examining its impact on two participating enterprises. A comprehensive analysis reveals positive outcomes in workers satisfaction, reinforced health-related beliefs and positive change behaviours.

The positive impact observed in the pilot phase underscore the project's potential as a transformative force, contributing to enhanced job satisfaction, functional health beliefs, positive behavioural shifts among employees and specially cancer prevention.

Behavioural Insights about COVID-19 vaccination in Kosovo, study protocol and preliminary results.

Florie Miftari Basholli, Merita Berisha, Ariana Kavaleshi, Isme Humolli, Emily White Johansson

Introduction: Public health emergencies such as the COVID-19 pandemic highlighted the importance of critically evaluating behavioral insights and perceptions on new scenarios. Since the first COVID-19 Vaccine became available in December 2020, research has focused on public perceptions, behaviors, attitudes, barriers, and factors related to vaccination against COVID-19. The main aim is to describe a study protocol that will estimate COVID-19 vaccination hesitancy (defined as being currently unvaccinated and unlikely or very unlikely to get vaccinated in the future) and relationship with barriers and drivers for vaccine uptake (e.g.socio-demographic or other behavioral factors).

Material and Methods: We conducted a cross-sectional study using data gathered during wave VI of a behavioral insights study, which was collected between 14th September to 5th October 2022 by the National Institute of Public Health of Kosovo and a local research company Index Kantar Kosova. We excluded foreign people, children under 18 years, and persons in hospitals, prisons, or military facilities. The survey was conducted using a Computer Assisted Telephone Interviewing method (CATI) and random digit dialing was used combined with quota sampling (landline). A multi-staged random probability sampling method was used. We obtained ethical approval and participants provided verbal consent after being informed about the study and contents of the questionnaire.

Results: Main variables in questionnaire, among others included: socio-demographics, COVID-19 experience, health literacy, COVID-19 risk perception, probability and severity, trust in sources of information and institutions (perceptions), lifting restrictions (pandemic transition phase), unwanted behaviours, wellbeing, COVID-19 vaccine intentions. COVID-19 vaccine intentions defined as not being currently vaccinated based on participant reports during the survey interview, and being unlikely to get vaccinated in the future defined according to the survey question "If a COVID-19 vaccine is available and recommended for me, I would get it?". Preliminary results showed that from 1000 respondents, not vaccinated were 20% of them, 7% of those not vaccinated would definitely vaccinate; 44% of those not vaccinated are concerned that a COVID-19 vaccine could cause them to have a serious reaction; 21% of those not vaccinated with low vaccine intention say ease of getting the vaccine is a factor in their vaccine decision; 16% of those not vaccinated with low vaccine intention say effectiveness of the vaccine is a factor in their decision to remain unvaccinated.

Conclusions: Completing study protocol ensured that national survey was accomplishment as per planned timeframe. Final findings will generate evidences related to drivers and barriers to COVID-19 vaccine intentions and will be presented during 12th IUHPE European Conference on Health Promotion or ESCAIDE 2024 conference.

Prevention Can Never Create Health: Here is What does.

Craig M. Becker

Introduction: By definition, prevention is stopping something from happening or arising. In other words, prevention cannot create health. Without question, it is morally imperative to stop bad things such as disease, depression, infirmity, and the like from happening, but doing so does not cause health. Health is the presence of physical, mental, and social well-being over a lifespan. Just stopping bad things from happening, with prevention, CANNOT cause health. Research has demonstrated that in fields such as education, business, and health, creating positive outcomes and better outcomes than previously experienced is a more effective way to produce desired outcomes than focusing on what to avoid. Additionally, positive developing strategies have documented that these methods effectively bypass or make irrelevant, thus prevent, recognized difficulties or problems. W. Edwards Deming demonstrated to businesses that creating the positive of higher quality was the most profitable way to conduct business and the most effective way to avoid and prevent waste, problems, and costs. Cass Sunstein and Richard Thaler demonstrated that public policy that “Nudges” people toward making better choices for themselves and society helps them and society do better and prevents and avoids many difficulties. In health, Aaron Antonovsky demonstrated that moving toward health with salutogenesis, or the study of the origins of health, effectively creates better health and helps prevent or avoid many diseases and infirmities. While prevention cannot generate health, multiple fields have demonstrated that using strategies to develop and create positives better than current experiences is effective.

Material and Methods: Participants will adapt specific successful examples used in education, business, policy, and health to develop strategies for health promotion that increase health, thus doing more than simple prevention.

Results: Participants will leave with tools to design programs and environments that promote health over a lifespan. The higher levels of health will also prevent or help recovery from unavoidable problems experienced.

Conclusions: Participants will have an expanded approach to health promotion, with additional outcome measures to document improved physical, mental, and social well-being that will enable improved health over a lifespan and the health capacity to overcome difficulties.

Factors influencing subjective wellbeing of economic and health domains in Southern Thailand.

Thanawit Bunsit

This research aims to explore factors influencing subjective wellbeing of economic and health domains of 400 people in Southern Thailand. Multiple regression analysis was employed for examining subjective wellbeing factors. The results showed that for the economic domain consists of four sub-domain including work, income, debt and savings showed the average of 4.45 out of 5. The health domain consists four sub-domains including physical health, mental health, access to healthcare services and leisure all together showed the average of 3.74. By using multiple regression analysis, it was found that factors affecting subjective wellbeing of economic domain were amount of debt and working for a daily paid job. For the health domain subjective wellbeing, monthly income, health condition and having health assurance significantly affected health subjective wellbeing at the level of 0.01.

Evaluation of EndoZone – a digital health promotion platform for endometriosis.

Diksha Sirohi, M. Louise Hull, Cecilia H.M., Rebecca O'Hara

Introduction: Endometriosis is a chronic condition affecting 5-10% of the global female population and is associated with symptoms such as chronic pelvic pain and painful periods. Although medical and surgical treatments are used, self-management strategies may be needed to assist with the long-term management of persistent symptoms. Evidence-based digital health platforms are rapidly accessible and can be used as health promotion tools to increase awareness, facilitate communication with doctors, and assist with self-management. This study presents preliminary evaluation findings of EndoZone, a digital health promotion platform for endometriosis, co-created with the endometriosis community.

Material and Methods: The process, impact and outcome evaluation framework was used to evaluate EndoZone in a pre-test /post-test study design. The pre-test survey was sent before EndoZone was launched. Participants were asked to use EndoZone for 12 weeks, after which, a post-test survey was sent. Statistical analysis was carried out in SPSS. Paired sample t-tests were used to ascertain the difference between the pre-test and post-test results.

Reach, usage, and participant satisfaction were assessed for process evaluation. Knowledge of endometriosis and pain self-efficacy were assessed for impact and quality of life for outcome.

Results: EndoZone reached 4,000 users globally during the 12-week study period. A total of 104 people participated in the evaluation from Australia. A third of participants used the platform 1-3 times during this time. Participants most commonly used the platform to obtain information about treatment for endometriosis (n=73), self-management strategies for physical well-being (n=67) and psychological well-being (n=53). The majority of participants (70.2%) were satisfied with the overall quality of EndoZone. A statistically significant improvement in knowledge scores (mean 0.61, SD 2.4, $P = 0.013$), pain self-efficacy (mean 2.7, SD 9.5 $P = 0.009$) and the overall quality of life scores (mean 3.9, SD 13.9, $P = 0.010$), was seen after using the EndoZone platform.

Conclusions: The positive change in knowledge, pain self-efficacy, and quality of life in those affected by endometriosis supports the use of EndoZone as a health promotion tool. EndoZone's global reach, positions it as a valuable digital resource aimed at promoting health and awareness amongst the international endometriosis community.

Chronic Health.

Craig M Becker

Introduction: To thrive means to grow or develop well to enable participants to prosper, flourish, and succeed. As research from professionals such as Lester Breslow has documented, best results ensue from the cumulative effect of engagement in multiple health-causing actions. He has also shown how Public health has moved from efforts to control infectious diseases to efforts to control chronic diseases. Now, instead of controlling problems, he suggests our current era aims to maximize health so it can be used as a resource for living. The key to helping society thrive will be transitioning toward chronic health, a “persistent, positive condition enabled through engagement in health-causing actions.” Despite the problems associated with chronic diseases, such as high healthcare costs, inadequate access, poor outcomes, and the need to treat them, research has shown that efforts aimed at only eliminating problems alter behaviors as predicted by Risk Homeostasis Theory (RHT). RHT predicts automatic behavioral adaptations will shift rather than eliminate risks to maintain a subconsciously acceptable level of risk (i.e., risk homeostasis). Chronic health uses approach strategies to support and encourage health-causing actions.

Material and Methods: This presentation will teach how to approach the multidimensional research findings that demonstrate creating environmental conditions conducive to chronic health. After learning about the Paneugenesis Process, participants will engage in a participatory activity to develop a chronic health plan that can be applied in many settings. Through an interactive role-playing exercise, participants will engage in a program planning and environment-creating activity using Paneugenesis that can generate thriving outcomes. The activity will address the seven interrelated dimensions of the Paneugenesis model to create unique, tailored programming for worksites, communities, and more.

Results: Participants will see how an environment that fosters chronic wellness would also effectively treat and attenuate problems caused by chronic disease(s). Participants will leave with measurement strategies to document progress toward chronic health.

Conclusions: The activity will first guide participants in discovering and clarifying what it means to be thriving and then how to use this information to design an environment that facilitates chronic health.

Serendipitous Health.

Craig M Becker

Introduction: The 2nd Law of Thermodynamics suggests things move toward chaos. Despite this, good chance events happen. These events are Serendipity, a word coined by Horace Walpole in 1754. Although serendipity is associated with surprising discoveries such as penicillin, we can increase the probability of serendipitous health events. This presentation will discuss how to cause serendipitous health. Serendipity must be understood for it to be helpful. Serendipity's full definition explains how good events, such as discoveries, occur by accident AND sound judgment and perception. Increasing serendipitous health over a lifespan will be associated with better judgment and perception, a likely outcome of effective education. The Heuristic Systematic Model (HSM) and the Elaboration Likelihood Model (ELM) explain that effective education happens when people actively engage with information. Specifically, helping people engage systematically and peripherally will be explored to increase the likelihood of serendipitous health gains. Malcolm Gladwell's book explained a similar phenomenon in "Blink." As was noted, people can trust their gut after they develop the requisite expertise. While there is no way to guarantee a desired serendipitous outcome, evidence indicates the probability of it occurring can be increased just as we can make it more likely someone can become a high performing "Outlier." In other words, while luck plays a role, serendipity is not entirely reliant on luck. This presentation will explore how to make a serendipitous health outcome more likely.

Material and methods: Using successful examples, such as how Steve Jobs at Apple made creativity more likely from their designed work environment, participants will iteratively develop plans to create a health-promoting environment that makes serendipitous health more likely.

Results: Participants will hear about research supported tools and methods to increase the chance of serendipitous health and methods to measure and document its occurrence. Techniques will also be provided to enable data to be collected about how to continually improve the environment to make serendipitous health more likely in the future.

Conclusions: Participants will leave with research supported information about environmental designs that can make Serendipitous Health more likely.

Finding common ground: how faith-health partners work together.

Elizabeth Boutros

Introduction: Faith communities engage with people across the lifespan and are often interested in promoting holistic wellbeing for all ages. Collaborations between health and wellbeing advocates, and faith communities, have the potential to increase the health of communities through meeting local wellbeing needs, and by addressing some of the social determinants of health. There is a need to better understand what makes collaborations between these different sectors work, or not work. This presentation will outline some of the needs being addressed by collaborations in two cities and explore some of the facilitators and barriers to partnership with faith communities.

Material and Methods: Semi-structured one-to-one interviews are being conducted with those involved in faith-health collaborations that seek to improve community health and wellbeing in Melbourne, Australia and Sheffield, England.

Results: Preliminary results show that these collaborations are currently addressing a range of health and wellbeing needs. Potential partners are often chosen with care, and shared goals or values between partners are seen as important to the establishment and maintenance of partnerships. In addition, participants described how local, national and international contexts influenced their collaboration and the needs they addressed.

Conclusions: Partnerships for health and wellbeing involving faith communities are currently active in meeting needs in their local areas. Understanding what is important to collaborators can help empower local collaborations, as well as increase the sustainability and capacity of these important health promotion partnerships.

Measuring mental health promoting behaviors – Development and validation of a scale to measure ABC-behavior.

Meilstrup, Charlotte Bjerre; Nielsen, Line; Nelausen, Malene Kubstrup; Madsen, Cecilie Schacht; Koushede, Vibeke

Introduction: To counteract the decline in mental health in Denmark and other countries worldwide, there is a need for a holistic approach and emphasis on mental health promotion in addition to treatment and prevention. The ABCs of Mental Health (the ABCs) is the first universal research-based framework for mental health promotion with three overarching domains: A) Act - Do something B) Belong - Do something with someone C) Commit - Do something meaningful. The overall aim of the ABCs is to promote public mental health through information and enhancement of mental well-being literacy. Several scales aiming to measure mental health concentrate on assessing psychological symptoms. However, as mental health is more than the absence of symptoms, there is a need for measuring positive aspects of mental health e.g. mental health promoting behaviors. The aim is to develop and validate a scale for measuring ABC-behavior e.g. how often and to what extent individuals carry out behaviors within the Act-Belong-Commit domains that can lead to better mental health.

Material and Methods: Based on the ABCs two scales for measuring ABC-behavior was developed; one including only the three domains and one including sub-questions within each domain. Both scales are brief, making them suitable for inclusion in larger national surveys. They were embedded in a large national survey among 18+ years-old (N=127.000). An initial face validation was carried out through telephone interviews with respondents (N=300) in a pilot survey. Statistical validations and correlations with other measures of positive mental health are to be carried out.

Results: The initial face validations showed that the scales were easy to understand but needed some adaptation before inclusion in the larger survey, carried out during the autumn 2023. The presentation will include results from the statistical validations of the two scales.

Conclusions: The development of a short and validated scale to measure mental health promoting behavior, can contribute to monitoring populations behavior and aid decision makers in prioritizing initiatives that promote mental health.

Monitoring the functioning of a health promotion network in the Italian context: a process perspective.

Michela Ghelfi, Luca Biffi, Sara Bernardi, Luca Piero Vecchio, Veronica Velasco

Inter-organizational networks are particularly crucial for health promotion which considers inter-sectoral strategies a core element. To evaluate networks both process characteristics and outcomes should be considered. This study aims to monitor the functioning of a health promotion network in the Italian context identifying facilitating and hindering factors. In achieving this, a participatory and multiperspective approach was used using a process perspective for evaluation.

This study consisted of different phases and methods. Questionnaires were distributed targeting the members of the operative level of the local network, while interviews were conducted with network managers. Descriptive and thematic analyses were conducted.

Quantitative and qualitative results were merged and integrated. Several indicators result in being crucial for network functioning. In general, process indicators resulted in being strictly interdependent. The context in which the network is embedded plays a significant role in facilitating or hindering the achievement of network objectives. One of the main critical aspects was a lack of a clear and shared definition of roles and their responsibilities in the network, which this research contributes in reaching through members' participation.

This study enabled an in-depth study of indicators that are particularly critical to the functioning of this type of network for which specific interventions could be implemented. This could be the first step for the implementation of a subsequent longitudinal study.

Storytelling as patient education among psychotic patients in a rehabilitation program.

Márk Komóczy, Edit Sipos, Karolina Kósa

Patient education is a planned interactive process of communication to improve health literacy and life skills for better decision making, but as opposed to health education, it is aimed at patients suffering from specific diseases. Patient education is challenging with schizophrenic patients all of whom are impaired in their cognitive functions that hinders verbal comprehension, reasoning and judgment. However, schizophrenic patients can be treated by various means, and many achieve an acceptable level of functioning especially if they enter rehabilitation and/or join patient groups.

Social workers and relatives in a Northeastern city of Hungary established a civil organization with the specific goal of rehabilitating and employing schizophrenic patients. Patients or relatives resident in the city and not in acute and/or inpatient care who wish can join as members.

The organization received funding for a patient education program that included various units such as metacognitive training, education on issues related to psychiatric medication, and patient education. The latter was designed in the form of storytelling, chosen because it provides an easy-to-comprehend form of learning compared to the carefully constructed scientific abstractions of formal presentations. 4 sessions of 90 minutes were planned during 4 weeks. Each session starts with the moderators telling a story (one from Greek, another from medieval mythology, a contemporary story of a nonmental patient in modern healthcare, and a fantasy tale of human transformation). Stories are told in the colloquial, avoiding medical jargon, technical terms, or references to mental illness, after which the patients ask questions, share their thoughts, feelings, and personal stories generating a lively discussion.

Before the first session, patients were asked to answer voluntarily and anonymously questions about their demographics, life satisfaction, self-efficacy, sense of coherence, pathological distress, last hospitalization, and membership in the organization. Significant positive correlation was found between self-efficacy and sense of coherence, significant negative correlation was detected between self-efficacy and pathological distress. Based on a brief evaluation questionnaire filled afterwards, 84% of participants after the first, and 100% of participants after the second session wished to participate in the next session that will take place in December 2023.

Rural health promotion during the pandemic in a network of empowered nonprofessional health workers (health mediators) in Hungary.

Karolina Kósa, János Sándor

A model programme was implemented in Hungary between 2013 and 2017 to increase access of disadvantaged population groups to primary care and preventive services by creating group practices in some rural communities. These employed – among others – nonprofessional health mediators recruited from the serviced communities to facilitate access of the local communities, including its vulnerable Roma members to all healthcare services. Health mediators received trainings organized by one entity of the consortium that directed the Programme. Health mediators became valuable members of the group practices who not only contributed to local health promotion programs and increased access to primary and preventive services but also improved their own health.

Many health mediators became unemployed after the programme. In order to use their capacities, the entity responsible for their training in the model programme submitted and won a governmental tender to establish a network of health mediators in 2020 in six rural settlements, primarily recruiting mediators with previous work experience. 2 mediators per settlement were employed half-time whose work was coordinated by professional health visitors or community workers of the same settlement. Each team received a brief epidemiological report specifying the least favourable health indicators of the settlement compared to the national average that was used to develop a local health promotion plan taking into account other local problems and resources. All team members received training in health mediation and were equipped with tablets with health education materials. Teams submitted monthly work reports; weekly online meetings provided a forum for discussing activities, and for presentations in relevant topics by invited guests.

All teams organized local group meetings on healthy nutrition, contraception, provided educational support for children struggling in school, distributed plants for gardening, organized sport events and local cleanups of illegal waste, and played a crucial role in facilitating the uptake of Covid-19 vaccines by explaining the symptoms of the infection, the benefits of vaccination, scheduling vaccination delivery, and even escorting some to the GP office. As a result, vaccine uptake in the network villages in one year was no different from the national average among those over 60 years of age.

A study on communication of the elderly by means of upper limbs.

Xinru Zhu, Kayoko Nohara, Giorgio Salani, Toshifumi Taniguchi, Yaotian Ai, Chihiro Wada, Ayano Nagata

This study examined the relationship between physical movement and communication with others among elderly people, late 60s to 80s, in day care facilities. We focus on their movements of the upper limbs, which receive relatively little attention compared to the lower limbs and the trunk, which are more eminently important for walking. We attempted to find some posture and movement patterns characteristic of the elderly in such situations as eating (communal eating Nakagawa 2010) or communicating with others, playing a board game, and drawing with friends.

The Sense of Coherence (Antonovsky 1979) value of an individual measured by the scale is of great significance in accessing their mental and physical states while there are aspects that do not emerge through the measurement as it is important to examine their actions and the social implications in their interactions with others without necessarily being conscious of them. Our investigation consisted of eight surveys conducted over a period of one and a half years on different groups of subjects in collaboration with MIZUNO Co, the Japanese athletic commodity manufacturer. Behavioral observation has been conducted using ethnographic techniques: (1) notes, sketches, etc. were taken real time; (2) video and audio recordings were made, and the research group later observed and discuss the correlation between the behaviors. Also the Modified Grounded Theory Approach analysis method (Kinoshita 2003) was utilised for qualitative analysis of the data obtained. Ultimately, the results were combined to determine the relationship between specific movements and communication, as well as the social implications of those movements and the symbolic nature of such behavior patterns in older adults. In the transitional phase of aging, the characteristic communication system using the upper limbs has observed as a socially relevant part of their daily story-constructing and may be the lifeline through which they share them in the community.

Empowerment, anxiety and stress levels among patients after cardiological incidents - a pilot study

Jarosław Dudek, Jarosław Rakoczy, Katarzyna Glibov, Katarzyna Tomaszewska, Anna Zalewska-Janowska, Robert Irzmański, Magdalena Wrzesińska

Introduction: Stress and anxiety can have an unfavorable impact not only on the overall functioning and well-being of patients after cardiological incidents, but also on the progress of therapy. Therefore, it is crucial to reduce negative stress and anxiety levels, and improve the quality of life of patients in order to facilitate diagnosis, treatment, and rapid recovery. The goal of this study is to verify determinants of psychosocial functioning of patients after cardiological incidents and develop a direction for interventions that can utilize patients empowerment and health awareness to improve the quality of life and well-being, as well as build patient engagement in the treatment process.

Material and Methods: The pilot study involved 33 people (12 women and 22 men, aged 42 to 79) after cardiological incidents who took part in cardiac rehabilitation in the inpatient clinic. All patients were examined during admission by using: Perceived Stress Scale (PSS-10), State-Trait Anxiety Inventory (STAI), Psychological Health Empowerment Scale (PHES).

Results: The average score on the PSS-10 was 17.5, what corresponds to the midpoint of the scale. The average score on STAI was 39.6 (state dimension) and 43.3 (trait dimension), both indicating an average level of anxiety. The mean scores on the PHES were as follow: 17.8 (Meaning), 15.7 (Competence), 14.9 (Self-Determination), 16.2 (Impact). It was revealed a significant negative correlation between PHES subscales: Competence, Self-Determination and anxiety state in STAI ($p > 0.001$).

Conclusion: Results suggest that individuals who experience greater psychological health empowerment tend to have lower levels of anxiety, highlighting the potential benefits of promoting psychological empowerment as a strategy for reducing anxiety in individuals after cardiological incidents.

Psychometric characteristics of the Serbian version of the Newest Vital Sign test.

Zora Četković, Dušanka Krajnović

Introduction: The Newest Vital Sign (NVS) is a short and simple health literacy (HL) instrument for assessing comprehension and numerical skills. It consists of 6 questions that assess an individual's ability to understand and interpret a nutrition label, and has been proven to be efficient in different settings as well as when applied among patients. We aimed to generate a linguistic equivalent of the NVS in the Serbian language and examine its psychometric characteristics.

Material and Methods: We followed the Translation Integrity Procedure guidelines to translate and culturally adapt the questionnaire to Serbian, using the Croatian version developed by Brangan et al. We used forward and backward translations, review by an expert panel, and cognitive interviewing. Internal consistency of the scale was assessed on a convenient sample of orthopedic patients. HL scores were correlated to participants' socio-demographic characteristics.

Results: Cognitive testing (N=15), conducted in order to provide information about understanding, clarity and relevance of the questions, revealed that questions regarding quantitative literacy assessment were considered to be lengthy and required concentration, but needed no further modifications. Validation study included 120 patients (64% males, 27% over 50 years of age, 19% retired, 65% with tertiary education (more than 12 years of education), and 23% with self-reported chronic condition). The majority of patients perceived their economic status as very good or good (75%), as well as their general health (83%). Only 37% of patients had inadequate HL level (scores less than 4), and mean NVS total score was 3.41 out of 6. Age, gender, area of residence, marital status, educational level, employment and economic status and self-rated health were not significantly correlated with the total HL scores ($p > 0.05$). The internal consistency of the Serbian version of the NVS was acceptable (Cronbach $\alpha = 0.71$).

Conclusions: Although we included a relatively small sample size, it was demonstrated that the NVS is a valid screening tool and could be implemented into fast-paced clinical practice.

Acknowledgements: This research was funded by the Ministry of Science, Technological Development and Innovation, Republic of Serbia, through a Grant Agreement with the University of Belgrade -Faculty of Pharmacy No: 451-03-47/2023-01/ 200161.

We would like to thank prof. Brangan for her permission to use NVS-HR; see reference Brangan S, Ivanišić M, Rafaj G, Rowlands G. Health literacy of hospital patients using a linguistically validated Croatian version of the Newest Vital Sign screening test (NVS-HR). PLoS One. 2018 Feb 15;13(2):e0193079.

The Influence of Job Resources and Demands on Burnout and Work Engagement of Italian Teachers: “the HBSC – Lombardy Teachers” Survey.

Stefano Delbosq, Luca Piero Vecchio, Gruppo HBSC Lombardia 2022, Marta Branda, Veronica Velasco

Schools are complex organizations, characterized by a high workload, multiple demands and a constantly changing environment requiring collaboration between different stakeholders, such as families, school staff, local communities, and public institutions. Teachers face these challenges on a daily basis, and they are, together with students, at the heart of the school setting. Interfacing with normative and organizational requirements, job overload, the adoption of new roles and responsibilities and the relationship with students, families, co-workers, and the school principal can represent a toll on their well-being (Ferguson et al., 2012; García-Carmona et al., 2019). It appears therefore vital to investigate their health and well-being conditions, as well as the underlying psychological and organizational process leading to them.

This research aimed at investigating the relationships between personal and job resources and demands with well-being outcomes in the workplace. This study is part of the larger research project “HBSC – teachers” realised in Lombardy (Italy), surveying work and health conditions in middle and high school teachers. All teachers of the classes sampled to participate in the international study “Health Behaviour in School-aged Children” were invited, leading to a sample of over 5000 teachers. The survey included measures such as burnout dimensions, work engagement, work satisfaction, working conditions, self-efficacy, teacher roles, centrality of work, presenteeism, and perceived health.

In line with the Job Demands-Resources Model, this study proposes multiple regression models to explore the psychological and organizational factors leading to the well-being of teachers in the workplace by using a representative regional sample of middle and high school teachers. Preliminary results highlight significant correlations between work engagement and job resources (such as self-efficacy, centrality of work, teacher roles, and support from the school principal), as well as similar results for burnout dimensions. Knowledge about the processes leading to these workplace outcomes may inform health-promotion interventions, fostering well-being within this occupation, which is often overwhelmed by the demands of the work environment.

Lifestyle advice from health workers in Kosova-Population based study.

Sanije Hoxha-Gashi, Musli Gashi, Rina Hoxha, Valbona Zhjeqi, Myvedete Tershnjaku, Fatime Ukaj, Pranvera Krasniqi, Ajkuna Hoxha

Introduction: Lifestyle-related diseases are on the rise, and noncommunicable diseases such as cardiovascular disease, cancer, and diabetes have reached pandemic proportions around the world. Healthcare personnel play an important role in health promotion and lifestyle information to patients as well as the population. This study aimed to evaluate the lifestyle advice for chronic diseases risk factors from health workers among Kosova adults

Material and Methods: A population-based survey was conducted among people aged 18–69 years from April 2018 to June 2019 using the WHO STEPs instrument. From 2800 randomly selected households, 2695 agreed to participate in the survey (response rate: 96.2%).

Results: Last year, 43.1% of respondents were informed by a health worker of the dangers of smoking and advised to stop, or not start, using tobacco products. More than half the population (55.8%) had received advice over the previous year from a health worker to reduce dietary salt consumption. Approximately two-thirds, meanwhile, had been advised to reduce fat in the diet (61.1%); to do, or start doing, more physical activity (67.6%); to maintain a healthy body weight or lose weight (64.5%); or to eat at least five servings of fruits and vegetables daily (71.5%). Advice to decrease salt consumption, to reduce fat in the diet, to increase physical activity, and to maintain a healthy body weight or lose weight was given increasingly with age to women but not to men. All other differences between the sexes were not significant.

Conclusions: The low rate of lifestyle advice reported by Kosova adults implies that more preventive advice should be provided in health care settings in country.

Professional competencies for health promotion – an unknown competence and a missed opportunity for public health in southern Sweden!

Åsa Bringsén, Cássandra Winther, Marie Felix, Petra Nilsson Lindström

Introduction: Health promotion expertise have been graduating with a bachelor's degree, since the beginning of 2000 in southern Sweden, as a response to various challenges hindering a positive development of social sustainability and public health. The competencies need to be put into practice for a possible positive effect, but alumni have expressed challenges in getting a job in health promotion. Surveys have therefore been used to explore the experiences of alumni regularly.

Material and methods: A survey, with standardized and open-ended questions, was sent to all alumni three years after graduating with a bachelor's degree in health promotion and education. The questionnaire focused on current employment, experiences of working life and education. The response rate was 53% (n=19), 89% were female, 95% had Swedish as first language and age varied between 26-51 years.

Results: 89% of the participants had an employment and 33% worked in municipality, 33% in private sector, 21% in government service and 11% on regional level. The findings showed that 42% had a qualified employment in health promotion and 21% had a qualified employment without focus on health promotion.

The alumni had generally a positive experience from their education which had contributed to their personal and professional development. Most of them felt proud of their education, recommended the university, and felt being well prepared for health promotion work in practice. The findings also show, however, alumni having difficulties navigating the labor market, and receiving an employment in health promotion. Alumni expressed how employers lacked knowledge and awareness of their competencies and preferred well-known competencies like social workers or nurses.

Conclusions: The findings indicate that health promotion professionals are somewhat used but an underused competence in southern Sweden. These results can be related to a lack of legislation and structure regarding health promotion in practice, which relates to the traditional organization of the Swedish welfare system, and a lack of knowledge and awareness of health promotion as professional competencies for the labor market. Multiple efforts are therefore called for if health promotion is to be a professionally driven, systematic and sustainable resource for public health in the region.

Occupational Health and Well-being in the European MENTOR+ Project: A Cross-Country Survey Analysis.

Ioanna Zygouri, Depsoina Lazarou, Archontoula Dalma, Pania Karnaki

Introduction: This study, conducted within the MENTOR+ Project, an EU Erasmus+ co-funded initiative, explores occupational health and well-being among teleworkers in Spain, Italy, Greece, and Romania. The current study focuses on determining user requirements by examining management involvement, organizational health, workplace hazards, and psychosocial factors aimed at providing insights into teleworking environments and their impact on overall well-being.

Material and Methods: Focus groups among 117 participants from different occupational sectors in the consortium's four countries were organized. Demographic variations, such as gender, age, and sector-specific characteristics, were analyzed. The FGs discussed physical activity, dietary perceptions, stress levels, and absenteeism. Additionally, management and team leader involvement in Occupational Health and Safety (OSH) was discussed, as well as the adoption of measures to address psychosocial issues. Both psychosocial and ergonomic workplace risks were explored.

Results: The findings reveal variations influenced by sectors, including gender distribution, age groups, and prevalent industries. Commonalities included the absence of nutritional advice, prevalent stress, and insufficient physical activity. Weaknesses in management and team leader involvement in OSH were noted, emphasizing a lack of training in telework-related OSH aspects. Mental health assessments for teleworkers were reported as insufficient, particularly in Spain, Italy, and Greece. Psychosocial risk factors revealed time pressure as a common concern, while ergonomic risks, notably concerning prolonged sitting, varied. Health complaints included back, neck, and shoulder issues across all countries. Although commonalities existed in implemented psychosocial measures like empowering workers and reducing demands, challenges arose from obstacles such as telework-specific training deficiencies and a lack of expert knowledge.

Conclusions: The study highlights critical areas necessitating intervention, including nutrition, stress prevention, mental health assessments, and universal OSH training for management and team leaders. Additionally, specific attention is warranted for developing tailored programs designed to address the unique needs of teleworking. The MENTOR+ initiative can contribute significantly by implementing tailored interventions to enhance the well-being of teleworkers, addressing the specific challenges identified in the survey results.

A Roundtable on Developing Global Settings for Health Promotion.

Michelle Baybutt, Sami Kokko

Objective: to facilitate a 90-minute workshop exploring contemporary perspectives for developing the settings-based approach and to detect new global settings for health promotion.

Learning Goals:

- to develop greater understanding of new and contemporary settings
- identify innovation and good/best practice in settings, and transferability between settings
- understand support and training needs of practitioners working in settings globally

Activities: 4 x 15 minute presentations with participant interaction, followed by facilitated round table discussions to meet the learning goals.

The healthy settings approach has been evolving for over thirty years amidst different interpretations and ideological understandings of what the approach is and what it means in practice. The emphasis has tended to focus on traditional institutional settings such as schools, cities and hospitals, with new/contemporary and often non-traditional ones being less recognized. The implementation of the settings-based health promotion has varied significantly (between settings and between regions) with some working with comprehensive and dynamic aims and means, while others have been limited and static—the latter representing more “health promotion in settings,” rather than being more comprehensive and holistic settings-based health promotion.

The publication of the Handbook on Settings-Based Health Promotion (2022) built on the previous influential work by Green et al (2000) and sought to provide some clarity on these complex issues. The handbook explores how the settings approach to health promotion strives for change in the structure and ethos of the setting—detailing how changes and developments in people's health and health behaviour are easier to achieve if health promoters focus on the environments (settings) where people live their lives rather than on the individuals themselves.

This roundtable builds on work at the 10th Nordic Health Promotion Research Conference which explored participants understandings of the settings approach, garnered mainly Nordic examples of practice. This roundtable will utilise these perspectives to focus on generating new consensus of contemporary settings-based practice with global relevance.

These interpretations will be used to develop future symposia and learning events with the IUHPE Global Working Group for Healthy Settings to engage global collaborators with settings-based health promotion.

Professional identity formation of health promotion practitioners in Switzerland.

Verena Biehl, Andrea Glässel, Karin Nordström, Frank Wieber

Professional identity (PI) is a central aspect in workforce capacity building. Persons who strongly identify with their profession better adopt their professional role, share common values, and therefore raise the quality of the professional practice. In the field of health promotion (HP) little investigations have been made to analyze PI formation of HP practitioners.

In Switzerland, the first undergraduate program in HP and prevention started in 2016 with the explicit aim of training HP practitioners with a clear PI. The program was designed based on the CompHP-Core Competency Framework for HP. Since the program start in 2016, a mixed method study building on Social Identity Theory has been conducted to evaluate the PI formation of these undergraduate students. Within a longitudinal qualitative study focus groups were conducted with first- and third-year students to understand their perspective of PI formation as HP practitioners. The data was analyzed using thematic analysis. Furthermore, an online survey was used to gather data on PI formation of first-, second-, and third- year HP students. The data was analyzed by calculating mixed effect regression models by using SPSS.

The findings indicate difficulties of HP undergraduate students at the beginning of the program to grasp the professional profile of HP practitioners due to its complexity. However, the profile becomes clearer over the study course. A six-month internship within the undergraduate program helps the students to get a clearer understanding of the professional roles and competencies. A further central finding is that the perceived low societal recognition of HP practitioners negatively influences PI formation.

Several indicators were found, which could promote PI formation of undergraduate HP students. Universities and professional associations should further invest in public relations for HP and strengthen the visibility of the professional profile of HP practitioners. Furthermore, the complexity of the professional profile should be proactively addressed in training curricula. For this purpose, didactic tools such as problem-based learning or networking opportunities have shown to contribute to PI formation. Promoting PI formation of HP practitioners can add an important aspect to workforce capacity building and strengthen the professional practice of HP.

Challenges for multilevel governance of health promotion in a federal country – the case of Switzerland.

Pin Stéphanie, Monod Stéfanie, Grandchamp Chantal, Courvoisier Nelly

Introduction: Switzerland is a federal and multicultural country made up of 26 cantons with extensive powers, particularly in the field of health promotion (HP). This governance between several political levels raises questions about the ability of HP actors to respond to common challenges, to conduct cross-sectoral policies and actions, and to integrate cross-border issues from a OneHealth perspective.

Material and methods: The study is part of a broader study of the governance of the Swiss healthcare system. The Health System Performance Assessment framework (HPSA) was used to analyze 4 subfunctions of governance: policy and vision; legislation and regulation; stakeholder voice; information and intelligence. Data provided from by a review of the literature; interviews with experts on the Swiss healthcare system; and workshops with stakeholders.

Results: Despite several unsuccessful attempts, there is no general federal law on health promotion. Although there is a national health strategy setting out the objectives for health promotion and health in all policies, it is not compulsory: each canton develops its own health promotion strategy, according to its priorities, its resources and the HP actors present in the area. Cross-cantonal and vertical coordination and support do exist, but only on certain issues, resulting to a lack of coherence between national, cantonal and local strategies. This makes it difficult also to develop a global approach to public health, acting on all determinants of health, bearing in mind that the institutional decision-making levels vary according to public policy. Industrial and professional lobbies are moreover influent in decision-making process, and there is little user involvement in the development, implementation and evaluation of HP programs at cantonal and national level. Data information system is incomplete, especially on social inequities and health.

Conclusions: Swiss decentralized system offers the opportunities to respond to the health needs of local communities and to facilitate their participation. However, it seems necessary for the HP actions to be part of a coherent national framework that sets out common objectives, promotes the integration of health into the various public policies and facilitates coordination between a wide range of public and private actors at all levels of governance.

Filling a Gap – A Case Study in Building Advocacy Capacity in the Australian Public Health Workforce.

Melissa Stoneham, Lee Collier, Jacqueline Napolitano, Meg Scolyer, Christina Pollard

Introduction: Public health advocacy is a fundamental part and key competency of health promotion practice. However, gaps exist in the provision of public health advocacy knowledge and skill acquisition in both the Australian tertiary environment and within ongoing professional development programs. Across several regions in Victoria the health promotion workforce is engaged in a community-based systems dynamics approach to understanding the complexities of, and addressing, childhood obesity. If staff are to affect systems change, they need to know how to advocate for systems change. Two regional health organisations (GVPHU; Gateway Health) partnered with the Public Health Advocacy Institute (PHAI) to address this gap. PHAI developed and facilitated a series of face-to-face advocacy workshops to build the capacity, skills, and knowledge of advocacy within the health promotion and to enable the integration of advocacy into everyday work. This case study outlines the process and its impact six months post workshops.

Material and methods: Two public health units serving 17 local government areas commissioned the PHAI to conduct advocacy training. PHAI developed interactive, action-focused public health advocacy workshops to strengthen the workforce and build healthier communities. Forty-nine health promotion workers participated in training to enable them to lead an advocacy project that aimed to promote state-wide initiatives. This involved a series of face-to-face skills-based public health advocacy workshops and post-workshop online e-mentoring. The workshops were based on PHAI's Advocacy in Action toolkit.

Results: Three skills-based public health advocacy capacity-building courses were held in 2023 in Victoria. Two workshops targeted health professionals, and the other was focused on community members. Following the workshops PHAI offered e-mentoring sessions for up to five campaign advocacy groups. Results included the creation of a diverse range of locally relevant public health advocacy projects, increased self-reported skills and confidence in conducting advocacy and an ongoing community of practice.

Conclusions: This case study demonstrates that many health promotion professionals are interested to learn how to integrate advocacy into their mainstream duties, and when offered the opportunity, are enabled to forge local partnerships, coalitions and projects to progress locally relevant advocacy.

Building Organisational Capacity for Holistic Health Policy and Systems Research Institutions (HPSRIs): Insights from a Mixed-Methods Study in the Philippines.

Harvy Joy Liwanag, Annika Frahsa

Introduction: While there is growing recognition of the important role of Health Policy and Systems Research Institutions (HPSRIs) in advancing the evidence-policy cycle, there is a need to understand their multiple functions and capacities to better inform organisational capacity building efforts. This study aimed to identify and define the organisational attributes of HPSRIs in a middle-income country setting, with a focus on creating a holistic framework for capacity building. The purpose was to inform national level efforts in enhancing the organisational capacities of HPSRIs to contribute effectively to the development of healthier societies.

Material and Methods: Conducted in the Philippines, the mixed methods study involved a literature review on HPSR capacity building and in-depth interviews with 33 managers of HPSRIs representing various stages of the evidence-policy cycle (academia, 11; research, 9; funders, 6; practitioners, 5; policymakers, 2). Interview transcripts were analysed using the Framework Method. We then conducted a workshop with 12 purposively-selected participants with diverse experiences in capacity building in the health sector (ministry of health, 3; international consultants, 2; academia, 2; private research institutes, 2; human resource development, 1; research funding agency, 1; local health office, 1) to develop a framework for assessing HPSRI capacities. The framework was subsequently applied in a survey to map and assess the capacities of HPSRIs in the country.

Results: HPSRIs were defined as organizations engaging in HPSR, as outlined by the World Health Organization Alliance for HPSR. The framework for holistic HPSRIs comprises four domains with two core attributes for each: Research Expertise (excellent researcher, capacity-building driven); Leadership (efficient administrator, financially sustainable); Engagement (co-creative and participatory, influential convenor); and Influence (policy-relevant, effective communicator). Out of 263 organizations surveyed, 40 were identified as HPSRIs, with 26 being university-based primarily focused on Research Expertise and only 15 reporting activities in Influence.

Conclusions: Findings are being used in collaboration with the Philippine Ministry of Health to develop an organisational capacity building program for HPSRIs. The insights also hold relevance for high-income settings. The study has emphasised that, for HPSRIs to effectively contribute to healthier societies, capacity-building efforts must extend beyond research expertise to encompass holistic organisational attributes.

Addressing Health Disparities: Comparison of Predictors of Health among Adults Living with and without Physical or Psychological Disabilities.

Grace Katharine Forster, Monica Lillefjell, Professor, Sobah Abbas Petersen

Introduction: People with physical and psychological disabilities face some of the greatest health inequities in modern society. Understanding opportunities for health from a multifactorial perspective is important to develop evidence-based strategies to promote health and strengthen community action, especially for people in vulnerable situations. Few studies have focused on explaining intersectional differences in relationships between environmental and participatory factors and health among populations with different disability types and severity. This study aims to explore differences in associations between environmental, perception and participation factors, on self-rated health among middle-aged adults with and without physical or psychological disabilities.

Material and Methods: Data stem from the fourth wave of the Trøndelag Health Study 2019, using a sub-sample of participants aged 45-64 years (N=38 246; mean age=54.4). Predictors, including built environment (public transport, paths, services, facilities, nature, and urban green spaces), perceptions (safety and enjoyment) and participation (community, artistic, outdoor activities, and sports), were regressed in self-rated health in a hierarchical model whilst controlling for demographic and socioeconomic confounders. Predictors of self-rated health among sub-groups with slight, moderate and severe physical or psychological disability, and those who reported no disability were identified.

Results: Among those reporting severe levels of disability, fewer significant predictors were observed and explained higher variance of health, compared to those with lesser severity or no disability. Employment, accessible public transport and nature spaces, and participation in outdoor activities and sports emerged as consistent predictors of health across groups. Contact with nature, including urban green spaces, displayed a stronger relationship with health among people with psychological than with physical disability.

Conclusions: Results suggest that the influence environmental and participation factors have on health varies among adults with physical and psychological disabilities, and with different severities. More severe disability indicated access to fewer health-relevant resources. Findings imply that a renewed focus on environmental assets and opportunities for participation for improved health among people with physical and psychological disabilities may contribute to reduce health inequities and contribute to better health outcomes in the target population.

Cooperative planning as a mechanism of structural change in health promotion.

Jana Semrau, Alfred Rütten

Introduction: This presentation introduces a cooperative planning approach as an innovative practice of community action that functions as a driving force for changes in both everyday life practice (e.g. creating healthy environments) and political practice (e.g. developing healthy public policies). The aim is to show how a “cooperative planning”-approach works as a mechanism of structural change.

Mterial and Methods: We apply a theory-based conceptual model that covers fundamental dimensions of health promotion action and position cooperative planning as a driving force within the model. Data from a case study are used to explain how health-promoting structural change can be achieved through this collaborative intervention approach.

Results: Cooperative planning takes into account the intervention context and the participation of relevant stakeholders as “inputs”. The “process” itself is participatory, collaborative and moderated towards concrete actions. The „outputs” of cooperative planning are various measures implemented to improve both everyday life practice (e.g. through infrastructure development) and political practice (e.g. healthy public policies). We distinguish the effects of cooperative planning on individuals and populations (e.g. enabling of participating stakeholders) as „outcomes” from the structural effects that we call „impact”. The latter refers to changes in rules and resources that underlie social practice. For example, those “structural changes” are decipherable from the changed patterns of behavior and social interaction that different stakeholders employ as new or modified routines in their everyday life practice.

Conclusions: The cooperative planning approach has been proven an effective mechanism of structural change in certain case studies. Future research and application should further test and develop this approach on a broader basis and in new application areas.

The Limitations and Potentials of Economic Evaluations in Community-Based Health Promotion: A Critical Review.

Philipp Weber, Leonie Birkholz, Riccarda Straub, Simone Kohler, Natalie Helsper, Lea Dippon, Klaus Pfeifer, Alfred Ruetten, Jana Semrau

Introduction: Community-based health promotion (CBHP) interventions are a promising approach to addressing complex public health problems. Nevertheless, economic evaluations in the field of CBHP pose unique challenges, specifically with regard to precisely assessing intervention costs and outcomes, as well as considering political-level changes and health equity. This review aims to explore the opportunities and limitations of economic evaluations in CBHP, focusing on the assessment of intervention costs and outcomes, and the consideration of political-level changes and health equity.

Material and Methods: A systematic search of PubMed, Web of Science, and PsycInfo databases yielded in 5395 citations. 27 eligible publications reporting 24 CBHP interventions that mainly targeted deprived communities were identified. We analyzed these interventions, focusing on comprehensive cost/resource assessments and outcome evaluations. We determined whether the intervention components and outcomes described were located at the „operational level“ and/or the „political level“ and whether they captured quantitative or qualitative data.

Results: Only a small percentage of the identified interventions included comprehensive cost and resource assessments. The outcomes at the operational level were mostly quantitative in nature and associated with sociodemographic factors, environmental conditions, or health status. On the other hand, outcomes at the political level were typically qualitative and related to public policy, capacity building, and the development of networks or collaborations. The study findings highlight the limitations of conventional economic evaluation techniques in completely understanding the complex nature of CBHP interventions. Therefore, we explore the utilization of cost-consequence analysis (CCA) as a more inclusive method, providing a versatile and multidimensional evaluation of costs/resources and benefits. Although CCA has shown promise as a viable solution, it has certain challenges that need to be addressed. Some of these challenges include accurately measuring and valuing outcomes, considering equity issues, accounting for intersectoral costs, and attributing effects.

Conclusions: This synthesis highlights the need for more comprehensive economic evaluation methods for CBHP. Despite its potential, the findings suggest that further research and methodological improvements are necessary to enhance the CCA as a framework. We support an increased emphasis on participatory approaches, in line with current public health challenges and equity considerations.

Doing Collaborative Health Promotion Research in a Complex Setting: Lessons Learned from the COMPLETE Project in Norway.

Torill Larsen, Ingrid Holsen, Helga Bjørnøy Urke, Cecilie Høj Anvik, and Ragnhild Holmen Waldahl

Education and health are intertwined: young peoples' educational success may depend on the health-promoting conditions in school, and educational success impacts health, living conditions, social mobility, and societal participation through the lifespan. This duality underscores the school as a crucial and complex health promotion arena both in research and practice. The present work discusses lessons learned from a large collaborative whole-school health promotion research project – COMPLETE– that aimed to increase participation, equity, and educational success among upper secondary school students. The project implemented and evaluated one universal (Dream School Programme) and one targeted (Mental Health Support Team) intervention through a comprehensive collaborative process between research and practice. With the understanding of schools as “living” organisations, the project was designed with a mixed methods approach encompassing a randomised controlled trial (RCT) and a process evaluation. Based on experiences with implementation of the project we make recommendations for future similar research endeavours in the educational setting. First, RCTs with a whole-school approach aimed at psychosocial factors are challenging and must be carefully designed. The complexity of the upper secondary school organization means that many factors will not be possible to consider or control, and this challenges the strict RCT design. Second, based on a thorough process evaluation we recommend that RCTs in (upper secondary) schools must include parallel process evaluations to capture potential implementation challenges, which in turn provides valuable explanatory information about effect results. Third, combining a process evaluation with a RCT is possible as shown through the COMPLETE project, but its success depends on a well-designed project organization, inclusive of all stakeholders and with defined roles, as well as the willingness to negotiate knowledge and ethics between different stakeholders. Without the close collaboration between stakeholders and a common vision for the project, the key components could not have been implemented to the same extent. In conclusion, the COMPLETE project is a case study of how true partnerships between researchers, NGOs and educational practice fields can be constructed and maintained throughout an intensive research process.

The 500 kg weight reduction challenge: prevention of obesity by and for women with migration background.

Marleen Mares, John Dierx

Introduction: The prevalence of overweight is increasing in Breda (Brabantscan, 2022). In the Hoge Vucht, a disadvantaged area in Breda, 54% of the adults (age 18-64) has a BMI (body mass index) of 25 or more and overweight and obesity are more frequent among people with a migration background. To reduce overweight in the Hoge Vucht, the 500 kg weight reduction challenge was started by la Femme Vitaal, a voluntary organisation by and for women with a migration background in January 2023. The aim was to improve the health of especially girls and women with a migration background.

Material and Methods: 50 participants (aged 16 – 64 years) started the challenge of losing 500 kg of weight, together as a group during one year. Twice a week participants followed kick boxing or Zumba, a dietician gave dietary advice and the participants were offered 3 workshops about healthy food and lifestyle. Qualitative data were collected after 6 months by 16 structured interviews with participants in the challenge on the one hand and by semi-structured interviews with the kick boxing coach, the dietician and the organiser of the challenge on the other.

Results: Preliminary results show that the group lost 184 kg of weight. A few participants have joined a regular sports club as a result of the challenge. Other participants want to continue the kick boxing and Zumba after the project and are willing to pay for these activities. Most participants indicate that they are still struggling with a healthy diet and need more guidance from the dietician. Also, participants would like more workshops about diet and physical activity.

Conclusion: An intervention organised by and for women with a migration background seems to be effective in reducing obesity and stimulating a healthy lifestyle. For that reason, the municipality of Breda has decided to extend the grant for 2024.

Rethinking the built environment as a driver to improve physical, mental and behavioural health in custodial spaces.

Helena Pombares, Alberto Urrutia-Moldes

Architecture carries great social responsibility and that is just exacerbated when talking about prison projects. Researchers have emphasized for years the importance of the built environment on the promotion of physical, mental and behavioural health in custodial spaces.

This paper's objective is to show how the use of research-based design could guide and inform designers on how the use of salutogenic architecture in custodial facilities can promote health & wellbeing, facilitating in turn inmates' rehabilitation and help in the reintegration process. It will use data collected and case studies to show how research-based design to integrate the principles of Salutogenic design has been welcomed into prison projects.

Salutogenic architecture and ecologic design arguably improve health and wellbeing and combined, they deliver a psychosocially supportive approach to prison design. Salutogenic architecture takes an intrinsically human-centric approach, which involves creating a sense of coherence, making the environment as readable and as understandable as possible, something particularly important for people who suffer from acute mental health issues. Given that prisons have the highest concentration of mental health conditions besides hospitals, this must play a role in any prison design.

Time to join the queue. Stepping into the shoes of community food project visitors in affluent communities.

Marie E. Swettenham

Objectives: Raise awareness of challenges faced by vulnerable populations living in food insecurity within affluent areas of the UK known as “Nested Deprivation”.

Demonstrate how “the queue” empowers a subculture inclusive of additional health benefits.

Reflect on session content from the perspective of a visitor, considering how this may apply to the wider field of food insecurity, social and health inclusivity.

Learning goals: Experience first-hand how surplus food projects impact and influence the lives of those they serve.

Opportunity for conference attendees to collaborate with each other and connect with the concepts of “nested deprivation”, and social subcultures within food insecurity.

Apply the experience from stepping in the shoes of visitors to a community food project in an affluent area, to research development and personal health promotion practice.

Activities: Introduce the concept of food insecurity within affluent areas including how this applies to health promotion, and why it matters within research.

Round table discussions facilitated by the session co-ordinator, considering the dynamics of the queue journey, social benefits, the impact on community participation and positive health promotion. An opportunity to virtually visit the steps of “the queue” within the room.

Presentation of coordinators research.

Open discussion with audience discussing the impact and social application of the queue to existing food aid services, and impact on promotion participation and positive health.

Risk behaviours and factors associated with quality of life and mental health of Brazilian Federal Employees.

Isabela Fernanda Rodrigues de Oliveira, Luís Fernando Monteiro, Nicolli Godoi Pereira, Priscilla Noll, Matias Noll

Introduction: Understanding how risk behaviors affect the mental health and QoL (quality of life) of employees of the Brazilian Federal Network of Professional, Scientific and Technological Education (RFEPCT) can help develop health and well-being strategies in the educational context. The aim of the study was to assess risk behaviors and their association with self-reported QoL and mental health among RFEPCT employees throughout Brazil.

Material and Methods: This is a cross-sectional epidemiological study that took place between June and November 2022 using an online questionnaire. The following questionnaires were used: WHOQOL-bref, DASS-21, Back-PEI, PeNSE and self-reported sociodemographic. The sample comprised 1,563 participants.

Results: The results showed that females had more symptoms of depression ($p = 0.010$), anxiety ($p < 0.001$) and stress ($p < 0.001$) and lower QoL in the physical and psychological domains ($p = < 0.001$). Regular consumption of ultra-processed foods 5 to 7 days a week had a negative impact on factors related to mental health ($p < 0.001$) and QoL ($p < 0.001$). Employees who self-reported drinking alcoholic beverages for 10 days or more during the month had higher QV in the environmental domain ($p = 0.001$), but had more symptoms of anxiety ($p = 0.003$) and stress ($p < 0.001$). Participants who practiced physical activity regularly had higher QoL and fewer symptoms of depression, anxiety and stress ($p < 0.001$). Finally, respondents who spent 5 hours or more a day in front of the computer had lower QoL in the psychological ($p = 0.002$) and environmental ($p < 0.001$) domains.

Conclusion: The findings of this study have helped us to understand the self-perception of QoL and mental health of civil servants, and these findings can make them aware of the need to introduce healthy habits that will bring them greater health and well-being.

Cancer prevention and early detection among people experiencing homelessness:

Co-designing the Health Navigator Model for Europe.

Tobias Schiffler, Alejandro Gil-Salmerón, Ascensión Doñate-Martínez, Tamara Alhambra-Borrás, Miguel Rico Varadé, Jaime Barrio Cortes, Matina Kouvari, Pania Karnaki, Maria Moudatsou, Ioanna Tabaki, Igor Grabovac

Introduction: Homelessness is linked to heightened cancer-related illness and death rates due to challenges in accessing vital cancer screenings and preventive services. Addressing these barriers, interventions employing Patient Navigation and Patient Empowerment have demonstrated efficacy in bolstering healthcare accessibility for vulnerable groups. Melding key components of these approaches, this study adopted a co-design strategy to devise the Health Navigator Model for Europe – a person-centred intervention for people experiencing homelessness (PEH) aimed at reducing disparities by eliminating barriers to access and fostering better engagement with healthcare services.

Material and Methods: Employing a qualitative research approach, this study conducted focus groups spanning December 2021 to January 2022 across Austria, Greece, Spain, and the United Kingdom. Seven focus groups involving 56 participants composed of 41 professional stakeholders and 15 PEH were undertaken using structured topic schedules to guide the discussion and to ensure consistency between countries. These sessions were audio-recorded, transcribed verbatim, and subjected to thematic analysis.

Results: Findings highlighted that professionals with backgrounds in health and social care, possessing a nuanced understanding of the local user population, are ideally suited for the role of 'Health Navigators'. These professionals should be integrated into environments that are familiar and easily accessible to PEH. Their primary responsibilities encompass (1) identifying users' health needs and barriers (e.g., seeking solutions regarding barriers to care), (2) fostering cancer awareness and self-management (e.g., encouraging user involvement in health-related decisions), (3) facilitating access to healthcare services and cancer screenings (e.g., coordinating and supporting attendance of appointments), and (4) providing practical assistance (e.g., assisting with the completion of paperwork).

Conclusions: The Health Navigator Model operates within entry points of homelessness services, providing integrated care to guide PEH in navigating healthcare resources, enhancing their access to care, and ultimately, improving both general and cancer-specific health outcomes. Currently, the model is undergoing pilot implementation and evaluation across four European countries as part of the CANCERLESS project that has been funded by the EU's Horizon 2020 programme (GA 965351).

Perceptions towards the adoption of a multi-risk factors cancer prevention educational tool among European Union citizens: a multi-country qualitative study.

Ariadna Feliu, Bibiana Barrera, Adriana Boată, Amanda Drury, Paweł Koczkodaj, Patricia Pinto, Marga Pla, Ivan Tchalakov, Helena Vučković, Hajo Zeeb, Carolina Espina

Introduction: Cancer is a major public health problem. Four million new cancer cases are diagnosed annually in Europe; of which, around 40% could be prevented. The European Code Against Cancer (ECAC) is a health education tool aimed at raising awareness about risk factors and evidence-based measures to prevent cancer. It consists of 12 recommendations to reduce individuals' cancer risk and related deaths. Our aim was to explore perceived barriers towards the adoption of the cancer prevention actions recommended in the ECAC among European Union (EU) citizens.

Materials and Methods: The COM-B Model was used as a framework for the study design and analysis since it identifies factors (capability, opportunity, motivation) that need to be present for any behaviour change to occur. A qualitative study using an exploratory research methodology was designed to obtain information from adults from nine EU Member states with no previous cancer diagnose using in-depth semi-structured interviews. Interviews were conducted in participants' native language by trained researchers. A framework thematic content analysis was conducted.

Results: Most participants were aware of all ECAC recommendations, except for radon gas; but did not know how to put them into practice nor where to find information. The main barriers to adopt lifestyle-related recommendations were having an addiction to smoking that would impend them from quitting, lack of skills to be physically active or to be able to breastfeed (capability); lack of time to exercise or cook, lack of financial resources, cultural norms and peer-pressure (opportunity). Barriers for other risk factors included lack of knowledge about carcinogens at work or radon, and lack of control of the exposure when it depends on others' diligence (capability). Finally, barriers to participate in vaccination and screening programs were personal beliefs (e.g., hesitancy) (capability), living in rural areas, and low quality and saturation of the national health system (opportunity).

Conclusions: Understanding of how the ECAC recommendations are perceived by the EU citizens and of the barriers encountered to adopt them, is key for the adoption of health promotion messages and to improve supportive societal structures to overcome these barriers.

Population-based cancer prevention education intervention through mHealth: a randomized controlled trial.

Carolina Espina, Ariadna Feliu, Albert González Vingut, Theresa Liddle, Celia Jiménez-García, Inmaculada Olaya-Caro, Luis Ángel Perula-De Torres

Introduction: Despite the high potential of mHealth-related educational interventions to reach large segments of the population, implementation and adoption of such interventions may be challenging. The objective of this study was to gather knowledge on the feasibility of a future cancer prevention education intervention based on the European Code Against Cancer, using a population-based mHealth implementation strategy.

Materials and Methods: A type-2 hybrid effectiveness-implementation study was conducted in a sample of the Spanish general population to assess the following implementation research outcomes: adoption, fidelity, appropriateness, and acceptability of an intervention to disseminate cancer prevention messages, and willingness to consult further digital information. Participation rates, sociodemographic data, mHealth use patterns and implementation outcomes were calculated.

Results: Receiving cancer prevention messages through mHealth is acceptable, appropriate (frequency, timing, understandability and perceived usefulness) and feasible. mHealth users reported high access to the Internet through different devices, high ability and confidence to browse a website, and high willingness to receive cancer prevention messages in the phone, despite low participation rates in comparison to the initial positive response rates. Although adoption of the intervention was high, post-intervention fidelity was seriously hampered by the disruptions caused by the Covid-19 pandemic, which may have affected recall bias.

Conclusions: In the context of the Europe's Beating Cancer Plan to increase knowledge about cancer prevention across the European Union, this study contributes to inform the design of future interventions using mHealth at large scale, to ensure a broad coverage and adoption of cancer prevention messages as those promoted by the European Code Against Cancer.

Wellbeing and sense of coherence in French-speaking breast cancer women: A cross-sectional study.

Sarah Michaud; Adil Mansouri

Background: Breast cancer, identified by the World Health Organization (WHO) as the most prevalent cancer globally, constitutes 1 in 8 cancer diagnoses. The impact of breast cancer on patients' wellbeing is important and could affect physical, psychological, and social dimensions. Wellbeing is a multifaceted concept and is influenced by factors internal and external to patients. The Sense Of Coherence (SOC) explores factors fostering human health and wellbeing. This study aimed to assess the wellbeing and the SOC in French-speaking breast cancer women as well as examine the associations between the wellbeing status and the SOC.

Material and Methods: A cross-sectional study was conducted in French-speaking breast cancer women between July and September 2023. Data were collected through an electronic self-administered questionnaire with three sections: 1) sociodemographic and clinical information, 2) wellbeing assessment using the WHO-5 Well-being Index which and 3) SOC evaluation using the SOC-13 scale. Data were analyzed using the R software.

Results: Ninety-nine participants were enrolled, predominantly from France (89.9%). The mean age was 47.7 (9.2) years old and 89.9% reported having children. The half received a cancer diagnosis between 2021 and 2023 (50%). Diverse treatments were administered during the study including chemotherapy (54%), radiotherapy (38%), and surgery (35%). The WHO-5 mean score was 52.1 (95% CI 48.1-56.1). The mean SOC score was 50.6 (95% CI 48.3-52.9), with sub-scale scores of 22.0 for the comprehensibility 18.0 for the manageability, and 17.0 for the meaningfulness. Factors associated with the SOC included a positive correlation with the WHO-5 ($r=0.43$, 95% CI 0.26-0.58), undergoing radiotherapy ($p=0.035$), and living alone ($p=0.008$).

Conclusions: A comprehensive understanding of wellbeing and the factors that fosters it will facilitate the development of early interventions to prevent an overall health deterioration in breast cancer patients in the future. This could help women to navigate the complexities of their journey with more resilience and consistency.

Implementing Health Promoting Policies among Children and Youth

How can we assess the capacity of Danish health and childcare professionals to promote healthy weight development?

Anneke Vang Hjort, Sofie Loklindt Christensen, Teresa Holmberg

Introduction: Considering that children and adolescents spend around 1/3 of their time at daycare or schools, these settings – including the social norms, the food and physical activity environment as well as family engagement in school and daycare programmes – are important for healthy weight development. Likewise, healthcare professionals play an essential role. For example, health visitors and midwives reach families during pregnancy and early life, which are significant life periods in relation to weight development. To target these settings, more knowledge about enablers and barriers to health promotion and prevention is needed. The Centre for Childhood Health will assess the practices and capacity among Danish professionals in childcare, school, and healthcare settings.

Material and Methods: The study (2023-2025) will conduct national surveys to measure health-promoting practices and capacity. The surveys will be developed based on (1) a literature review of studies and surveys within the scope, (2) qualitative interviews with the target groups, and (3) stakeholder involvement, including Delphi processes with research- and practice experts.

Discussion: One of the key methodological questions is how to operationalize health promotion “capacity” among the various target groups. For example, what is the most suitable theoretical concept to capture the capacity? Is capacity an individual property or a property within an organizational context? Is it a state or process? At the conference, we will present the study design and preliminary operationalization. We encourage delegates to share thoughts and inputs on assessing health promotion capacity.

Promoting health in schools: identifying forms and functions of the Health Promoting Schools interventions.

Paul J. Veugeliers, Katerina Maximova, Julia Dabravolskaj, Jodi Kalubi

Introduction: Health Promoting Schools (HPS) interventions are crucial for promoting health in school settings. However, each school functions within a particular context, which poses a challenge to the successful implementation of HPS interventions and requires adapting them to each school's unique needs, resources, and priorities. It is increasingly recognized that the success of transferring complex interventions to a new context relies on a deep understanding of each intervention's core functions (i.e., the intervention's basic purposes that fundamentally define the intervention and drive its effectiveness) and forms (i.e., specific content and delivery strategies implemented to achieve core functions). The objective was to develop a core functions and forms matrix of the HPS intervention called APPLE (A Project Promoting healthy Living for Everyone) Schools.

Material and Methods: Qualitative data were extracted from 191 yearly action plans written between 2008 and 2021 for 70 APPLE Schools. Two reviewers examined 5301 extracted activities, of which 2683 were included in the study sample. We used supervised machine learning algorithms to classify these activities into program activities and implementation strategies (i.e., strategies that help to ensure adherence to the intervention and its routinization within a particular school). Core functions of program activities were developed using the data-driven approach and informed by the HPS framework, while core functions of implementation strategies were drawn from the framework suggested by Samdal & Rowling (2011). Patterns of similar activities (i.e., forms of program activities and implementation strategies) within each core function were identified through thematic analysis.

Results: We identified 62 forms across 16 core functions of program activities and implementation strategies. Although the most commonly addressed core functions of program activities were physical activity (91%) and healthy eating (90%), other core functions were addressed in fewer than half of schools (27 to 43%). Core functions of implementation strategies were addressed in a majority of schools: relational and organisational support context (86%), partnerships and networking (84%), student participation (78%), and professional development and learning (73%). The remaining core functions of implementation strategies were addressed in fewer than half of schools (33 to 48%). Forms of program activities and implementation strategies included a broad range of activities, with more forms being put in place to address the most common core functions.

Conclusions: In this study, we analyzed activities extracted from annual action plans and created a matrix of core functions and forms for the APPLE Schools program. The results of this project offer a glance into the core functions that remain largely unaddressed in most of the schools. Moreover, the core functions and forms matrix can be used as a roadmap for future HPS interventions.

Acceptance analysis of adolescent health promotion application (KONCO SREGEP) in remote area.

Muthmainnah, Lutfi Agus Salim, Ira Nurmala

Introduction: Adolescent Health Promotion application is effective media in adolescent now. "Konco SREGEP" application was designed as digital-based adolescent health promotion media in accordance with the results of a study of the needs, characteristics and capacities of adolescents. This app has been available on the PlayStore since 2021. However, out of the targeted 30 schools, only 2 schools use this application. Therefore, it is necessary to study the acceptance model of the adolescent health promotion application „"Konco SREGEP"" in Malang Regency through modification of Theory Acceptance Model (TAM) and Integrated Behavior Model (IBM).

Material and Methods: A Quasi Experimental with Nonequivalent Control Group Design. Intervention and control group were given socialization about the application, intervention group was assisted for one month. 188 students (94 each group) from six schools were obtained by purposive random sampling. Data analysis consisted of difference test analysis.

Results: The results showed that there were differences before and after mentoring in the intervention group on the variables of knowledge and skills, perceived control, salience of the behavior, and actual system of use, meanwhile in the control group, only knowledge and skill variables. In addition, there are differences in the variables studied between the intervention group and the control group, including perceived control, salience of the behavior, behavioral intention to use, environmental constraint, habit, and actual system use.

Conclusions: This showed that the benefits felt by adolescents are the most important thing and can be considered in designing strategies to increase the acceptance of the "Konco SREGEP" Application.

Assessment of Water, Sanitation and Hygiene in Schools of Kosovo.

Tahire Maloku Gjergji, Naser Ramadani, Lindita Maxhuni, Lendita Mehmeti, Burbuqe Latifi, Arijana Kalaveshi, Merita Berisha, Gjyle Osmani, Drita Zajmi, Leonora Shala

Introduction: Adequate access to Water, Hygiene and Sanitation (WASH) in schools is the right of every child, as recognized in the 2030 Agenda for Sustainable Development, the Protocol on Water and Health and the Ostrava Declaration on Environment and Health. The main purpose of this work is to reflect the current state from administrators, pupils and inspectors of WASH indicators in Kosovo schools, at the national and local level, to identify challenges and needs, in order to improve the planning of strategies, policies and programs in schools.

Material and Methods: In collaboration with Ministry of Education, Science, Technology and Innovation (MESTI) this cross-sectional study was carried out by the National Institute of Public Health (NIPHK) and supported by the World Health Organization (WHO), Pristina office during 2021. A random selection of 100 schools were included in this research and standardized WHO questionnaires were used. The work in the field was carried out by 10 teams consisted from two members who previously conducted one-day training sessions.

Results: About 90% of the school administrators affirm that the schools always have drinking water available, while according to the pupil's perception this percentage is significantly lower (50%); 58% of pupils declare that they do not drink water at all during their stay at school; Slightly more than half of the pupils (55%) claim that they are satisfied with the toilets and almost as many (57%) claim that there is enough privacy in the toilets; Toilets are not easily accessible by pupils with limited physical abilities; The vast majority of schools in Kosovo (87%) had coverage with basic service for drinking water, (88%) basic service for sanitation and (93%) basic service for hygiene, based on the service levels of the joint monitoring program for WASH in schools.

Conclusion: Implementation of the regular monitoring program of hygienic and sanitary conditions in schools and awareness for the importance of drinking water and hygienic condition in schools are crucial to increase the basic service for drinking water, sanitation and hygiene in schools.

How do school health professionals understand culture? – a scoping review.

Emmie Wahlström, Sara Landerdahl Stridsberg, Camilla Larsson, Jonas Stier

Introduction: There is ample research suggesting that encounters and interaction between health professionals and children with migration backgrounds become particularly challenging because of (assumed) differences in cultures – i.e., ‘differences characterizing the other’. Less research focuses on the health professionals’ cultural self-understanding, that is, of how their own culture influences such encounters and interaction. That said, the objective of this scoping review is to explore how health professionals understand and conceptualize culture and its significance when encountering children. More specifically, the scoping review aims to identify, describe, and analyze previous research on school health professionals’ understanding of culture. Focus is on, school health professionals since they encounter children on a regular basis to conduct screening and promote health.

Material and Methods: The scoping review is guided by the JBI guidelines for scoping reviews. Literature searches have been conducted during October 2023 in Scopus, PubMed, Cinahl Plus, SocIndex, Sociological abstracts, Social services abstracts, APA PsycInfo, APA PsycArticles, Web of science and ASSIA. Articles eligible for inclusion are published as peer reviewed articles in scientific journals, between 2013-2023 and focus on school health professionals (i.e., school nurses, school social workers, school doctors and school psychologists), concepts relating to understanding of culture and the context of the school health services. Screening was conducted by two researchers and data will be analyzed using qualitative content analysis.

Results: As the review is on-going, only preliminary results can be presented. The searches generated 2 315 publications. After removing duplicates, titles and abstracts of 1 545 publications were screened for eligibility. The screening of 60 full text articles is on-going and results will be presented at the conference. Tentative observations in the screening process are: a) no publications included school doctors, b) publications tend to stress the need for intercultural competence or similar concepts in the discussion or implication part of abstracts not as aim or results, c) studies mainly include variations of two concepts, i.e., “cultural competence” or “cultural responsiveness”, and d) the number of publications studying school health professionals’ understanding of culture is fewer than expected considering culture being highlighted as challenging in encounters.

Here is our ideal school! Students' perception of their wellbeing at school.

Alessandra Mereu, Minerba Luigi, Paolo Contu, Andrea Chessa, Shakhova Kristina, Claudia Piga, Claudia Sardu

Introduction: Adolescents are a core group for health promotion for their tremendous potential of wellbeing and their capabilities. Adolescent spend most part of their day at school, so it is their life setting. School is generally considered a healthy setting, but is it always true? What is their perception? What are the factors that promote their wellbeing? What are the factors that cause uneasiness? These were the main questions of a qualitative survey through photo voice, carried out in a secondary school attended by students with low socio-economic background. The aim was to explore adolescents' vision of well-being in their reference environment.

Material and Methods: Students of four classes attending the first class participate at the project. They participated at photo-voice with the support of health promoters to express their perception of wellbeing at school. They took the photos; they choose the best meaningful photos they wanted to display at the photo-exhibition, with their relative comments. The main topics emerged were: the good or the bad relationship with classmates, with teachers; the school climate, welcoming or not; learning assessment as a judgement; satisfaction and self-efficacy in learning outcomes; longer breaks to have a rest; participative teaching and work groups.

Results: It was realized the photo-exhibition that was attended by the students of the project, the school dean and teachers. Following the exhibition, one of the classes, spontaneously, involved the other students of the school to see the photos, and anonymously collected their comments. The project gained visibility: it was published on the school website; it was published in the local newspaper. The headline of the newspaper was „here is our ideal school“. The ideal school for students is the school that promotes well-being, which takes into consideration their health needs.

Conclusions: Although this project involved only one school, its significance lies in the fact that it represents the first step towards the whole-school approach. In Italy, health promotion is not yet firmly established, so it is hard to start from school policies, as the WHO suggests. Our aim is to build an ease, acceptable and reproducible model for other to foster health promotion in school setting.

Implementation of Comprehensive Sexuality Education in Schools in Kosovo.

Merita Berisha, Leonora Shala, Fehmi Krasniqi, Edi Gaxha Puka, Lulavere Behluli, Habibe Buzuku Pllana, Besnik Sherifi, Zarife Miftari, Visare Mujko Nimani

Introduction: Kosovo recognizes the importance of comprehensive sexual education (CSE), and it is an integral part of the Curriculum Framework since 2010. The Ministry of Education, Science, Technology, and Innovation has been proactive in addressing this need and provide youth with the skills for life and skills for work. This work presents how we introduced and implemented comprehensive sexuality and reproductive health education in schools in Kosovo.

Materia and Methods: Since 2010 curriculum reform started from MESTI in collaboration with National Institute of Public Health of Kosovo, the intersectoral working group and UNFPA. An adaptation of European Standards for Comprehensive Sexuality Education and compilation of Manuals for teachers from grades 1-12, and for children with disabilities, development of videos for students and brochures for parents and training of teachers from grades 1-12 were among first steps followed by mentoring and monitoring visits in schools.

We established cooperation with the Faculty of Education, University of Prishtina, developed and piloted framework for monitoring the implementation of CSE in schools with teachers and parents and designed campaigns for awareness raising, advocacy and gathering stakeholders as well as participated in regional meetings and share experiences.

Results: Working group collaborated in developing handbooks tailored for teachers in delivering CSE effectively, addressing the unique needs and understanding of students from levels 1-5, levels 6-9, and levels 10-12 and children with disabilities, and trained 2500 teachers to date. The recommendations emphasize the imperative to sustain training efforts and foster collaboration among students, parents, and teachers. Additionally, it underscores the necessity of furnishing supplementary materials and resources to overcome obstacles, mitigate shame, and dispel taboos.

Conclusions: This multistakeholder approach underscores the commitment of Kosovo to ensuring that its youth are equipped with the knowledge and skills necessary for making informed decisions about their sexual health.

Enhancing elderly autonomy through promoting health literacy for regular physical activity?

Health Literacy Survey of the French population 2019–2021.

Bakary Cissé, Cécile Allaire, Rajae Touzani, Alexandra Rouquette, Tangui Barré, Julien Mancini

Introduction: In 2030, 21 million people aged 60 or over will be living in France. Several challenges arise regarding their care, particularly in terms of living conditions and autonomy. Promoting regular physical activity (PA) could make a significant contribution to preserving the autonomy of the elderly and delaying their entry into care homes. Given recent discussions on the potential of health literacy (HL) in health promotion, the aim of this study was to provide evidence elucidating the relationship between HL in French people over 50 and their engagement in PA.

Material and Methods: The survey forms part of an international collaboration initiated by the World Health Organization - European Health Information Initiative (WHO-EHII) affiliated network Action Network on Measuring Population and Organizational Health Literacy (M-POHL) concerning implementation of the Health Literacy Population Survey 2019–2021 (HLS19). In France, data were collected from 2 003 adults representative of the population (online panel), using a 12-item scale on general HL (HLS19-Q12; score range: 0–100). Descriptive statistics were analyzed using Chi-square/Wilcoxon tests. Logistic regression analysis was performed to examine the association between self-reported regular PA (≥ 5 days/week) and HL, controlling for the effects of other health behaviors and participants characteristics stratified by gender.

Results: Among 900 participants over 50 years old, 610 (67.8%) did not engage in regular PA. Active people over 50 had significantly higher HL levels than the less active (68.6 vs 64.7 ; $p=0.002$). However, after stratification of the data by gender, this difference was no longer significant in men (66.0 vs 64.0 ; $p=0.4$). In women, the significant predictors of regular PA were higher levels HL levels ($OR=1.02$ [1.01–1.04]) and fruit and vegetable consumption ($OR=1.85$ [1.20–2.88]), after adjustment for socio-economic indicators.

Conclusions: This study revealed a positive association between high HL levels and regular PA in women over 50. These findings suggest that health promotion interventions, including the promotion of HL, should be implemented in people over 50 to stimulate regular PA, thus helping to prolong their autonomy.

Fostering community-based health promotion for healthy ageing in Austria: status quo, development areas and stakeholder process.

Petra Plunger, Paulina Wosko, Lisa Schlee, Gerlinde Rohrauer-Näf

Introduction: Community-based health promotion for healthy ageing has evolved in Austria through the establishment of specific networks such as the Healthy Communities Network and the Healthy Cities Network. The Healthy Austria Fund funds projects and supports capacity development in this area. Programmes such as caring communities and community nursing, which have been developed in recent years, also have a strong link to healthy ageing. In 2023, the Future Health Promotion Competence Centre took on the task of systematically describing the field, identifying important development topics and putting the topic higher on the agenda.

Material and Methods: The FGÖ funding database was searched for relevant projects. 21 projects from the „Healthy Neighbourhoods!“ initiative were analysed and a working model developed based on the findings. In a stakeholder process, experts from health promotion practice and experts representing the diversity of ageing discussed current challenges, in particular the question of how to sustainably anchor health promotion and healthy ageing initiatives within communities.

Results: In total, over 100 community health promotion projects focussing on healthy ageing have been implemented in the last 10 years. Based on an in-depth analysis of 21 projects, 6 fields of action were identified: neighbourly help, health promotion and health literacy courses, settings and organisational development, participatory processes, health promotion hub and networking, assessment and evaluation. According to the experts, supportive strategies, stable financing, and capacity building are needed, as well as an explicit responsibility for health promotion at local authority level in order to anchor community-based health promotion for healthy ageing in the long term. Emerging programmes highlight the need for exchange and coordination.

Conclusions: The discussion process on sustainably anchoring health promotion for healthy ageing in the community setting will ideally create a congruence of objectives between the various initiatives and programmes addressing healthy ageing. In addition to data that proves the effectiveness of different measures, a convincing narrative is also required that conveys the social significance of healthy ageing to decision-makers.

Toward healthy ageing at work: Self-initiated change through the lifespan.

Min-Chien Tsai, Sy-Feng Wang, Didier Jourdan

Introduction: In many countries, the demographic transition has led to increased interest in the question of healthy ageing in the workplace. From a health promotion perspective, enabling middle-age professionals to increase control over, and to improve, their health through organizational changes and capacity building is a priority. This study used the motivational theory of life-span development (MTD) to propose that people play an active role to adopt control strategies to cope with various lifespan development tasks. We therefore addressed the following questions: how to promote health, wellbeing, and motivation to continue working and toward healthy ageing at work?

Material and Methods: A total of 10 middle-aged (≥ 45 years old) education professionals (5 female; 5 male) were invited to take part in the online interviews, which were audio-recorded and transcribed verbatim. Each interview lasted approximately 30-45 minutes. The interview questions aimed to explore in depth the participants' response to the challenges of ageing at work age and the coping strategies the develop.

Results: The interview results reflected that the main age-related difficulties tasks were linked to 1-new professional challenges, 2- physical limitations, and 3- issues in intergenerational communication. The interviews showed various coping strategies were developed by the middle-aged education professionals 1- selective primary control strategy (job crafting; engaging in health promotion activities), 2-compensatory primary control strategy (help seeking or advice), 3-selective secondary control strategy (positive reappraisal; seeking social support; follow role models), 4-compensatory secondary control strategy (downward social comparison; downgrading expectation; decrease workload), and 5-optimization strategies.

Conclusions: Middle-aged people are the main workforce in the global ageing trend. How to promote their health, well-being and motivation is an important issue for human resource management, occupational health, career development, and public health field. This study contributes to the theoretical framework by providing a broader interpretation of control strategies. The practical implications of our findings will be discussed during the presentation especially, the need to 1-understand the assets/difficulties of middle-aged and senior citizens in the workplace due to their age and 2- promote healthy ageing at work by reinforcing the capacity of the people to develop different coping strategies.

Dynamic model of health assets for cognitive health of older adults: a secondary analysis of the longitudinal SHARE data.

Yuliya Bodryzlova, Bouchra Nasri, Yan Kestens, Emmanuelle Bélanger, Grégory Moullec

Introduction: Positive health refers to the reserve of capacities that sustain and maintain good health. However, the determinants of positive health are a topic of the ongoing discussion. The Dynamic model of health assets considers individual and environmental sources of positive health. However, the applicability of this model to the positive cognitive health of older adults has yet to be tested. This study aims to evaluate the independent contribution of health assets, as by Dynamic model of health assets, in predicting positive cognitive health among older adults.

Material and Methods: Participants of the Survey on the Health, Aging, and Retirement in Europe, Waves 5 (2013) and 7 (2019), were included in analyses. Positive cognitive health was operationalized as six or more words recalled of the 10-word delayed recall test at baseline and follow-up. Health assets were presented by personal characteristics, activities, neighborhood characteristics and social support. Multilevel logistic regression was constructed with the expectation that the addition of health assets would improve the model predictive value.

Results: The model including assets and risk factors for dementia explained more variability in positive cognitive health than the model only including socio-demographic and risk variables. The pseudo-R-square for fixed effect was 0.27 vs 0.21, and for total effect, it was 0.33 vs 0.31. The area under the curve (AUC) was 79.5% vs 77.8%, respectively.

Association Between Resilience and Frailty among Chinese Older Adults.

Junling Gao, Hua Fu, Yujie Wang

Introduction: Resilience is a multidimensional concept determining healthy aging, however, there were limited studies examining the association between frailty and resilience in detail. In this study, we aimed to examine the association of frailty with three dimensions of resilience—strength, optimism, and tenacity among Chinese older adults.

Material and Methods: A cross-sectional study was conducted among 10,209 participants who were sampled by three-stage sampling method, from three cities in China from June 2020 to July 2021. The Chinese version of the Connor-Davidson Resilience Scale (CD-RISC) was used to measure resilience's 3 dimensions (strength, optimism and tenacity), which were converted into quartiles for the analysis. Frailty status was measured using the Chinese version of the FRAIL scale, categorized into robustness, pre-frailty and frailty. Multinomial logistic regression was used to examine associations between frailty status with strength, optimism and tenacity.

Results: The overall proportions of robustness, pre-frailty, and frailty were 42.7, 48.7, and 8.6%, respectively. After controlling for sociodemographic characteristics, self-rated health, and health behaviors, compared with older adults with the lowest quartile of strength, older adults with the second quartile (odds ratio, OR = 0.67, 95% CI: 0.57-0.78), third quartile (OR = 0.60, 95% CI: 0.50-0.72), and fourth quartile (OR = 0.58, 95% CI: 0.46-0.73) of strength had lower ORs for pre-frailty, and who also had lower ORs (0.44, 95% CI: 0.33-0.58; 0.42, 95% CI: 0.30-0.59; 0.34, 95% CI: 0.20-0.56, respectively) for frailty. There were no homogeneous associations between optimism and tenacity with frailty status.

Conclusions: Higher strength was associated with lower chance of being pre-frail and frail among Chinese older adults. This finding implies that community-based training programs aiming to enhance psychological resilience, especially strength, may contribute to healthy aging. Future studies should examine the effects of resilience on frailty using longitudinal or experimental study designs in cross-cultural contexts.

Co-Creating Well-Being: A Holistic Approach to Physical Activity Promotion in Aged Care Facilities.

Annika Frahsa, Lea-Sofie Hahn, Ansgar Thiel

Introduction: In view of the demographic change and aging populations in Europe and beyond, aged care facilities constitute an increasingly important, yet challenging setting for health promotion – given it is a highly sedentary pseudo-total institution characterized by structured daily routines within a paradigm of care for fragile and vulnerable residents. Addressing those challenges asks for a holistic approach for change that considers intrapersonal, sociocultural, organizational, environmental, and political determinants. This talk will present processes and outcomes from a research project, funded by the German Ministry of Health (2019-2023), on physical activity promotion in aged care facilities.

Material and Methods: We applied a comprehensive co-creation approach to promote physical activity in seven nursing homes in Southern Germany together with residents, significant others, staff, and management. We conducted approx. 800 hours systematic on-site observations, semi-structured interviews (n=31) and Photovoice (n=27 participants, n= 169 photos) for participatory assessments of barriers and options; future workshops (n=14) for the co-development of physical activity promoting interventions, and co-evaluation workshops (n=7) with goal attainment scaling for an analysis implementation and outcomes of interventions (total n= 57). Data was interpreted through reflexive thematic analysis, supported by MaxQDA20.

Results: Interventions implemented in the participating facilities spanned individual (n=11), social (n=7), green care (n=6), neighborhood (n=7), staff & relatives (n=5), infrastructure (n=6), and organization policy (n=15) determinants of physical activity. Physical activity promotion was integrated into care concepts and mission statements, staff work descriptions, as well as informal internal routines. Of the interventions implemented, 33% were rated as more successful, 43% as successful, and 19% as less successful than anticipated.

Conclusions: Aged care facilities tend to have a focus on caring for and protecting vulnerable people, rather than empowering residents as agents of their own well-being or enabling them to age in a self-determined way. Holistic approaches based on co-creation can initiate structural and cultural change towards the implementation of physical activity promotion that can be integrated into daily routines. However, the analyses also emphasized the critical role of staff training, along with the involvement of relatives and external service providers, as essential components for achieving sustainable change in aged care facilities.

Contributing to the Global Participatory Process to Structuring the Field of Health Promotion Research.

Didier Jourdan, Louise Potvin

Objectives: Although health promotion research has acquired many attributes of a distinct field, researching practices from various disciplinary perspectives is not sufficient to create a coherent knowledge base for health promotion. True to health promotion principles, a bottom-up process for structuring the field through the creation of a “Global Handbook of Health Promotion Research” has been launch by the UNESCO chair and WHO collaborating centre Global Health & Education and the Canada Research Chair on Community Approach and Health Inequalities, in partnership with the IUHPE.

By the end of the workshop, we aim to have:

- Critically reviewed the different epistemological and ethical research frameworks
- Collected the feedback of the participants

Format: This session will present a way of structuring the field of research before opening the discussion with participants and inviting them to contribute to the ongoing process of strengthening the knowledge production in health promotion.

Part 1: We will set the scene with a short didactic presentation of the three dimensions we identified to further structure health promotion research. The first relates to the object for which knowledge is produced (health social practices). The second dimension relates to the purpose and ethics of research (epistemic and transformative aim). The third dimension concerns the knowledge produced and the conditions for valid knowledge.

Part 2: Structured small group discussions facilitated by workshop leaders on the three dimensions and their markers. Participants will contribute their opinions and share their valuable experiences.

Part 3: The last part of the workshop will describe the initiative took with the Editorial Board of Global Health Promotion to create and edit a section in the journal entitled “Doing health promotion research”. Participant will be invited to contribute by writing introductory-level presentations of paradigms, approaches and methods relevant for health promotion research.

Learning goals:

1. To learn from the process of structuration of the field of health promotion research
2. To identify the three dimensions that could help describing the research practices
3. To contribute perspectives to ongoing global efforts to strengthen health promotion knowledge base and methods for knowledge production.

Implementing policies for local Health Promotion Work: sharing experiences.

Ruca Maass, Christina Plantz, Eric Breton, Monica Lillefjell

Objectives: In line with international policy recommendations, municipalities and local communities are key actors in realizing the overarching objectives for local health promotion. Policies are important means to enable the development of systematic approaches locally but rely on coherent implementation to have positive effects. In this workshop, we will explore how policies and policy-implementation can support or hinder Health Promotion Work.

Main objectives are

- a) to build competence in regard to how policies can facilitate local health promotion; and
- b) to identify collaboration partners and initiate networking for common learning about favorable policies and implementation processes.

Activities: The workshop consists of 4 distinct elements; 3 interactive presentations with integrated group discussions; and a concluding plenary session.

Presentation 1 builds on 'lessons learned' from the EU Joint Action Health Equity Europe (2018 -2021). Through extensive research activity across 13 countries, six policy recommendations were outlined in a collaborative approach. These are followed-up by a new European initiative to conceptualize and implement supersetting approaches across contexts.

The second presentation discusses experiences from Norway with the local implementation of national policies, and how they facilitated for local Health Promotion Work. Findings are derived through follow-up research and in close collaboration with municipal and regional partners, in the context of a 10-year National Program for Public Health Work.

The third presentation shares experiences with a French policy instrument supporting a health in all policies-approach. The instrument is designed to build local capacity to address the social determinants of Health and aims at supporting local mobilization of intersectoral actors for public health.

During presentations, central questions linked to beneficial policies and implementation strategies are outlined for group discussions.

During the last 30 minutes, we engage the audience in a plenary discussion on central points from group discussions, with the aim to outline approaches for practice and further research.

Learning points:

- exchange experiences and emerging solutions from various national contexts
- awareness of how policies can facilitate for public health work
- knowledge about beneficial policies and implementation strategies
- increased competence to support municipalities in the development of systematic Public Health Work

Salutogenesis 101: Exploring my role in the River of Life.

Jake Sallaway-Costello, Marguerite Daniel

Where does health come from? How can health promoters support people and communities to move towards wellbeing? This workshop, presented by the Global Working Group on Salutogenesis is a cross-conference learning opportunity introducing and exploring salutogenic theory, which examines the origins of health, as opposed to the causes of disease. Whether a salutogenic scholar or beginner, everyone is welcome to this inclusive workshop where we will consider the big ideas of health, and place ourselves in the River of Life to make sense of the amazing potential of salutogenic thinking.

The history of Salutogenesis, and its influence on health promotion, will be briefly explored, before we consider the application of this approach in your area of interest. We'll provide a beginners guide to the major concepts of salutogenic theory, including the Sense of Coherence, generalised and specific resistance resources, the health-ease/disease continuum, and how these ideas relate to both traditional and emerging health promotion challenges. Using intervention examples from your own research, teaching, and practice, we'll transition from the pathogenic to the salutogenic, exploring the origins of health in areas that matter to you. The session will conclude with all participants being given the newly created Glossary on Salutogenesis, demystifying salutogenic language for your own practice.

By the end of the workshop, participants should be able:

- To describe the basic conceptual orientation of salutogenic theory
- To interpret their own area of health promotion work through salutogenic lenses
- To imagine new and emerging applications of Salutogenesis in health promotion
- To compare and contrast salutogenic ideas with similar major theories of health

Workshop schedule:

1. Checking in
2. Introduction to the River of Life
3. Competing ideas: How do you theorise health?
4. Key concepts in Salutogenesis
5. Health promotion: From pathogenic to salutogenic (A participatory reflection on interventions from research, teaching and practice, through a salutogenic lens)
6. The Glossary of Salutogenesis
7. An invitation to the spaces and places of salutogenic activity

Digital Health Literacy and its contribution to health promotion across generations.

Diane Levin-Zamir, Stephan Van den Broucke

Introduction: The use of social media and digital resources for health have surged in recent years. While digital resources and communication may promote the health of many, adequate use of these resources requires skills to access, understand, assess and apply digital health-related information. The principles defined in the UN Sustainable Development Goals must be applied to ensure that in the digitalized world, no one is left behind. Thus, Digital Health Literacy (DHL) in the population can be a vehicle for health promotion. Health promotion researchers, practitioners and decision makers need to consider DHL for improving people's ability to effectively use digital resources and appropriate and innovative interventions to positively address DHL need to be developed to contribute to health and well-being. The results of surveys such as that of the WHO Action Network for Measuring Population and Organizational Health Literacy (M-POHL HLS19) are useful for understanding the needs of population and special groups in order to plan, implement and evaluate health promotion interventions.

Learning Objectives

1. To introduce the concept of digital health literacy (DHL) and its relevance to health promotion
2. To present recent DHL measures developed and results of national/international surveys on DHL as a tool for health promotion planning
3. To raise awareness regarding the association between DHL, social determinants and health equity
4. To discuss how the above may be applied in various country and cultural contexts for health promotion policy, intervention and research.

Session outline:

1. Presentation of the concept of DHL, measures and results of the M-POHL HLS-19 Survey in Europe, emphasizing the social and personal determinants of DHL
2. Introducing the research, policy and practice recommendations that stem from the HLS19 survey in Europe 2019-2021
3. Interactive discussion with session participants regarding:
 - a. Skills needed to access digital health resources in their countries/cultural contexts
 - b. Who may be the most vulnerable groups for limited DHL
 - c. What are the opportunities and barriers for improving DHL and/or building capacity for organizations to acknowledge and plan appropriate interventions
 - d. How appropriate and innovative health promotion interventions may positively influence digital health literacy

The political determinants of health: An applied perspective.

Marguerite C Sendall, Allyson Mutch and Lisa Fitzgerald

The relationship between our environment, the prevailing political context and policy landscape, and health outcomes from a planetary perspective is not linear. There is no straight forward to understand the links between these three concepts. Consequently, the political determinants of health are not well recognized in public health. However, the political determinants of health within a planetary perspective are emerging as an increasingly important variable in health outcomes. This workshop will expose the explicit and implicit relationships between political decisions, policy and public health outcomes from a planetary perspective. The social determinants of health are well understood in public health, however the political environment which creates these conditions, is rarely given the attention required to truly understand, for example, advocacy and action strategies. The political determinants of health and the social determinants of health are intertwined and complex. This foundational understanding about the complex juxtaposition between these concepts will ensure participants meet learning objectives and feel inspired to apply this new knowledge in their local practice environment.

OBJECTIVES OF WORKSHOP: The objective of this workshop is to encourage critical thinkers by challenging participants to explore complex concepts in a safe environment, to think about disciplinary ideas in different and novel ways and to kindle the inner activist to challenge the status quo, make a difference to how things are done, progress fair and equal treatment across the population, bring to the fore and highlight complexities and inequities and not accept complacency. This workshop is more important than ever to prepare the current and next generation of public health, health promotion practitioners and health policy makers for their progressively more intricate careers.

TYPES OF ACTIVITIES: The approach for this workshop is participant centred, interdisciplinary, multi-national and activity based. Complex concepts will be addressed in a highly interactive, engaging and thought-provoking way, the learning approach and activities will be pedagogically robust, and the structure will be logical and easy to follow. A suite of learning activities will cater to diverse learning styles and prior knowledge. The specific components of this workshop are small and interactive group activities, focused and localized scenario-based activities, hands-on and technology-based activities, and participant-led and practice relevant activities.

How can Higher Education facilitate the development of Health Equity competencies among learners?

Gwendolijn Boonekamp, Joost van Wijchen, Isabel Antón Solanas, Davide Ziveri, Maria Nordheim Alme

Introduction: Equity in health and equal rights to social care and healthcare are fundamental human rights. However, not everyone gets the care and treatment they are entitled to. Norms and values, built on political, economic, historical and social grounds, play an essential role. Therefore, a continuous dialogue between different stakeholders is necessary to exchange perspectives and experiences and adapt to current and future challenges. Given their role in educating future social and healthcare professionals, Higher Education Institutes (HEIs) should play a pivotal role in supporting and nurturing students' intrinsic development of competencies in health equity. To this purpose, we developed a framework built on five lenses and values to view health equity challenges in practice. Furthermore, educational tools were developed to apply these lenses to real-life cases in education or supervision in practice.

Objective: This workshop introduces and shares the HEQED framework and applies the developed tools to address health equity in health and social care curricula.

Learning goals:

- Participants learn the five health equity lenses and values and where to find tools to address health equity in their practice.
- Participants' lenses are challenged by discussing the five lenses proposed.
- Participants enhance their ability to view professional challenges by using five health equity lenses exploring diverse perspectives
- Participants reflect on possibilities to apply these tools in their practice and formulate recommendations.
- Workshop set-up:
 - First, the health equity framework and lenses will be introduced: human rights, ontological security, social justice, participation and planetary well-being (15min).
 - Next, the five lenses and values are distributed among the participants. Each homogenous group of participants gets some time to clarify the lens (15min).
 - Then, two real-life cases are proposed in which health equity is challenged. Participants form heterogeneous groups in which the five lenses are represented. They discuss one of the cases from a professional perspective based on their assigned lens (30 min).
 - Then, each group will provide plenary feedback on the main challenges in the subgroup discussions (15min).
 - In the wrap-up, participants will formulate recommendations for the HEI tool platform and their own take-home message on applying the lenses and the tools (15min).

Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health in Europe: a qualitative study and considerations for the Patient Navigation Model.

Hanna M. Mues, Katrin Schäfer, Magdalena Wrzesińska, Magdalena Kostyła, Jarosław Rakoczy, Jaime Barrio-Cortes, Ana Fernández Feito, Cristina Fernández García, Rosa Gómez Trenado, Beatriz Benito-Sánchez, Marta Pisano González, Athanasios Gogos, Ioanna Zioga, Anastasia Papaioannou, Laura Domínguez, Alejandro Gil-Salmeron, Igor Grabovac

In the European Union, 84 million individuals experience enduring conditions of mental ill-health. Structural issues, including limited access to health promotion and cancer prevention services, are linked to a higher burden of cancer in this population. The proposed symposium will aim to elucidate the experiences of people with mental ill-health across 4 European countries (Austria, Greece, Poland and Spain) and provide an overview of the Horizon Europe CO-CAPTAIN Project focusing on the barriers and facilitators identified within a qualitative study using semi-structured interviews. The preliminary results indicated three overarching themes: (1) importance of somatic health and participation in preventive services, (2) barriers to access preventive services, and (3) facilitators to access preventive services. Moreover, overall knowledge and awareness of health promotion and cancer prevention services varied greatly, but most participants identified access to appropriate information as insufficient. Stigma and discrimination experiences within the healthcare system were shown as a persistent barrier across countries, together with lacking flexibility of services. Participants were aware of potential somatic health issues due to health behaviours like smoking or physical inactivity, but emphasized the burden of mental ill-health and need for more support. Co-designed supportive interventions, such as the Patient Navigation Model, which consider the living conditions of people with mental ill-health, involving social support and empowerment, were identified as key facilitators. This symposium will present detailed and contextualized results for each of the participating countries, and offer a chance for an open discussion with the audience, concerning the co-creation of tailored interventions such as the Patient Navigation Model, which may offer an adequate approach to build supportive environments and reducing the gap in health literacy and improve participation in health promotion and cancer prevention services in people experiencing mental ill-health. In accordance with the overarching objectives of the CO-CAPTAIN Project, to harness the transformative potential of integrated care pathways and provide health policy and social care recommendations for the adoption and implementation of the Patient Navigation Model across Europe, this symposium will be of interest for professionals including health care workers, researchers, representatives of mental health services and organizations, as well as public authorities.

Titles and Authors of presentations:

- Promoting primary cancer prevention among individuals with mental ill-health in Europe – an introduction to the CO-CAPTAIN project – Hanna Mues
- Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health: Findings from Austria – Katrin Schäfer
- Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health: Findings from Poland – Magdalena Kostyła

- Barriers and facilitators to healthcare access and cancer preventive services for people with mental-ill health: Findings from Spain – Rosa Gomez Trenado
- Co-creation of tailored interventions: Co-adaptation and implementation of the Patient Navigation Model in the CO-CAPTAIN project as an example – Alejandro Gil-Salmeron

Tackling obesity in shift workers: The EU project SHIFT2HEALTH.

Wallner Marlies, Boshuizen Hendriek, Depoortere Inge, Monique Vingerhoeds, Feskens Edith, Fuchs-Neuhold Bianca, Haider Sandra, Jilani Hannah, Heidi Lammers-van der Holst, Matullat Imke, Olsen Annemarie, Papantoniou Kyriaki, Magdalena Wrzesińska, Riederer Monika, Wakolbinger Maria, Wynne Richard, Winzer Eva, Wagner Karl-Heinz

Shift work is an independent risk factor for the development of overweight and obesity. In addition, shift workers are a large group of professionals in many sectors in Europe and represent an important target group for health systems. Unhealthy dietary habits (snacking, high sugar intake, preference for savoury and sweet and fatty foods) have been identified for this group and are likely to be among the main causes of obesity. The underlying mechanisms for these unfavourable eating habits still need to be clarified. Possible explanations include changes in metabolism (e.g. microbiome and inflammation), taste perception and circadian dysregulation. Empirically proven solutions are urgently needed to support national health systems, reduce the development of obesity and improve the well-being of shift workers in the EU. SHIFT2HEALTH aims to identify mechanisms and environmental and lifestyle factors that lead to obesity in shift workers. We will combine existing and new knowledge on nutritional, behavioural, perceptual and physiological determinants of (un)healthy food choices in a cross-sectional study, taking into account personal needs and desires. In addition, products and strategies will be developed and evaluated taking into account the behavioural and relational level to support healthy eating habits. Stakeholders (health organisations, representatives of shift workers, companies, policy makers and scientists) will be involved in all steps. The results will be used to gain new insights into the nutritional mechanisms involved in the development of obesity in shift workers and to develop customised health promotion strategies to benefit shift workers and employers. An extract of the above topics will be presented by scientists from one of the 15 EU partners involved to explain the current state of knowledge, the planned methods and the preliminary results.

Titles and Authors of presentations:

- Night shift work and health with focus on nutrition and food choice. Marlies Wallner
- Night shift work and cancer risk: the evidence, research gaps and methodological challenges. Kyriaki Papantoniou
- Interventions in practice to optimize sleep & health in shift workers; a study on feasibility, effectivity and acceptability of a sleep strategy. Heidi Lammers-van der Holst
- Overview of the European „Shift2Health“ project. Karl-Heinz Wagner

The background is composed of four large, solid-colored rectangular blocks. A red block occupies the top half of the image. The bottom half is split vertically: the left side is white, and the right side is yellow. A horizontal blue band crosses the bottom of the white and yellow sections, containing the text.

12th IUHPE European Conference on Health Promotion