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Health promotion and prevention of risk – actions for seniors
Pro-health 65+

Development of search strategy encompassing
perceptions and concepts of health promotion (WP.5)

Project Meeting, Krakow, 08.05.2015



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WP.5 Objectives



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WP.5

Objectives

- accumulation and assessment of available evidence related to health promotion interventions targeting the elderly
- classification of interventions according to taxonomy of objectives and the validity of evidence.



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Main tasks



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WP.5

Main tasks

1. Identification of effective health promotion methods and programmes for the elderly
2. Classification of the quality of evidence
3. Innovation-driven health promotion for the elderly



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Questions

Main question

What are effective health promotion interventions addressed to older adults and elderly population?



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Questions

Specific questions

- Which general health promotion intervention applies to elderly persons?
- Are there specific effective interventions for elderly persons?
- What is quality of available evidence?
- Is there evidence for interventions targeting main health problems in the elderly?



Evidence search strategy

- Two stages
 - I stage: secondary sources – scoping review
 - available systematic reviews
 - guidelines and statements from professional organisations
 - summaries from projects and networks
 - II stage: primary sources according to systematic review methodology
 - selected priority areas
 - when there is a gap in evidence
 - according to project timeliness



WP.5 Detailed work plan

Stage 1	Scoping review
Step 1	Definition of priorities
Step 2	Identificaton of sources and organizations
Step 3	Searching for secondary evidence
Step 4	Summary of secondary evidence
Stage 2	Focused reviews
Step 5	Identification of gaps in evidence
Step 6	Selection of areas for supplementary systematic review
Step 7	Approach to classification of evidence
Step 8	Development of collection tool
Step 9	Definition of search strategy
Step 10	Search of evidence in priority areas
Stage 3	Summary of evidence
Step 11	Assessment of evidence
Step 12	Drafting the report on available evidence
Step 13	Recommendations on health promotion interventions
Step 14	Developing input to DI.7 (First dissemination package)



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I stage: secondary sources – scoping review

- available systematic reviews
- guidelines and statements from professional organisations
- to be considered depending on time and resources:
 - summaries from projects and networks
 - reports from social campaigns and health promotion programmes



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II stage: primary sources according to systematic review methodology

- selected priority areas
- when there is a gap in evidence
- according to project timeliness



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Health promotion interventions



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Decisions to make

- how to define the scope of evidence search?
- how can we use available definitions of health promotion?
- extendend and orthodox perception of health promotion?
- health promotion & prevention?
- what taxonomy(ies) of interventions?



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Definitions

- Ottawa Charter 1986
- Green & Kreuter, 1991, 1999
- Dictionary of Public Health and Education 2004
- Tannahill 1990
- European Committee for Health Promotion Development, 1998



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Broad/colloquial understanding

any activity that improves health status



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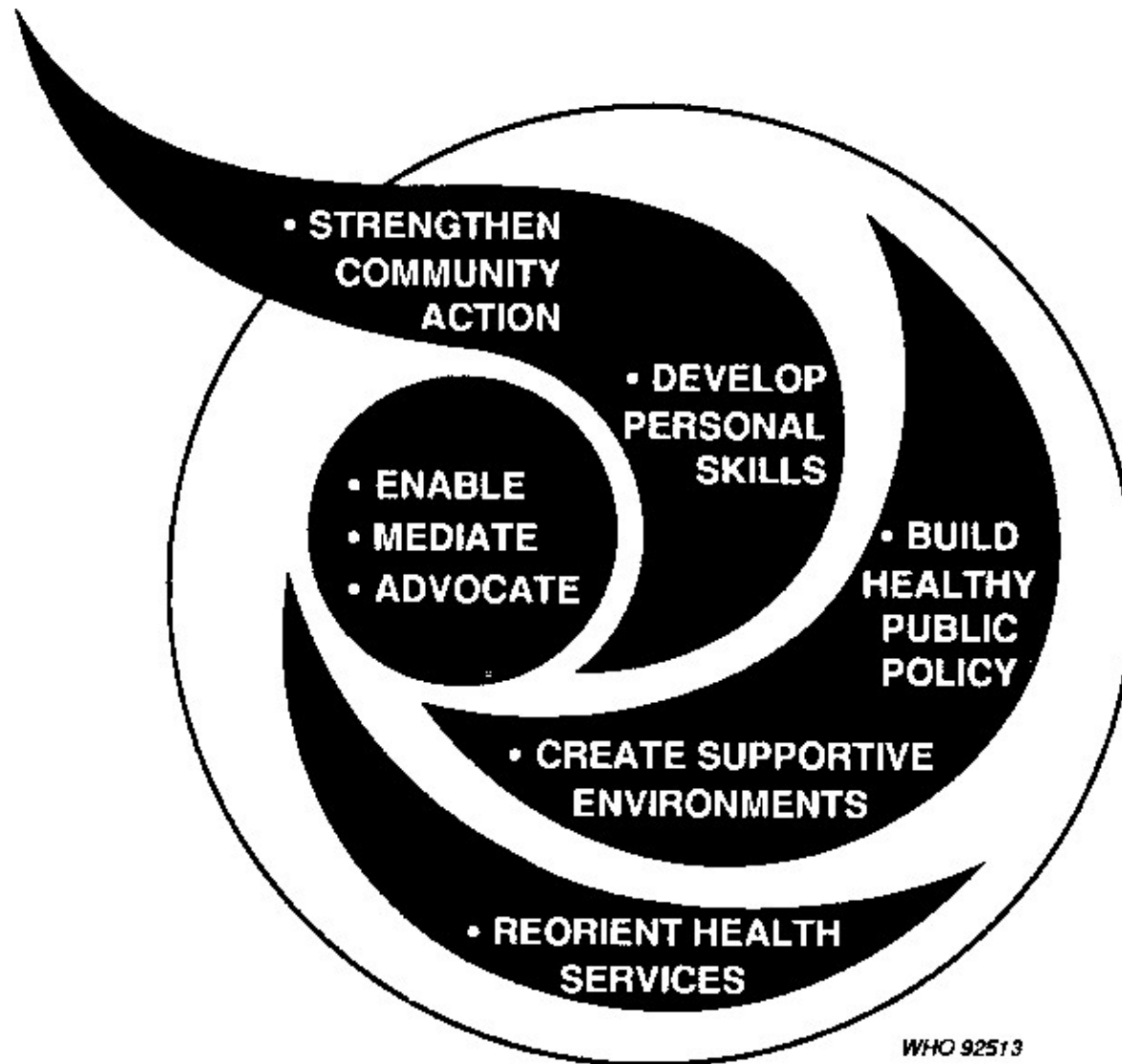


Ottawa Charter, 1986

Health promotion is the **process of enabling** people to increase control over, and to improve, their health.



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Definitions

- combination of two levels of action:
 - health education
 - environmental actions to support the conditions for health living

Green & Kreuter, 1991, 1999



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Definitions

- the use of a **combination of health education and specific interventions**, such as antismoking campaigns, breast health month and diabetes awareness, **at the primary level of prevention** designed to facilitate behavioral and environmental changes conducive to health enhancement and harm reduction.

Naomi N. Modeste, Teri S. Tamayose, Dictionary of Public Health and Education. Terms and concepts. 2nd edition. John Wiley & Sons, Inc. 2004



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Definitions

- Sustainable **fostering of positive health** and **prevention of ill-health** through policies, strategies and activities in the overlapping action areas of
 - socio, economic, physical, environmental factors
 - equity and diversity
 - education and learning
 - services, amenities and products
 - community-led and community based activity

Tannahill A, Health Promotion: The Tannahill model revisited. Pub Health 1990, 2008



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Health promotion perception

- the promotion of well-being and the prevention (or a reduction in the probability) of disease or ill health

*European Committee for Health Promotion
Development, 1998*



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Health promotion



Downie, Fife & Tannahill's, Oxford University Press, 1990



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US Department of Health and Human Services

- four categories of priority areas for national health promotion and disease prevention:
 - health promotion
 - health protection
 - preventive services
 - surveillance

CDC, 1990



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What is not health promotion?

- health promotion strategies are not limited to a specific health problem, nor to a specific set of behaviours
- (WHO) applies the principles of, and strategies for, health promotion to a variety of population groups, risk factors, diseases, and in various settings.

WHO, <http://www.who.int/healthpromotion/en/>



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And what about disease prevention?

- measures not only to prevent the occurrence of disease, such as risk factor reduction, but also to arrest its progress and reduce its consequences once established

Health Promotion Glossary, Geneva, WHO 1998



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Health promotion ↔ Disease prevention

- used complementarily
- sometimes even exchangeably
- measures for implementation overlap



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Formulating search strategy (I)

- broad initial search for health promotion, prevention, and related interventions addressed to elderly
- in phase of selection, inclusion of interventions which fall in health promotion according classical definition and/or types of interventions specified by McKenzie (extended search string)
- in this phase, accepting primary prevention
- inclusion of combined interventions
- exclusion of secondary and tertiary prevention



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Formulating search strategy (II)

- avoiding medicalization (overt) by exclusion of medical interventions (therapy, diagnosis, etc.) and rehabilitation services
- but, if lifestyle interventions addressed to elderly persons with medical conditions, included in the search
- if interventions focus on general health status, QoL, etc. and do not clearly associated with specific clinical treatment, also included



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Search strategy

P	Population
I	Intervention
C	Comparison
O	Outcome



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Query syntax stemming from PICO

P = elderly

MeSH

.....
.....
.....

Free text

.....
.....
.....

OR

AND

I = health promotion interventions (MeSH **OR Free text)**

AND

C = systematic review (MeSH **OR Free text)**

AND

O = effectiveness (MeSH **OR Free text)**



PICo adapted to needs of scoping review

Population	Intervention/interest		Comparison & outcome	
Elderly	“Health promotion”	“Health education”	“Systematic review”	Effectiveness
Senior	Prevention	“Health literacy”	“Meta analysis”	Efficacy
Seniorial	Intervention	“Health communication”	“Meta-analysis”	Efficiency
Elders	Interventions	“Health advocacy”	Metaanalysis	Impact
Elder	Campaign	“Community advocacy”		Evidence
“Senior citizen”	Campaigns	“Social campaign”		Outcomes
“Old age”	“Health programme”	“Social campaigns”		
“Old people”	“Health program”	“Health coaching”		
Seniors	“Health prevention”	“Environmental change strategies”		
“Advanced age”	“Social support”	“Healthy environment”		
Geriatric	“Social care”	“Community mobilization”		
Aged	“Social intervention”	“Behavior modification”		
Ageing	Screening	Screening		
Aging	Preventive	“Primary prevention”		
	Prophylaxis	“Health screening”		
	Nutrition	“Support groups”		
	“Physical activity”	“Social network”		
	Habits	“Social gathering”		
	Addiction	“Health changes”		
		„Legislation”		
		„Regulation”		



Final search strategy for scoping review

((((((((((((((((((Elderly) OR Senior) OR Senior) OR Elders) OR Elder) OR "Senior citizen") OR "Old age") OR "Old people") OR seniors) OR "Advanced age") OR geriatric) OR aged) OR ageing) OR aging)) AND ((((((((((((((((((“Health promotion”) OR Prevention) OR Intervention) OR Interventions) OR Campaign) OR Campaigns) OR “Health programme”) OR “Health program”) OR “Health prevention”) OR “Social support”) OR “Social care”) OR “Social intervention”) OR Screening) OR Preventive) OR Prophylaxis) OR Nutrition) OR “Physical activity”) OR Habits) OR Addiction)

OR

AND (((“Systematic review”) OR “Meta analysis”) OR “Meta-analysis”) OR Metaanalysis)) AND (((((Effectiveness) OR Efficacy) OR Efficiency) OR Impact) OR Evidence) OR Outcomes)



Scoping review - data collection tool

- Publication details, Aim of the analysis
- General area of intervention
- Specific target area
- Medical domain/condition, if applicable
- Level in public health pyramid
- Type of intervention (Issel)
- Type of intervention (CDC after McKenzie et al)
- Complexity of intervention
- Use of technologies
- Short description of intervention(s)
- Types of included studies
- Location of the studies
- Age group
- Target audience
- Age profile information
- Initial assessment of effectiveness
- Description of effectiveness



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General area of intervention

- health promotion*
- prevention #
- screening
- social support/care

* orthodox meaning

only primary



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Specific target area

- general health
- quality of life
- physical activity
- nutrition
- addiction
- mental health
- cognitive function
- sleep problems
- disease oriented
- frailty



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Level in public health pyramid

- population services
- enabling services
- direct health services



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Public health pyramid

- initially developed by the Maternal and Child Health Bureau of the Health Resources Services Administration for maternal and child health improvement programmes (Van Dyke)
- adopted by Issel, (Issel 2009 Health Programme Planning and Evaluation)

**Direct HC
services**

Enabling services

Population programmes

Infrastructure services



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Type of intervention (Issel)

- Treating
- Assessing
- Coordinating
- Monitoring
- Educating
- Counselling
- Coaching
- Giving tangibles

Issel 2009



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Intervention type	Direct	Enabling	Population
Treating	medical procedures, tertiary prevention	exercise classes	immunizations water fluoridation
Assessing	needs assessment	needs assessment	epidemiological assessment
Coordinating	care coordination, linking to services	case coordination, local provider networks	systems integration, disaster response planning
Monitoring	follow-up	local trends	trends analysis
Educating	skills building, information provision	job training programs	media campaigns
Counseling	psychotherapy, emotional support, CBT	group counseling, family counseling, grief counseling	news alerts and advice
Coaching	role modeling, motivational interviewing, empowerment	community development	policy formation
Giving tangibles	vouchers for food	medical supplies, loans	income supplements



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Type of intervention (modified from CDC after McKenzie et al)

- health communication
- health education
- health policy/enforcement
- environmental changes – economic, services, social, cultural, psychological, political,
- health-related community service strategies
- community mobilization
- behavior modifying activities
- organization culture
- incentives and disincentives
- social activities – support groups, peer support/buddy support, social assemblies, social networks



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Use of technologies

- assistive technologies
- information and communication technologies
- social media
- videoteleconferencing
- sensors
- smart home
- other



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Summary

- in the stage of scoping review – broad understanding of health promotion
- in the stage of classification – attempt to use several taxonomies of target areas and interventions
- attempt to obtain multidimensional view of the domain