9th Nordic Health Promotion Research Conference
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Book of abstracts
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ORAL PRESENTATION

ABSTRACTS
COMMUNITY EMPOWERMENT, CO-CREATION AND HEALTH PROMOTION INITIATIVES IN RURAL AREAS IN DENMARK

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Background:
According to the co-creation and co-production discourse, citizens and communities are expected to be involved through their sharing of ideas and more and more also in specific voluntary work, which the municipality has previously delivered. Bailey and Pill (2015) emphasises that there exists a paradox in local empowerment initiatives, where the strategy of empowerment is to empower and engage the local communities but, these attempts can often reinforce the power-base of the controlling institutions in society.

Purpose of study:
It is to explore what take place in preparation and implementation of local development plans in three Danish rural communities, where health promotion initiatives have been included by the citizens in their local plans.

Methods:
A qualitative approach. The study used document analysis of village plans, municipal health and rural policies in a search for interconnection or mismatch between plans. In addition, personal semi-structured interviews were conducted with of local citizens, public administrators and political leader in each of the municipalities.

1): There is generally a very large involvement of citizens and therefore community empowerment take place in the three local areas

2): The great involvement and the very active communities make potential for co-creation and empowerment processes, but the communities themselves will keep the right to choose what they engage in

3): The municipalities can support the local efforts but must not infect or trample the local initiatives

Keywords:
Community empowerment, health promotion, co-creation and collaboration across sectors in the Denmark

FACTORS THAT CONTRIBUTE TO POOR MENTAL HEALTH IN YOUNG WOMEN. A QUANTITATIVE STUDY

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Background:
In modern Western societies, a considerable number of young women struggle with their mental health. Poor mental health is not only an economic burden for society, but also takes a personal and social toll on the women themselves and their families. It has not been quantified why many young women suffer from poor mental health. Qualitative studies have, however indicated that the women feel pressured by high performance demands and unwillingness to disclose the non-perfect elements of the self. To prevent mental health problems effectively, it is important to know and understand the reasons for the suffering.

Purpose of study:
To quantify the factors that may contribute to poor mental health in young women

Methods/Theory:
A survey was conducted in the autumn of 2017 among 1,082 women aged 16-24 years residing in Denmark, representative of the Danish population. Questions included perceived pressure from various sources including parents and the educational system

Findings:
The data shows that approx. 45 % of the respondents feel stressed every day or several times a week, and more than half only feel good enough when they have success in almost all areas in life. One in four girls feel pressure from their parents about achieving top grades in most subjects. A large majority agrees that they can be anything they want as long as they pull themselves together. Stress and perceived pressure coincide in a dose dependent manner.

Conclusion:
High performance demands, the need to be perfect, the preoccupation with individual achievements and the correlating stress levels have the potential to pose a serious threat to the mental well-being of young women in Denmark.

Keywords:
Youth, women, mental health, pressure, demands
Managing uncertainties during return to work processes after cancer

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Background and purpose:
Research shows that return to work processes after cancer may be prolonged due to medical and work related obstacles. Health promoting factors are less investigated. This qualitative study has a salutogenic perspective exploring how return to work processes may be successful by utilizing available resources in resolving upcoming tensions after cancer treatments.

Methods:
Eight persons were interviewed in-depth. Upon the methodology Interpretative Phenomenological Analysis (IPA), we applied the theoretical framework of Salutogenesis to describe and interpret tensions and resources involved.

Results:
Participants described fear of cancer reoccurrence and worries about impairments from cancer treatments and if late effects persistently would influence their working abilities. They described to at all times be determined to return to work, choosing to believe in the best alternative when unsure, staying reality oriented and controlling negative emotions by their thoughts. Furthermore, they adapted to their new situations by adjustments at work, educating or finding new positions. All prioritized activities that brought energy. Finally, they had solid basis financially and socially, and demonstrated to be utilizing available inner and outer resources, pointing to a somewhat strong sense of coherence.

Conclusions:
Negative emotions are not an obstacle for sustainable return to work after cancer. To be of support, it is important to assist people in managing their emotions. It may also be helpful to guide people towards finding meaningful and manageable working tasks according to their realistic working abilities. Interventions studies to guide these processes may be of great value, and more research is necessary for creating instruments.

Keywords: Survivors, Cancer, Return to work, Health Promotion, Health Behaviour

Conversion of Social Capital in the Rehabilitation Process of Adolescents following an Acquired Brain Injury – A Longitudinal Study on Inequality

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Background:
Inequalities in health treatment and outcome varies among different socioeconomic groups and is closely related to the relatives of the patient. This is also the case for adolescents (15-30 years old) with a severe acquired brain injury being a vulnerable group due to the young age and the complex and longterm rehabilitation needs.

Purpose of study:
This study presents a longitudinal study exploring changes in social networks of adolescents with an acquired brain injury in a rehabilitation trajectory. This in order to understand how social capital can be invested and converted in a rehabilitation process and provide us with knowledge on how this can contribute to our understanding of inequality in Danish Health Care.

Methods/Theory:
The empirical data were generated by focus group interviews with and questionnaire surveys of families six months after discharge as well as 1½ years after discharge. The study is theoretically based on Portes’ theoretical trichotomy considering social capital and explored empirically with inspiration of Social Network Analysis.

Findings:
We found that the networks of the families were reduced and weakened throughout the period of rehabilitation especially half a year after hospitalisation. Families with a ‘strong closed family structure’ were most successful in transforming their resources during the rehabilitation process, compared to a ‘small and weak family structure’. Those with a ‘split family structure’ struggled the most in this regard.

Conclusion:
We conclude, that the possibility of transforming social network to social capital in an illness trajectory is closely linked to socio-economic status/social class and hereby can be related to inequality.

Keywords: Adolescent, Longitudinal, Rehabilitation Process, Severe Brain Injury, Social Network
‘ADD-IN’ PROMOTION OF PHYSICAL ACTIVITY IN EDUCATION OUTSIDE THE CLASSROOM: THE INFLUENCE OF SETTINGS

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Background:
Education outside the classroom (EOtC) is a curriculum-based approach to teaching which is positively associated with children’s physical activity (PA), especially for boys. EOtC distinguishes itself as an ‘add-in’ initiative where health promotion is integrated into schools’ and education sector core business.

Purpose of study:
Although various settings are used in EOtC, no studies have investigated whether individual settings have a greater impact on PA than others. Therefore, the aim of this study is to investigate how green settings used for EOtC are associated with PA levels and whether associations are modified by sex.

Methods/Theory:
33 Danish classes (grade 3-6) were enrolled – 17 in which the teachers were willing to use EOtC on a weekly basis during the school year 2014-2015. In a cross-sectional design, children’s PA was objectively measured for seven consecutive days at a random period during the school year with Axivity AX3 accelerometer. In total, 296 children (age 9-13) with PA data for one full school day (8:10-14:00) that involved one EOtC session (Mean±SD, 262±117 minutes) were included in the analysis. Exposure to EOtC and the character of the settings used for each EOtC session was self-reported by the teachers. Difference in PA intensities between green and other settings, was tested using mixed-effects regression models for the full sample and for each sex.

Findings:
Although the type and quality of teaching activities used in EOtC varies, the findings of this study will contribute to knowledge about which settings the use of EOtC will have the greatest impact on health promotion.

Conclusion: (research in progress)

Keywords:
Health promotion, Outdoor teaching, Physical activity, Prevention, School-based intervention

THRIVING – NOT WELL-BEING... TOWARDS A CONCEPTUAL FRAMEWORK FOR IDENTIFYING DISTINCT COMPONENTS OF POSITIVE MENTAL HEALTH.

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Abstract
This study argues for a concept of thriving that is more usable – theoretically and operationally – than the current concepts of mental health and well-being.

Background:
The concepts of mental health and well-being seem ambiguous and translations between Nordic and other languages involving the Nordic word trivsel seem arbitrary.

Purpose of study:
To conduct meaningful analyses and interventions we need clear concepts and clear measurement constructs to provide distinct analytical variables.

Methods/Theory:
The study analyses the roots of well-being concepts and the composite concepts and measurements of mental health.

Findings:
There are no clear distinctions between the concepts of well-being, mental health, quality of life, etc. Most definitions are too broad and too individualistic and mix individual and contextual factors.

Conclusion:
It is recommended to restore the old Nordic concept of trivsel as a bidirectional developmental process between the individual and the surroundings instead of focusing on the individual state of well-being. This framework emphasises the importance of the social context and distinguish between mental health and well-being. Well-being is regarded as a possible spin-off from thriving.

Keywords:
Mental health, well-being, thriving, context, concepts
Of bodies and bikes: how youth become oriented while participating in health-promotional school activities

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Background:
From 2014-2018 Region Zealand and Absalon University College collaborates in developing and testing a health-promoting initiative, which addresses social inequalities in health among children and youth. The initiative aims at integrating health-promotion and elementary school-life with a focus on activities connecting physical activity to inclusion as well as to academic and educational goals.

Purpose:
The study’s purpose is to explore the experience of everyday school-life, from the perspective of youth who are largely absent from elementary school and examines the youths’ orientations while participating in health-promotional school activities.

Theory/Method:
Inspired by sociological phenomenological approach, the study uses participant observations and informal interviews to explore how seven youth, with a high level of school absenteeism, interrelate with objects and each other while participating in health-promotional school activities. The analysis is carried out using Ahmed’s queer phenomenology as a theoretical framework.

Findings:
The analysis asks the question of how school youth interrelate with objects and others in the context of a health-promotion initiative and thereby how they disrupt and reorder social relations in ways, which extend their grasp and puts other relations and new objects into their reach. The analysis identifies four distinct orientations whereby the youth find their way in a social world, in which they do not feel at home. Hereby, the youth also increase their proximity to other academic, educational and social spaces, which at a first glance seem inapproachable and inhospitable.

Conclusion:
Integration of health-promotion and school-life have important implications for youth and their orientations towards or away from academic, educational and social spaces. It is therefore critical to carefully consider approaches to health-promotion activities, as experienced by youth. Both because understanding the perspectives of youth is key to designing health-promotion, which is meaningful to the youth and to avoid that the health-promotional school initiatives contribute to create new inequalities or further exacerbate already existing ones.

Keywords: Health promotion, elementary school, social inequalities in health and well-being

PhD dissertations related to Health Promotion from the Nordic countries during the time-period of 2008 to 2018. Use of the Health Promotion concept in titles, abstracts and keywords.

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Background:
This project was commenced as a collaboration within the Nordic Health Promotion Research Network (NHRPN) in order to identify the scope and theoretical basis of PhD dissertations on health promotion in a Nordic context.

Purpose of study:
The objectives were to present
1) the methods used for collection of dissertations
2) the first step of analysis in terms of number of dissertations and at what University (College)
3 ) scopes of the dissertations

Methods/Theory:
Searches for dissertations were performed in a number of national databases in Denmark, Finland, Iceland, Norway and Sweden, published 2008-2018. Different methods and theoretical perspectives presented in the abstracts will be analyzed.

Findings:
Strategies for collection of dissertations differed between countries. There are no common national databases for dissertations in the examined countries. Manual searches at university sites as well as different national databases were required for collecting dissertations from all Nordic universities. According to the preliminary findings, there were 56 published PhD dissertations from 6 of the 8 universities in Denmark, 65 from 7 universities in Finland, 48 from 10 universities in Norway and 225 from 22 universities/university colleges out of 25 in Sweden. There are zero dissertations from universities in Iceland and Faroe Islands. An overview of the different scopes of the dissertations will be presented at the conference.

Conclusion:
The procedure for collecting dissertations were much more difficult than expected. The forthcoming analysis will contribute of providing a comprehensive picture of the scopes and the implementations of Health Promotion within Nordic dissertations.

Keywords:
PhD; Dissertation; thesis; Health promotion; Theory; Nordic countries
SUCCESS FACTORS FOR DEVELOPMENT OF HEALTH-PROMOTING AND SUSTAINABLE LEADERSHIP IN HEALTHCARE—LEARNINGS FROM AN INTERVENTION STUDY

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Background
Leadership is considered a key condition for employee health. There is limited research on how learning processes at different organizational levels contribute to the outcomes of workplace health promotion interventions.

Aim
The aim of this study was to map out learning factors contributing to an improved work environment following interventions aiming at developing health-promoting leadership.

Methods
The implementation of an intervention program based on system theory was evaluated. The program included evidence-based knowledge of key-factors and conditions for improving workers’ well-being. 6 groups of 65 managers and organizational key actors were participating in the program. The program was evaluated through interviews (n=44) and questionnaires to managers (n=37) and employees (n=348) before and two times after the intervention program.

Results
The survey results indicated improved health-oriented leadership, job satisfaction, vitality and improvements of work environment at the workplaces where the managers had been working actively according to the leadership program. Multilinear models pointed at that the learning factors “working actively”, “improved learning climate” and “improved managerial work” in different ways contributed to the different outcomes. The analysis of the qualitative interviews showed that important success factors for improvements following the interventions were managers’ own delimitation and prioritization of systematic work environment work as well as inter-organizational collaboration between OHS, HR, managers at different organizational levels and the researchers of the program.

Conclusions
A system oriented mobilization of learning at different organizational levels is important for improvements of health following interventions on health-promotion leadership.

Keywords: Interventions, workplace health promotion, leadership, learning processes

DEMANDS AND RESOURCES IMPACTING ATTRACTIVE WORK FOR REGISTERED NURSES AND ASSISTANT NURSES

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Introduction
Today, turnover among nurses is one of the largest challenges for health care service. Work demands have importance for turnover among both assistant and registered nurses. However, assistant and registered nurses often share work situations, but they have different work demands, work activities and differ in their professional or semi-professional roles. Also, their labor market conditions differ significantly. There is scarce research on what and how organizational demands impact assistant respectively registered nurses’ intention to leave. The aim of this study was to investigate what demands were most important to predict intention to leave among assistant respectively registered nurses. The aim was furthermore to investigate organizational resources that might moderate the negative impact demands have on intention to leave.

Method
A cohort (n= app. 400) with data from a survey to assistant and registered nurses collected in 2012, 2013 and 2014 (T1, T2 and T3) was analyzed. Multilinear analyses were performed to investigate what different demands and different organizational resources at T1 predicted intention to leave at T2 and T3. Secondly, interaction effects of combinations of resources and demands were analyzed for testing resources that might moderate the negative impact high demands have.

Results
Work demands explained more of the variance in intention to leave among assistant nurses compared to registered nurses. Quantitative demands, emotional demands and role conflicts were significantly predicting assistant nurses’ intention to leave. While, resources at work explained more of the variance in intention to leave among registered nurses compared to assistant nurses. Among the resources, sustainable work environment and recognition were significantly predicting registered nurses’ intention to leave. None of the analyzed organizational resources had a major moderating effect on the negative impact from high demands on assistant nurses’ intention to leave.

Conclusion
It is important to decrease assistant nurses’ demands at work for decreasing their intention to leave. More research is needed on specific resources that can moderate the negative impact high demands have on their intention to leave. Additional
to organizational conditions, explanations may be found in the work-group climate as well as the labor market conditions and retirement benefit system.

**Researching Promotion of Resilience in Children: Methodological Challenges and Solutions**

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**Background:**
The aim of this workshop is to discuss methodological challenges during the planning of an evaluation of mental health promotion initiative. The case to be discussed is a resilience curriculum (RESCUR, Surfing the Waves), which is the result of a European research collaboration between six universities (in Malta, Italy, Greece, Croatia, Portugal and Sweden). The RESCUR curriculum was developed as a universal intervention including special efforts to be relevant for children in risk zones.

**Purpose of study:**
The workshop will focus on six principle challenges, which first are discussed in the workshop, then we present our case. (1) The intervention should be targeting important mechanism for enhancing resilience. (2) The recruiting of interventions sites and participants is demanding. (3) The design of an implementation and effect study is challenging. (4) The selection of sensitive measurement tools is essential. (5) The implementation of the intervention is a key concern. (6) The cooperation between researchers, schools, teacher, parents, and children is essential for sustain results.

**Methods/Theory:**
Using our project as a case: The RESCUR curriculum was developed as a universal intervention including special efforts to be relevant for children in risk zones. The research trial included large clusters in school, NGO and social service. A cluster randomized trial was planned for reaching high quality evidence. Measurement tools include quantitative scales, observations and interviews. The implementation was promoted by training and supervision of the practical work with teachers and group leaders. The research on implementation used a mixed-methods approach to enhance the understanding of the processes and effects. The training and supervision of the practical work with the RESCUR curriculum has proceeded as planned. The analysis of the implementation will give us a feedback on the achievement, barriers and success factors.

The academic-practice-policy partnership has been instrumental for the development of the design of the research program, promoted the gradual implementation and enhanced both the practical and scientific relevance and quality of the work.

**Conclusion:**
The workshop will discuss methodological challenges when doing intervention research in health promotion. Our research program on implementation and the effects of the RESCUR curriculum will illustrate the development of compromises between the needs of the practitioners, the researchers and the policy-makers.

**Findings:**
The reflective part of the workshop will go beyond the decisions made in our project: The theoretical foundation for the program is based on a socio-ecological model of resilience, but essential is that the intervention targets European children in the context of societal changes. Practical problems occur when recruiting the schools, local NGO groups and social services. In the school arm, the schools were cluster randomized, which was not possible neither in the NGO or the social service. The outcome measures need to be relevant and feasible to use for children aged 7-12 as well as teachers and group leaders. The research on implementation used a mixed-methods approach to enhance the understanding of the processes and effects. The training and supervision of the practical work with the RESCUR curriculum has proceeded as planned. The analysis of the implementation will give us a feedback on the achievement, barriers and success factors.

**Keywords:** Resilience, children, controlled trial, intervention, mixed methods research

**On the Importance of Implementation Theory and Participatory Practice-Based Research for a National, Regional and Local Development to Support Children of Parents with Dependency Disorders**

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**Background:**
Children living in families with dependency problems face challenges in their daily life not just with regards to future alcohol abuse - a challenge for the welfare state. Therefore, the Swedish Association of Local Authorities and Regions (SALAR) started a development process guided by implementation theory.

**Methods/Theory:**
A participatory practice-based research program was developed including a mixed-methods approach. Analysis of documents, participatory observations, group discussions and interviews were conducted.

**Findings:**
On the Implementation structure: A national implementation team was created by involving SALAR professionals working with dependency and children initiatives. At regional/county level process leaders and development workers collaborated in joint assignments to support locally planned and implemented initiatives to support children and parents.
On the Implementation processes: The national team developed a participatory developmental process including continuing education and support structure. At the county level a team of professionals cooperated in supporting the municipalities, which included competence development, development of guidelines and cooperation in families in need.

Conclusion:
National initiatives need implementation theory and a focus on real changes and sustainability as well as social inclusion and social justice. A development process needs leadership, clear mandates, time and support through monitoring and systematic knowledge dissemination. Participatory practice-based research is a challenge. Increased collaboration can make a difference according to the voices of children, parents and professionals.

Key words:
Implementation theory, collaboration, participatory research, children of alcoholics

IMPLEMENTING A NEW MENTAL HEALTH POLICY IN SWEDEN

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Background:
Sweden faces increasing problems related to mental ill-health. To address this problem, the government recently launched a new mental health policy to cover mental health issues in general.

Purpose of study:
This study aimed to explore the implementation process of the new mental health policy.

Methods/Theory:
A case study was conducted in which national governance and regional response constituted the main elements of the case. A period of 4 years was chosen. In all, 68 national and regional key documents were selected for the analysis. Theories of implementation processes and governance strategies were used to enhance the understanding of the data.

Findings:
The implementation process showed the following distinctive features: 1) a broad range of target groups were addressed from persons at risk of mental ill-health to persons suffering from severe mental illness; 2) the whole spectra from preventive interventions to treatment interventions were included; 3) the mental health of children and youth was prioritized; and 4) the character of the governance gradually shifted over time from an open to a more targeted approach. A major difficulty associated with the implementation process was the lack of options to systematically follow-up government policy efforts.

Conclusion:
The broad definition of mental health care and support meant there were regional variations in the prioritizing of groups, as well as regional variations on the working methods used.

Keywords:
mental health, policy implementation

PROGRAM REACH OF A PHYSICAL ACTIVITY SCHOOL HEALTH PROGRAM: A QUALITATIVE STUDY OF TEACHERS’ PERCEPTION

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Background:
There has long been a concern that health promotion programs reach those in lesser need of improving their health, to a larger degree, than those in higher need. In a school setting, there is a risk of mainly reaching those children who are more experienced in and enthusiastic about, for instance physical activity or healthy eating.

Purpose of study:
The nationwide three-week-long school-based physical activity competition program “Active Around Denmark” (AAYR) is offered yearly to all Danish school classes. We aimed at uncovering teachers’ perceptions of the implementation of the program. We wanted to establish if teachers perceive different participation in students who are more or less confident when it comes to physical activity, and if teachers observe negative effects on social cohesion in class due to the competition program.

Methods:
This qualitative project is based on individual interviews with 16 school teachers who implemented the program in a fifth-grade school class (9-11 years) in 2017. Data was analyzed through systematic text condensation.

Findings:
Teachers perceived program reach to be high and did not experience that those students who were less confident when it comes to physical activity had differential participation than those feeling more confident. Further, the program was perceived to positively affect social cohesion in class.

Conclusion:
Based on teachers’ perceptions, the AAYR program did not seem to be differentially received by students. Future studies are needed to study implementation from a student perspective and/or program sustainability in longitudinal studies.

Keywords: Youth, adolescent, exercise, intervention
STATE-ORGANIZED HEALTH EDUCATION IN GERMANY – HEALTH LITERACY PROMOTION WITHIN HEALTH COMPROMISING REGULATIONS

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Background:
Migrants particularly refugees often suffer from multiple health issues and face various financial, language and cultural barriers to health care. To support their integration, Germany developed a mandatory language course for newcomers with twelve core topics including health. However, no empirical evidence exists on the nature and the course’ potential to promote health and health literacy.

Purpose of study:
We aim at closing this gap, exploring the characteristics of the language-related health literacy skills and informing other countries on lessons learned from this state-organized health education program.

Methods/Theory:
We systematically conducted a document analysis of the 22 course manuals by the German government acknowledged and triangulated it with the regulations and quantitative studies.

Findings:
Health is included in all language levels and targets the interaction with the health care system and health-promoting advices. Besides vocabulary, also specific language features (imperative, auxiliaries) and language skills (listening to the doctor, describing symptoms and completing forms) are assessed. But the participants complain about factors negatively impacting their health namely time constraints, concentration difficulties and fear of failing the test. Furthermore, the course embraces a deficit perspective on learner in need to acquire language skills because existing assets and capabilities are rarely utilized.

Conclusion:
Addressing health literacy in language courses is a promising and effective strategy but limited and negatively impacted by the regulations, time, financial and personal constraints and the focus on passing the final test. This study can inspire other countries to modify the course to enhance health literacy of their newcomers and to strengthen intersectoral collaboration.

Keywords: Health literacy; adult education; migration; setting

THE GOVERNANCE OF EQUITY IN HEALTH

Marit K. Helgesen
Østfold University College

Background and purpose:
All Nordic countries develop policies to increase equity in health. In all countries, public health policies are institutionalized in a multilevel system, and coordination and cooperation between more public policy sectors as well as with voluntary/private sectors is necessary to accomplish equity. The purpose of this paper is to explore how policies to increase equity is governed in the Nordic countries.

Methods/Theory:
The Nordic countries can be studied in a “most similar systems design” that allow the researchers to concentrate on “meaningful systemic differences” (Lijpart, 1975). Therefore, we study the generic mechanisms of governance: laws, economies, information and organization and ask whether differences in these mechanisms as well result in different policies to increase equity.

Findings:
Two countries have laws on public health. In Denmark, Finland and Norway the national level fund public health partly as it is defined as local level projects, while in Sweden it is expected that the national level fund the totality if policies are developed for municipalities to implement. In Denmark, Finland and Norway the national level is mandated to support municipalities with knowledge on the local health status, while the responsibility for this is more fluid in Sweden. In Finland, Norway and Sweden the territorial organizations are discussed and among countries there are variations as to what extent the local government stakeholder associations are involved in increasing equity.

Conclusion:
All countries use all governance mechanisms but they differ in intensity. This result in different policies to increase equity in health.

Keywords: governance, equity, law, knowledge
A CONCEPTUAL CRITIQUE OF HEALTH IN ALL POLICIES — DEVELOPING A POLICY FRAMEWORK TO REDUCE SOCIAL INEQUITIES IN HEALTH

Ditte Heering Holt, et al.
National Institute of Public Health, University of Southern Denmark

Background:
In recent years there has been a proliferation in concepts to describe intersectoral health policies. Much of this work orients around the promise of Health in All Policies (HiAP), an approach that promotes addressing the social determinants of health and social inequities in health. However, in theory and practice, questions of health equity are often marginal or unattainable.

Purpose of study:
The aim of the paper is to develop a conceptual critique of HiAP and, on this basis, explore how policies could be more effectively designed and implemented with the explicit goal of reducing social inequities in health.

Methods/Theory:
the paper uses empirical examples of HiAP policies to develop a conceptual critique which outlines two inherent problems of HiAP: ambiguities concerning the intentionality and directionality of the HiAP concept. We introduce Sen’s capability approach to outline a new policy framework.

Findings:
We find that HiAP policies have often been ineffective at reducing social inequalities in health. We propose that the intersectoral approaches involved with policymaking and implementation of health equity policies should be seen as distinct from Health in All Policies and could usefully be regarded as additional to the existing approach.

Conclusion:
We argue that the capability approach could provide the basis of a policy framework for guiding more effective intersectoral policy action to reduce social inequities in health.

Keywords: Health in All Policies, intersectoral policymaking, health inequality

INTRA-FAMILIAL HEALTH POLARIZATION: HOW DIVERSE HEALTH-CONCERNS BECOME BARRIERS FOR HEALTH BEHAVIOR CHANGE WITHIN FAMILIES WITH PRE-SCHOOL CHILDREN AND EMERGING OBESITY

Didde Høeg, PhD-student,
Department of Health Promotion, Steno Diabetes Center Copenhagen

Background:
In a rural Danish municipality, a high rate of school-aged children is overweight or obese compared with average rates in Denmark. Thus, there is a need for the municipality to initiate an obesity preventing intervention targeted families with preschool-aged children. However, prior to intervention development it is essential to examine the local context to be able to tailor an intervention to local needs.

Purpose of study:
To study contextual barriers and potentials for healthy living within families with preschool children and emerging overweight.

Methods/Theory:
Workshops were used to gain qualitative knowledge about the families’ everyday lives, health perceptions and health concerns. Four workshops with families (45 family members) and five workshops with professionals (31 professionals) were conducted. Theory of Lindbladh & Lyttkens was applied to elaborate context-findings in relation to health behavior changes in the families.

Findings:
All families perceived ‘healthy living’ to entail undesirable practices (extreme workshops and strict diets) and an absence of all desirable preferences (food flavors). Furthermore, the parents had conflicting health concerns. The mothers were concerned that the child’s overweight would run out of control and lead to health-related complications. The fathers were mostly concerned that the family would start practicing ‘healthy living’ in a fanatical manner. This created a family-dynamic where the parents performed opposed health behaviors, which became a huge barrier for becoming a healthier family.

Conclusion:
Understanding local perceptions of ‘healthy living’ and familial contexts related to childhood obesity is essential prior to the development of tailored interventions.

Keywords:
Family research, deprived area, health perceptions, childhood overweight and obesity.
How can we optimize the use of research in governmental organizations when making public health policies?

Mette Winge Jakobsen,
Unit for Health Promotion Research, University of Southern Denmark

Background:
Focus on organizational factors of research use for public health policymaking has increased; however, this knowledge is scattered across disciplines and with different scopes.

Purpose of study:
To map the organizational factors that facilitate research use in public health policymaking.

Methods/Theory:
Scoping review methodology and thematic content analysis. The model of organizational culture by Schein was used to reflect upon the most frequently reported factors.

Findings:
Fourteen reviews and 40 empirical studies were included in the review. A conceptual map was developed of 64 organizational factors that facilitate research use. The review found a general lack of use of theories. Twenty-seven factors were reported by seven or more empirical studies, including at least one review. The review demonstrates a close link between individual factors and organizational factors in relation to research use. Based on the model of organizational culture by Schein, several of the frequently reported factors reflected the three levels of organizational culture. For instance, funding and commissioning of research and external communication, clear strategic vision for research use and performance management strategies, and a high value placed on rationality, professionalism and quality improvement.

Conclusion:
This review demonstrates the importance of an intra-organizational perspective of research use that combines individual and organizational factors. The lack of theory in previous research stresses the need to apply more theories to better understand organizational research use. Reflecting upon Schein’s model of organizational culture in relation to the identified factors, this model seems useful in understanding organizational cultures, which are research receptive.

Keywords:
Research use, policymaking, policy organizations, organizational culture, knowledge management

“The Health-Promoting Quality of Pilgrimage Walking”

Nanna Natalia Jørgensen
Volda University College, Norway

Abstract:
An earlier study concerning the motives, processes and effects of walking the Spanish Camino argues that pilgrimage walking (PW) in a nature and social context is beneficial for mental health and wellbeing (Jørgensen, 2008). Unlike other long-distance walks in nature, people have a purpose with PW (e.g. recovering from hardships) (Hafskjold, 2015), and provides calm and a community where people self-regulate and renegotiate inner values, needs and actions, acquiring a sense of coherence and new perspectives. Hence, PW may be regarded as health promoting, being characterized by an individual’s desire to improve or maintain health and involves active participation regardless of health status (WHO, 1998).

Jørgensen’s current research explores people’s intentions and experiences when walking the Norwegian St. Olav pilgrimage and how these are linked to health outcomes based on people’s perceptions both during and three months after the journey. Data was gathered between May-October 2017 through questionnaires sent to pilgrim hostels along the route. 53 people from 13 countries and with different belief systems replied. Motive, process and effect categories were generated through a qualitative text analysis of their answers, explained with cross-disciplinary theories, pilgrimage being a processual interdisciplinary phenomenon.

Findings show people experience inner peace, empowerment and wellbeing while walking, and a strengthened self, physical health and resilience after the journey. They seem to obtain what they hope for through their own health assets; PW can thus be considered health promoting (Vestøl, 2013). This conclusion opens a window for further exploration and debate of pilgrimage in a health promoting research framework.

Background:
MPhil in Human Development, Currently PhD Fellow in Health and Social Sciences

Purpose of study:
To shed light on the health-promoting qualities of pilgrimage walking

Methods/Theory:
Qualitative questionnaires, from which categories were generated through a qualitative text analysis of answers, explained with cross-disciplinary theories, pilgrimage being an interdisciplinary phenomenon.

Findings: Findings show people experience inner peace, empowerment and wellbeing while walking, and a strengthened self, physical health and resi-
lience after the pilgrimage. They seem to obtain what they hope for through their own health assets; pilgrimage walking can thus be considered health-promoting.

Conclusion: The research concludes pilgrimage walking is health-promoting. This opens a window for further exploration and debate of pilgrimage in a health-promoting research framework.

Keywords:
St. Olav pilgrimage, walking, health promotion, processes, effects, mental health, wellbeing, empowerment.

HEALTH LITERACY IN THE RELATION TO SMOKING AMONG THE ADOLESCENTS

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South-Eastern Finland University of Applied Sciences

Background: Health literacy is conceptualized as action competence where the health-related decision is essential and where the social and contextual determinants interrelate. Daily smoking prevalence among the 8-9 class pupils was 9.6% and among the vocational school 1-2-year students 19.6% in Kymenlaakso region in 2017.

Purpose of study: Investigation smoking and possibilities to quit it among adolescents.

Method: The web based inquiry in the secondary (209 respondents) and vocational (59 respondents) school.

Findings: 97% of the daily smokers, 97% of the occasional smokers, and 85% of the non-smokers and 84% of the smoking experimenters knew the health risks of smoking well. Methods of quitting knew 83% of the daily smokers, 80% of the occasional smokers, 81% of the non-smokers and 84% of the smoking experimenters. Over a half (62%) of the non-smokers and 61% of the smoking experimenters considered smoking restrictions at school supporting their non-smoking manners. Over a half (53%) of the non-smoking and 61% of the smoking experimenters considered smoking restrictions at school supporting their non-smoking manners. Over a half (53%) of the non-smokers and 61% of the smoking experimenters considered smoking restrictions at school supporting their non-smoking manners. Over a half (53%) of the daily smokers avoided smoking in the non-smoking companionship. 40% of the daily smokers smoked more among the other smokers than alone. 48% of the daily, 60% of the occasional smokers and 95% of the smoking experimenters considered themselves be capable of avoiding smoking even other in the companionship smoke. More than the third quarter (78%) of the smokers appreciated their non-smoking friends.

Conclusions:
The restrictions of smoking and visual, encouraging messages for avoiding smoking support to keeping non-smoking. Developing peer-based methods for quitting at school is recommended.

Keywords: health literacy, smoking prevention, quitting smoking, peers

PHYSICAL ACTIVITY AMONG STUDENTS AT VOCATIONAL EDUCATION AND TRAINING SCHOOLS IN DENMARK

Lene Winther Ringgaard
Health Promotion Research, Steno Diabetes Center Copenhagen

Background: Social inequality in health is increasing and PA is important to prevent noncommunicable diseases. Cross-sectional data from 2014 shows that 16% of VET students do not engage in moderate to vigorous PA (compared to 8% among high school students). Schools are an important setting for PA interventions, as PA habits to a certain degree are developed in youth. Furthermore, the 2015 VET-reform included 45 minutes daily, mandatory PA for the students – highlighting that increasing PA levels among VET students is a political priority. However, the schools are struggling on how to implement this initiative. To better inform and tailor PA interventions to VET-school students, there is a need for more comprehensive knowledge on PA prevalence and predictors of PA.

Purpose of study:
To investigate physical activity (PA) level and predictors of PA among students enrolled in vocational education and training (VET) schools and elaborate on how data can be used to promote PA in VET-schools.

Methods/Theory:
In January through March 2019, a national representative cross-sectional survey among high-school and VET students will be conducted. This study presents data on PA-level, PA motivation, PA self-efficacy and PA preferences in the sample of VET students, approximately 2500 students.

Findings:
Descriptive statistics on the level of PA and the proportion of students who adhere to the WHO guidelines on PA will be presented, as well as data
on motivation for PA, PA self-efficacy and attitudes to PA. Furthermore, we will discuss the implications of these finding in planning new PA interventions in VET-schools.

Conclusions:
VET-schools are an important setting for PA interventions. The interventions need to be tailored to address student motivation, self-efficacy and preferences for PA.

Keywords:
Physical activity, VET school students, health promotion, intervention, cross-sectional study.

Background:
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Keywords:
Physical activity, VET school students, health promotion, intervention, cross-sectional study.

Being there for each other – health promoting school development from young peoples perspective

Catrine Kostenius
Luleå University of Technology & Norrbotten Association of Local Authorities

The purpose of this study was to describe and understand how mental health can be promoted in schools from young people’s perspectives. Three focus group discussions were held with 14 young people, 8 from Scotland and 6 from Sweden aged 15-21, 11 girls and 3 boys. Participants came from youth groups organized in Scotland by Highland Children’s Forum, and in Sweden by the County Council and Swedish church. The participants were presented with an overall question, How can schools promote mental health and have a role in supporting early intervention in children and young people with emotional and mental health problems? In order to capture their experiences, thoughts and ideas they received two poster assignments which were the point of departure in the discussions. A phenomenological analysis was used. The findings consisted of one main theme Everyone is being there for each other and three themes without any relative order of precedence; Being in a safe, inclusive and well informed space Meeting adults who are available, listening and taking action and Feeling significant and being of significance to others. The young people want adults in school who are present, knowledgeable and wish to engage them and talk about their mental health needs. They believe that both adults and young people have the possibility and responsibility to contribute to a school that promote mental health. Listening directly to young people sharing their experiences and perceptions can provide valuable insight that might inform further research and health promoting school development efforts.

Keywords:
Health promoting school, student voice, school development, mental health

Unleashing the power of everyone – a model for multi sectoral health promotion

Catrine Kostenius
Luleå University of Technology & Norrbotten Association of Local Authorities

The purpose of the study was exploring the use of the 5-D cycle as a research and development model for multi sectoral health promotion. A workshop using the 5-D cycle was held with 79 participants,
68 adults representing 26 different professions and 10 politicians, 11 students aged 12-18 and 1 parent. Qualitative content analysis was used. In the workshop the participants (1) defined health promotion in the context of school, (2) discovered important values and documented them, (3) dreamt by formulating visions and documenting future scenarios, (4) designed activities for improvements, and finally (5) envisioned destiny by formulating activities to reach the goals and continuous development in alignment with the visions and values. The findings reveal a definition of health promotion in the school context including physical, mental, social and existential dimensions. Important visions and values were for example caring for each other, building appreciative relationships, being respectful and honouring diversity in an inclusive environment. The findings illuminate dream-come-true-scenarios capturing the essence of a school where everyone, students and staff alike loves to be, grows and learn for life. We found the 5-D cycle useful in guiding a participatory process including adults, children and youth. It was also helpful in supporting adults and students to formulate dreams and articulating visions on how to improve the school as well as designing for enacting visions. The 5-D cycle connected health promoting school development and research unleashing the power of everyone in multi sectoral health promotion.

Keywords: Appreciative Inquiry, health promotion, empowerment, participatory model, multi sectoral

WHAT’S ON YOUR MIND? – EXPLORING THE USE OF ARTIFICIAL INTELLIGENCE IN MENTAL HEALTH PROMOTION

Catrine Kostenius
Luleå University of Technology & Norrbotten Association of Local Authorities

The need to promote mental health is increasing especially in sparsely populated areas and remote settings. Doings so with an artificially intelligent agent (AIA) may allow the user to receive support through a natural voice conversation. The purpose was to explore the views about promoting mental health with the use of an artificially intelligent agent. Focus group discussions were held during the month of October 2018 in the arctic region of Sweden with a total of 15 participants; 5 representatives from patient organizations, 7 professionals from health care organisations and 3 professionals from local municipalities. The focus group discussions were held with one group IRL and with one group of participants via video link to ensure participation from different municipalities in the most northern county in Sweden. The focus group discussions were taped and transcribed verbatim. Data was analysed with qualitative content analyses. The qualitative content analyse resulted in findings that point to a field of tension: Possibilities - enabling more people to easily and quickly access mental health promotion. Challenges - questioning if the encounter with an AIA would replace human-to-human conversations or be a complement in promoting mental health. The findings point to the possible use of an artificially intelligent agent to promote mental health in general and specifically in sparsely populated areas and remote settings. In addition, we suggest AIA will be the subject of further research and ethical discussions.

Keywords: artificial intelligent, health promotion, mental health, ethical questions

CO-CREATION OF HEALTH PROMOTION KNOWLEDGE IN PARTICIPATION WITH THREE SPECIAL NEEDS INSTITUTIONS

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Centre in health promotion research, Department of people and technology, Roskilde University

Background:
Danish special needs institutions (SNI) care for citizens with significant disabilities. SNI’s are classified and regulated as a social service provider and not as a health service. SNI’s do, however, present themselves as treatment schools, or -homes to get funding from municipalities.

Purpose of study:
The classification as a social service focus on special pedagogics and social support and leaves less emphasis on health knowledge and theory. SNI’s try to provide healthy environments, nourishment, relations, and activities for their users. However, professionals at SNI’s lacks knowledge and theory of health promotion. So health is tacitly part of the pedagogical work. Hence, SNI’s had an interest in identifying practice and conceptualizing local “tacit” institutional pedagogical health potentials for their users in their daily pedagogical practices.

Methods/Theory:
The methods based on participatory action research, in which field studies, interviews with the professionals and users led to case reports. These reports provided the institutions to re-interpret the findings in joint workshops, and hence address health promotion potentials in their pedagogical practices. The methods created a joint co-creation of knowledge aiming at identifying possibilities for changes in their institutional and pedagogical practices.

Findings:
The research project highlighted that SNI’s need to
gain knowledge and theory of health promotion to develop healthier pedagogical practices, and healthier institutional settings.

Conclusion: Participating with SNI’s can co-create relevant “local” relevant knowledge of health promotion, and is, yet, an unexplored area in welfare institutions, which could be studied further in a changing landscape of healthy institutional settings.

Keywords: Participatory action research, Special needs institutions, disabilities, health pedagogics

**Salutogenic health promotion in groups: building salutogenic capacity.**

Eva Langeland, et al.
Professor of Health Science, PhD, Western Norway University of Applied Sciences
Faculty of Health and Social Sciences, Department of Health and Caring Sciences

**Background:**
There is a call for knowledge about how individuals evaluate and experience intervention programs based on a salutogenic approach.

**Purpose of study:**
To increase knowledge about health-promoting processes while participating in a salutogenic talk-therapy groups. The following research questions were posed: How do participants in a salutogenic talk-therapy group experience being part of the group when it comes to their own health and well-being? What are the characteristics of the group that contribute to initiate, strengthen and maintain health-promoting processes?

**Methods/Theory:**
The study has a qualitative explorative design, including eleven individual in-depth interviews and one focus group. The sample consisted of home-living persons with mental health challenges, from one salutogenic talk-therapy group, participating in two 16-sessions intervention sequences during one year.

**Findings:**
Although the participants expressed their suffering and struggling with different health problems, attending the group effected their lives and their health and wellbeing positively. Through the analyses, we identified an overall structure: A richer life consisting of three main-themes: A well-functioning group; Who am I? and; A community of like-minded individuals.

**Conclusion:**
A salutogenic group climate with high quality of social support, a redefinition of tension and active participation seems crucial for strengthening salutogenic capacity. Theoretically, it seems fruitful to view sense of coherence as a health and coping resource that enables one to identify resistances resources, and to be able to apply them in a health-promoting manner. Awareness of the interplay between the vital resistances resources; identity and social support, seems prominent in strengthening participants’ sense of coherence.

**Keywords:**
Focus-group, In-depths interviews, Salutogenesis, Salutogenic approach, Talk-therapy group.

**Collaboration in health promotion strategy work – need for social marketing?**

Dr Jaana Leinonen, et al.
Faculty of Social Sciences, University of Lapland, Finland

**Background:**
Finnish municipalities play a crucial role in health promotion. Municipalities are responsible for taking health into account in all their activities and decision-making. Since the challenges related to citizens’ health and wellbeing have become more complex, municipalities have faced demands to develop the collaboration needed for health promotion strategy work. Furthermore, the health care act states that strategy work should have a collaborative emphasis. Municipal sectors must collaborate on strategy formulation and implementation. To increase polyphonic conditions in strategy work, municipalities should engage in strong collaborations with other local and regional organisations.

**Purpose of study:**
The purpose of our study is to increase understanding about the collaboration in health promotion strategy work in municipalities. Our empirical research questions aimed to find out how strategy work is done, who the strategic actors are and what role collaboration play in health promotion strategy work.

**Methods/Theory:**
Empirical data consists of in-depth thematic interviews (N = 26) and focus group interviews (N=3) collected from the municipal managers, leading officials and coordinators responsible for municipal health promotion.

**Findings:**
Although collaboration and its benefits are emphasised, cross-sectional collaboration is not fully implemented. Potential strategy actors are excluded from strategy work due to cultural reasons, weak interaction and a lack of mutually shared, holistic understandings of health promotion.

**Conclusion:**
There is a need for boundary-spanning leadership.
and behaviour that strengthens the mutual interaction and to build strategic collaboration. Managers should change their attitudes more responsive to strategic thinking and collaboration. We suggest social marketing appropriate to bring about necessary change.

Keywords:
Health promotion, collaboration, strategy work, municipalities

THE NORDIC PERSPECTIVE ON MIGRATION AND EMPOWERMENT

Johan Lidmark, et al.

Background:
International migration is a complex phenomenon that touches on a multiplicity of economic, social and security aspects affecting our daily lives. In the Nordic countries migration is a contentious political topic as the number of migrants has significantly increased in recent decades.

Purpose of study:
The aim of this study was to analyse governmental policy documents on migrants and refugees in Denmark, Finland, Norway and Sweden and to identify and compare how they are described within an empowerment perspective.

Methods/Theory:
A critical discourse analysis was undertaken of each Nordic country.

Findings:
The findings revealed that all four documents placed migrants in a passive position in regard to decision making and that an empowerment perspective was lacking.

Conclusion:
Migrants are similarly treated in each Nordic country as a problem to deal with rather than as a possible resource for the society and the approach seeks to protect the welfare state and the culture of the country. The lack of empowerment perspective may be having a negative impact on the health and well-being of migrants and on their integration in the Nordic society. The paper concludes by raising several questions in regard to migration and empowerment in the Nordic context.

Keywords:
empowerment, migrants, refugees, Nordic, policy, health, welfare state.

HEALTH BENEFITS OF INTERACTION WITH NATURAL ENVIRONMENTS AMONG IMMIGRANT WOMEN IN NORWAY.

Catherine Lorentzen, et al.
University of South-Eastern Norway

Background:
Immigrants in Norway, and especially some sub-groups of women, experience generally more health challenges than the ethnic Norwegian population. The health beneficial effects of interaction with nature are well documented, but few studies are performed on immigrant populations.

The purpose of the study:
The present study explores the potential health benefits of interacting with natural environments for immigrant women in Norway.

Methods:
We performed individual interviews with 14 first generation immigrant women aged 27-70 years from Iran (2), Poland (2), Palestine, Afghanistan, Congo, Kenya, Thailand, Russia, Portugal, Latvia, Colombia and Bulgaria. Data were analyzed by qualitative content analysis.

Findings:
Interaction with nature contributed in different ways to health improvements for the interviewees. Nature served as an arena for restoration and therapy, through calming and mood improving effects. Interaction with nature further improved mental health by accelerating the process of acculturation through different learning mechanisms (learning about aspects of the Norwegian culture, in general and related to outdoor life, learning about Norwegian natural environments, getting familiar with the local physical environments, learning the Norwegian language). Nature also served as an arena for various forms of social interaction that contributed in strengthening existing social bonds and reducing feelings of loneliness and isolation. Physical activities were often involved in the interviewees’ interactions with nature, yielding both mental and physical health benefits.

Conclusion:
The findings of this study suggest that interaction with nature may be particularly health beneficial for immigrant populations.

Keywords:
nature, immigrant, women, health benefits, restoration, acculturation, social interaction, physical activity
Using photovoice to promote young migrants health - benefits and challenges with the method

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Background:
Young migrants are a group that are seldom asked to share their experiences of health. More research focusing on an inside perspective on young migrants health is needed. Through photovoice, young people are given the opportunity to document and discuss their lives by using photography.

Purpose of study:
Illuminating experiences from collaborating with young migrants to promote health using photovoice, focusing on benefits and challenges with the method.

Methods/Theory:
The study was based on a social perspective on health. Photovoice was the chosen method inviting 28 young migrants in a municipality in northern Sweden aged 16-20 from 5 different countries to take pictures and discussing these with focus on experiences and conditions for health and how health can be promoted. The four step process: 1) Introduction, 2) Photographing session, 3) Workshops, and 4) Final presentation.

Findings:
Using photovoice with young migrants enabled insights into several aspects of the participants’ everyday life inside and outside the school context. The participants could identify health promotion factors but also health challenges in their everyday life. More important, it enabled conversations based on the participants’ pictures of their lives rather than questions posed by the researcher. The study also revealed ethical challenges addressing power imbalance and how to reach social change, which is further discussed.

Conclusion:
We recommend using photovoice with young migrants as it proved to be a rich tool to promote critical thinking and discussions allowing self-reflection. However, more research is needed to discuss how to reach social change, the last step of the method.

Keywords:
health promotion, photovoice, social change, young migrants

Partnering for mental health promotion: Process evaluation of ABC for mental health in Denmark from 2016-2018

Katrine Rich Madsen, postdoc, et al.
National Institute of Public Health, University of Southern Denmark

Background:
Mental health problems are a growing worldwide challenge. Multi sectoral and disciplinary partnerships are recommended as means of ensuring effective delivery of mental health promotion initiatives and creating environments that foster and maintain population mental health. ABC for mental health is a community-based mental health promotion campaign that provides a framework for how to work with mental health promotion across sectors and disciplines. ABC for mental health is organised as a national partnership that included seven municipalities, seven private organisations/NGOs and three public organisations from 2016 to 2018, but that have grown significantly since.

Purpose of study:
The purpose of this study is to describe and examine the organisation and feasibility of the ABCs of mental health in Denmark from 2016-2018.

Methods/Theory:
Qualitative data was collected through activity and evaluations reports (four waves, total of 54), 5 interviews and 12 group interviews.

Findings:
We will present preliminary findings from the process evaluation of the ABC for mental health partnership in Denmark. Specifically, there will be a focus on the process of building, sustaining and managing a large national cross sectoral and cross-disciplinary partnership between municipalities, private organisations and researchers working with mental health promotion.

Conclusion:
The findings add to the scarce empirical knowledge on how to effectively work with mental health promotion in a partnership. Furthermore, the findings will be valuable for the ongoing work with ABC for mental health in Denmark (2018-2021) but also for other countries worldwide where ABC for mental health is being implemented.

Keywords:
Mental health promotion, partnerships, intersectoral and -disciplinary collaboration.
“MAKE MY DAY”: A DIGITAL HEALTH PROMOTION AND STROKE PREVENTION PROGRAM FOR PEOPLE WITH TIA

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Background:
It is possible to impact on stroke prevention by reducing modifiable risk factors such as unhealthy lifestyle habits. In primary health care mHealth applications could be a way forward in addressing preventive and health promotive actions and follow-up for persons with a heightened risk for stroke.

Purpose of study:
To explore the feasibility and experiences of a digital stroke prevention intervention for persons who had a Transient Ischemic Attack (TIA).

Methods/Theory:
Persons who had a TIA (n=6) were recruited from neurological units via a TIA registry in Stockholm county. An intervention including six physical group meetings and a mHealth application addressed lifestyle changes using individual goal setting. The intervention included modules that covered several lifestyle habits. Both quantitative (lifestyle habits, stroke risk factors, quality of life, data logs) and qualitative data (individual interviews) were collected pre and post intervention.

Findings:
Preliminary findings indicate high compliance in using the mHealth application and that the application was useful to raise awareness of current activity patterns in everyday life and for supporting lifestyle changes. The physical group meetings, and individual follow ups at 6 and 12 months gave additional support for these participants to proceed with lifestyle changes.

Conclusion:
This case study indicate that on an individual level the mHealth application in combination with physical group meetings and follow up gave the participants support in their change process and that persons who had a TIA could benefit from a prevention program in order to change unhealthy lifestyle habits.

Keywords:
Lifestyle habits, mHealth, Mobile phone technology, Prevention, Primary health care, Stroke, TIA

THE LONGITUDINAL ASSOCIATION BETWEEN CHILDHOOD AND ADOLESCENCE EMOTIONAL AND BEHAVIORAL PROBLEMS AND ADOLESCENT HIGHER SCREEN USE

Niko Männikkö; et al.
Oulu University of Applied Sciences, University of Oulu

Background:
The links between emotional and behavioral problems with excessive screen exposure has repeatedly been highlighted in the literature. However, there are few longitudinal studies examining this association.

Purpose of study:
We aimed to investigate the relationships between childhood and adolescence emotional and behavioral problem characteristics and the amount of adolescent daily screen time.

Methods/Theory:
In the Northern Finland Birth Cohort 1986 we have longitudinal data from 7036 participants (3390 boys). They were assessed at the birth, in childhood (age 8), and in adolescence (age 15–16). Measures included socio-demographic variables at the baseline, subjects’ emotional and behavioral tendencies assessed by teachers in childhood (Rutter B2 scale; Elander & Rutter, 1996) and with self-reports in adolescence (Youth Self-Report (YSR); Achenbach, 2001). Furthermore, subjects’ self-reports in adolescence covered digital media use. A three-phase hierarchical linear model was conducted. Study participants spent an average of around four hours per day with different media screens.

Findings:
We found that with males, higher levels of social, rule-breaking and attention problems were significantly related to the higher amount of screen time, whereas higher level of anxious-depression symptoms were inversely related to the screen consumption in adolescence.

Conclusion:
Overall, this study emphasized that specific characteristics of behavioral problems in adolescence are linked to higher screen consumption.

Keywords:
Adolescent, Sedentary behavior, Computer, Video games
IT’S TIME TO REWRITE THE SOCIAL DETERMINANTS OF HEALTH [SDH]-MODEL AND INCLUDE THE EXISTENTIAL DIMENSION

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Background:
The famous SDH-model, with layers in a semicircle, was first painted in the sand by M.Dr. Haglund and published in Swedish 1983 with M.Dr. Svanström. The model has been translated and modified through the years with more or less the same determinants. The last decades the existential dimension of health, sometimes referred to as spiritual, has proven to be of importance for health and health related quality of life [HQOL]. It was recognised as an aspect of supportive environment 1991. WHO developed 2002 a trans-cultural survey WHOQOL-SRPB for measuring HQOL including Spirituality, Religion and Personal Beliefs (religious or secular). This existential SRPB dimension consisted of: Meaning & Purpose in Life; Experiences of Awe & Wonder; Spiritual Connection; Wholeness & Integration; Spiritual Strength; Inner Peace and Hope & Optimism and Faith.

Purpose of study:
1) The overall purpose is to generate knowledge about the existential dimension of health (understood as aspects of SRPB) in relation to SDH and their impact on HQOL.
2) To develop existential health promotion in a secularized Swedish context.

The aim of this presentation is to introduce a refined model of SDH with the existential dimension.

Methods/Theory:
Theories of public-health, psychology of religion and HCL is combined in a mixed-method design. with now: Now consisting of WHOQOL-SRPB (original and BREF) surveys N=303, interviews with 15 focus groups and promotion evaluations.

Findings:
The existential aspects were relevant for participants in the interviews, preliminary partial psychometrically evaluates found correlation to SDH.

Conclusion:
Sustainable health promotion needs to consider the refined SDH-model.

Keywords:
Existential health; Spiritual health; social determinants of health; health promotion & Health related quality of life.

A CIRCUMSTANTIAL APPROACH TO SOCIAL INEQUALITY IN HEALTH; ON TARGETED HEALTH PROMOTION AND THE PROBLEM OF CATEGORIZATION.

Camilla Hoffmann Merrild
Center for General Practice at Aalborg University

Background:
One way to reduce social inequality in health in welfare states is through targeted health promotion interventions, focusing on at risk populations. However, such interventions often fail to reach those most in need, and their effectiveness is highly debated.

Purpose of study:
Departing in the case of preventive health checks offered to at risk populations, this presentation explores how ways of addressing social vulnerability, disadvantage, or socio economic position within health promotion and illness prevention relates with the situatedness of life, health, and illness.

Methods/Theory:
Semi-structured interviews with people, who had been invited to participate in a preventive health check. Observations of health checks were also carried out. Theoretically, the presentation engages with contemporary discussions of egalitarianism, practice theory and health promotion.

Findings:
Targeted health promotion interventions often rest on assumptions of what socially disadvantaged people need, and therefore do not always address the actual problems faced by the people they intend to help. Moreover, the very categorization of disadvantaged or vulnerable populations group together people who live fundamentally different lives, and therefore have very different needs for assistance and support.

Conclusion:
Targeted public health interventions must be grounded in the concrete needs of the people involved, and more attention should be paid to the process of conceptualizing social differences in health and illness. Categorizing and defining people according to personal traits and competencies, diverts attention away from life circumstances that are often much more fundamental to health and illness practices.

Keywords:
Preventive health check, social inequality, categorization, life circumstances, egalitarianism.
Mandatory Exercise at Work and Employees’ Rights to Privacy and Non-discrimination: A Nordic Perspective

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University of Copenhagen, Denmark

Purpose:
The purpose of the study is to assess whether recent measures to make exercise in the workplace mandatory conflicts with employees’ fundamental rights to autonomy, privacy and non-discrimination in Denmark and Sweden.

Method:
I use a legal positivist approach and analyze laws, collective agreements, and case law of the selected countries. I also use a comparative legal approach to put the findings from each country in perspective, and analyze these laws in light of European Union (EU) Law and the European Convention on Human Rights (ECHR).

Main findings:
The analysis of the laws shows varied levels of protection of employees in the Nordics. In particular, collective agreements may play a distinct role, which may result in such mandatory measures being legal from a national perspective. However, in light of EU law and the European Convention of Human Rights, mandatory exercise in the workplace may be challenged on the ground of privacy, autonomy and the right to non-discrimination. As such, these measures may be deemed as disproportionately interfering with individual autonomy. Less intrusive measures, such as voluntary exercise, may be more adequate. In addition, such measures may result in a more favorable treatment of healthy employees, and the exclusion of employees on the grounds of age, gender, disability, religion, and health status at the recruitment stage, and as grounds for employment termination.

Conclusion:
Employers need to be mindful of the legal implications of these measures.

Integrative or Disintegrative Management and Leadership Approaches to Health Promotion and Sustainable Workplaces?

Arne Orvik, et al.
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Background
Leadership can impact employee health and the social climate, while management can build organizational capacity for sustainable workplaces. The aim of this study is to investigate if and how management and/or leadership approaches in research on health promotion and sustainable workplaces are addressed, and to discuss the results related to a need of disintegrative approaches to health promotion and economic efficiency.

Material and Methods
In a scoping review, 20 scientific peer-reviewed articles from the Nordic countries were included for an in-depth analysis. Of these, 10 studies focused on management, 5 on leadership, and 5 on both management and leadership.

Findings
Four categories emerged: studies including a whole system understanding; studies examining success factors for implementing workplace health promotion; studies using sustainability for framing the study; and studies highlighting an explicit economic focus.

Conclusion
It seems reasonable to conclude that workplace health promotion should integrate health needs and efficiency in order to contribute to long-term sustainability. However, while integration of health needs into leadership has been highlighted, efficiency is often prioritized in work organizations and challenge the social and health dimension of sustainability. Therefore, it may be discussed whether disintegrative approaches to health promotion and economic efficiency are needed. In applying the concept of organizational health we consider health humanities and ‘compassionate design’ as valid approaches in promoting workforce wellbeing. Organizational health presumes a dialectical perspective with a focus on diversity and value conflicts, but also mutual dependencies, particularly in personnel-intensive organizations in health care.
BOUNDARY RE-ESTABLISHMENT IN NEW TERRITORY?: NURSES WORKING FOR THE IMPLEMENTATION OF LIFESTYLE-RELATED DISEASE PREVENTION IN DANISH HOSPITALS

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Abstract:
In Denmark and elsewhere, healthcare professionals are mobilized to identify individuals at risk as a way of reducing the development of so-called lifestyle-related chronic diseases such as type 2 diabetes. However, we have few insights into situated work practices for handling the new health challenges. This paper focuses on the boundary work among professions involved in preventive measures at Danish hospitals and how new initiatives alter the grounds for professional jurisdiction. Drawing on documents, reports, articles and debates, qualitative in-depth interviews and extended conversations conducted with healthcare professionals, managers, and key persons about goals, dilemmas, and practices related to prevention of chronic diseases, as well as site visits at Danish hospitals, it is investigated which professional groups have assumed responsibility for the tasks, how they are defined, and through what kinds of interactions and infighting. The analysis grounds Abbott’s framework of linked ecologies and his meso-level vocabulary in a situated account of professional boundary work and follow the way different professions create, and sometimes stabilize or standardize techniques for ‘prevention of lifestyle-related diseases’. It is demonstrated by different forms of boundary work how, nurses in particular work to extend, defend or refashion established work boundaries when handling these new tasks.

Keywords:
prevention of chronic diseases, situated work practices, boundary objects, workplace artefacts, sociology of professions

HEALTH ORIENTATION TOWARDS HOME: A CONCEPTUAL COMPASS FOR HEALTH PROMOTION?

Pelle Pelters
University of Halmstad & Stockholm University

Purpose of study:
Considering culture a setting that habitually directs us towards certain ways of thinking, feeling and behaving the aim was to explore the idea of health as a culturally rooted orientation in order to expand the horizon of understanding regarding health as a basis for health promotion.

Methods/Theory:
This conceptual exploration uses queer, postcolonial and phenomenological theorists’ works (e.g. Ahmed, Svenaeus, Baba) as data to outline the concept of “health orientation”.

Findings:
A tentative understanding of a health orientation toward home is suggested: With every (health decision) step on our way in life, we create paths of health practice that gain embodied familiarity each time we repeat the same (cognitive, behavioral, emotional ...) action. Thus, a health orientation is established that conveys a sense of home, i.e. security, familiarity and confidence. As existing paths are, however, easier to follow, powerful health narratives and practices are more likely consolidated than alternative roads to health.

Conclusion:
The concept of a health orientation towards home might broaden the scope of health promotion activities.

Keywords:
Home, health orientation, phenomenology, queer, power

POLES IN THE NORDIC COUNTRIES – MIGRATORY DIFFERENCES: POLISH EXPERIENCE IN THE AREA OF HEALTH COMMUNICATION&PROMOTION

Piasecka-Robak, A

Purpose of the study
Because of Brexit, Poles are increasingly choosing Scandinavian countries for migration, e.g. Iceland, Norway and Sweden. The presentation is a characteristic of Polish experiences in the promotion of health and health communication, constituting the mental heritage of Polish migrants to the Nordic countries.

Methods/theory
the critical paradigm; methods: content analysis, action research, interview / Karl Popper theory of three worlds in health education

Findings
My presentation is to facilitate the understanding of the health behaviors of Poles, to bring the specificity of Polish health communication and health promotion, to understand Polish immigrants from the perspective of their health experiences.
Conclusion
Understanding polish culture of health communication & promotion and polish traditions is necessary to reduce the risk of marginalization. The number of Polish migrants is a new challenge for the public health of the Nordic countries. It requires a global approach with respect for locality.

Keywords
Poles, migrants, mental heritage, health traditions

"SELF-CARE IS HEALTH CARE": PSYCHO-EDUCATIONAL HEALTH PROMOTING PROGRAMME

Lynn Preston
University of South Africa

Background
The study was conducted at a South African government district hospital in a medical out-patient department, which deals with patients with chronic diseases.

Purpose of the study
The purpose of the study was to investigate the needs of patients who have chronic diseases and then to devise a psycho-educational programme, which could empower these individuals towards self-care, which would alleviate the pressure on limited health care professionals. It is significant as South Africa has a resource strapped health system with minimal health care professionals and if patients were more informed they could make better choices.

Methods/theory
The theoretical perspective that grounded the study and the educational programme was the Middle-range theory of self-care (Riegel et al. 2012). The Self-care theory includes three main concepts, namely, self-care maintenance (addressing the process of improving the well-being of the individual - physical and emotional); self-care monitoring (focussing on vigilant body monitoring; self-care management (evaluating changes in the physical and emotional experiences).

Findings
The study highlighted the fact that patients in the South African health system have to take more responsibility for their care, resulting in a need for patient empowerment towards self-care.

Conclusion
If the patients were empowered to be more aware of their own condition and bodily symptoms they will then be able to make better decisions as to when it is necessary to see doctor and when they can cope on their own. In creating three personified characters of self-care management, maintenance and monitoring, a programme evolved whereby the patients could understand and apply self-care principles in a fun way.

Keywords
Psycho-education; Health promotion, Self-care

THE LABOUR MARKET’S ROLE IN CREATING A NORDIC WELFARE STATE REGIME – THE CASE OF NORWAY

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Purpose:
The Nordic countries are well known for having small wage differences and high public social spending. The Nordic countries also figure among the world’s leading nations in international rankings of prosperity, productivity and competitiveness. This shows that there does not have to be a trade-off between efficiency and social security. Under the right institutional circumstances, equality and prosperity can work together and be mutually beneficial. The purpose of this study is to explain the critical role of the wage bargaining system in creating a Nordic welfare state regime – and to highlight the critical role that organized employers played in creating this regime.

Methods:
The issues presented are based on scientific literature regarding the development of welfare state regimes.

Findings:
Coordinated wage bargaining and solidaristic wage policy in Norway has not only generated the most egalitarian distribution of wages in the capitalist world, it has also been crucial for securing high international competitiveness, innovation and modernisation. Coordinated wage bargaining therefore benefited both workers and capital. Small wage differences produced in the labour market have also helped in producing a high level of generalized trust in society, which again have been important in sustaining political support for a high public spending on social insurance and basic goods for all citizens.

Conclusion:
The Nordic countries have performed well, and they still rank high with respect to prosperity and social equality. Although the prospects for the Nordic countries currently look good, there are some dark clouds. Unionization in decline and weakening of centralized and coordinated wage bargaining, put a pressure on the model.

Keywords:
Wage bargaining, Income inequality, Trust, Welfare state regime, Trends
INCLUDING A PHILOSOPHICAL FOUNDATION TO ENHANCE DEVELOPMENT OF HEALTH PROMOTION

Eva K. Robertson, Professor
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Purpose of study:
The aim of this presentation is to critically reflect about philosophical foundation of Health Promotion and consequences shown in practice.

Methods/Theory:
A critical reflection inspired by a philosophical analectic method (developed by Enrique Dussel), using documents defining Health Promotion and examples taken from own data-material, studies published in 2014 and 2015.

Findings:
The modern science is founded on rationality, universality and fragmented concepts. Most concepts are implicit even though they define and prescribe our understanding and actions. Methodology becomes a technique for analysis, with strict categorizations were the immediate experiences easily become overlooked. The consequences is often an exclusion of what speaks to people, their (bodily) experiences, in a given relationship and situation, especially for those living in the intersections of multiple inequalities, likely to be disadvantaged. Strategic interventions according to goals of change have an attempt to overwhelm and control how others think and act, particularly by the voices of the expert’s. It leads to exclusion of many voices. An ethical unconditional respect for ‘others’, creates a safe place for dialogue to include other voices. It opens for mutual learning and responsive actions.

Conclusion:
When re-thinking health promotion it is decisive to scrutinize the taken-for-granted philosophical foundation. A recognition of and respect for the uniqueness of ‘other’, as well as for other knowledge production, is needed to construct a pluriversity of epistemological development to meet health challenges and crisis. Recognizing the complexity of whole-body sensuous experiences, means to recognize humans own personal value and uniqueness in particular and human rights in general.

Keywords: Health Promotion, philosophical foundation, analectic method, un-conditional respect of the other, epistemological pluriversity

GOVERNING PARENTS AND CHILDREN IN UNIVERSAL PARENTING TRAINING

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Background:
In 2008 a Swedish national strategy for parental support recommended structured manual based parenting training courses to be available for all parents with children 0-17 years. Courses chosen for universal use were initially designed for selective use on principles for behaviour modification and communication skills. Arguments for implementing universal parenting training relied on health economic calculations.

Purpose of study:
To investigate power relations and rationalities of governing in universal parenting training, as expressed in public investigations, selected programme manuals and course sessions and children’s experiences of family life.

Methods/Theory:
Discourse analysis and qualitative content analysis. The materials consisted of two official investigations (1947 and 2008); course manuals from two parenting training programmes; recorded oral conversations during two courses and interviews with 11 children.

Findings:
The analysis of official investigations exposed a discursive change, from children as beings in 1947, towards children as future adults in 2008. Further, the findings showed that the course manuals harmonized with a risk-prevention paradigm in Swedish public health policies. Analysis of the course sessions indicated that both courses were governed by expertise, towards parental self-improvement, self-regulation and control. Interviews with children contributed displayed their sense of integrity and agency.

Conclusion:
The major conclusion was that universal manual based parenting training came through in the analysis as a governing of parents and children which relied on normative adult constructions. This raised questions for future research about how risk based preventive methods, currently used in universal parenting training, can promote children’s health from a children’s participatory rights perspective.

Keywords: Children, parents, universal parenting training, population level, public health prevention, promotion, children’s rights.
**Finnish Professionals’ views of the multiprofessional collaboration in mental health promotion of children**

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Background:
Teachers in early childhood education and care and elementary school settings are frontline professionals who promote, prevent, and identify children’s mental health (MH) problems. However, MH promotion of children requires multiprofessional collaboration.

Purpose of study:
The purpose of this study was to investigate the multiprofessional collaboration related to the MH questions regarding children in 18 North Savo region municipalities of Finland. Research questions were:
1) How does multiprofessional collaboration among professionals function? and
2) How do the personnel view challenges related to multiprofessional collaboration?

Methods/Theory:
The target groups of this study were 1) early childhood education professionals, 2) basic education professionals, and 3) primary health care professionals. The data were collected using an electronic questionnaire and analyzed statistically using descriptive and multivariate methods.

Findings:
In all, 482 professionals completed the questionnaire. The collaboration between school/early childhood education and care and primary health care functions well. Less than half (38%) of basic education professionals assessed collaboration with the child psychiatric special health care functions well. Professionals with under 14 years of work experience experienced collaboration structures as a challenge (p=0.015), and professionals with under 25 years of work experience experienced attitude as a challenge more than group 35 or beyond years of work experience (p=0.001).

Conclusion:
Although collaboration between basic services functions well, mental health promotion of children requires broader cross-sectoral collaboration. The work experience influenced respondents’ perceptions of the challenges of multiprofessional collaboration. It is therefore necessary to consider the reasons for the more critical attitude of newly graduated.

Keywords:
Children, mental health promotion, multiprofessional collaboration

**Self-Guided Fitness Training as a Life Unfolding Activity**

Vibeke Ostergaard Steenfeldt, et al.
Absalon University College

Purpose of the study:
Several studies find that physical training programmes have positive impacts on cancer patients in the form of e.g. well-being, physical capacity, decreased side effects, mental resources, and self-confidence. Based on ideas of the architecture’s impact on healing and health, The Danish Cancer Society has built six houses called Life Spaces. Our research takes place in one of these houses in which a room is designed as a multifunctional room where cancer patients are invited to do physical activities on their own. The aim of our study is to describe what characterises the cancer patients’ lived experience of participating in self-training activities.

Methods/Theory:
The study was conducted within a phenomenological framework using a narrative approach. Six cancer patients who attended the self-guided physical training – one male and five females – participated in narrative interviews. The participants were diagnosed with different cancer diseases and have all undergone surgical or chemotherapeutic (or both) treatments. The findings from a phenomenological analysis are discussed in the light of Medard Boss’ existential foundations.

Findings:
Three themes appeared from the phenomenological analysis: Fitness training, which is characterised by varied descriptions of exercises; more than illness, characterised by having a space, where illness is a common experience not needed to be constantly articulated; and fellowship, characterised by being part of a group of people who takes care of each other.

Conclusion:
The self-guided physical training contributes to physical improvements and social relationships. Furthermore, it makes room for creating meaning in life and is a way to attain existential freedom. The training has an impact of the participants’ lives as a life unfolding activity.

Keywords:
Physical activity, cancer patients, lived experience, narrative approach.
**DEVELOPING A QUESTIONNAIRE TO STUDY POLITICIANS’ VIEW ON THEIR ROLE, RESPONSIBILITY AND POSSIBILITY TO PROMOTE HEALTH**

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**Background and purpose of study:**
Although the political context is recognized as an important determinant of health, there is limited research on politicians’ role in health promotion. No fitting questionnaire to study the subject could be identified, therefore a new questionnaire was developed.

**Methods/Theory:**
An inductive approach was used and the first step was semi-structured interviews with six politicians. They represented two different municipalities and four different political parties from different sides of the Swedish political spectrum. The interviews focused on the politicians view on their role, responsibility and possibility to promote health. The data was analysed by means of qualitative content analysis. Five categories were created with several sub-categories each. The categories formed the sections of the questionnaire. Statements and questions were created to cover all the sub-categories. The statements were assigned Likert-scales (strongly agree to strongly disagree) for answers and some of the sentences were turned into questions. Lastly, the questionnaire’s face validity was tested by the interviewees who filled out the questionnaires, two thinking aloud as they did and three by filling out the online version of the questionnaire and leaving comments on the questionnaire.

**Findings:**
This resulted in a questionnaire with five sections focused on: Politicians view on health and health promotion; to affect health as a politician; collaboration between actors; the politics of health; the municipality organisation and prerequisites.

**Conclusion:**
The questionnaire will be used in an exploratory study on local and regional politicians’ view on their role, responsibility and possibility to promote health in northern Sweden.

**Keywords:**
Politicians, quantitative research, questionnaire development.

**REVISITING SELF-EFFICACY AND MORAL CONSTRAINT IN NURSING**

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**Purpose**
The aim of this article is to suggest an expansion of the theoretical framework for understanding the personal consequences of institutional constrains on nurses’ moral actions. Selected empirical cases underpin the need for revisiting the mainstream theoretical approach.

**Theory**
With an outset in the literature of the concept of moral courage (e.g. Murray 2010) the article critically revisits the notion of self-efficacy (e.g. Bandura 1982). Based on an investigation into the concept of organizational ethical climate (e.g. Victor & Cullen 1988) the article suggests an expansion of the present analytical focus via the dimension of political efficacy. The main argument of the article is that the literature on nursing ethics most often presents a normative notion of individualised moral courage as a response to ethically unbearable or critical situations in practice.

**Findings/Outcome**
The article introduces a coherent analytical framework for analysing both the personal and the institutional effects of a (non)responsive working environment.

**Empirical data**
Nursing students in practical training represents an entry into situations when health care professionals for the first time experience how ethical claims can – or cannot - be applied in a hierarchal setting. The everyday working life of nursing students in practical training thus constitute an exemplary case for analysing the first-hand accounts of differences between theory and practise. Based on selected cases the article finds that the contemporary institutional setup of nursing can discourage rather than encourage employees’ critical actions. The empirical findings presented in the article are from a larger project based on qualitative lifeworld interviews and observations among 40 Danish nursing students. Four selected cases outline the basis of the analysis. The empirical data shows that the individualised framing of possible actions can put a constraint on students making them less prone to speaking up when faced with ethical dilemmas. In conclusion, the article suggests a change of view from individual courage to collective problem solving based on a more responsive organisational structure.
Exploring nurses’ experiences of work-related health in a Swedish context – A qualitative study

Dip Raj Thapa, PhD-Student, et al.  
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Background:  
Nursing as a profession exhibits high levels of work-related stress and psychosocial disorders. Daily, nurses face job-related ethical challenges, high job stress and risk of burnout. Emotional distress, lack of support from the employer, bad working and employment conditions contribute to illness and sickness. To retain nurses and to reduce negative trends of stress-related psychosocial disorders, it is important to explore nurses’ experiences on work-related health.

Purpose of study:  
To explore nurses’ experiences of work-related health in Swedish context

Methods/Theory:  
A qualitative study design. 13 in-depth interviews with nurses were analyzed with qualitative content analysis applying an inductive approach

Findings:  
As the main category, we identified “Nurses’ health and job satisfaction are affected by the quality of organizational and collegial support and the opportunities that facilitate recovery, health and the care”. Four generic categories were found; 1) “Work environment and organizational support as reasons for reduced recovery”; 2) “Competence opportunities, supervision and time for reflection for health and job satisfaction”; 3) “Work variation, collegial support, and feedback from patients for better health and care”; and 4) “Social network and physical activities for better recovery”.

Conclusion:  
To retain nurses and to improve nurses’ health, employers should minimize high workload, give support and develop strategies to ensure recovery time. As health promotive strategies, the employer should prioritize and create competence opportunities, time for supervision, reflection, as well as good collegial and supportive environments in the work place.

Keywords:  
Health promotion, organization, recovery, stress, support.

Are changes in the labour market threatening the Nordic welfare model?

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Purpose  
The Nordic countries are known for generous and universal welfare benefits, low social and economic inequity and good public health. One of the most important factors for creating these positive results have been a close collaboration between employer associations, trade unions and the government, all having a mutual aim of creating productive and health promoting enterprises. The purpose of this study/presentation is to present trends in society and economy challenging the mechanisms that have been crucial for the development and maintenance of the Nordic working life model and thereby the welfare model.

Methods  
The issues presented are based on scientific literature regarding working life changes in European and Nordic countries.

Findings  
The challenges can be grouped into two main categories:  

a) A more globalized labour market - important challenges are immigration; a (possible) weakening of collective salary negotiations; increased prevalence of precarious work with low-paid workers; and an “Americanisation” of leadership and management ideologies.

b) Technological developments - important challenges are robotization in manufacturing and business and thereby a reduction in “lower middle class” workers; and the sharing economy with on-line business transactions.

Conclusion  
Without a positive will among political and labour market parties to focus on the prevention of inequity, and thereby not handling the described working life challenges properly, this may threaten the Nordic welfare state regime as we know it. Still, the Nordic countries with close collaboration between working life parties, stable economies and educated and healthy workers are probably better off than many other countries and systems to deal with labour market changes and increased inequity.

Keywords  
Labour market; Social inequity in health; Workplace health promotion
**A SALUTOGENIC APPROACH TO MOTivating STUDENTS TO COMPLETE SECONDARY SCHOOL**

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Purpose of study:
To explore salutogenic factors in the school context that are beneficial for students with low grades.

Methods/Theory:
This study has a qualitative approach. Four 17-19 year old students (two females and two males) participated in qualitative research interviews based on a thematic interview guide; i.e. What is a good class atmosphere, your best experience from school, your relationship with teachers? Seven experienced teachers (four females, three males), participated in focus group interviews based on a thematic interview guide; i.e. What is a good class atmosphere, your best teaching experience, your relationship with students? Data were analysed by content analysis. Ethical research guidelines were followed.

Findings:
Students described the following salutogenic factors as beneficial for completing secondary school: Good start to the school year; Safe classroom environment; Predictability and clarity on the part of teachers; Ability to manage school assignments; Being seen by and having a close relationship with the teacher; Receiving praise and positive feedback; Personal maturation.

Teachers described the following salutogenic factors as beneficial for students: Good collaboration with teachers; Ability to focus on learning and coping; Getting to know the students and working/collaborating as a team; Clear leadership; Having faith in the student.

Conclusion:
A positive teacher-student relationship tailored to the students' abilities was important. Face to face meetings were essential. The students experienced being seen and that the teacher wanted them to do the best for them. Student meetings with teachers were crucial for the students to succeed.

Keywords:
adolescents, health promotion, salutogenesis, school, qualitative

**BUILDING SITUATED FOOD LITERACY WITH ETHNIC MINORITY FAMILIES**

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Steno Diabetes Center Copenhagen

In 2018 Steno Diabetes Center Copenhagen, Copenhagen Hospitality College and Tingbjerg Area Secretariat initiated a project to develop food courses in Tingbjerg (a disadvantaged neighbourhood in Copenhagen). The project sprang from identified local requests for capacity building in healthy food including focus on healthy eating in families with children.

Exploring the participatory process of developing food courses, this study addresses how families in a diverse, multicultural setting practice and build food literacy (FL), and how these practices may engage and strengthen family relations.

Methods/theory
The analysis draws on qualitative data generated during three workshops (Jun18), and three practical food courses (Nov18); including focus groups, observations and interviews.

Benn (2014) defines food literacy as people's competences and abilities to know, do, sense, want and care about food issues (e.g. nutrition, cooking, eating, sustainability). Applying a practice analytical framework, we situate this model in the local community and family context. Thus, we consider and analyse family food/eating practices situated in time and space, shaped by discourse, materialities and social relations (Kemmis et al. 2014; Schatzki 2002).

Findings/conclusions
Empirical findings showed how participants expressed desires and needs to learn how to navigate healthy eating within their multicultural everyday lives, including how to motivate children in healthy food practices. Following, we analyse and discuss how food literacy building processes can engage food practices in the family and strengthen healthy everyday family lives in an ethnically diverse everyday setting; how food practices (deciding, cooking, eating together) can strengthen social relations and parenting practices.

**VISION ZERO IN RELATION TO ACTIVE MOBILITY AND SERIOUS INJURIES IN AN URBAN ROAD SPACE FOR ALL ROAD USERS**

Astrid Värnild, et al.
Mälardalen University, School of Health, Care and Social Welfare, Sweden

Background:
The road safety policy Vision Zero has been implemented in Sweden since 1997 but the number of seriously injured cyclists and pedestrians in Re-
region Västmanland have increased in a conceptual urban road space consisting of roads, pavements and tracks for walking and biking. Active mobility supports individual health and development of a sustainable society but studies calculate somewhat increasing road traffic injuries by more active mobility. A safe urban road space promote active mobility even for an increasing number of older road users in Europe.

Purpose of study:
Is to examine whether an increased age contributes to the increased number of seriously injured cyclists and pedestrians that occurred from 2003 to 2017 in an urban road space of Region Västmanland.

Methods/Theory:
Logistic regression models were used to calculate associations between age and increasing number of serious injuries (ISS>8) 2003-2017 among cyclists and pedestrians. Data (N=403) was retrieved from STRADA (Swedish Traffic Accident Data Acquisition) for Region Västmanland - a region of 270.000 inhabitants near the Swedish capital.

Findings:
In the road space from 2012, the probability among cyclists and pedestrians ≥80 years for serious injuries (OR 4.33, CI 1.18-15.89; from 2015: OR 9.81, CI 2.33-41.26) increased whereas the probability for older road users 65-79 years increased from 2015 (OR 6.09, CI 1.86-19.89). No significance for sex.

Conclusion:
Age has contributed to an increased number of serious injuries for cyclists and pedestrians in Region Västmanland despite municipalities promote health and safety by a national policy including support from the region.

Keywords:
road injuries, active mobility, Vision Zero, pedestrian, cyclist, urban.

TOWARDS A THIRD WAY: THEORIZING SPORT AND EXERCISE AS WORKPLACE HEALTH PROMOTION

Ulrik Wagner, et al.
University of Southern Denmark

Purpose of the study
Sedentary lifestyle and the absence of physical activity have been identified as pandemic, thus leading scholars to suggest sport, exercise and movement activities being integrated at the workplace. This, however, is not without obstacles. The purpose of this study is to expand our theoretical understanding of exercise at work for future critical studies.

Methods/theory
By departing from a critical management tradition inspired by Alvesson and Sandberg, we problematize some of the foundations underpinning research on workplace sport and exercise. On the one hand we critically scrutinize some of the mechanical and functional-managerial assumptions found in the occupational medicine tradition. On the other hand, we draw on insights from a broad critical management stream of research that points to the control and dominance aspects. While we remain more sympathetic to the latter, we believe it can be used for developing a third Foucauldian-inspired approach which is based on employee empowerment and emphasizes sport and exercise as potential emancipation by introducing playing as part of work activities.

Findings
Some preconditions for a third position can be identified:

1. workplace sport and exercise shall be conceived as entailing employee empowerment, enabling emancipation through the introduction of playing as an integral part of work rather than being health interventions per se. In order to avoid the mechanical functionalism known from parts of occupational medicine health improvements must rather be perceived as additional benefits.

2. this third position is radical in nature as its implementation requires a fundamental rethinking of corporate managerialism and contemporary capitalism, but also a new orientation away from parts of the sport movement that tends to see sport and exercise primarily as being leisure activities rooted in civil society.

Conclusion
Theorizing a third way may be a start to go beyond functional managerialism, but also to use insights from critical studies in a more productive approach for instance through button-up implementation of new workplace initiatives.

Keywords
Workplace health promotion, empowerment, emancipation, play, critical management studies.
Challenges that need to be handled when Photovoice is used as a research method in the school setting

Maria Warne, et al.
Mid Sweden University

Background:
There is growing body of research about visual methods in health promotion. Photovoice (PV), a community based participatory research method, is one of these methods that being used more and more frequently in health promotion (HP) interventions and research with young people. The aim of PV is to increase empowerment and participation among vulnerable groups. PV is often used together with so-called at-risk youth in after-school settings, more seldom in the school setting, as a part of the curriculum, with youth with varied background.

Purpose of study:
The purpose of this study was to highlight dilemmas and discuss challenges when photovoice was used in the school setting as a part of the curriculum.

Methods/Theory:
The participants were girls and school staff at a vocational program in an upper secondary school in the Northern part of Sweden. A thematic content analysis was used to analyse data from observations, student workshops, focus groups and face-to-face interviews with school staff, with focus on the PV method.

Findings:
The results are on progress but shows challenges that needs to be handled: hierarchies limiting the dialogue, the slow pace of the process creates frustration, and finally the method is likely to reinforce previous mistrust against adults when the participants’ proposals are not implemented.

Conclusion:
The conclusions is that scholars using photovoice as a research method at school need to be aware of challenges when they use PV.

Keywords:
Challenges; high school; Photovoice; qualitative method; youth

“We are in a field full of tensions” – Health Communication through Participatory Theatre: Between Empowerment and Victim-blaming

Iben Charlotte Aamann, postdoc, et al.
CSUF, Roskilde University, Denmark

Purpose of study: In this paper, we discuss participatory theatre as a communicative tool to promote health among marginalized citizens in relation to health services, more specifically their GPs. We present an analysis based on a dialogic evaluation, which we (the authors of this paper) have carried out, focusing on the potentials and tensions embedded in participatory theatre. We conclude that it would be helpful for organizers and facilitators of participatory theatre and other potentially dialogic methods to understand the tensions in terms of a continuum ranging from empowerment at one end to victim blaming at the other.

Methods/Theory:
The paper refers to dialogic evaluation and reflexive practice as theoretical foundation (Olesen et al., 2018, Wichmand et al. 2018).

The empirical data emanate from a dialogic evaluation of an intervention targeting marginalized citizens living in disadvantaged areas initiated by Region Zealand as a part of the program “Early detection of cancer”. The intervention took the form of two evening events entitled “Go and see your GP on time” and “Make the most out of your GP consultation”. Both of the events consisted of two rounds of forum play and a presentation by a health professional on seven symptoms and “dilemma reflections”. As part of the dialogic evaluation, the two evaluators had meetings with the involved professionals during the intervention period in order to reflect on and further develop the events.

Findings:
Participatory theatre: Between individual behavioural change and a problematisation of structural inequality

Participatory theatre has become widespread in diverse contexts, including social transformative research, competence development within the formal education system (Olesen and Nordentoft, 2018) and social work (Galløe, 2016).

This paper analyses an event launched by Region Zealand targeting marginalized citizens with the aim of strengthening their competence to cope when meeting ill neighbors, friends or family members and when interacting with their GPs.

Participatory theatre holds a potential for empowerment and social transformation which lies in its origins in “the theatre of the oppressed” (Boal, 1978; Singhal, 2004). The idea is that participatory
theatre contests the hegemonic notion of marginalization as the product of individual deficiencies, redefining it as the product of structural inequality. It challenges the oppressiveness of particular social norms as it allows participants to validate their life experiences and creates a space in which participants are able to “widen their repertoire for social change” (Erel, Reynolds and Kaptani, 2017, p. 305). However, in order to realise this potential, it is crucial that the participatory theatre is embedded in “a critical and emancipatory discourse of social transformation that highlights a range of different power relations” (Erel, Reynolds and Kaptani, 2017, p. 308). Otherwise, there is a risk that the participatory theatre becomes “too individualized, focused on individuals’ ability to deal better with oppressive situations” (Erel, Reynolds and Kaptani, 2017, p. 307) and thereby contributes to “neoliberal ‘victim-blaming’” (ibid.) by ascribing problems to people’s individual deficiencies rather than social inequalities. This risk is particularly high when participatory theatre is used as a “teaching method” rather than a method for shared knowledge production. Scharinger points to how the contemporary scene of participatory theatre does not represent independent, grassroots or social movement activities since plays are most often initiated in top-down processes “by donors with specific agendas” (Scharinger, 2013, p. 102).

Participatory theatre can thus contribute to both empowerment and victim-blaming. In collaboration with the professionals involved, we developed an understanding of how the choices made in the work with participatory theatre have an impact on where a specific forum theatre play can be placed on a continuum between the two positions. At the meetings between evaluators and involved professionals, we (the evaluators) introduced an analysis of the specific participatory theatre plays and “audience” experiences (explored by the evaluators in group interviews). At the meetings, we discussed the analysis in relation to the involved professionals’ intended purpose of using participatory theatre and we considered where to position the plays on the continuum between empowerment and victim-blaming.

Conclusion:
The analysis of the participatory theatre plays and the responses from the “audience” led to consideration of the following dimensions:

1. Knowledge dissemination or knowledge-sharing - to what extent is the goal to disseminate a message as opposed to knowledge sharing where the participants’ voices are heard and taken into account?

2. Prioritization of resources in relation to involvement - how involved is the “audience-group” in the development process in order to make sure that their voices are heard?

3. Perspective - to what extent is there a focus on individual competencies and behavioral change compared to a focus on socio-structural problems regarding inequality, power, economics and political choices?

Keywords: Participatory theatre, empowerment, health promotion, dialogical evaluation
Workshop presentation abstracts
Workshop

THE PROMISE OF CITIZENSHIP, DIGNITY AND SOCIAL INCLUSION FOR OLDER PEOPLE.

Bilfeldt, A. et al.

How to break social exclusion of older people? Social exclusion concerns mechanisms and conditions that mean that individuals and/or groups are wholly or partially excluded from autonomy and influence on their own situation and the rights that the majority of citizens possess. The EU COST action Reducing Old Age Social Exclusion (ROSE-Net) focuses on both the causes and reduction of social exclusion of the elderly. Social inclusion, by contrast, consists of processes through which marginalized or excluded groups gain more power over their own life situation, self-determination and access to the same living conditions and rights that the majority of society enjoy (Larsen & Andersen, 2013).

WHO defines ageism as the stereotyping prejudice and discrimination towards people on the basis of their age. Ageism is widespread and an insidious practice which has harmful effects on the health and wellbeing of older adults, as it marginalises and excludes older people in their communities.

Some groups are at higher risk of exclusion. Those groups include people with dementia, those living in institutions, people living in rural areas, cultural minorities and older migrants. And in a gender perspective these risks can take different forms. The groups of highest risk of exclusion remain unaware of their rights as citizens, and may also lack basic information about services, supports and entitlements.

Two dimensions in relation to ageism are to be highlighted: how it manifests through the symbolic exclusion of older people, for example through “the othering” of ageing and older people in media representation, and how ageism is embedded in institutions and in social and societal structures.

The promise of citizenship is of a rights-centred approach to participation (and inclusion) founded on recognition of autonomy and self-governance at all stages of our lives.

In this workshop social exclusion of older people as well as processes that lead to social inclusion of older people will be highlighted.

HEALTH SYSTEMS IN TRANSFORMATION IN SCANDINAVIA, AND THEIR IMPLICATION IN THE RISING INEQUALITIES IN HEALTH CARE

Dybbroe, Betina, Professor, et al.

Centre for Health Promotion Research, Roskilde University

Abstract:
The politics of person centeredness are seen today as a way to transform care services giving citizens responsibility and choice. This introduces prioritization in services and is formed by medical attempts to personalize interventions. Findings from this project suggest that social class and social complexity, as well as end of life patient trajectories are disadvantaged, and social differentiations in care are created.

Background:
The Nordic welfare states have in recent years been seen to value an individualized approach to elderly care, while at the same time creating standardized health care services.

Purpose of study:
The presentation will take departure in research project “Creating integrated person-centered care in different settings- the context project”, based in Norway and Denmark (2018-2021) where a research team investigate what this approach in care implicates, and how it is related to various contextual factors.

Methods/Theory:
Theories on participation in care as a process that must be accessed through social legitimacy, and how this legitimacy is not always attainable due to class and social situation (Protheroe, Barnes and Cotterell, Merrild, Elstad). The methods are intensive quick-side switching team-based ethnography. The data include: shadowing observations, focus group interviews, individual interviews, workshops, political documents and statistical data.

Findings:
Higher thresholds for access to care are presented, and social complexity and needs assessment are suppressed. Medical and activating/rehabilitative discourses are privileged and help becomes dependent on how citizens socially present their needs and to what extent they are seen as legitimate citizens.
**Positive mental health among school-aged children: a Nordic research collaboration**

Charli Eriksson, et al.
Stockholm University

**Background:**
The importance of mental health and well-being during adolescence has become evident in recent decades, in both research and specific interventions. The positive dimensions of mental health represent innovative public health research of first rank priority in Europe. Nordic researchers have developed a research program on positive mental health in the Nordic countries based on the international Health Behaviour of School-aged Children (HBSC) study.

**Purpose of the workshop:**
The aim is to discuss methodological challenges for research on adolescent positive mental health. The Nordic collaboration on common measures of positive mental health will be presented and three questions will be discussed with the workshop participants:

1. Is it possible to analyze positive mental health using positive aspects of existing collected measures of self-rated health, life satisfaction, multiple health complaints and similar indicators?

2. Which criteria should be used when selecting measurement instrument for positive mental health among adolescents?

3. Are the measures of positive mental health selected for the 2018 HBSC data collection in the Nordic countries relevant and sufficient for future surveys?

**Methods/theory:**
1. The HBSC study gives us an opportunity to study measures of mental health or related to mental health over a period of 12 years from 2002 to 2014 across five Nordic countries. These measures include the outcomes; self-rated health, psychosomatic symptoms, life-satisfaction and sleep. The development across countries over time of family communication and the school-related stress are also included.

2. One essential component is to have access to high-quality measurement instruments of positive mental health. Previous literature on data collecting instruments in epidemiological and survey research has been reviewed.

3. Even if there are many alternatives measures of positive mental health available, there is so far no golden standard. A selection of measures related to positive mental health has been done based on quality, feasibility and applicability in surveys.

**Findings:**
1. The overall prevalence of adolescents having high life satisfaction has declined in most Nordic countries. The trend of excellent self-rated health indicates a small overall improvement 2002-2006 thereafter a stable trend. The prevalence of two or more weekly symptoms showed large country differences over time. The prevalence of sleep difficulties has increased in Denmark, Iceland and Finland. The prevalence of adolescents finding it easy to talk to their mother or father or both has been showing a general positive development. The level of school pressure was highest in Iceland and Finland. These indicators will be related to measures of positive mental health.

2. Among important criteria are age appropriateness, psychometric characteristics and theoretical relevance. Results from previous methodological studies mainly in the HBSC context give support in the selection of indicators, but there is a need for more methodological and theoretically sound research.

3. The 2018 data included new measures to enhancing research on positive mental health: general self-efficacy, self-esteem, sense of unity, loneliness and Warwick-Edinburgh Mental Well-being Scale.

**Conclusion:**
It is not enough to focus on positive aspect of measures of mental health. Positive mental health needs theoretical and methodological development. A Nordic collaboration is beneficial.

**Keywords:**
Adolescents, epidemiologic methods, mental health, Nordic countries, collaboration

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**Health promotion of refugees – Empirical evidence from approaches in two European countries**

Stefanie Harsch (M.A., Ph.D. Student), et al.
University of Education Freiburg, Germany

**Background:**
Recently, with the influx of many migrants and refugees to Europe, countries such as Sweden and Germany face new challenges to responding to their health needs and to promoting their health.

**Purpose of study:**
To bring together current evidence on health promotion interventions for refugees and to engage in a discussion on the contexts, strengths, and limitations and lessons learned.

**Methods/Theory:**
To illuminate the complex phenomenon, we use a comparative perspective on the empirical evidence.
of 3 studies (reviews on interventions, qualitative studies, discourse analysis) in two countries. We referred to the theoretical concepts of integration and acculturation, health literacy and translingualism a.o.

Findings:
Initially, we outline the situation for refugees in the two countries generally, provide ample evidence on the health needs and particular burden of refugees, and discuss the increasing influence of racism.

Sweden Study 1:
We provide insights into an integrative review on health-related integration interventions for migrants performed by civil society agents. These agents are encouraged to help migrants improve their health and integrate into the host culture. We found 9 interventions representing 2 different acculturation spectra oriented towards a) assimilation-integration or b) integration-separation. Concerning health, the former mostly native-driven interventions are primarily oriented towards assimilation whereas the latter mostly migrant-driven interventions tend towards integration.

German study 1:
Migrants often face various health issues and barriers to health care for example health literacy. A promising setting to enhance health literacy of refugees are language and integration courses but the manuals and empirical evidence on it are rarely analyzed. Here, we discuss the key findings of a scoping review (N=49 articles, including 22 manuals) and a qualitative interview study with German as a second language teachers. Besides didactics and methods, the influence of the group, the school, and the wider social context, we illuminate the role of translingualism, transculturalism, social support, empowerment. Language courses demonstrate to be promising settings to advance health literacy and provide a health-supportive environment but particularly in Germany political and personal factors counteract their potential.

Sweden Study 2:
RFSL Newcomers: A health-related civil society integration intervention for LGBTQ-migrants LGBTQ-migrants belong to the most vulnerable in society, where issues of health inequalities, in combination with those of sexuality and gender, are at stake. Civil society agents have been encouraged to help migrants to integrate and improve health. As understanding health may facilitate promoting health, the aim of the study was to reveal understandings of health in a non-governmental integration intervention for newly immigrated LGBTQ-people from a participant perspective. The findings from a discourse analysis of the conducted interviews are tentative but indicate the salience of social and existential understandings of health for LGBTQ-migrants.

Conclusion:
Multiple health interventions for refugees exist that vary significantly regarding content and strategy but even more in social integration, use of assets (translingualism) and understandings of health. We plea for widening a comparative perspective.

Keywords:
Refugee health, health promotion interventions, health literacy, integration

THEORIZING SUSTAINABLE DEVELOPMENT (SD) AND HEALTH PROMOTION (HP)

Jesper Holm, et al.
Roskilde University, Denmark

Abstract:
Theorizing sustainability and health promotion
Health promotion and sustainable development are related concepts; beneficial social conditions strengthen human resources and thus the ability to care for health and environment, and reversely beneficial environmental conditions enable communities to strive for mental and social health. We welcome research and discussions that involves a perspective on sustainability in relation to HP.

Background:
At the 8th NHPC, a central theme on SD & HP were launched, kick starting discussions on the interrelated nature of the two regimes. We summarized the conclusive discussions and brought parts hereof to a broader academic audience in Scandinavian Journal of Public Health (no 46, Suppl 20. In 2018). Here the final statement were to call for investigations into

a the duality of health promotion and sustainability and how it can be handled in order to enhance mutually supportive processes between them;

b the social dimension of sustainability and how it can be strengthened in the development of strategies for health promotion and sustainable development

c exploring and identifying policy approaches and strategies for integrating health promotion and sustainable development

Two key notes, Anna Balkfors, City of Malmö and Timo Ståhl, Finlands National Institute for Health and Welfare, gave our attention to the current, Nordic political-regulatory approaches in HP integrated SD policy and planning efforts: local deliberative governance vs. national planning.

At the 9th NHPC we invite to a deepening and unfolding of the previous joint action discussions. The scope is to create an empirically based foundation for theorizing, and eventually aiming for joint research projects in the nearest future. The workshop will set focus on the trickling down of the 17
SDG´s in Nordic public and private politics, which in time will rise the focus on the still more interrelated problems of climate change, environmental degradation, social health inequity and poverty. The workshop aims at unfolding empirical findings and best & worst practice cases among us, which may disclose the social change and transition processes behind a continuous extension of HP & SD integration/co-ordination.

Purpose of study:
We invite researchers concerned about this task and who have focus on e.g.:

1. Strategies and policy/planning cases for linking SD & HP , and for linking social and environmental dimensions in the SDG

2. Cases with promising dimensions of HP and SD co-ordination in urban development, local food, social groups activities, social entrepreneurship etc.

3. Nordic differences in environmental and health coordination and sector integration

Methods/Theory:
The task of the workshop is to facilitate a first “laboratory” to exchange empirical experiences and theoretical-analytical thoughts. We invite researchers to give short presentations of empirical and theoretical reflections from a Nordic context.

These presentations will be followed by one minute of flow writing on empirical/theoretical reflections from your own research

Based on these written reflections we will divide you in to subgroups where you will share your thoughts with colleagues. The groups will be asked to think about how future collaborations could be organized

Two of the workshop facilitators will sum up the major points from the workshop.

**Co-creation in health promotion: How does it make a difference in practice**

**Rikke Krølner**
Statens Institut for Folkesundhed, Denmark

Background:
Community participation and partnership are foundational concepts that form an integral part of how health promotion interventions are to bring about changes for better health and reduce health inequity. The aim is to empower local communities and co-produce better solutions than public services acting alone.

This is supported by a broader societal trend, the so-called “collaborative turn”, in which bringing together the different perspectives, knowledge, and resources of various actors (and sectors) is assumed to create synergy and added value like innovative ideas and more efficient problem solving when dealing with complex issues.

This “collaborative turn” is gaining political momentum and funders increasingly request co-production and partnerships in grant applications. However, several researchers have highlighted the lack of evidence of partnership work, while others caution that the current collaboration discourse may overshadow much needed critical discussion and reflection of the dilemmas and challenges involved when engaging in collaborative partnerships.

Objectives of the workshop
The workshop will present experiences and results from four research projects doing empirical research in this field at the National Institute of Public Health (NIPH) in Denmark and the Centre for Clinical Research and Prevention (CCRP), the Capital Region of Denmark:

1. The Young & Active project’s model of co-creation and student involvement which aims to promote physical activity, sense of community, and well-being among first year students at high schools and vocation schools. Based on mixed methods research, the paper present evaluation findings on outcomes, barriers and facilitators for implementation as well as sustainability issues related to the approaches applied in the intervention project e.g. peer-led innovation workshops. Rikke F. Krølner, senior researcher, NIPH.

2. The Danish Healthy Cities Network’s (SBN) model of co-creation: based on qualitative analysis of interview data and documents, the study explores the SBN’s experiences with and approach to co-production. On this basis we present a model outlining five elements defining the SBN’s co-production approach. Amalie O. Kusier, research assistant, NIPH.

3. Evaluation of the Danish Government’s partnership fund: based on a conceptualization of partnership as an emerging process (rather than a tool for intervention), this study analyzes 10 cases to explore how partners establish equal partnerships. The study proposes that an adaptable partnership aim may function as a boundary object that enables productive collaboration between partners with diverse interests. Ditte H. Holt, postdoc, NIPH.
Workshop

4. The Prevention Laboratory: using the experiences of establishing health promotion partnerships in the Prevention Laboratory, the presentation will discuss how using a systems approach to conceptualize partnership working can inform the challenges of making diverse partners come together in productive collaboration. Anders B.G. Hansen, postdoc, CCRP.

Based on the four presentations, participants will be engaged in discussing their experiences with co-creation and partnerships. A moderator will stimulate discussion on 1) ways to involve participants and potential partners in design and implementation of health promotion interventions, 2) the challenges and potentials of collaborative partnerships, and 3) how we may conceptualize the elements of collaborative processes including the challenges and dilemmas involved.

Keywords: Collaborative partnerships, community participation, co-creation, student involvement

APPROACHES TO PROTECT AND ENHANCE MENTAL HEALTH: PROMOTION, PREVENTION, AND TREATMENT-ORIENTED APPROACHES TO MENTAL HEALTH

The Danish National Institute of Public Health, University of Southern Denmark

Format:
10 minutes welcome and introduction, followed by three 10 minutes presentations and a moderated discussion at the end.

Welcome by senior advisor Anna Paldam Folker, Head of Department of Health and Social Context, National Institute of Public Health, SDU

Introduction to mental health and mental health promotion by senior researcher Vibeke Koushede, National Institute of Public Health, SDU

Concepts like mental health promotion, prevention, and treatment are often conflated and sometimes used interchangeably. These approaches to mental health have different implications for practice and can be used to address different issues related to mental health, and thus may work towards different outcomes. In this workshop, these concepts are introduced and we question whether it is important to identify a specific approach when tailoring mental health interventions.

After an introduction, this workshop will introduce three examples of mental health initiatives that are all carried out at the National Institute of Public Health, University of Southern Denmark. All three projects aim at protecting or enhancing mental health, however in different settings and target groups, and using different methodological approaches. Each initiative and its approach to mental health will be introduced.

Three 10 minutes presentations
Example 1 by senior researcher Nanna Ahlmark: Body therapy for veterans with PTSD is a body therapeutic intervention aiming at reducing PTSD and depression symptoms and improving quality of life body awareness, and ability engage in social relations among veterans.

Example 2 by PhD student Camilla Bonnesen: en go’Bgym’ is a school-based intervention combining educational and environmental initiatives to prevent stress and promote well-being among high school students in Denmark.

Example 3 by postdoc Charlotte Meilstrup: ABC for mental sundhed is organised as a cross-sectoral partnership that uses a social marketing strategy and a community development approach to influence individual behaviour and to create supportive environments to foster and maintain mental health.

Moderated discussion by Anna Paldam Folker
Participants will be invited to reflect on their own practices and approaches aimed at enhancing mental health in different target groups and local settings, including the implications of their approaches.

HEALTH LITERACY IN A CAPACITY BUILDING PERSPECTIVE – THE ROLE AND COLLABORATION BETWEEN POLICY MAKERS, PRACTITIONERS AND RESEARCHERS.

Karin C Ringsberg, et al.
University of Gothenburg

Background:
Health literacy has been paid specific attention to as an important social determinant for equity in health. It has been highlighted at WHO’s global health promotion conferences, 1986, 2009, 2013, 2016 and also in policy documents and scientific articles. In the WHO report from 2013, Health literacy: The solid facts, it is described as a resource for the individual’s health as well as for the health of the population. At the conference in Shanghai, 2016, health literacy was discussed related to the seventeen UN Sustainable Development Goals. WHO’s document Health 2020: the European policy for health and well-being aims to support action across government and society to: “significantly improve the health and well-being of populations, reduce health inequalities, strengthen public health and ensure people-centered health systems that are universal, equitable, sustainable and of high quality”. In the forthcoming WHO document Health 2030, health literacy is one of the key health promotion pillars for achieving the 2030 Agenda for Sustainable Development Goals. Therefore from a
capacity building perspective it is crucial that people with different competences and experiences from health promotion practice, research and policymaking, collaborate when building up knowledge and praxis of health literacy.

Purpose of study:
The purpose of the workshop is to discuss roles and cooperation/collaboration between policy makers, practitioners and researchers to build capacity regarding health literacy. Possibilities and challenges.

Methods/Theory:
The workshop is building upon active interaction between the participants. It starts with a short introduction of the concept of health literacy, presentation of the workshop participants, aim of the workshop and organization of it. Thereafter there is a short presentation of WHO:s work/ongoing projects with health literacy, globally and in special within WHO Euro and the Nordic countries; the sustainable development goals related to health literacy, Health 2020 and the ongoing work with Health 2030. After that the participants discuss and reflect issues, and concerns and future challenges in capacity building of health literacy with special focus on collaboration/cooperation between policy makers, practitioners and researchers from their own experiences and perspectives in subgroups. Finally a summing up in plenum of the group discussions with pinpoint of future challenges of the capacity building.

Findings:
The findings will be developed during the workshop in active interaction between the participants.

Conclusion: The overall pinpointed challenges are vital efforts in the work with capacity building of health literacy.

Keywords: health literacy, capacity building, policy documents, workshop, challenges.
POSTER PRESENTATION
ABSTRACTS
THE SOCIAL ASPECTS OF HEALTH

Heidi Myglegård Andersen, et al.
University College Absalon, Denmark

Purpose of study:
Purpose of the study is in an overall perspective to reduce inequality in health. There is a focus on the social aspect of the concept of health and how health communication is performed by professionals.

Methods/Theory:
Based on two empirical PhD. Studies a critical view on the concept of health and the lack of focus on the social aspect of health is extracted. Both studies are based in Critical Theory. One of the project have a Critical perspective on health communication in a health care center the other has an action research and empowerment approach in a deprived local community. Both studies presents positive and negative consequences of health professionals including or not including the social aspects of health in their health communication.

Findings:
Two Ph.D. project with an overall theme to reduce inequality in health reveals how the national health documents focusing on biomedicine and attempts at forming and controlling the behavior of the individual represents a narrow and reductive use of the concept of health. The studies also show how the perspective is reproduced on all level of society and also by health professionals in local healthcare centers. The studies also reveals the positive aspect of focusing on the social aspect of health, culture and every day life.

Conclusions:
The social aspect of health is essential in the use of the concept of health and thereby in the aim at reducing inequality in health.

Keywords:
Inequality in health, SODH, Critical Theory, Recognition, health communication

A FOOD LITERACY MEASURE FOR SCHOOL CHILDREN

Ane Høstgaard Bonde, et al.
Steno Diabetes Center Copenhagen, Health Promotion

Background
Food literacy is a relatively new concept that captures the complexity of knowledge, skills and practices necessary to cope with food needs in everyday life. Being able to measure food literacy (FL) in children is relevant for guiding food education and health promotion in school.

Purpose of the study
To develop, test and validate an instrument to measure FL in children, grade 6-7 (aged 12-14).

Methods/Theory
Benn proposes a theoretical FL model with five domains that in addition to common domains of food knowledge and cooking skills includes sensory competences, ethical considerations and citizenship in relation to food and sustainability. The development of the instrument takes place in four steps:

1. Conducting a review of existing questionnaires of related concepts.
2. Concretizing the domains of the model by defining sub elements to each domain and questions to each element.
3. Reviewing questions by a panel of experts in food and health education in children, and subsequently adjusting and reducing according to comments.
4. Ensuring face validity by conducting focus group interviews with children. The final questionnaire with 60 questions will be tested among 800 children from 14 schools and retested among 150 children in March-April 2019.

Findings
The questionnaire’s structure will be validated with confirmatory factor analysis and reliability will be tested with Cronbach alpha and omega reliability measures. The questionnaires’ convergent validity will be tested by investigating the association between measured FL and a theoretically related construct of health literacy in school age children.

Conclusion
This study results in a multidimensional FL instrument useful to assess FL levels in school children and guide future food education and school health promotion. The usefulness as an evaluation instrument will require test in larger studies.

Keywords:
Food literacy, food and citizenship, children, measurement

PROMOTING RESILIENCE IN CHILDREN: AN RCT TO STUDY THE EFFECTIVENESS OF A RESILIENCE CURRICULUM

Britta Eklöf, et al.
Department of Psychology, Gothenburg University, Sweden.

Background:
To meet the challenge of mental health problems among young people and to counter potentially harmful long-term effects of childhood adversities, a universal prevention method called RESCUR was
developed and pilot-tested in a research collaboration between six European universities. The method is a comprehensive school-based program to foster resilience and psychosocial development in children (7-12 years) by providing tools to overcome disadvantages and obstacles in their development.

Purpose of study:
The aim is to examine the effectiveness of RESCUR in Sweden.

Methods/Theory:
Children (N = 544), aged 7-12 years, from 17 Swedish schools, were cluster-randomized to intervention and waitlist control groups. Data were collected via teacher-ratings at baseline and approx. 1 year later. Main outcomes were resilience (CYRM), and psychosocial strengths and difficulties (SDQ).

Findings:
There were baseline difference between the intervention and control group, with the former group displaying lower levels of resilience and higher levels of internalizing problems (ps < .05). Children in both groups were reported to have lower levels of resilience and prosocial behaviour, and higher levels of psychosocial difficulties at follow-up compared to baseline (ps < .05). Some scales that did not differ significantly between the groups at baseline, did so at follow-up (ps < .05), with the intervention groups displaying worse outcomes.

Conclusion:
Based on these preliminary findings, RESCUR cannot be recommended for wider implementation. More research is needed to understand the findings. Further analyses of forthcoming teacher reports, children’s self-reports and longer-term follow-up data will be undertaken in the near future.

Keywords:
Resilience, children, promotion, controlled trial, intervention

DEVELOPING THEORY AND RESEARCH IN A NORDIC PERSPECTIVE.

Elisabeth Fosse, et al.
University of Bergen

Background
Since the Ottawa Charter (1986), the Nordic countries have been in the forefront in developing health promotion (HP) theory, research, policy and practice. In 2007, the NHPRN was established in cooperation with the Nordic School of Public Health. It is an informal network working with research on HP from a Nordic perspective. Since 1996, nine Nordic HP research conferences have been arranged, of which the four most recent by NHPRN.

Aims
The aims of the NHPRN are to develop: the theoretical understanding of HP; Nordic research cooperation; and to organize the Nordic Health Promotion Research Conferences.
Organization
It is an interdisciplinary network with junior and senior researchers from the Nordic countries who meet biannually at WHO’s premises in Copenhagen. The network is organized in working groups engaged in topics central for HP research and practice; Empowerment, Equity in Health, Healthy Aging, Health Literacy, Work-related health, Theories and methods in health promotion.

In the meetings, lectures on state-of-the-art issues are given by leading researchers and policy makers. Participants engage in theoretical discussions in plenum and working groups. Collaboration finds also place at the meetings and through e-mail correspondence and web meetings.

Outcomes of the network
The network has contributed to the scientific discussion by publishing journal supplements from the latest Nordic HP conferences, scientific and debate articles, and a book.

Welcome to join the network
The network is open for HP researchers and PhD students working or doing research in the Nordic countries. The NHPRN is a working network and it is presumed that all participants actively participate in the work and the meetings. For more information see the web site www.nhprn.com.

Key words:
Health promotion; Public health; Scandinavia; Nordic; Network

Sexual and Reproductive Health for Unaccompanied Youth – An Evaluation of a Project in Southern Sweden
Cecilia Garell
School of Health and Welfare, Halmstad University

Background:
The project leader met these youth together with personnel from the youth clinic to talk about sexual health, including topics as the development of the body, contraceptives and family planning, and norms and laws in Sweden.

Purpose of study:
To evaluate the project “Sexual and reproductive health – efforts to unaccompanied youth, and personnel at youth clinics”. The overall purpose of the evaluation is learning; to bring forth lessons useful in this and in forthcoming projects.

Methods/Theory:
The project is evaluated according to an explanation and action oriented evaluation model with focus on relating the results to described processes and presumptions. For the collection of data there has been interviews with personnel at youth clinics and, with persons in the board for the project together with surveys to youth taking part in the information sessions.

Findings:
The overall findings are positive. The project leader has unique knowledge and capability to reach to the youth, and to discuss these delicate questions with vulnerable youth. The youth find the information valuable, some information is new to them (e.g. about the myth of the hymen – the “curtain”). The intention is to implement the project as a way of working in youth clinics. Therefore, one or two midwives have been accompanied the project leader on the information sessions at the youth clinic or the schools.

Conclusion:
It is a necessary project where intercultural knowledge is vital to reach the youth.

Keywords:
Evaluation, sexual health, unaccompanied youth

Reframing Rehabilitation: Pedagogical Strategies in Physio-and Occupational Therapies
Louise Hansen
The university college Metropo, Denmark

Background:
The responsibility for rehabilitation of patients is increasingly shifted from the Danish welfare state onto citizens themselves. In health policies this shift creates new forms of rehabilitation, where patients are redefined as participants, which potentially alters the pedagogical approach in which rehabilitation is primarily undertaken by physio- or occupational therapists. Ethnographic research in the field of pedagogy and physio- and occupational therapy is scarce.

Purpose of study:
This paper will offer perspectives on how pedagogy is constituted within the practice of physio- and occupational therapeutic rehabilitation across different contexts.

Methods/Theory:
Four separate ethnographic studies based on participant observations and qualitative interviews were carried out by the authors in different settings. The analyses engage these empirical examples to illustrate how pedagogical strategies becomes visible within therapeutic practices in healthcare. The researchers utilize poststructuralist inspired theoretical framework employing concepts of infrastructure (Larkin 2013), positioning and subjectification (Butler 2006, Foucault 2003, Davies & Harré 1990) and practices (Barad 2007, Mol 2002).

Findings:
Health education becomes a tool that transforms health policy ambitions from a social concern to an individual commitment through the work of health professio-
nals. Physio- and occupational therapy are identified as practices with a particular pedagogical approach. Political concepts such as involvement and participation are mobilized and enacted through series of technologies as a kind of institutional infrastructure. While presented as an apparently neutral practice (Larkin 2013), these therapeutic forms become the ground for determining how to be a patient, what quality is, what involvement is possible, and, most significantly, how health education is formed.

Keywords:
Health education, pedagogy, physiotherapy, occupational therapy

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**THE CIRCLE OF HEALTH – A COMPREHENSIVE TOOL TO ANALYZE AND DEVELOP HEALTH PROMOTION INTERVENTIONS E.G. FOR NEWCOMERS**

**Stefanie Harsch (M.A., Ph.D. Student), et al.**
University of Education Freiburg, Germany

**Background:**
Migration is a determinant of health and highly complex in all phases and levels. To address the newcomers’ health concerns, various interventions were developed but are not or loosely connected and therefore can’t unfold their potential to support migrants holistically. Tools such as the Circle of Health are developed to describe the scope of interventions and provide a road map for planning.

**Purpose of study:**
The study’s purpose is to explore the usability of the circle of health to systematically identify and to analyze health promotion interventions for migrants in the resettlement phase in Germany and to test it for developing programs.

**Methods/Theory:**
We utilized the Circle of Health to guide our identification of actors and interventions on each level. We conducted a systematic review and analysis of intervention based on its components and presented the whole picture of interventions for migrants including existing gaps. Furthermore, we used it to develop interventions for female newcomers on physical activity.

**Findings:**
We identified 450 interventions for supporting migrants in the stage of resettlement. The analysis showed that it is not enough to target the language and prepare leaflets but also to implement interventions at the community level that improve well-being. The subproject on physical activity revealed that besides camps and sports club also language courses are promising to improve daily physical activity.

**Conclusion:**
The Circle of Health is a practical tool to embrace the complex nature of health promotion of migrants and not to omit possible interventions and is usable with people regardless their education or learning styles.

Keywords:
Health interventions; tools; migration; health education

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**ARE DANISH VOCATIONAL SCHOOLS READY TO IMPLEMENT ‘SMOKE-FREE SCHOOL HOURS’? A QUALITATIVE STUDY INFORMED BY THE THEORY OF ORGANIZATIONAL READINESS TO CHANGE**

**Anneke Vang Hjorta, et al**
Steno Diabetes Center Copenhagen

**Purpose of study:**
The tobacco policy of ‘smoke-free school hours’ (SFSH) might prove to be an effective intervention to reduce smoking in Danish vocational schools. SFSH entails that students, staff and visitors are not allowed to smoke during school hours – nor inside or outside school area. The effectiveness of tobacco policies is depended on implementation into routine practice (e.g. enforcement). Furthermore, organizational readiness for change is crucial to successful implementation. The aim of this study is to identify barriers and facilitators to implement SFSH in Danish VOCATIONAL SCHOOLS.

**Methods/Theory:**
Semi-structured interviews and focus groups were carried out with management and teachers (n=22) from six schools: Three with- and three without experiences implementing SFSH. The interviews, as well as the data analysis, were informed by the Organizational Readiness to Change (ORC) theory.

**Findings:**
We identified ten factors acting as facilitators or barriers in achieving ORC. Facilitators: Beliefs that SFSH will prevent the uptake of smoking; that SFSH will result in a better learning environment; if clear responsibilities in enforcement-procedures are in place; if legislation about SFSH is ratified; if same tobacco policy is established in apprenticeship-work places. Barriers: Beliefs that SFSH is patronizing and violating personal freedom; that there’s not enough resources to enforce SFSH; that enforcement will negatively influence relations with students; that SFSH will cause student dropout; that SFSH will cause more disturbance in class room cause of pupil’s nicotine cravings.

**Conclusions:**
ORC is necessary to successfully implement SFSH in Danish VOCATIONAL SCHOOLS. Facilitators and barriers must be addressed in the process of creating ORC and some schools might need support in this process.

Keywords:
Smoking prevention. Vocational schools. Vulnerable groups. Tobacco policy.
**Self-rated health determines work ability during unemployment**

Marja Hult  
University of Eastern Finland

**Background:**  
Good work ability is essential in obtaining and maintaining a job. However, research evidence of factors supporting good work ability during unemployment is scarce. This study explored the association of several factors with good work ability of unemployed persons.

**Methods/Theory:**  
Study used the data from unemployed persons (n=1832, 42% women, 58% short-term unemployed e.g. duration < 12 months) aged 20 to 65 who responded to Finnish nationwide Regional Health and Well-being Study in 2014–2015. Logistic regression was used to explore the association of sociodemographic, work-related and wellbeing factors, and health behaviours with good work ability (Work Ability Score ≥ 8).

**Findings:**  
Good work ability associated with following sociodemographic factors: age under 45 (OR 1.87, 95% CI 1.27-2.74), high level of education (OR 1.90, 95% CI 1.29-2.80) and short-term unemployment (OR 2.06, 95% CI 1.43-2.97). Of work-related factors, low physical demands of most recent job (OR 1.48, 95% CI 1.01-2.18) and high job satisfaction (OR 2.38, 95% CI 1.65-3.45) had significant associations. Good self-rated health (OR 7.98, 95% CI 5.40-11.79) and good quality of life (OR 2.35, 95% CI 1.49-3.71) as wellbeing factors were also associated with good work ability.

**Conclusions:**  
Self-rated health is the most important resource of work ability during unemployment. In addition to the current life situation, previous job still seems to shape the perception of work ability. By health promotion means and by paying attention to wellbeing at work, work ability and succesful job seeking of unemployed persons could be enhanced.

**Keywords:**  
Unemployment, work ability, self-rated health, quality of life, job satisfaction

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**The formation of bodily health norms among primary school students**

Katrine Vraa Justenborg  
Copenhagen University College of Education

**Purpose of the study**  
To understand how the class room provides certain health norms and practices through the bodies of primary school students, and the same time understand why 30.3 % of all students in the Danish primary school mis thrive.

**Methods/theory**  
This project examines the formation of health norms and practices among primary school students and focuses on answering four questions (concerning norms, mirroring, participation, and technology). First, how are norms for health created in the class room, and how are the students affected by these norms? Second, how does mutual mirroring affect the health of the students? Third, how does the students’ participation in the class room correlate to their overall health norms? Fourth, how modern technologies in the class practice affect the health of the students?

This project will use mixed methods: everyday observation, a survey with 1200 respondents and 20 socratic interviews.

Theoretically the project is based on a combination of Bourdieu’s (1984; 1988; 1990; 1997; 2005) and Larsen’s (2013; 2017) relational perspectives. Especially Larsen’s concept of health capital and its division (The surgery body, the chemical body, the nutritional body, the physical body and the mental body) will be used.

**Keywords:**  
Class room, health norms, bodies

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**Physical activity counseling in Quebec primary care physicians**

Suzanne LABERGE, et al.  
University of Montreal

**Background:**  
A great proportion of the population does not meet the physical activity (PA) recommendations to reap the health benefits. Primary care physicians are ideally positioned to positively influence the adoption and increase of PA in the population.

**Purpose of study:**  
The aim of this study was to document the Quebec primary care physicians’ PA counseling and promoting (PACP), and examine to what extent their attitudes, perceptions; barriers, needs and sociodemographic characteristics influence their behavior.

**Methods/Theory:**  
A survey was conducted during 4 continuing medical education sessions in Québec (Canada). A total of 701 primary care physicians (67% women) completed the questionnaire.

**Findings:**  
Results showed that 40% of the respondents reported PACP to their patients in the context of primary care, although the majority (98%) of them...
considered it is an integral part of their professional role. While 90% said that a physically active physician is more effective in convincing their patients to be more active, only 14% met the PA recommendations. The factors predominantly associated with physicians’ PACP are: physicians who are personally physically active on a regular basis, who have more than nine years of medical experience, who are less affected by work overload, and who feel to be effective in the PACP interventions.

Conclusion:
The results suggest that Quebec primary care physicians should increase their PACP practice to their patients, and that a majority of them should increase their own level of PA given their modeling to their patients.

Keywords:
Primary care physicians, physical activity, counseling, attitude, barriers.

LOCAL COMMUNITY ANALYSIS IN VULNERABLE NEIGHBOURHOODS AND THE USE OF THE LOCAL TOOL (THE LOCAL COMMUNITY ANALYSIS TOOL)

Cecilie K. Ljungmann, et al.
Steno Diabetes Center Copenhagen

Purpose of study:
The study describes the process of conducting a local community analysis in a vulnerable neighbourhood in the municipality of Aarhus, by using The LOCAL Tool – a methodological tool developed at Steno Diabetes Center Copenhagen – with the purpose of characterizing and understanding local communities, as well as the residents and professional stakeholders, who live and work there. The tool provides a structured, participatory approach to characterize a local community by using four themes: 1) Physical and Organizational Structures, 2) Population Characteristics, 3) Professional Stakeholder Perspectives and 4) Citizen Perspectives.

Methods/Theory:
The study is based on quantitative and qualitative methods and includes semi-structured interviews with professional stakeholders and focus group discussions with different groups of residents.

Findings:
The analysis shows that it is essential to support the residents’ visions and ideas to create a local environment that motivates a healthy and social lifestyle. It must therefore be the needs, interests and wishes of the residents that create the starting point for future interventions, why it is important to mobilize the resources that exist in the community in co-productive processes across residents and different professional stakeholders to support a process towards a sustainable development.

Conclusions:
Overall the study revealed a useful tool to create a solid knowledge base for the development of future social and health related interventions and a broader sustainable community development. The findings and experiences from this study will be informative in developing social and health promoting interventions in other local communities.

Keywords:
Local community, user involvement, health promotion.

TRANSFORMATIVE CHANGE TOWARDS A SUSTAINABLE MEAT CONSUMPTION - AN EXPLORATION OF THE CRITICAL ASPECTS INFLUENCING THE PROCESS OF CHANGE

Sacha Manik
Center for Health Promotion - Roskilde University

Background:
Reducing our meat consumption is an essential part of the transition towards a sustainable western society (e.g. Bayley & Harper 2015; Wellesley et.al. 2015; Springmann et.al. 2018). Attaining a greater understanding of the sociological structures and mechanisms that support or challenge our way to a lower meat consumption is therefore of major importance and will be the aim of this thesis.

Purpose of study:
This PhD thesis seeks answers to the question “Why is a sustainable low-level meat diet a challenge for citizens in the process of transformative change? And how can this knowledge of challenges underpin a change in the meat consumption practices of the broader public of Denmark?”

Methods/Theory:
The results of the thesis is found through the method of retroduction by combining a survey, focus group interviewing, and a review with the theoretical perspective of critical realism and practice theory; particularly building on the perspectives of Margaret Archer and Alan Warde.

Findings:
The preliminary findings indicate that particular the social setting and the lack of support from public authorities in Denmark challenge a transformation of people’s meat consumption practices

Keywords:
Meat consumption, transformative change, challenges.
Analysis of the demand and concessions of the continued cash benefit for persons with disabilities under 16 years

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Purpose of study:
Brazil is one of the ten richest countries in the world, but about 25% of the population live on the poverty line. For people with disabilities, poverty acts as an aggravation of their disability and promotes poverty. The Continuous Cash Benefit - BPC assists populations living in extreme poverty by providing a minimum monthly income. Seniors and people with disabilities who have physical, mental, sensory or intellectual impairments in the long term are candidates. It is necessary to prove a gross monthly family income of less than ¼ of a minimum wage per person and, for people with disabilities, expert medical evaluations are necessary. The objective of this research was to analyze the profile of BPC concessions for people under 16 years of age requested from the National Social Security Institute of Maringá, Brazil, from May 2015 to October 2017.

Methods/Theory:
The population consisted of 332 applicants and had as its primary source the instruments of expert medical evaluation. For the analysis of the data, homogeneous groups of classes of dysfunctions (Cluster Analysis) were established and, from them, the profile of the applicants and the standard of the concessions were characterized.

Findings:
A predominance of male, pre-school, illiterate individuals with a diagnosis of mental and behavioral disorders, diseases of the nervous system and congenital malformations was observed.

Conclusions:
The grants appeared to be more dependent on the medical diagnoses of the applicants than on the degree of dysfunction suffered by the individuals, emphasizing the burden of the disease as a vulnerability factor.

Keywords:
People with disabilities, vulnerable populations, Continuous Cash Benefit, child disability.

The application of a conceptual model as a template and steering tool in clinical studies of self-management in hand eczema

Annette Mollerup
Absalon University College

Purpose of the study
Hand eczema is common in Denmark. The course is often fluctuating and becomes chronic, leading to sick leave, involuntary occupational shifts or early retirement. Hence, we need to support individuals’ self-management.

The purpose of this theoretical study was to develop a model, as guidance and as a frame of reference in a large clinical study of hand eczema.

Methods/theory
The study draws upon several sources:
- A literature review as to definitions of self-management
- Knowledge of characteristics of the disease
- Lazarus’ theory of stress and coping
- Methodology relevant to clinical research including focus group interviews and randomized trials of complex interventions

Findings
We first reflected upon the characteristics of a course of hand eczema as referred to disease severity, clinical threshold and chronological threshold. The clinical threshold determines the point when subtle skin changes become clinically visible. In time, eruptions may become more frequent and the chronological threshold then illustrates the transition, whereas the skin does not recover between eruptions. We then depicted the individual’s dynamic adaptation to the disease according to three constituents of self-management i.e. self-monitoring, patient competencies and the health provider-patient relationship.

Conclusion
The model was useful in the literature review. Moreover, the model was directive in a four focus group interview study.

Findings
Finally, the model steered the innovation and development of a multimodal nurse-led patient counselling program, evaluated in a randomized controlled trial including 306 patients.

Keywords
Self-management, chronic illness, hand eczema, clinical trial, patient counselling
Involving Social Return On Investment (SROI) in Community-based Health Promotion - A Prerequisite for Securing Sustainability of Actions or an Unethical Business Case?

Asier Nielsen
Steno Diabetis Center Copenhagen

Purpose of study:
Background The socially disadvantaged neighborhood Tingbjerg has several food clubs and cafés for specific target groups of residents but no public restaurant in which residents and visitors from outside Tingbjerg can enjoy meals from various parts of the world, and perhaps even interact socially around their experience. Professional stakeholders and residents in Tingbjerg have noted this deficiency and requested support to establish a Community-Driven Restaurant (CDR), which is non-profit, healthy, multicultural, sustainable and environmentally responsible. The restaurant will receive its food supplies from organic food suppliers and will be supervised by professional gourmet cooks. Moreover, the restaurant will serve an educative purpose for young socially challenged residents.

Methods/Theory:
Intervention The intervention has two elements, namely the construction of the restaurant and its kitchen facilities; and the establishment of an internship program for young residents of Tingbjerg. Both elements are co-produced with local professional stakeholders and co-created with residents using design-based thinking and action research methodology. A working group comprising professional stakeholders and residents will be established to organise and coordinate activities.

Findings:
Main results The purpose of this component is to increase cross-cultural interaction in Tingbjerg through the establishment of a community-driven restaurant, and to provide young residents with internships in the restaurant. The wider perspective is to increase healthy living, cross-cultural tolerance, attraction from outside visitors and positive press coverage from Tingbjerg, and to get young and socially challenged people away from the street and into formal education and subsequent employment in the food service sector.

Conclusions:
Significance for research or policy My PhD study investigates the intervention economy and its potentials for attracting public or private investments for social and health change. Using the SROI framework this involves the development and testing of a business case for the CDR which documents (and is negotiated with potential investors) the cost-savings of bringing poorly educated and unemployed youth groups into formal education (and subsequent employment) through internships in the community restaurant.

Keywords:
Social return in investment, social impact bond, local community, vulnerable neighborhoods, diabetes

Adherence to Mammographic Screening – Views of Women from a Swedish Region

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Background: A health promoting strategy to early detect potential breast cancer is mammographic screening. In Sweden, organized population based mammographic screening program is offered and requires a high and continuous attendance to be successful. Therefore, if women decide to refrain from accepting the invitation due to modifiable reasons, it is of importance to understand this. In Sweden the national attendance rate in mammographic screening is 80% and by interviewing a group of women who attend and are residing in a Swedish region with only one mammographic facility, it may shed light on how they are reasoning around their attendance, both benefits as well as potential concerns.

Purpose of study:
To describe the experiences and perceptions of women who attend mammographic screening.

Methods/Theory:
Data from six focus group discussion were analyzed by content analysis.

Findings:
Attendance is an unquestionable act and decision is made based on one’s own and other opinions. The invitation is perceived as a benefit however the decision to attend entails planning and dictated by social determinants. Additionally, feelings and thoughts regarding the screening procedure is taken into consideration.

Conclusion:
The decision to attend as well as the willingness to continue to adhere to the screening is based on norms, structural conditions largely outside the individual’s direct control, the screening procedure itself and own’s as well as other opinions of the value of the screening. Consequently, all of this may have consequences on the individual and public health.

Keywords:
Attendance, experiences, social determinants, mammographic screening, public health
LOCAL DRUG PREVENTION STRATEGIES THROUGH THE EYES OF POLICY MAKERS AND STREET-LEVEL BUREAUCRATS

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Department of Health Promotion and Development, University of Bergen

Background:
Norwegian municipalities report that drug misuse is their most important public health challenge. Addressing drug prevention aimed at youths is, therefore, an important policy area for the local government.

Purpose of study:
The study provides insight into the local drug prevention strategies through the eyes of those tasked to address it, namely policy makers and street-level bureaucrats. The following study explores how policymakers and street-level bureaucrats describe local drug prevention in practice.

Methods/Theory:
A single case study of a Norwegian municipality was used to investigate the structures for drug prevention. The data was gathered through 14 interviews with public officials from the relevant policy areas and street-level bureaucrats from a drug prevention service. The data were analysed using a thematic framework analysis.

Findings:
This study showed that the participants' description of drug prevention included a health promoting perspective, where the goal is to create good living conditions for all. This finding was discussed in contrast to a more traditional prevention perspective, which is found more prominent in the literature. The participants highlight that drug prevention is the responsibility of several policy areas, but the organization is described as siloed, with limited room for collaboration. We discuss how the street-level bureaucrats and policy makers navigate in the siloed landscape to highlight some of the challenges for local drug prevention.

Conclusion:
The local policy makers and the street-level bureaucrats describe drug prevention in a health promoting perspective, but experience there are challenges when working across organizational silos.

Keywords:
Drug prevention; Local government; Intersectoral collaboration; Health promotion; Qualitative research; Case study.

PRELIMINARY FINDINGS OF THE PROCESS EVALUATION OF THE QUEBEC GOVERNMENT INITIATIVE PROMOTING DAILY 60-MIN PHYSICAL ACTIVITY IN PRIMARY SCHOOL

Noémie Robitaille
National Bank of Canada

Purpose of study:
To identify the various school-community mobilization strategies developed for implementing the government initiative

Methods/Theory:
The main concepts of the theory of community capacity building (Casey et al., 2009; Gugglberger & Dür, 2011) were used to specify the topics enabling us to meet the research purposes. An online survey of 39 questions was sent to the 415 participating schools. The survey addressed topics such as the attitude and the degree of involvement of the different stakeholders concerning the initiative, the planning and the strategies to implement the chosen actions and how to overcome the barriers encountered. The SPSS 25 program was used to organize the collected data. Chi-square and variance analyses were performed to explore the relations between the different variables.

Findings:
Preliminary findings show that physical education teachers represent 80% of the project leaders. In 3 out of 4 participating schools, almost all education staff is already aware of the benefits of physical activity on learning achievement. A majority of the school staff wish to be involved in the project, including the daycare personnel (61%).

Conclusions:
We found some significant variations in the extent of mobilization within the school stakeholders and the school size as well as the geographical location (rural or urban). We also found differences in the developed strategies according to the two same independent variables.

Keywords:
Physical activity promotion, primary school, community capacity building, leadership, mobilization
**Children's Agency in Building Social Capital and Collective Actions**

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Background:
The Health Promoting School (HPS) approach emphasising pupil participation is recognised as being conducive for building social capital. Yet, how participatory health educational processes relate to different types of social capital remains unclear.

Purpose of study:
The present study explores which mechanisms within a participatory health educational process influence social capital and collective actions in the school context, and discusses children’s agency in such processes.

Methods/Theory:
The study applies a multiple case study design. The Danish ‘We Act – Together for Health’ HPS intervention is considered an instrumental case on a participatory health educational process for children, principally since it applied the participatory Investigation–Vision–Action–Change (IVAC) methodology. The paper is based on a theory-driven, abductive research strategy. Qualitative methods, including focus group interviews with children, semi-structured interviews with teachers and school principals, and participant observation were used.

Findings:
Findings include a conceptual framework, which elucidates several mechanisms residing at different levels that interact with types of social capital and collective actions within the school setting. This indicates that working with child participation through the IVAC methodology can influence types of social capital and collective actions though not without challenges.

Conclusion: To sum it up, children face challenges in terms of influencing bridging and linking social capital, norms of reciprocity and collective actions without sufficient support mechanisms at school and class levels.

Keywords:
Social capital, collective actions, health promoting school, children, IVAC methodology

**The Art of Plate Spinning – A Study of Clinician-scientists’ Translational Work Practices in a Danish Hospital Setting**

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Background:
Strengthening “translational pathways” between scientific research, clinical care and measureable health outcomes is politically desirable as a way of insuring that public investments in health science generate payback in the form of improved care practice and improved public health. Policy documents and existing studies on translational research have pointed to the crucial role of clinician-scientists as hybrid professionals with expertise in both health care practice and scientific research. This professional role is often understood as a key actor in facilitating adaptations of knowledge across perceived “translational gaps” between science and health care.

Purpose of study:
While the importance of this role has been addressed thoroughly, only few empirical studies focus on clinician-scientists’ practices, the ways in which clinician-scientists actually carry out day-to-day hospital-based translational research work. The purpose and contribution of this study is an empirical exploration of clinician-scientists work practices.

Methods/Theory:
The study draws on methods and theory from the field of organizational ethnography in particular situational analysis.

Findings
The study analyzes how clinician-scientists must meet demands of multiple arenas, something which tends to be overlooked in the prevalent dualistic discussions of science and clinic as separate domains to be translated to and from each another. The arenas are depicted in turn to highlight the organizational and technical complexity as well as the scope of the specialized knowledges involved.

Conclusion:
The paper argues that a continual bringing together of multiple, rather than dual arenas is constitutive of the clinician-scientists’ hospital-based research work practice. Multiple arenas are continually held in play - or kept spinning - as in the image of the act of plate spinning.

Keywords:
clinician-scientists, physician-scientist, academic medicine, translational research, translational medicine, situational analysis
INTEGRATIVE OR DISINTEGRATIVE MANAGEMENT AND LEADERSHIP APPROACHES TO HEALTH PROMOTION AND SUSTAINABLE WORKPLACES?

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Background and aim
Leadership can impact employee health and the social climate, while management can build organizational capacity for sustainable workplaces. The aim of this study is to investigate if and how management and/or leadership approaches in research on health promotion and sustainable workplaces are addressed, and to discuss the results related to a need of disintegrative approaches to health promotion and economic efficiency.

Material and Methods
In a scoping review, 20 scientific peer-reviewed articles from the Nordic countries were included for an in-depth analysis. Of these, 10 studies focused on management, 5 on leadership, and 5 on both management and leadership.

Findings
Four categories emerged: studies including a whole system understanding; studies examining success factors for implementing workplace health promotion; studies using sustainability for framing the study; and studies highlighting an explicit economic focus.

Conclusion
It seems reasonable to conclude that workplace health promotion should integrate health needs and efficiency in order to contribute to long-term sustainability. However, while integration of health needs into leadership has been highlighted, efficiency is often prioritized in work organizations and challenge the social and health dimension of sustainability. Therefore, it may be discussed whether disintegrative approaches to health promotion and economic efficiency are needed. In applying the concept of organizational health, we consider health humanities and ‘compassionate design’ as valid approaches in promoting workforce wellbeing. Organizational health presumes a dialectical perspective with a focus on diversity and value conflicts, but also mutual dependencies, particularly in personnel-intensive organizations in health care.

Keywords:
employee health; management; leadership; organizational health; sustainable workplaces; work health promotion

THE MEANING OF MOVEMENT IN THE EVERYDAY LIVES OF DANISH HIGH SCHOOL STUDENTS: A PHENOMENOLOGICAL STUDY EXPLORING EXISTENTIAL WELL-BEING AS ‘DWELLING-MOBILITY’

Stine Kjær Wehner, et al.
National Institute of Public Health, University of Southern Denmark.

Background:
Health promoting initiatives focusing on physical activity includes advice on integrating active behavior in everyday activities pointing to a tendency to combine a health agenda with other agendas. From a public health perspective this might be a valuable strategy, but it calls for a conceptual awareness and exploration of the target groups’ perceptions of this broader concept of physical activity.

Purpose of study:
Stemming from a Danish intervention study aiming at increasing well-being among high school students aged 16-17 years old through promotion of movement, this study engages in a conceptual exploration of ‘movement in the everyday’ in relation to well-being.

Methods/Theory:
Combining fieldwork and photo elicitation interviews the study investigates different kinds of meaning experienced in relation to movement. Theoretically the study is framed by existential phenomenology with a focus on corporeality, temporality and intersubjectivity. The existential theory of well-being ‘Dwelling-mobility’ is applied in a discussion of the relationship between bodily movement and well-being.

Findings:
The findings point to movement as a way for students to balance two existential modes within the dimensions of corporeality, temporality and intersubjectivity: one of activity and tenseness, and one of break and stillness. For the students, movement entails bodily experiences ranging from modes of self-forgetfulness to the body demanding attention in different manners; they experience movement as a break from everyday obligations, but also as a way of moving forward; and they experience movement as an occasion both for being social and for withdrawing from the social worlds.

Conclusion:
Looking across the three existential themes and applying dwelling-mobility as a notion of well-being, for the students we may consider bodily movement in everyday life as containing a potential for balancing two existential modes: a mode of mobility, activity and tenseness and a mode of dwelling, break and stillness.
Impact on Educators and Learners of a Peer Education Approach to Delivery of a Mental Health Promotion Intervention to High School Pupils by Pharmacy Undergraduate Students in Manchester.

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Background:
Mental health promotion (MHP) within a school environment provides an opportunity to prevent mental health disorders and illnesses in young people, and can contribute to positive mental health (1). Peer education is one method for delivering MHP interventions. Benefits of peer education for educators and learners include the development of leadership skills, knowledge and individual health behaviours (2).

Purpose of study:
To pilot a mental health promotion intervention and identify impact on high school pupils and undergraduate pharmacy students.

Methods/Theory:
The Medical Research Council (MRC) framework for developing and evaluating complex interventions was used (3) to design and pilot an intervention for Year 9 (Y9) pupils aged 13-14 years. The intervention was co-designed with stakeholders (Y9 pupils and teachers). Repeated measures questionnaires adapted from Painter, K., et al. (4) were used to establish impact on high school pupils; thematic analysis of assessed reflective pieces was used to explore impact on pharmacy students.

Findings:
High school pupils’ knowledge and attitude and personal help-seeking scores increased significantly pre and post intervention. Thematic analysis of students’ reflective pieces suggests that taking part in mental health promotion had increased students’ knowledge of mental health and had developed their skills. Findings also indicate that students valued the opportunity to take part in health promotion as it would be an important part of their future pharmacy career.

Conclusion:
A mental health promotion intervention delivered by pharmacy students to high school students utilising peer education had positive impacts on both high school pupils and undergraduate pharmacy students.

Keywords:
Mental health promotion, undergraduate, high school, harmacy, peer education

Qualitative Study of Communicational Barriers Between Men and General Practitioners (GPs)

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Background:
The focus of this research is to explain inequalities in men’s health within the context of cancer detection. Men has a lower estimated life span and a lower cancer survival rate than women. Current literature suggests multiple reasons for this, including differences in regular contact with a doctor. Also, it has been shown that men’s educational level is closely related to their cancer survival rates.

Purpose of study:
This project investigates the doctor-patient communication and early detection of cancer that minimizes patient delay and improve the survival rate for patients.

The aim is to gain a better understanding of men’s relation to their own health and experiences from meetings with general practitioners and how it influences when and why they act following changes in sensation of their body.

The project will elaborate on how men experience potential symptoms and communicate them with their GP. The project aims to understand how communicational barriers can influence patient delay.

Methods/Theory:
The qualitative data consist of 10 semi-structured interviews. The interviews are with male patients, who have experienced an urgent referral pathway for suspected cancer (kræftpakkeforløb), and GPs from Region Zealand.

Findings:
The presentation will be based on the initial analysis of qualitative interviews with attention to communicational tensions between how men and GPs experience the diagnostic meeting regarding the urgent referral pathway for suspected cancer.

Conclusion:
The study is finished in Q1 2019 and the conclusion will be presented with the poster.

Keywords:
qualitative methods, doctor-patient communication, marginalization, dialogic communication, patient delay.