

National targets for health – what can design contribute?

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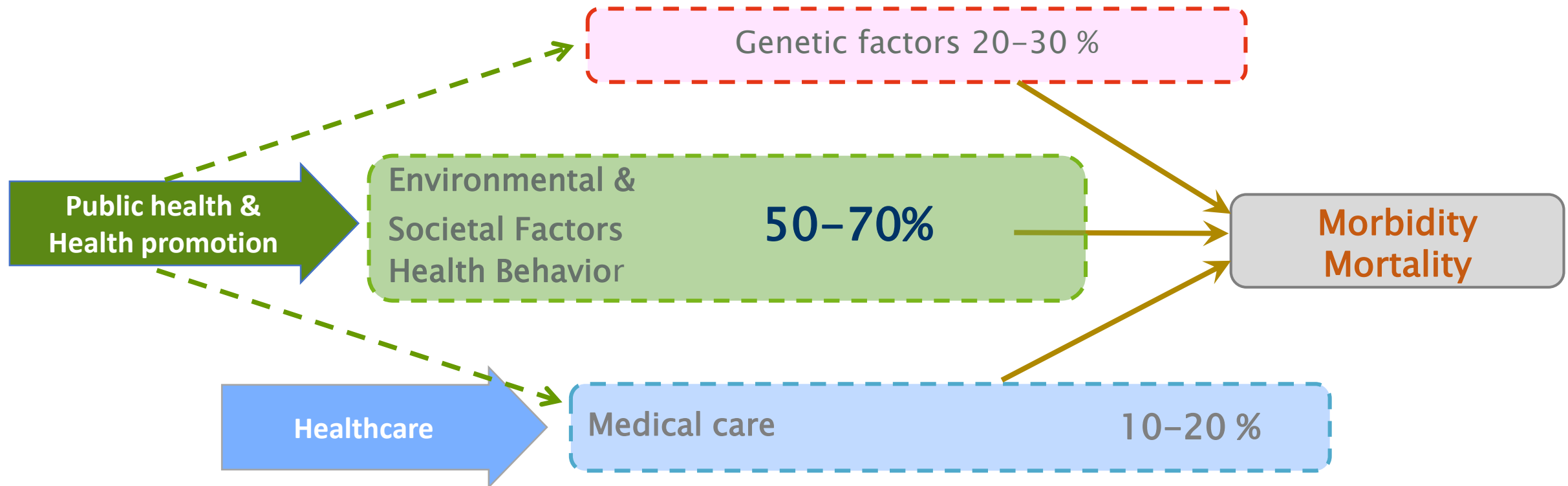
Content

- The Austrian health targets – a brief overview
- Examples of how design – as a relevant (public) health determinant – can support public health and the Austrian health targets
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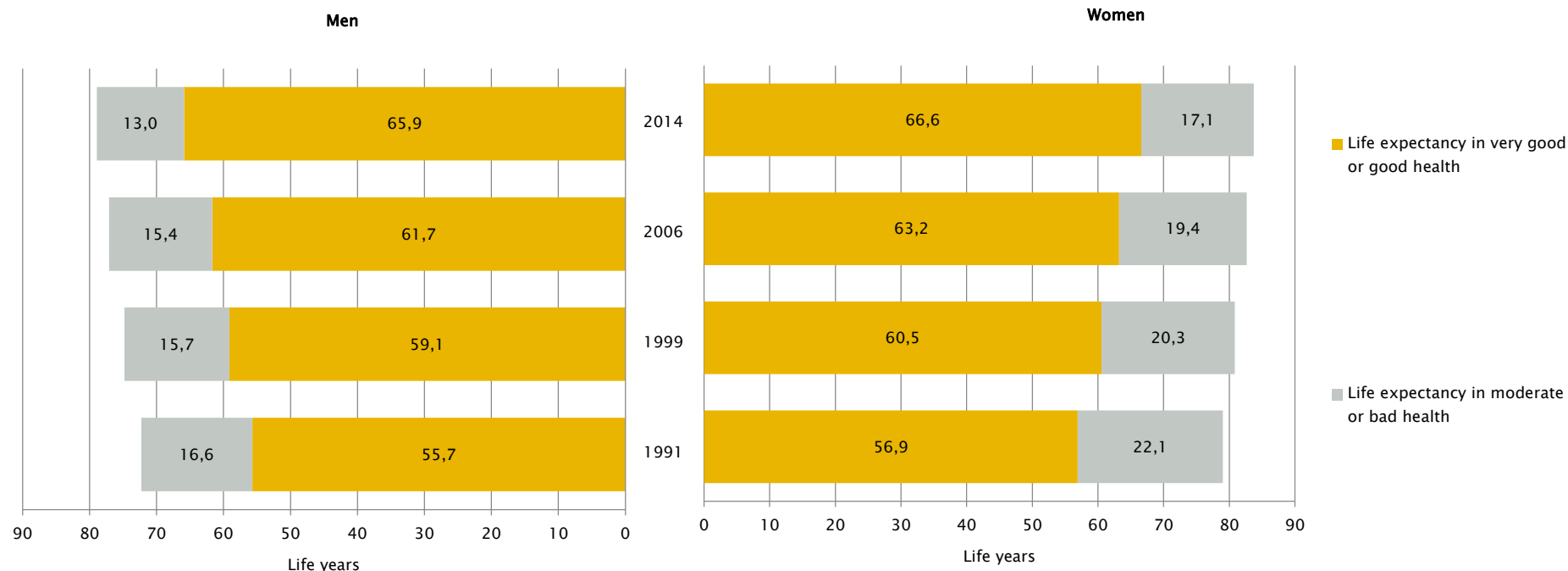
The Austrian Health Targets – a brief overview



A strong need for a public health & health promotion approach!



Our overall goal: More healthy life years for all!



- Austrian get old, but could do better with regard to healthy life years
- People from better socio-economic backgrounds do better than those worse off
- Women are more concerned than men

Developing & Implementing comprehensive national targets for health

2011/12

- Mandate from Federal Health Commission / Austrian Council of Ministers
- Broad, intersectoral development & consultation approach – more than 40 key political and societal stakeholders, public consultation

Ongoing

- Development of implementation plans for each health target
- Monitoring & evaluation, continuous adaptation of plans

Until 2032

- Institutionalization of achievements – sustainability through building structures and capacities, including financing mechanisms

10 Targets for Health – basic principles



Adapted from: Dahlgren G, Whitehead M. *Tackling inequalities in health: what can we learn from what has been tried?* London, King's Fund, 1993.

- Health determinants approach
- Settings approach
- Life course approach
- Health in all policies & intersectoral approach
- Co-Benefits Approach



10 Targets for Health – embracing all major settings and phases of life



Target 1: Health-promoting living and working conditions

Target 2: Health equity for all people living in Austria

Target 3: Better health literacy in the population



Target 4: Secured sustainable natural resources

Target 5: Strong social cohesion as a health enhancer

Target 6: Healthy conditions for children and young people



Target 7: Access to a healthy diet for all

Target 8: Active population through appropriate environments

Target 9: Good psychosocial health in all population groups



Target 10: Sustainable, efficient and high-quality
health care for all

Contributions of design to Public Health & Austrian health targets – selected examples



Target 1 – Better living and working conditions

Healthy Cities (since 1988)



Health Promoting Hospitals (since 1989)



Health Promoting Schools (since 1993)



Workplace health promotion (since 1996)



Promoting healthy settings through networks – with architecture, design, landscaping and urban planning as relevant aspects of setting quality!

Target 3 – better health literacy (of patients)



Health literacy-friendly signage & design supports the finding, understanding, appraising, and applying of information that is needed to take decisions on treatment, prevention, and promotion.

Target 4 – natural resources



Better air and lower temperature in cities through public transport, green areas, promoting walking and cycling, ...

Target 5 – social cohesion



Better social capital & community engagement through traffic-free streets that allow meeting and playing, through wide and lighted spaces that increase public safety, through common areas in rental houses, ...

Target 7 – a healthy diet



Supporting healthy food choices through shop design

Target 8 – Active population through appropriate environments



City planning can support active lifestyles through cycling, walking and carbon-free mobility!

Target 10 – quality of healthcare

**TABLE 1:
SUMMARY OF THE RELATIONSHIPS BETWEEN DESIGN FACTORS AND HEALTHCARE OUTCOMES**

Healthcare Outcomes	Single-bed rooms	Access to daylight	Appropriate lighting	Views of nature	Family zone in patient rooms	Carpeting	Noise-reducing finishes	Ceiling lifts	Nursing floor layout	Decentralized supplies	Acuity-adaptable rooms
Reduced hospital-acquired infections	**										
Reduced medical errors	*		*				*				*
Reduced patient falls	*		*		*	*			*		*
Reduced pain		*	*	**			*				
Improved patient sleep	**	*	*				*				
Reduced patient stress	*	*	*	**	*		**				
Reduced depression		**	**	*	*						
Reduced length of stay		*	*	*							*
Improved patient privacy and confidentiality	**				*		*				
Improved communication with patients & family members	**				*		*				
Improved social support	*				*	*					
Increased patient satisfaction	**	*	*	*	*	*	*				
Decreased staff injuries								**			*
Decreased staff stress	*	*	*	*			*				
Increased staff effectiveness	*		*				*		*	*	*
Increased staff satisfaction	*	*	*	*			*				

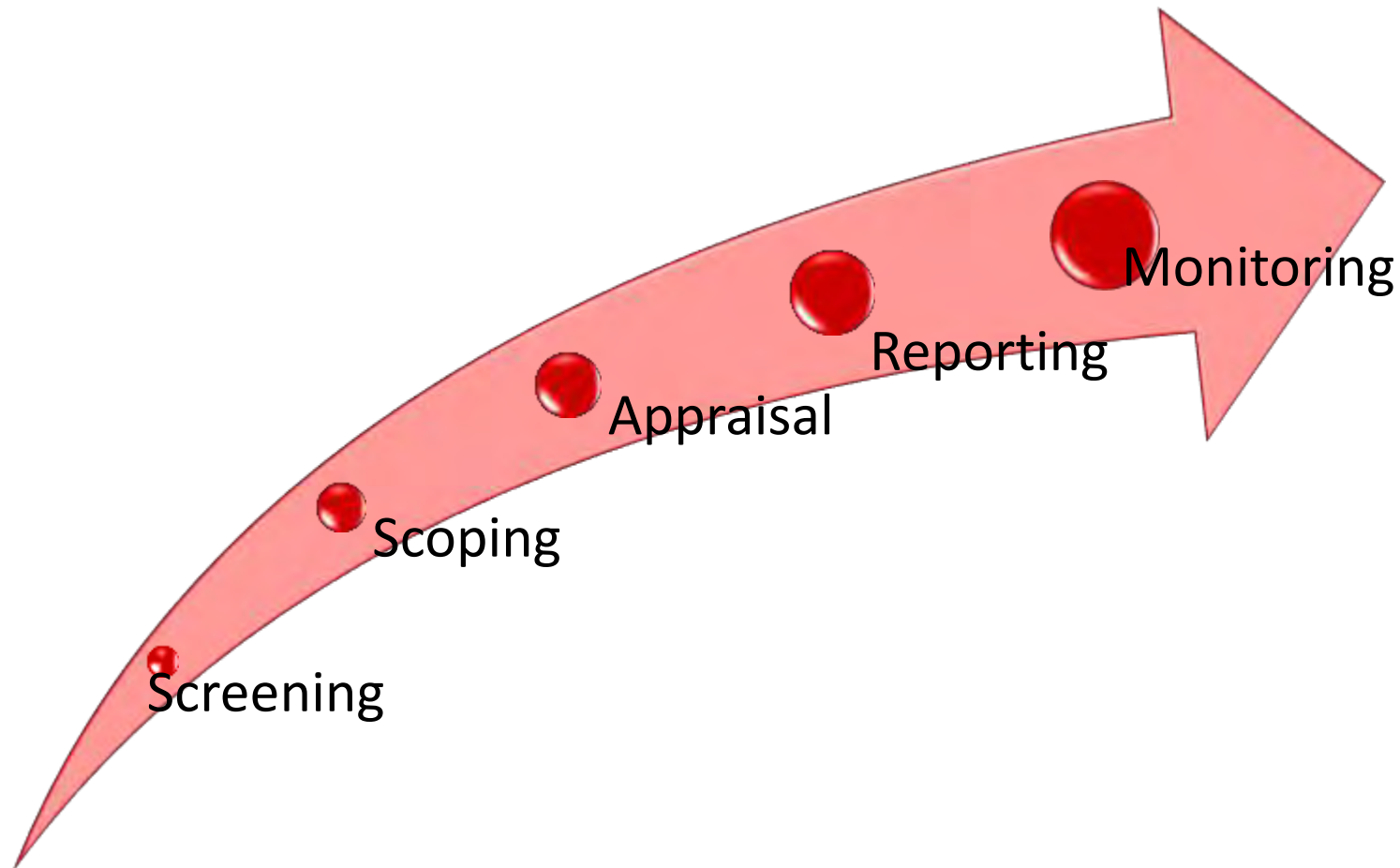
* Indicates that a relationship between the specific design factor and healthcare outcome was indicated, directly or indirectly, by empirical studies reviewed in this report.

The built environment has proven effects on health!

Source:

Ulrich RS, Zimring C, Zhu X, DuBose J, Seo HB, Choi YS, Quan X (2008): A Review of the Research Literature on Evidence-Based Healthcare Design. In: HERD 1 (3), 61-125

Health impact assessment (HIA) as a voluntary tool to support intersectoral cooperation for health



Design-relevant example:

- Regional HIA on road development in one Austrian province

Summary & Conclusions



Summary & Conclusions

- Determinant-oriented public health and health promotion interventions have a high potential to improve population health
- Austria has a long tradition in setting-oriented health promotion & public health and has recently implemented an intersectoral health target process approach towards this end
- Design-oriented interventions can highly contribute to achieving health promotion & public health goals in a wide range of areas

Many thanks for your attention!

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