

# **PUBLIC HEALTH AND HYGIENE in Slovak Republic**

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## Health - Definition

- ❑ State of full *physical, mental and social* well-being, not only absence of disease and disability  
(WHO, 1948)
- ❑ The reduction in mortality, morbidity and disability due to detectable disease or disorder, and an *increase in the perceived level of health*  
(WHO, 1999)

# Health Promotion

- ❑ Process enabling individually and collectively increase control over *determinants* of their health, and improve health status. (WHO, 1998)
- ❑ It does not mean only responsibility of the health care system, but also *individual responsibility* for health expressed via *life style*. (Kebza, 2005)

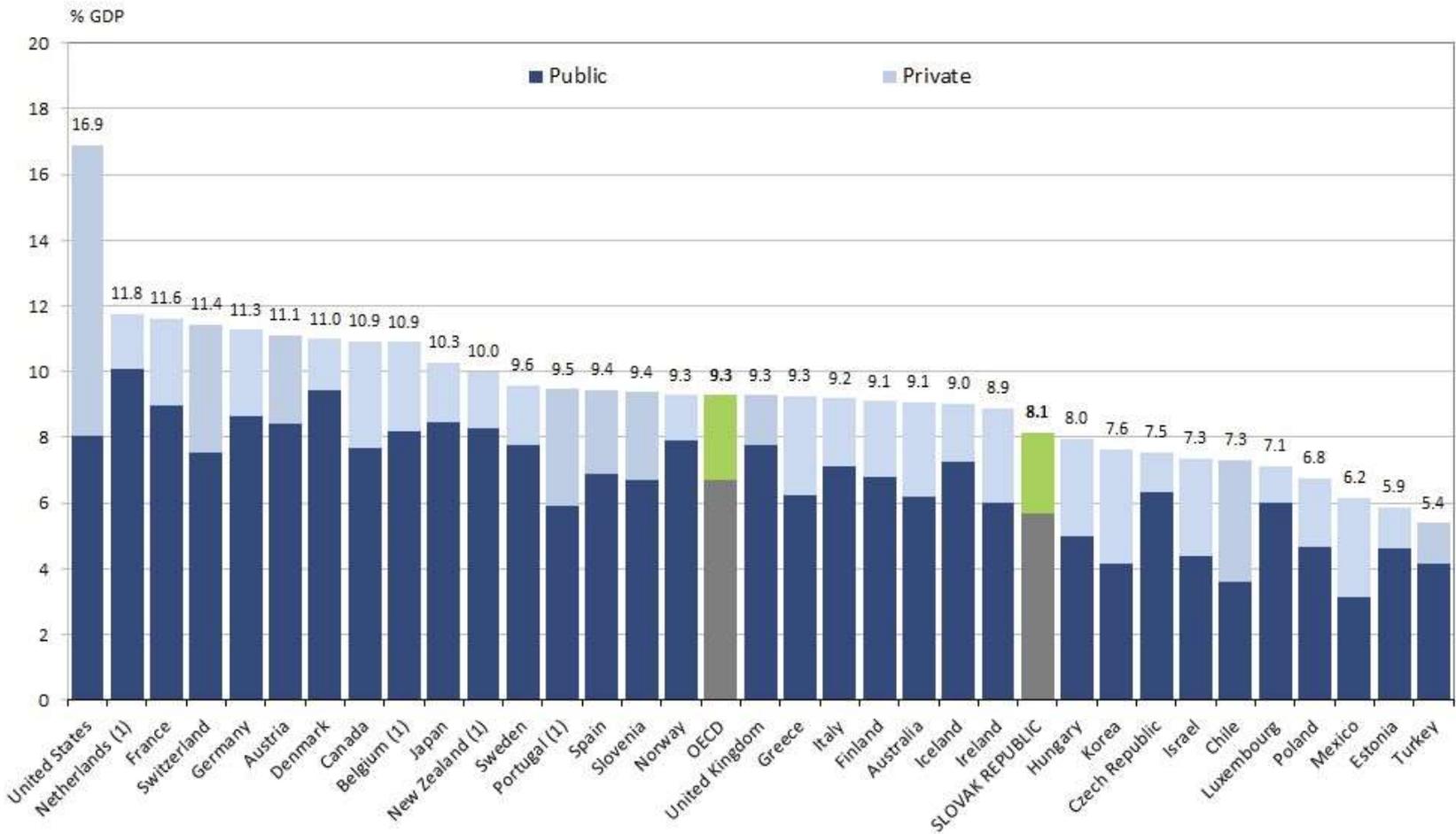
# Determinants of Health

- ❑ **Life style (50%)**
- ❑ **Environment** (cultural, economic, social and physical conditions of life) (20%)
- ❑ Genetic background (20%)
- ❑ Health care system (10%)

# Health 21 in SR

- ❑ Insufficient financial resources
- ❑ Insufficient intersectoral collaboration
- ❑ Lower participation of public
- ❑ Slow regional implementation of Health 21

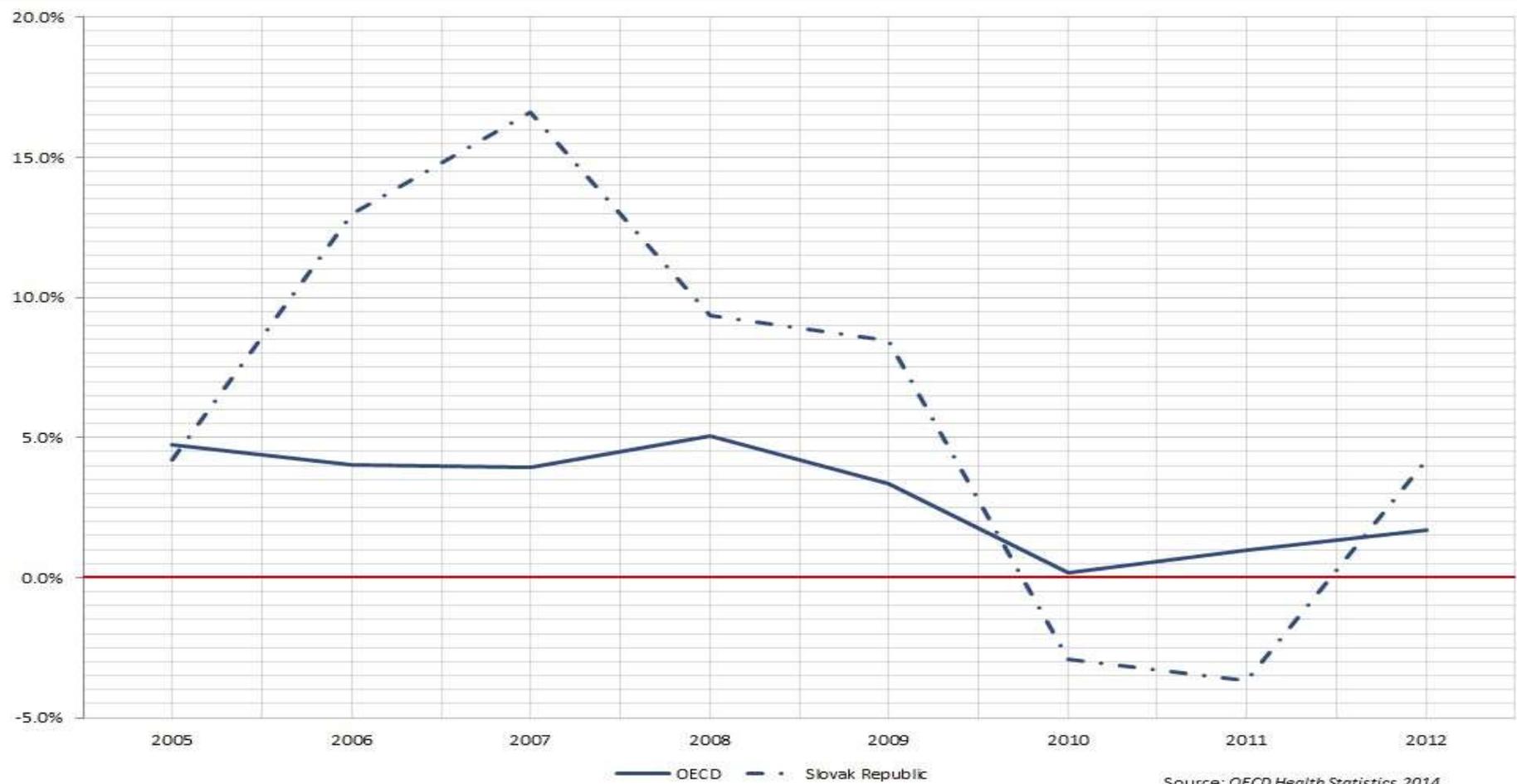
# Health expenditure, public and private, as a share of GDP, OECD countries, 2014 or latest year



1. Total expenditure excluding capital expenditure.

Source: OECD Health Statistics 2014.

## Health expenditure growth rates (in real terms) since 2005, Slovak Republic and OECD average



Source: OECD Health Statistics 2014

# **Teaching of Public Health at MF UPJŠ Košice**

## **Strengths:**

- very high level of academic staff**
- professors and associate professors**
- 4 departments dealing with specialization in public health**
- teaching connected more to medical science and background**
- approved curriculum by Accred. Com.**
- bacalaureate and master degree**

# Teaching of Public Health at MF UPJŠ Košice

## Weaknesses:

- ◆ weak connection to real practice at public health agencies, occupational health agencies
- ◆ no possibility to include student to existing community health programs

## Eliminations

- ◆ staff from public health agencies has also teaching hours for students
- ◆ organizing outside excursions
- ◆ students have also summer practice in PHA.

# **Research at the department**

- ◆ **Environmental and social factors effect on reproductive parameters**
- ◆ **Child growth comparison**
- ◆ **Roma health communities living as marginalised population**
- ◆ **Tick born infection and occupational exposure**
- ◆ **Exposure to heavy metals**
- ◆ **Cardiovascular prevention among adolescents**

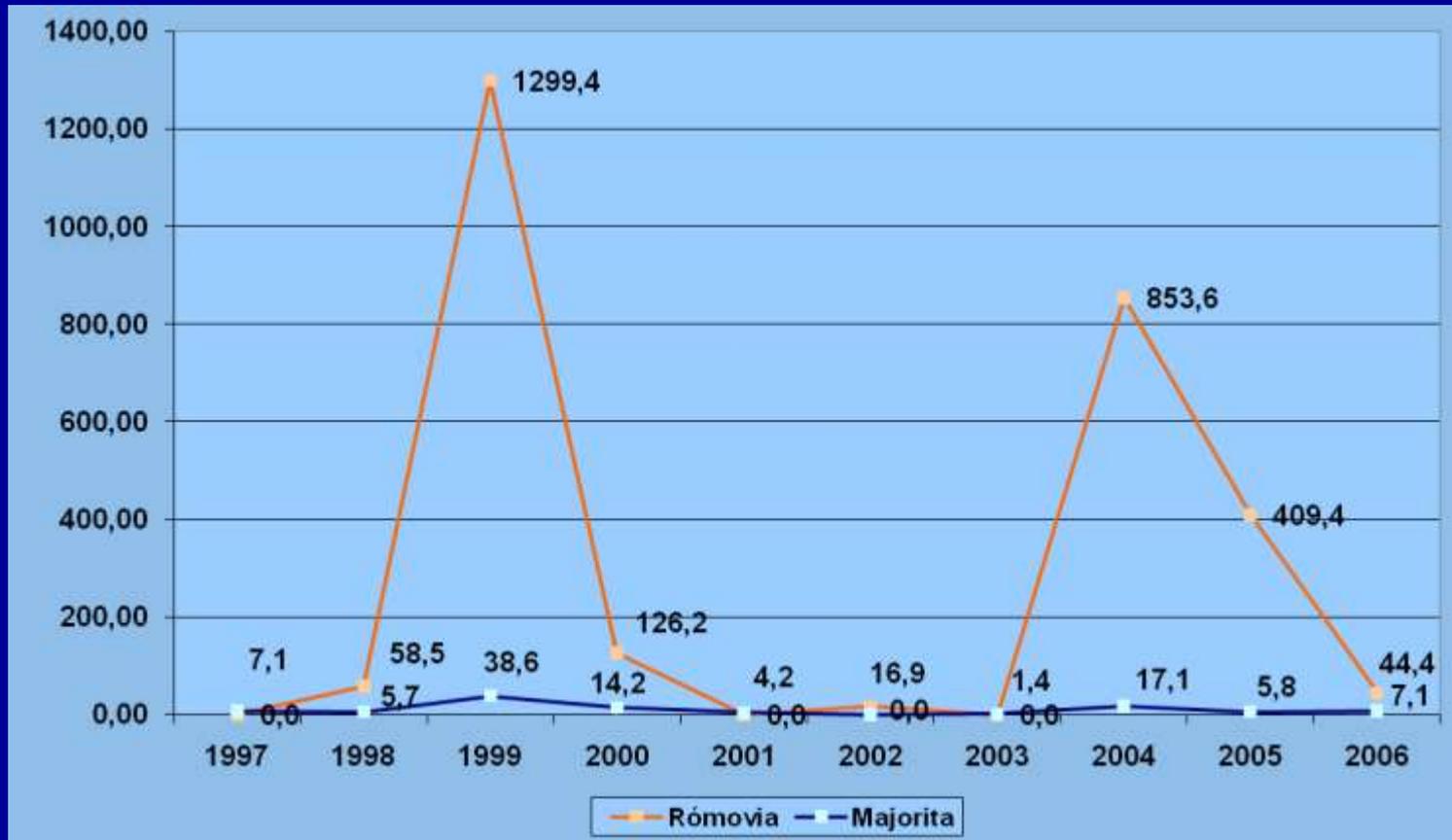
# Ethnic height differences in girls Roma versus Slovak national anthropometric survey (Roma, n=710)

	SR - 2001			Roma - 2006					
Age	n	(cm)	s (cm)	n	(cm)	s (cm)	Diff.	P(95%)	Sig.
3	728	100.30	5.96	8	94.38	3.78	<b>5.92</b>	0.0030	**
4	481	107.83	5.91	13	100.08	4.37	<b>7.75</b>	0.0001	***
5	530	114.93	5.83	20	105.35	4.98	<b>9.58</b>	0.0001	***
6	508	122.44	6.46	56	108.08	8.23	<b>14.36</b>	0.0001	***
7	884	126.34	6.18	95	112.45	9.32	<b>13.89</b>	0.0001	***
8	948	132.06	6.42	66	119.19	9.03	<b>12.87</b>	0.0001	***
9	833	137.06	7.17	69	124.24	10.39	<b>12.82</b>	0.0001	***
10	779	143.27	7.47	28	135.55	9.71	<b>7.72</b>	0.0003	***
11	858	150.85	8.41	17	142.41	7.61	<b>8.44</b>	0.0003	***
12	854	156.21	7.64	6	150.08	6.83	<b>6.13</b>	0.0792	n.s.

\*p<0.05 ; \*\* p<0.01 ; \*\*\* p<0.001

# Hepatitis A among Roma population and majority population

Bardejov, 1997-2006



**Priemerná chorobnosť' je u Rómov 27,8-krát väčšia ako u majority ( $\chi^2=1277,87$ ;  $p<0,001$ ).**

# Newborn parameters differences Roma and Non-Roma

Parameter	Roma (n=947)		Non-Roma (n=2713)		t-test p-hodnota
	Mean	SD	Mean	SD	
Birthweight (g)	2866.9	452.3	3267.5	538.5	<0.001
Birthlength (cm)	48.4	2.3	49.7	2.6	<0.001
Head circumference (cm)	33.0	1.7	34.1	1.6	<0.001
Chest circumference (cm)	32.1	2.1	33.1	2.0	<0.001
Gestational age	37.0	1.5	39.2	1.6	<0.001
Apgar score vitality	9.3	1.4	9.2	1.2	n.s.

# Organisation of Public Health services in SR

- ❑ **The Public Health Authority is a budgetary organization of the state with competence on the territory of the SR with the registered office in Bratislava, linked with the financial relations to the budget (DECRESAING) of the Ministry of Health**
- ❑ **executive agency with great legislative strenhts**
- ❑ **The Public Health Authority is managed and its activity falls under the responsibility of the Chief Hygienist of the SR**
- ❑ **Chief hygienist - is also the director of the office. The chief hygienist is appointed and dismissed upon proposal of the Minister of Health of the Slovak Republic by the director of the office of the ministry**

# **Organisation of Public Health services in SR**

- manages, controls and coordinates the execution of state administration carried out by regional public health agencies**
- Regional public health agencies - 36 in SR**
- field of protection, promotion and development of public health**
- mainly focused for health protection and environmental control and inspection.**

# Regional Public Health Authorities

## Goals:

- **international projects - important participation in solving of national for public health and performing scientific research in this field**

## In practise:

- **CINDI project, Healthy school, Healthy workplace**

# Goals:

- ◆ **managing, directing and controlling of epidemiological surveillance of communicable diseases and fulfilment of immunisation program**
  
- ◆ **In practise:**
  - **report important infectious disease to the system EPIS**
  - **on site epidemiological control**
  - **vaccination support**
  - **vaccinations in the state of community threads - VHA vaccination among Roma communities**

## **Goals:**

**control and protection of health in occupational settings**

## **In Practise:**

- **control of exposure – concentration, level of noise,**
- **control of worker's health**
- **diagnostic results – audiometry, pulmonary functions, toxicological blood test**

# Goals:

**Control and protection of environmental factors**

**In Practice:**

- **drinking water control**
- **air pollution control in another hands**
- **risk of waste disposal**
- **other environmental risk**

# Goals:

## **Ionizing radiation control**

### **In Practice:**

- **environmental ionizing radiation**
- **ionizing radiation in occupational settings**

# Goals:

**Food control, cosmetic control, no textile control**

## **In Practice:**

- EU directives about allergens**
- Responsibility of veterinary service for animal products**
- Responsibility of PHA for risk human health**

**Food scandals**

# **Goals:**

**Hospital infections control, control of sterility  
in central sterilisation unit**

## **In Practice:**

**- Control of sterility of tool and environment in  
specific department, surgery theaters**

# **National Environment and Health Action Plan of SR - NEHAP**

**□ performing tasks of control of environment**

**In practise:**

**body entitled to impose sanctions on placing  
of chemical substances and mixtures on  
market according to special ordinance,**

# **International Network of Health Promoting Hospitals**

- ◆ **WHO Collaborating Centre – Copenhagen, Denmark**
- ◆ **health care towards active promotion of health**
- ◆ **Annual international conference and workshops  
(2013 in Sweden)**

**Baby freindly hospitals**

# Health protection in PHA

- ❑ inspektor - control
- ❑ food procesing, cosmetic, food quality
- ❑ occupational settings and protection

# Standards on Health Promotion in Hospitals

- ◆ I. Guidelines for management of health promotion in the hospital
- ◆ II. Assessment of patients needs in the field of health promotion
- ◆ III. Information for patients on health promotion in the hospital
- ◆ IV. Support of healthy working environment
- ◆ V. Continual collaboration

## **Examples of successful projects in SR**

- **Baby Friendly Hospitals (breastfeeding support)**
- **Antismoking campaigns – League against Cancer, Healthy City**
- **Narcis day – March**
- **Tobacco Alcohol Drugs program**
- **Také ball, not drugs**
- **Health Clowns at pediatric departments in hospitals in SR**