

# Introduction of the Health@work.hk Project



## Overview

- Overview on workforce health promotion
- Experience of the first phase of the Project
- Introduction of the second phase of the Project
- Roles of dietitians / nutritionists in WHP

## Background

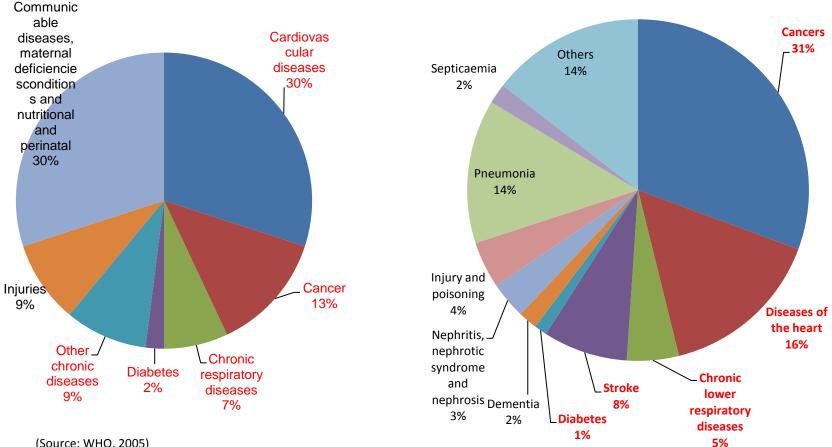
## Why tackle NCD?

NCD represented 60% of all deaths globally

NCD are leading causes of death in HK (>60%)

#### Projected main causes of death, worldwide, 2005

Proportion of all registered death in HK, 2010



(Source: WHO, 2005)

Source: Department of Health, Census and Statistics Department

### Why target the workplace? Clarge Leet of **3 million working** people **Action Plan to** Promoting **HEALTH** in Promote Healthy Diet and Hong Kong: Physical Activity Participation in Hong Kong >1/3 of daily hours at work t

Setting-based approach for health promotion

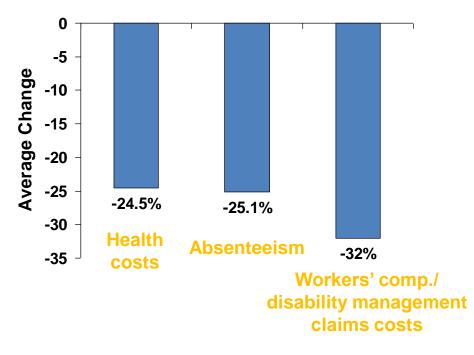
#### PEOPLE

Non-communicable diseases prevention actions

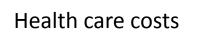
#### Environment

# Why promote health in the workplace ?

## Worksite health promotion economic return



#### The Return On Investment (ROI) in Workplace Wellness Programs 3.27



Absenteeism

2.73

Meta-analysis of 22 studies

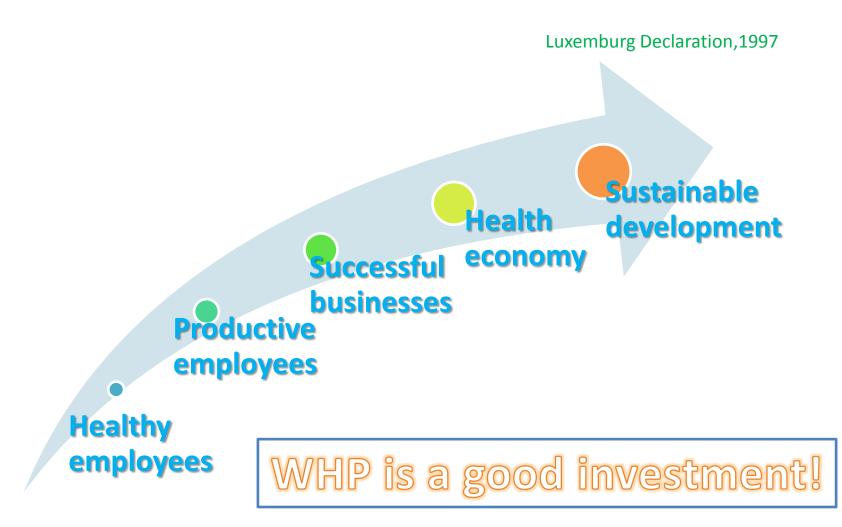
Meta-analysis of 22 studies

Source: Chapman LS. Meta-evaluation of worksite health promotion economic return studies: 2012 update. Am J Health Promot. 2012 Mar-Apr;26(4):TAHP1-TAHP12.

Source: Baicker, Katherine, David Cutler, and Zirui Song. 2010. Workplace wellness programs can generate savings. Health Affairs 29(2): 304-311.

## **Workplace Health Promotion**

"Combined efforts of employers, employees and society to improve the health and well-being of people at work"





**Experience sharing** 



•To develop a model of Workforce Health Promotion that will increase health awareness and literacy of the workforce

•To assess the feasibility, acceptability, effectiveness and efficiency of the model of WHP

## **Participants**



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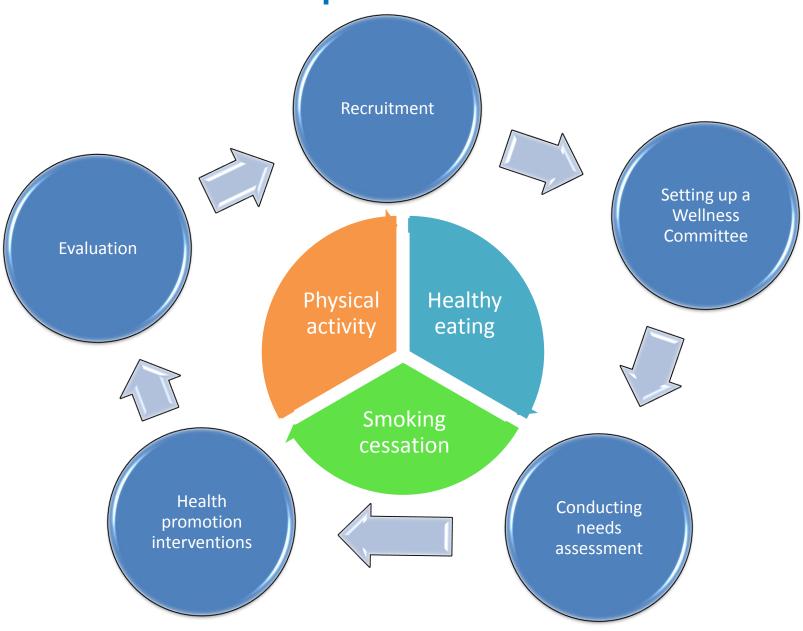
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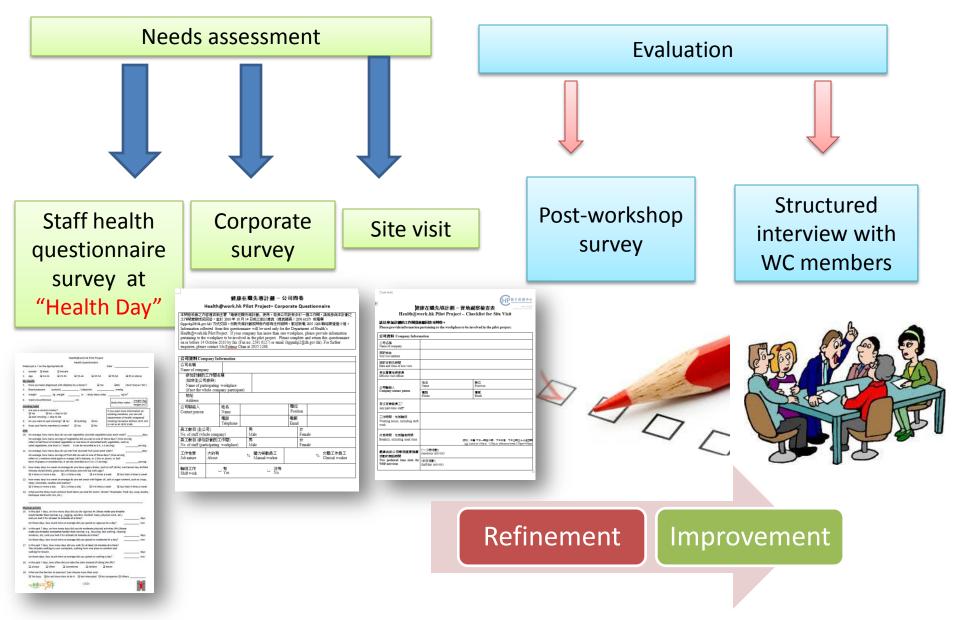
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## Components



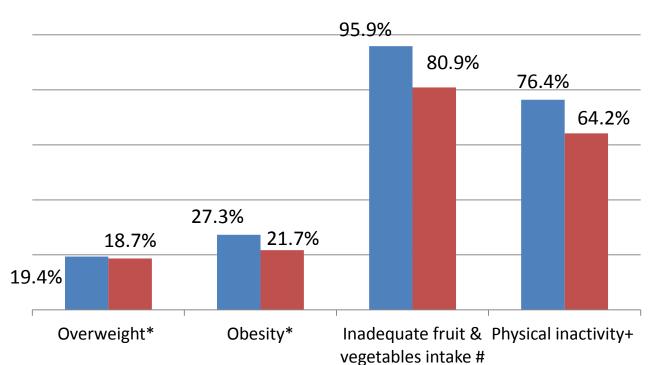
## **Data collection**



## Workforce health status

Workforce

General population



Workforce: N= 1100

General population: Behavioural Risk Factor Survey (BRFS) 2010

\*Weight status by WHO classification (Asian standard)

*#DH recommends adults to consume a daily intake of at least 2 servings of fruit and 3 servings of vegetables.* 

+ Not meeting WHO's recommended level

✓ Current smokers accounted for 11.8% of all

"Health Day" participants.

## Health promotion interventions

Joyful Fruit Day (16)

Read Nutrition Labels for Choice of Snacks (18)

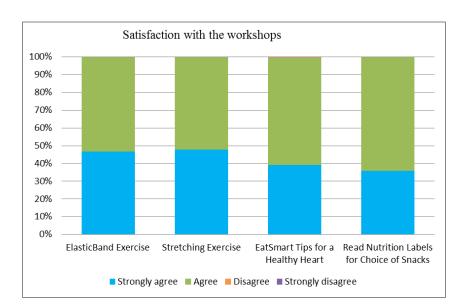
EatSmart Tips for a Healthy Heart (19)

Get Moving – on Your Feet (14)

Stretching Exercise (19)

Elastic Band Exercise (18)

## **Employee perspective**





- Participants' satisfaction was generally high (99.8%) across the spectrum of health promotion interventions
- ✓ Over 96% would recommend these workshops to other colleagues.
- The majority of respondents (over 98%) agreed or strongly agreed that the subject matter helped them in the practice of healthy lifestyle.

#### (a) Health promotion interventions and information

- Health promotion activities and health information
  - informative
  - useful

#### ✓ Instructors

- professional
- knowledgeable

#### ✓ Souvenirs

- > attractive
- easy to use

#### ✓ Workshop duration

➤ optimal

✓ Generated synergistic effect



#### (b) Environmental changes

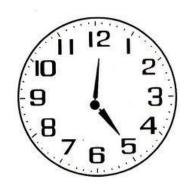
- ✓ Some organisational changes related to healthy lifestyles were observed and reported by WCs
- ✓ Examples:



#### (c) Resource implications

- ✓ Acceptable
- ✓ Affordable
  - **D** Time
  - Human resource requirement





#### (d) Challenges for organisations

- ✓ Some organisations identified challenges which included:
  - Difficulty in maintaining the momentum and staff interest in the health promotion activities
  - Lack of appropriate facilities for organising sports games and training after office hours

## Success factors (I)

Active leadership and organisational commitment

Corporate-centric approach

Case management approach

Needs assessment and evaluation



## Close collaboration with other stakeholders

## Taking company size and structure into account

Synergistic effect on overall population health improvement

## Conclusion

- ✓ The WHP Pilot is considered a workable model for the local business community.
- The <u>Health@work.hk</u> Project has commenced its second phase with the aim of developing a sustainable and costeffective model for application in the wider business community.





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## Second phase of the Health@work.hk Project



## 3 types of interventions

Organisation polices

Health@work hk project

Lifestyle and personal health skills Supportive environmental measures





## Healthy eating



Physical activity



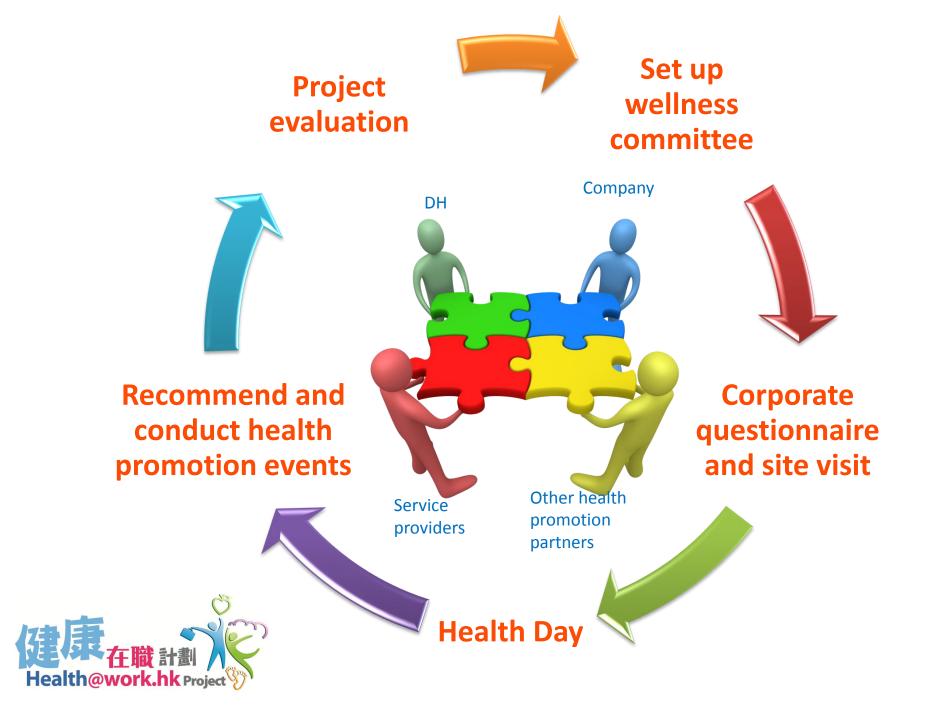
Smoking cessation



### Alcohol use



## Baby friendly workplace



## Roles of Community Dietitians

## **Ottawa Charter**

**Health Promotion Action Means** 

- Building Healthy Public Policy
- Create Supportive Environments
- Strengthen Community Action
- Develop Personal Skills
- Reorient Health Services
- Moving into the Future

## Strengthen community action

- Health promotion cannot be achieved by the Department of Health alone.
- It requires the collaboration of all secotrs (Govts, health sectors, social sectors, NGOs, industries, etc).

# What you can do to promoting health in workplace?

1. Developing personal skills

You can provide health information, education to the staff / orgaisation. Enhance their skills so they can have great control over their own health and over their environments.

# What you can do to promoting health in workplace?

- 2. Create supportive environments
- As a health consultant, you can assess the workplace and provide guidance on how to modify the diet environment.
- Make the workplace more conducive for healthy eating by providing more healthier options. So, the staff can make healthier choices.

## Health education resources



http://www.cheu.gov.hk/healthatwo rk

Email: health\_cheuweb@dh.gov.hk





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## End of Presentation Thank you