

WELLNESS as a regional key competence

1. Introduction

As a result of the local administration reform, the new local authorities in Denmark will as of January 2007 – in collaboration with the new regional authorities - carry the main responsibility for public initiatives within the area of preventive medicine and health enhancement.

The new legislation in the health sector aims at reinforcing the preventive and health enhancing effort by means of broad, goal-oriented, interdisciplinary partnerships between public players at local and regional level such as the municipal social and health sectors, schools and daycare centres, and private players such as general practitioners, insurance companies and societies.

In the 'Wellness working group' of Ribe county we take this challenge literally, and in the following we want to outline how we in the future region of South Denmark – through comprehensive and interdisciplinary collaboration – can exploit the possibilities inherent in focusing wholeheartedly on public health or 'wellness', which we find to be a more 'saleable' term.

We want to outline how, by making wellness a focus for development, the region can create wellness for the citizens as well as becoming a healthy region. In this way the region can first of all strengthen its image as a region which gives a high priority to the welfare of the individual and the family and is therefore attractive to live in; secondly, the region can reduce health expenses, and thirdly, it can reduce the number of socially marginalized citizens. By marketing itself as wellness-oriented, the region can furthermore create economic growth e.g. by making a wholehearted effort in the area of wellness tourism and by developing products and concepts within this area.

It is the conviction of the wellness working group that in the long term there are many future-oriented economic and social possibilities and resources to be found in public health and wellness. This is true in relation to the preventive effort as well as to a regional or municipal strategy for attracting new citizens. At the present time the challenge lies in making public health and wellness a prestigious political project by telling local and regional politicians, opinion-makers and other players with influence on local and regional development what public health and wellness is really about and what the benefits of focusing wholeheartedly on this area are.

In the following 3 sections of this document, we will briefly describe 3 main areas, which we feel local and regional authorities can and should concentrate and collaborate on, namely,

1. The region of South Denmark as a healthy region
2. Wellness tourism
3. Product and concept development.

This is followed by 2 sections in which we outline possible concrete projects in the 3 above areas and suggest how to develop and organize, in concrete terms, the collaboration among the many local and regional players in the area.

The present document is meant as a relevant contribution to the paper "Growth in Business and Industry" which focuses on existing possibilities and challenges for business and industry in the future Region of South Denmark. We want to point out how wellness as an industry can stimulate development in all areas and how many existing initiatives within clustering, networking etc. in the region as a whole can be viewed in connection with a wellness initiative.

2. The Region of South Denmark as a healthy region – local and regional health enhancement and prevention

The definition of health enhancement (salutogenesis) which we recommend, defines health as the power and resources of the individual person. Firstly, this definition takes resources, not



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illness/problems as its starting point. Secondly, by focusing on the individual, it creates more space for 'empowerment', i.e. actively involving citizens in the health enhancement project. Thirdly, this definition focuses on the stage before the onset of illness or other problems. The field of health enhancement is in this definition interdisciplinary and multidimensional with many players, which makes it possible to collaborate extensively in order to reach the best possible solutions.

Chart 1 – the field of collaboration.

Around circles:
the health sector
the cultural sector
the education sector
the planning sector
the social sector

In circles:
Regional psychiatry
Health education
Cultural environmental initiatives
Community centres/activity centres
The net-based cultural institution
Outreach
Schools
Citizens' involvement in environmental activities
Citizens' involvement in planning.

Prevention of illness (pathogenesis) and accidents can take place on many levels. Generally the following 3 levels are identified:

- primary prevention – keeping healthy people healthy and preventing disease and symptoms from ever occurring
- secondary prevention – identifying disease and symptoms as early as possible in order to reduce the period of illness and improve the prognosis
- tertiary prevention – preventing relapse and chronic conditions, including loss of capacities.

It will be seen that prevention focuses on illness, whereas health enhancement takes resources as its starting point. To illustrate the difference, consider the example of obesity and how to deal with it.

- Health enhancement: the focus will be on diet and exercise. Healthy school meals, nutritional education and more and more varied physical education lessons will be introduced – or half an hour of physical exercise for everyone will be included in each school day.
- Prevention: the focus will be on the disease (obesity) and, depending on the level of prevention, on the group or individual at risk. Groups and individuals are identified, which means that a process of exclusion (stigmatization) has been initiated, to be followed by a process of inclusion.

Methods of prevention and health enhancement overlap to a certain extent, but the two approaches are based on different kinds of thinking.

We have chosen to focus on two areas where the region can seek to become known as a healthy region, namely 1) collaboration between public and private players, and 2) learning as a means of health enhancement and prevention.

In area 1 we look at development and implementation of models for public-private collaboration about health enhancement and prevention of typical life-style related diseases, focusing on

- a) children and young people
- b) the family





- c) senior citizens
- d) the workplace

By health enhancement and prevention is meant the process which enables a person to control and improve his or her state of health. Health enhancing initiatives include:

- developing a health enhancement policy
- increasing the local effort to develop personal skills
- reorienting the health services

In area 2 we focus on how learning can be used in prevention and treatment, and how learning can help give groups of socially marginalized, chronically ill and/or uneducated people a more active life, thereby reducing the expenses of the social sector.

Learning, in various definitions of the concept, is utilized by the social and health sectors in both treatment and prevention of disease.

In the psychiatric field, psychoeducation is used in treatment and prevention in order to teach psychiatric patients how to live as normal a life as possible with their disease.

In the social sector, particularly where the labour market is concerned, a behaviourist approach has become prevalent: rewards and punishments are given in the form of reduced benefits in connection with absence or withdrawal of benefits for failing to keep appointments, just as a social benefits ceiling has been introduced as an incentive for claimants to seek employment. There is an ongoing debate about a bill requiring citizens from match group 4 to document regular periods of employment in order to claim supplementary benefits.

Available scientific evidence points to the fact that this approach does not have the desired effect of encouraging people to find employment; on the contrary, it seems to drive people away from the labour market. Conversely, it seems that a more development oriented, bottom up approach works much better. When people are involved in the process and participate in defining their own needs for development and learning, they become better at finding employment. Also, the evidence suggests that it is the long term effort that pays off.

3. Wellness tourism – An opportunity to market the region as a place where quality and wellness are top priorities.

In Denmark with its long and strong tradition of folk high schools, study circles etc., there is deep-rooted belief that learning is not something that should be reserved for children and young people. In Western Jutland tourism is a major source of income, the splendour of our countryside attracts many tourists. In fact the Region of South Denmark has a tourism turnover of 23%, second only to the Region of Copenhagen.

In this connection it is also worth mentioning that the region has the biggest amount of tourist facilities for disabled people in Northern Europe, since this could contribute to projecting a wellness oriented tourism image.

How can we combine these assets and create new tourism concepts which will raise our tourism sector above the 'pizza bar level', giving it an image of wellness and preparing it for the competition in the experience oriented society of the future?

Wellness tourism comprises all areas which either as a single experience or a combination of experiences can attract tourists to the region, and which in one way or another contribute to the physical or mental well-being of the individual. This means that the concept could cover for example the following kinds of holiday:

- a stay at a folk high school with an input of culture, learning and health enhancement.
- a stay at a holiday or health resort focusing on experiences and wellness
- concept holidays including nature experiences e.g. hiking, biking, canoeing, fishing etc.
- sports holidays based on the sports facilities of the region (golfing, swimming etc.)



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These are all relatively expensive holiday forms, requiring a fair amount of manpower, skilled as well as unskilled. At the same time this is a growth area which caters to a group of people with considerable spending power and which therefore constitutes an important potential source of income.

It should also be possible to combine wellness tourism with the experience oriented tourism which families with children usually prefer. It is well known that this type of holiday is usually quite short, the families staying only for a few days, but if the type of experiences that appeal especially to the parents were readily available, it might be possible to make families stay longer in the region.

There are at present only few initiatives of this sort. Some existing ventures could possibly be changed in accordance with the new concept, but it will take a fair amount of enterprising activities to turn the visions into reality.

Investing in wellness tourism also provides an obvious opportunity for developing the region's most sparsely populated areas which typically attract many tourists. This way, rather than degenerating into 'pizza bar dumps', these areas will develop tourism and related businesses on their own terms. It will also provide leisure activities for the people who live in the sparsely populated areas and thereby make these areas more attractive to live in.

4. Product and concept development – New opportunities for enterprising and export?

The Scandinavian welfare state enjoys world wide respect. However, in recent years we have had endless discussions about whether or not our health sector actually lives up to the image many foreigners have of it ..? One area where we can still consider ourselves ahead of many other countries and where we do have a lot to offer, is health enhancement, preventive medicine, quality of life, welfare in the workplace, health and safety at work, and lifelong learning, each of these things contributing to the public health in an interdisciplinary way.

It should be possible to share our experience with others and/or perhaps even export our wellness concepts. We feel that the Region of South Denmark possesses many competencies within the area, and there are many initiatives, networks and organisations which can contribute to/ participate in development projects.

The following organisations are directly involved in the area and could therefore participate in product and concept development projects:

1. The Department of Health Sciences
2. Worklife Partners (formerly BST (Health and Safety at Work Services) Varde)
3. Other BST centres which have now been privatised.
4. The National Health Enhancement at Work Centre (County of Southern Jutland)
5. Centres of Further Education (CVU, the health professions)
6. In-service Training Centres (AMU) (courses focusing on workers' health at work and at leisure)
7. Adult Education Centres (VUC) (lifelong learning, social inclusion)
8. The new local health centres.
9. The County of Vejle's involvement in EARLALL (European network for lifelong learning)
10. TCM – Traditional Complementary Medicine, research in plant medicine.
11. The Health Telematics centre, new technologies in the health industry
12. REKA – a private company which develops concepts of wellness and experience oriented tourism (Lalandia etc.)

It should also be mentioned that the region of South Denmark has an incredible amount of entrepreneurs in areas of health and culture. This could be utilized in collaboration with IDEA in a wholehearted effort to boost the wellness industry.



5. Project development and concrete initiatives.

5.1 Project possibilities within the Region of South Denmark – A healthy region.

Children and young people

A wholehearted health enhancement effort involves creating initiatives at as early a stage as possible, while realizing that *healthy children grow into health adults!*

Local and regional authorities should therefore ensure that all institutions that work with children and young people have a health policy focusing on smoking, alcohol, diet, television, computer games, play and exercise.

It is important to integrate health care into the everyday lives of children and young people.

A concrete project could be to develop health and safety services for all child care institutions and schools. A licensed work environment agent could for a small fee provide the institutions with advice on health policies and their implementation as well as on initiatives to enhance the well-being and health understanding of children and young people.

In the education area itself it would be an idea to include interdisciplinary health education in the curriculum of schools. The subject should be adapted to the age of the students, perhaps focusing on 'carrots rather than jellybeans' and 'play as a physical activity' in the earlier years and things like 'diet, exercise and unhealthy weekend habits' later on.

The family

When working with the family, it should be kept in mind that "healthy living should be easy living!", which would mean establishing a closer collaboration among schools, daycare institutions, after-school centres, sports clubs, doctors and health centres, in order to create a more holistic and harmonious space for the families to develop healthy habits for life in.

This requires that the various aspects of modern life – work, leisure, public welfare initiatives – all have a common, health enhancing focus.

A concrete project could be to establish 'family centres' where families could come to stay and where they would be offered experiences and healthy food as well as spending time together as a family.

The centres could offer partially user financed cultural and physical experiences for all age groups combined with e.g. courses in healthy cooking. In this way all family members can have experiences suitable for their age groups, it will be easy because it will all take place in the same place, and hopefully the families will learn that healthy food tastes good ...!!!

The initiative could be developed by a network consisting of the Adult Education Centres and the Centres of Further Education which have the premises for cultural, physical and cooking activities.

The Workplace

Health enhancement and prevention could also be put on the agenda by firms and businesses in collaboration with the vocational schools. An interdisciplinary health course could be developed by the In-service Training Centres (AMU) focusing on diet and exercise among people with a low level of education. The Centres have experience from working with these problems among drivers, but the concept can easily be transferred to other professional groups. Many people with a low level of education are exposed to similar factors which can contribute to causing life-style related diseases. These factors include 'fast' or unhealthy food, smoking, lack of exercise, irregular working hours, exposure to dangerous chemicals, wrong working positions, high pressure of work etc.

The learning should contribute to a change of habits by making the learner realize that if he or she continues the 'wrong' way, it will lead to great and preventable suffering. From society's point of view this is a waste of resources which could have been spent in different ways. It is never too late to change habits in order to cure or prevent disease.

The teaching methods should focus especially on the possible lack of motivation on the part of the students. Motivating the students is the great pedagogical challenge of the project.

The course could include subjects such as the following:

- Diet, nutrition and exercise should be included in all courses lasting 4 weeks or more
- The health element could be offered as a separate course using the methods of 'blended learning'
- The content will have a broader scope than the element so far included in the drivers' courses



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- The weight, fitness and body fat percentage of each student will be measured at the start and end of the course.
- The teaching will include anatomy, physiology, psychology, training techniques, measuring fitness and BMI, diet, the daily intake of calories etc. as well as 2 weekly training sessions.
- The student will participate in 2 weekly, planned training sessions at e.g. at fitness centre. This is to improve the fitness and muscle mass of the student and to teach him correct working habits.
- The student will be encouraged to think creatively about how to integrate exercise into his everyday life e.g. during breaks

In recent years existing courses have included an element of theoretical teaching in the area of health and working environment. This will now be supplemented by a practical element and an attempt to effect a change of attitude in the students.

There is a lot of focus on making the workforce stay longer on the labour market, and this necessitates a greater effort in the health area. There are great economic gains to be had from effecting a change of mentality among people with a low level of education.

Learning as a factor in health enhancement and prevention.

As described earlier, by health enhancement and prevention we mean the process which enables a person to control and improve his or her own state of health.

Not being able to cope with the personal challenges arising from an ever more complex and globalized everyday life can produce both stress and anxiety, while, on the other hand, being able to cope with them improves one's health as well as one's quality of life; therefore, it is necessary to focus on the area of general learning.

An idea for a concrete project would be to create a space for helping ordinary people who are simply finding it difficult to manoeuvre in the information society with its many demands for new skills (involving e.g. dialling services, computers, filling in forms to obtain certain rights or options etc.). Again, it is possible to distinguish between prevention and health enhancement in terms of a distinction between general academic qualifications (e.g. in Danish, mathematics, computer studies and English) on one hand and learning skills on the other.

Learning can in this way become both preventive (in reducing stress and anxiety) and health enhancing (in improving the quality of life). This applies to general learning in e.g. Danish, mathematics and computer studies, which improves the ability to meet the challenges of the information society, as well as to general learning skills, which improve the ability to care for the well-being of oneself and one's family.

One new initiative, which could work in this way, could be 'parent learning' whose purpose is

1. to offer Danish and mathematics to parents of children in primary and lower secondary school
2. to enable parents to help children with their school work and thereby enhance the effect of teaching in primary and lower secondary school
3. to raise the general level of education in the region
4. to help provide a well-educated workforce for the regional business community

The inspiration for the project came from a TV programme (on DR 1) about Djursland municipality, where the Adult Education Centre (VUC) collaborated with the local authority in offering courses in elementary mathematics for parents.

The aim was to enable parents to help children with their homework and thereby increase the children's profit from the teaching. A further aim was to integrate the schoolwork into the framework of the family's social life.

At the same time the parents' improved skills in reading and mathematics will make them better equipped to hold on to jobs. Furthermore, the general regional level of competencies will rise with better chances of retaining and creating jobs as a result.





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The courses could be offered in collaboration with the primary and lower secondary schools, which would circulate information to the parents in August, September and October. The courses would be offered once a year, starting after the autumn break.

In the long term, the aim is to incorporate and develop the concept of 'family learning'. One aspect of family learning is the question of how you learn, meaning the learning style of the individual family member as well as the learning of the family as a whole. How, for instance, do we create a good learning environment in the family (e.g. by abolishing television)? Or how do we accommodate the different learning profiles (cf. Gardner's philosophy) within our family?

Another idea for a concrete project could be to offer 'emergency' assistance whenever the information society knocks at the door, when forms are tricky or when the English text is unintelligible or the electricity bill makes no sense etc. The Adult Education Centre could be open one night a week for those who need this kind of assistance.

Also, courses could be offered in communicating, filling in forms and seeking information on the Internet. Lacking qualifications in this area are at the moment leading to social marginalization.

The employability assessment method was developed in the labour market context. In its origin it is based on a development oriented idea, but at the present time local authorities are using it with a primarily top down oriented approach, whereby the method, because of behaviourist thinking, translates into a simple checklist. A third idea for a concrete project could be to develop this method further and use it in the work with socially marginalized groups, taking a more bottom up oriented approach.

The aims of the employability assessment method are:

1. to support the individual citizen in a clarification process and to develop the citizen's skills and make them usable in an employment context.
2. to ensure that decisions about financial support are made on the basis of qualified and systematic documentation throughout the processing of the individual case

It is thus a method which, when used in a development oriented way, should enable people with social or health problems either to cope with a job again and become self-supporting or to document their need for social benefits.

5.2 Project possibilities in wellness tourism

The Region of South Denmark is an obvious area in which to develop wellness tourism, offering beautiful and varied countryside, spas, varied nature and sports activities, many artistic activities, a network of folk high schools, and a well developed tourism network, which can be utilised in the interdisciplinary development and marketing of new tourism concepts.

There is a lot of analytical work to be done and projects must be launched in order to initiate innovation and enterprising in the areas of wellness generally and wellness tourism in particular

