

Palliative Care  
V I C T O R I A  
Specialist health care and practical support



## Strategies to merge public health and palliative care practice

Sue Salau, Policy Officer, Palliative Care Victoria  
Bruce Rumbold, Director, Palliative Care Unit, School of Public Health, La Trobe University, Melbourne  
Fiona Gardner, School of Social Work, La Trobe University, Bendigo

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## Public Health is not necessarily the same as public health

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## Public health: the importance of settings

- Old public health: focus on physical environment. Hygiene reduces incidence of illness
- New public health: focus on social environment. Unhealthy environments 'get under the skin'

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Focus on prevention & harm  
minimisation:  
Downstream and Upstream

- Individual focus
  - Specific problem-solving
  - Expert interventions
  - Biological science perspectives dominant
- Community focus
  - Network analysis
  - Culture change
  - Social science perspectives dominant

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Public health perspectives

- Health is more than the absence of disease and disability
- Health is created in communities that attend to the richness and diversity of human experience
- A fundamental requirement for health is a healthy environment: health is socially determined
- Strategies for health involve much more than providing 'health services'

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OTTAWA CHARTER 1986

- In promoting health we should:
- Enable, mediate, advocate for health
  - Create supportive environments
  - Strengthen community action
  - Develop personal skills
  - Reorient health services

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## Health Promotion

- Preventive strategies
- Harm-minimisation strategies
- Early interventions
- Community development
- Participatory/partnership relationships
- Ecological approach to health & safety

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## Some facts to remember

- For most people, the longer part of dying occurs outside health care institutions
- Most care is informal (non-professional) and self-care
- Actual lived experience of dying is in people's heads and relationships as well as their bodies
- Public health is interested in developing the wider community context within which palliative care services make their contribution.

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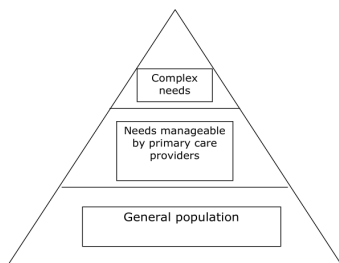
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Health services approach

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## Health Promoting Palliative Care

- Provide education and information for health, death and dying
- Provide social supports, both personal and communal
- Encourage interpersonal reorientation
- Encourage reorientation of palliative care services
- Combat death-denying health policies and attitudes

• Kellehear, A. (1999) *Health Promoting Palliative Care*, Melbourne, Oxford University Press

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- Public health is not just another term for psychosocial care

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## Health Promoting Palliative Care

- Health education
- Death education
- Social supports
- Interpersonal reorientation
- Environmental and policy development

• Kellehear, A. (1999) *Health Promoting Palliative Care*, Melbourne, Oxford University Press

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### Health Promoting Palliative Care aims to:

- Complement clinical approaches
- Encourage community alliances
- Restore social and spiritual activity
- Allow for diversity amongst clients
- Expand understandings of health & challenge current health policy
- Reclaim an holistic perspective

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### International projects

- **SPAIN**
  - Catalonia WHO Demonstration Project - health services model
- **INDIA**
  - Kerala WHO Demonstration Project: Neighborhood Network in Palliative Care – community development model

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- **UNITED KINGDOM**
  - St Joseph's London, primary school project
  - Marie Curie & Help the Hospices
  - NHS End of Life Care Strategy
  - Scottish Partnership for Palliative Care (endorsement by National Assembly)

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- AUSTRALIA
  - Victoria: 2002-5 Caring Communities, 2007-9 Strengthening Palliative Care through Health Promotion (DHS-supported project)
  - New South Wales: Newcastle café conversations and schools program
  - Queensland: hp worker and implementation study
  - National: policy and community capacity building

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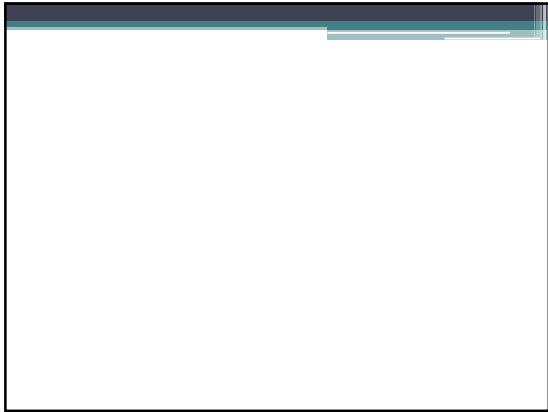
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Public health initiatives in palliative care

- Community development
- Community education
- Prevention strategies aimed at reducing social morbidity
- Social policy, practices & advice

Palliative Care Australia (2003) *Palliative Care - service provision in Australia: a planning guide (second edition)*, Canberra, Palliative Care Australia, p. 13

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## Some Strategies for Health Promotion

### Loss and death education for all

-SCHOOLS AND CLUBS -WORKPLACES - COMMUNITY GROUPS

### Community development – get help to create a 'settings' approach

-TALK TO COUNCIL –ASK ROTARY OR LIONS -TALK TO COMMUNITY HEALTH – TALK TO THE UNIONS AND BUSINESS ASSOCIATIONS

### Partnerships – work across and with, not down or at

-SCHOOLS, LOCAL NEWSPAPERS, TV & RADIO, SPORTS ASSOCIATIONS AND CLUBS, CENTRELINK, CHURCHES

### Allies – people are actually employed to do public health

-HEALTH PROMOTION – COMMUNITY HEALTH – AIDS COUNCIL – WOMEN'S HEALTH – EDUCATION DEPARTMENT - PUBLIC HEALTH ASSOCIATION

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## The basics: The Big 7 checklist

- Prevention
- Harm-minimisation
- Early interventions
- Changing settings or environment
- Participatory/partnership
- Sustainable
- Evaluated

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## HPPC Programs

- Strengthening Palliative Care Through Health Promotion
  - Funded by DHS Victoria
  - Health Promotion Workers appointed, funded, trained and supervised to work with regional palliative care consortia

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