

Annual Congress &amp; Medicare Expo on

# Primary Healthcare

April 25-27, 2016 Dubai, UAE

## Ethical tensions associated with the promotion of public health policy in health visiting: A qualitative investigation of health visitors' views

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**Aim:** To explore whether and how health visitors experience ethical tensions between the public health agenda and the need to be responsive to individual clients.

**Background:** Current health policy in England gives health visitors a key role in implementing the government's public health agenda. Health visitors are also required by their Professional Code to respond to the health-related concerns and preferences of their individual clients. This may generate tensions.

**Methods:** 17 semi-structured individual interviews covering participants' experiences of implementing public health interventions and perceptions of the ethical tensions involved. Interviews were audio-recorded, transcribed and analysed thematically using a Framework approach.

**Findings:** Health visitors raised a number of ethical concerns which they attributed to organisational resource allocation and the introduction of protocols and targets relating to public health goals. They did not always regard it as appropriate to raise topics that employing organisations had identified as public health priorities with particular clients for whom they were not priorities, or who had other more pressing needs. They noted that resources that were allocated towards reaching public health targets were unavailable for clients who needed support in other areas. Organisational protocols designed to monitor performance put pressure on health visitors to prioritise achieving targets and undermined their ability to exercise professional judgement when supporting individual clients. This had implications for health visitors' sense of professionalism. Health visitors saw trusting relationships as key to effective health visiting practice, but the requirement to implement public health priorities, combined with a lack of resources in health visiting, eroded their ability to form these. Policies need to be evaluated with regards to their impact upon a broader range of processes and outcomes than public health goals. The erosion of health visitors' professional values and ability to develop relationships with clients could have numerous adverse implications.

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## Mental health and physical multi-morbidity

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Mental and physical multi-morbidity, i.e., the co-existence of at least one mental and one physical chronic condition, constitutes a major challenge in modern healthcare. This talk will address this particular topic and will present new research based on comprehensive data from Danish nationwide registries. Our results demonstrate that persons with poor mental health have higher risk and poorer prognosis of physical conditions such as cancer, cardiovascular disease, dementia, diabetes and infections. These new findings emphasize that there is an urgent need to focus on the individual person and to rethink healthcare policies. As the healthcare system has become increasingly specialized and fragmented, we need to develop effective and interdisciplinary approaches to comply with the complex care needs of this patient group.

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