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Partner News

New Center Opens in Albania to Address Needs of Women and Children

"The establishment of the Lezha Town Health Center (THC) is one more achievement of the AIHA partnership in Albania," said Albanian Minister of Health Leonard Solis, praising the work of the Lezha/Pittsburgh partners during the Center's opening ceremony on February 3, 2004. The THC is the second healthcare facility in the country to be opened under the auspices of the AIHA partnership program in the past three years. Solis says the THC "demonstrates the continuing success of the American and CEE partners to provide quality health services in Albania."

Officials from USAID and the Albanian Ministry of Health and representatives
from the Lezha municipal government public health and primary care
departments, the health insurance department of the Order of Physicians, and
international organizations, such as Swiss Caritas, Sant Egidio, and the
University Research Co., attended the THC opening to celebrate the success of
the Lezha/Pittsburgh partnership program.

"The Town Health Center was
established to improve the capacity of
the Lezha healthcare system to assure
quality primary care services for the
local population, which has grown
dramatically since 1999 and thereby
placed the district's existing medical
infrastructure under great strain,"
says John Capati, AIHA regional
coordinator for Central and Eastern
Europe. To create the most effective
model to meet the healthcare needs of
the local population, Lezha/Pittsburgh
partners conducted a survey at four
ambulatories in the city. Assessment
revealed the most vulnerable areas in
the city's patient care services. "The results of this research were used to
develop the THC's patient-centered care model and will be used as baseline data
to measure patient satisfaction in the future," explained Capati.

The THC is staffed by general practitioners, midwives, nurses, a social worker,
and a lab technician who received comprehensive training from their Pittsburgh
counterparts on a variety of topics ranging from general women's health issues
and obstetrics care for women with disabilities to genetic testing and various
aspects of children's health, including respiratory disease, allergies,
environmental influences, and adolescent health. Within the partnership, the
Albanian practitioners also learned to develop patient education programs
oriented toward women and adolescents that cover topics such as breast self-
exams and prevention of domestic violence and teen pregnancy, among many
others.

In addition to working with their Pittsburgh partners, the Lezha professionals also
received information about programs developed by Tirana/Providence,
Tirana/Bucharest, and Gjilan (Gjilane)/Hanover partners. For example, partners
from Tirana shared their knowledge in the areas of the breast health, newborn
care, and health management, while US colleagues from Hanover trained them in
quality improvement techniques.

The Albanian Ministry of Health allocated approximately $130,000 for renovation
of the Center, which will help to assure the comfort of THC patients and improve
the working conditions of the Albanian healthcare providers. Partners from
Pittsburgh provided the Center with up-to-date laboratory and medical
equipment, as well as educational materials, thereby giving patients access to
diagnostic, treatment, and counseling services within an integrated framework.

According to Irma Goertzen, US partner and president of Magee Women's
Hospital in Pittsburgh, Pennsylvania, the new center was realized due to the
collaborative efforts of Albanian and US healthcare providers and policy makers
who worked diligently to improve medical delivery in Albania. "To win, a team
needs to be competitive, well-trained, and eager for new victories," said Goertzen during the opening. Emphasizing the presence of all these components in the partnership's collaboration, she concluded that "I am proud to be a part of a winning team."

**Involving Businesses to Strengthen Health of Communities: Pecs/Harrisburg Partners Sponsor Two Workshops**

AIHA Pecs/Harrisburg partners spent the first few days of February in Budapest discussing with local community leaders from throughout Hungary ways that communities can become more involved in improving the health—particularly of women—of a community. The first meeting, the Business Leaders Summit, took place February 2. It was followed by a seminar for the Hungarian Association of Healthy Cities (HAHC) coordinators, February 3-4. Both events were sponsored by AIHA Pecs/Harrisburg partners.

**Business Leaders Summit Provides Tools for Business and Community Collaboration to Improve Health**

"A community that has a vision and a plan for improving the health of its population is a good place to locate a business. And a business that has a vision and a plan to improve the health of its community is a successful business." This thought was the cornerstone of the Business Leaders Summit.

More than 20 business leaders from the United States and Hungary met to engage in a critical dialogue about strategies for engaging businesses in activities that improve the health of their communities, particularly in the area of women's health. The meeting was also attended by officials from the Hungarian Ministries of Health, Economics, and Culture; the Hungarian Association of Healthy Cities; and the National Health Promotion Center. Four business experts from Pennsylvania shared their best practices, insights, and models for integrating community health into the corporate values of a company—including explaining how this leads to a return on investment. During the workshop these experts also emphasized the main principles behind successful business and community interaction.

"Engaging businesses to improve health is a good business decision and return of investment," says John Claypool, executive director of the American Institute of Architects Philadelphia chapter. "Social investing starts with the premise that the investor is looking for a return. This is the same as an employer's investment in its employees," he explained, emphasizing that high-risk employees, or those who engage in health risk behaviors, cost a business more than low-risk individuals because they are less productive, are absent more often, submit larger healthcare claims, and spend more time in the hospital. "Contributing to the physical and mental well-being of employees adds to their level of
productivity and, therefore, the bottom line of the company," he said.

According to Claypool, businesses also benefit from the marketing exposure and positive public relations that are a direct result of community involvement. Claypool explained that as a business becomes more involved in community activities, name recognition increases and residents begin to associate the name of the business with individuals from the business whom they meet at community functions. "By investing time, expertise, leadership, products, or services [in a community], businesses can expect that the community will provide a return on the investment," he assured attendees.

Claypool's thoughts are shared by Pete Butler, engineering manager at Proctor & Gamble. "Society believes that companies are in business to make a profit, but if they show concern for causes that consumers relate to, then people in the community [will] continue to support the company through product consumption," he explained.

Stressing the importance of integrating community issues and interests with the company's mission, Butler presented different concepts used by Proctor & Gamble to contribute to the health of its community. "Direct financial assistance is the smaller part of what we do to help the local population" said Butler. "The volunteer efforts and the special skills of our employees are far more important. That is why we encourage the community volunteer work of our employees through small grants programs that assist with their efforts to purchase medical equipment and supplies for local hospitals. [As volunteers, our employees] also provide expertise in negotiating better insurance rates for medical staff, participate in hospital board meetings, and lead fundraising efforts."

Engaging businesses to improve health by drawing on personal commitment and involvement was also raised by David Davis, president of Kilmorrey Inc. and chairman of the Board of the Institute for Healthy Communities. According to Davis, community initiatives and businesses need to see how they benefit from joint collaboration. A very important aspect of this is personal commitment to and involvement in community health.

"A general concern for the welfare of society is a common motivator among business leaders for contributing to community health [programs] because they live in this society and raise their families there. On the other hand, community leaders must understand that business is not separate from the community, but a part of it," said Davis. According to him, personal concern motivates community change through the individual commitment of society members and their interaction at the personal level.

Tim Twardzik, executive vice president of Ateeco Inc., stressed the importance small and family-owned businesses play in improving the economic health of a community. He outlined a cause-related marketing paradigm that helps business identify and address the main concerns of their community. "It is critical to incorporate a community's economic development into your business plan," said Twardzik, underscoring that "it is also important to give back, especially as a big fish in a small town. [Your giving] will be returned to you ten-fold and encourage other companies to participate as well."

The presentations of the American experts were followed by a discussion during which Hungarian business leaders focused on strategies to enhance their corporate efforts to improve the health of their communities.
HAHC Coordinators Learn How to Work Together To Accomplish Common Goal

Learning how to network and collaborate more effectively beyond traditional boundaries, across diverse organizations, and by engaging local businesses to support community health programs was the focus of the seminar for Hungarian Association of Healthy Cities (HAHC) coordinators. Held to help build the capacity and optimize the organizational effectiveness of HAHC coordinators as they work to improve community health, the workshop took into account the economic challenges and diminishing resources Hungarian communities are currently facing. US business leaders and US and Hungarian representatives of the HAHC network spoke about how to better align resources, validate health priorities, reduce competition and duplication, and increase an individual's access to critical health care.

The HAHC coordinators were also trained on how to coach and guide the group process, provide effective lobbying and advocacy at the local and regional levels, strengthen interaction and trust among diverse stakeholders, and manage conflicting interests and behaviors. In addition, the training introduced several consensus building tools and techniques for prioritizing and selecting feasible projects and programs that have the greatest chance of impacting women's health.

Regional News

World TB Day

The World Health Organization (WHO) is marking March 24 as a key date for mobilizing politicians, health providers, and civil communities in the global efforts to stop tuberculosis. "Every breath counts — Stop TB now!" is the theme of World TB Day 2004.

According to WHO's Stop TB Website, the day will coincide with the opening of the second Stop TB Partners Forum, which will take place in India, the country with the world’s highest TB burden. It is anticipated that the Forum will provide the opportunity for launching world-wide Stop TB campaigns to encourage greater public participation in the global movement against TB.

This year, WHO is encouraging healthcare providers and governments to disseminate information that introduces facts about TB to the general public. For example, a Stop TB campaign can ask: How many people know that

- one third of the world is infected with TB
- each year, 8 million people develop TB and 2 million patients die from it
• more women die of TB than maternal mortality
• TB is curable
• there exists a global movement and partnership to stop TB.

Using these facts, the organizers of Stop TB hope to infuse a sense of urgency in the TB movement and catalyze the participation of civil society towards raising greater societal commitment.

Romania Demonstrates Containment of AIDS; Experts Predict Whether Success Can Endure

Romania declared victory in its fight against AIDS, reported The New York Times (Times) on February 11, 2004. According to the newspaper, the country has clearly demonstrated how the joint efforts of governments, pharmaceutical companies, and international organizations can bring HIV/AIDS under control by providing infected individuals with necessary ARV treatment.

"We have a victory [because] everyone who needs triple therapy is getting triple therapy," says Adrian Streinu-Cercel, president of the Romanian National AIDS Committee. Peter Pilot, executive director of UNAIDS considers Romania an important showcase because it has demonstrated that it is possible to bring HIV/AIDS under control.

Romania's AIDS burden is not typical, says the Times. Among the 10,000 individuals living with HIV/AIDS, 7,000 are children between the ages of 12 and 17 who were infected with contaminated blood as infants, between 1987 and 1991. During this time period, Romanian doctors used "micro-transfusions" as a treatment for pediatric anemia and applied immunoglobulins made from blood products for relatively minor illnesses. In most of these children, the infection was discovered when they got older.

According to the report, an effort to fight HIV/AIDS at the national level was made by the Romanian government in 1997, when it created its AIDS plan. At the time, only 30 Romanians were receiving ARV treatment. In 2000, the number of children taking ARV drugs increased to several hundred, but due to the insufficient budget resources needed to purchase expensive drugs the number of deaths in the country began to rise.

As cited by the Times, the ensuing outcry was a catalyst for change. The government established a committee of public health officials, lawmakers, drug companies, parents, and patient advocates headed by Streinu-Cercel. In addition to the increased infusion of money that the government began to allocate for treatment, Romanian won a $49 million grant from the Global Fund to Fight AIDS, Tuberculosis, and Malaria. As a part of the Romanian government's strategy to fight the disease, approximately 5,300 patients who have full-blown AIDS receive not only ARV treatment, but a daily food allowance, a monthly stipend for a caregiver, and 12 train tickets to travel to the capital for tests and counseling. The government also began to purchase anti-AIDS drugs in bulk and stopped taxing them.

In spite of all the success Romania presently shows in containing the infection, the country's public health experts are afraid of a second wave of HIV/AIDS. Their fears are founded on the fact that children infected in the late 1980s are getting to the age where they engage in sexual relations, give birth, and breast-feed. In addition to needle sharing among drug users, experts consider these
three activities to be the major HIV/AIDS transmission routes, concludes the report.

**Anti-smoking Code Calls for Effective Actions on Behalf of Healthcare Providers**

During a recent meeting held at the World Health Organization's (WHO) Geneva headquarters, representatives from healthcare associations agreed to promote a new code of conduct and lead by example in the fight against tobacco use. According to WHO statistics, tobacco kills five million people every year. Among the deaths are those of medical professionals whose smoking prevalence in many countries is at least as high as it is among the general population, reports UN Wire.

Professionals attending the meeting "vowed to improve tobacco surveillance and cessation programs, ensure access to tobacco-free healthcare facilities, and implement education and community advocacy programs." Participants also agreed that medical workers—including physicians, dentists, and nurses—should introduce tobacco control into the public health agenda at the country level and support the ratification and implementation of the WHO **Framework Convention on Tobacco Control** adopted last year.

"If dentists warned all their patients that smoking causes excess plaque [and] yellowing teeth, and contributes to tooth decay, as well as a five-fold increased risk of oral cancer, the impact on smoking would be dramatic," said Vera Luiza da Costa e Silva, director of the WHO's Tobacco Free Initiative, emphasizing the critical role healthcare professionals can play in fighting tobacco use.

**Russia Leads Highest Males Smoking-Related Mortality Rate in Europe**

More than 30 percent of male and 4 percent of female deaths in Russia are smoking-related, reports Rosbalt. According to the Lead Scientific Associate of the Russian State Research Center for Preventive Medicine Galina Maslennikova, the mortality statistics caused by tobacco use among Russian men is the highest in Europe. She also emphasized that 80 percent of Russian males and 50 percent of females who have tobacco dependency started to smoke before the age of 18.

As cited by Rosbalt, the figures announced at the recent press conference by Maslennikova demonstrate that more than 40 percent of teenage boys and 7 percent of teenage girls are smokers. These figures are even higher at profession-oriented schools, where 75 percent of boys and 64 percent of the girls smoke. According to Maslennikova, the continuous advertisement of tobacco goods, sale of cigarettes to underage customers, and widespread habit of smoking among adults in Russia are factors that contribute to the promotion of the hazardous habit among the younger generation.

**Workshops, Conferences, Opportunities and Grants**

**Eurasia Foundation Offers Grants for Public Administrators and Policymakers**

The Eurasia Foundation promotes the advancement of democratic institutions and private enterprise in twelve host countries: Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, the Kyrgyz Republic, Moldova, Russia, Tajikistan,
Turkmenistan, Ukraine, and Uzbekistan. The Foundation seeks to improve the effectiveness of civil servants in these countries by giving grants that support professional training through university-level economic and public administration programs that meet international standards and local needs. It also promotes civil service reforms and projects that restructure government functions to increase opportunities for newly-trained professionals to apply their skills. At the same time, the Foundation provides grants for programs that enhance capacity to carry out independent public policy analysis, in particular by encouraging cooperation between policymakers and independent analysts in developing concrete solutions to societal problems. For more information about the program and application process, see: www.eurasia.org/grant.html#Grantmaking.

Call for Images of Hope
The Group of Multinational Association of Supportive Care in Cancer, the International Society of Geriatric Oncology, the European Oncology Nursing Association, and Cancerworld have announced nominations for the first Images of Hope Photography Award. The organizers are looking for art and stories from individuals who have fought cancer and have come through their experience with a new vision and purpose. The sponsors believe that the photo contest can inspire and drive the development of new treatment options, which give new hope to those who need it. For more information, visit: www.cancerworld.org/IOHsite/index.html.

International Research Conference on Food, Nutrition, and Cancer
The American Institute for Cancer Research and the World Cancer Research Fund International will hold the world's leading forum on diet, nutrition, and treatment of cancer on July 15-16 in Washington, DC. The main topics of the conference will focus on the cancer prevention and treatment methods related to the nutrition for individuals who suffer from cancer. For more information, please go to: www.aicr.org/conference/

New Challenges in Health Promotion and Prevention: Conference on Urbanization and Health
Urbanization, health, and social services are the main topics of the annual conference of the European Public Health Association (EUPHA), to be held October 7-9 in Oslo, Norway. The conference brings together researchers, practitioners, and policymakers to discuss health problems related to urbanization and to exchange of information on experiences and research results, as well as to formulate common solutions and strategies to address urbanization and health. For more information, see: www.eupha.org/html/menu3_2.html.

Features

Tomsk/Bemidji Partners Showcase Excellence in Motivating Population to Lead Healthy Lifestyles and Gain More Followers Among Healthcare Providers
Sociological studies conducted in the United States indicate that if you can bring together 10-20 percent of the followers of any innovative idea, the idea becomes unstoppable. This truth has been proven many times over by the physicians and nurses who share their experiences and knowledge with colleagues through the AIHA program. Each partnership has left behind a legacy of progressive ideas, effective programs, and tangible results that have now become accepted approaches and are developing on a large scale in the countries of Eurasia.
two northern regions of their respective countries—Tomsk in Russia and Bemidji, Minnesota in the United States. "We have the same climate and the people are similar," say American partners Neen Lillquist, retired nursing executive, and Mary Thompson, US partnership coordinator and director of clinical safety, infection control, and risk management at North Country Regional Hospital, laughing, "Maybe that's why it has been so easy for us to work together."

In February, the Americans visited Tomsk to wrap up their four year partnership with the Tomsk Central Regional Hospital and to share the successes of the program with approximately 100 physicians, nurses, and policymakers from many medical, educational, and government institutions in Tomsk city and Oblast at the final conference of the partnership, held February 16-17.

"The program activity of the Tomsk/Bemidji partnership was highly successful and we are very proud of our achievements," says Thompson. "[Since the inception of the partnership,] we have succeeded in developing a series of tools and approaches that have led to the re-evaluation of existing processes and have set the groundwork for changing [the Russian healthcare system], especially in terms of community outreach and motivating the population to become interested in their own health. This is the strength of the partnership, and this is what will make it sustainable in the future," she emphasizes.

According to Thompson, specific examples of the partnership's achievements include establishing patient education focus groups, holding health fairs, and developing and publishing patient education materials. These and other lessons learned and successes achieved were presented at the Best Practices Conference in February. The goal of the conference was to discuss how partnership programs were implemented and provide an opportunity for more detailed discussion where different ways to develop successful programs could be demonstrated first hand.

Conference presentations made it clear that nursing leadership and the expansion of the range of tasks performed by mid-level medical personnel played a key role in implementing successful healthcare system reform in the Tomsk Oblast. As a result of what the Russian partners gleaned from the experiences of their American colleagues, nurses gained self-confidence and began to show initiative, which had very positive effects on their interactions with patients. They introduced efforts to educate the public on the prevention of various diseases and to promote healthy lifestyles. According to Galina Mishenina, head nurse at the Tomsk Central Regional Hospital, much work was required on the part of nurses and other staff to bring about these changes.

"From studying the experiences of our American colleagues, our healthcare authorities and the nurses themselves, we became convinced that nurses could assume a leadership role and could manage various services and departments on their own," Mishenina explained. "A nurse can be not only an assistant, but an
equal partner to a physician." Mishenina said, pointing out that US colleagues helped Tomsk partners organize nursing services in the most efficient way and address issues related to strategic planning, management styles, and leadership. She noted that these reforms are particularly important as Russia moves to a model where medical services will be covered partially from government funding and partially by insurance companies.

According to Mishenina, the partnership also served as an impetus for the creation of the Tomsk Oblast Nursing Association and inspired nurses to continue their education. Many of the nurses who participated actively in the partnership are currently students in the department of advanced nursing education at Tomsk State Medical University. "When people ask me how our nurses are different from others, I answer that we recognize the value of our profession and we know how to make it better," said Mishenina. "We now understand that nursing is a dynamic scientific profession, one which is mainly focused on the patient, his or her environment, and his or her health—aspects of life on which the social well-being of our society depends," she emphasized.

**Community Health Education Centers: Key to Health of Future Generations**

Albert Adamyan, head of the Tomsk Oblast Health Administration, believes that another benefit of the partnership is the fact that it helped Russian medical professionals direct their efforts toward protecting public health rather than treating disease. "Participating in the partnership program made my colleagues and me understand that unless people want to be healthy and take steps to maintain their health, it is very difficult for medical professionals to help them." He pointed out that healthcare providers should have the skills needed to motivate patients to take responsibility for their own health.

Adamyan also said that it is very important to create an environment in which the public knows where to get the information they need. To address this issue, he explained how the Tomsk partners established Community Health Education Centers (CHECs), citing the Svetly CHEC, which opened under the auspices of the partnership in March 2002, as an example of their indisputable effectiveness.

Igor Andreyev, director of the Svetly CHEC, discussed the history of the project and the structure of the center during the conference. During his talk he suggested approaches that participants might borrow and apply to their own institutions. "Specialists who have been working in medicine for a long time still have a stereotypical view of prevention—one that was largely seen as a formality," he said. "Recognizing this, we tried to move away from events in large halls and auditoriums, and to avoid making loud speeches from podiums. Instead, we looked for other ways to encourage people to develop a healthy lifestyle." According to Andreyev, CHEC works with the public primarily through focus groups that bring approximately 7-8 patients together based on their interests. Questionnaires were used to determine the range of issues the community is concerned about, then specialists from the center developed and offered focus group sessions on various topics to local
residents, including tooth decay prevention for children, poor posture correction, family planning, coping with stress, breastfeeding, coronary artery disease, and thyroid disorders.

In his presentation, Andreyev emphasized the importance of involving mid-level medical personnel in working with the public. "Borrowing from the experience of our American colleagues, we have begun involving nurses in our work with the public and have seen impressive results," he noted. "Nurses and feldshers have a better rapport with patients and present information to them in a simpler and more accessible format. They also tend to take public education more seriously than doctors."

**Health Fairs: Fun for the Spirit, Good for the Body**

Another inexpensive and effective patient education tool discussed during the conference was the health fair. The June 2002 Svetly CHEC health fair, which was attended by approximately 400 residents from the village and the surrounding area, was used to frame the discussion. Anatoliy Frolov, first deputy chief physician at Tomsk Central Regional Hospital, who participated actively in the celebration as chairman of a special organizing committee for the fair shared his experiences coordinating and conducting the event with participants of the conference.

"I'll tell you frankly that when we began planning to hold the health fair we were afraid that few people would come," he said, "So we conducted a very extensive public information campaign. Two articles were published in the local newspaper; the nurses posted announcements about the fair in apartment building entrances, stores, and other public places; and they put more than 2,000 invitations in villager mail boxes."

According to Frolov, this approach was effective and the fair was packed with guests for the entire five hours it was open. He says that ultimately this was not surprising as the event was staged in such a way that the villagers would remember it for a long time. For example, all visitors were registered at the entrance and received a "health passport" in which information about their height, weight, and blood pressure was recorded. Tables were set up around a hall, each with its own medical theme, where anyone could receive a consultation and get brochures on prevention of a particular problem. Every hour there was a raffle, where children and adults won prizes donated by the partners from Bemidji. And, two medical professionals in clown costumes organized games and contests for attending children. In the end, approximately 6,000 brochures, booklets, and flyers were given out during the fair.
"It is worth noting that we didn't see a single discarded brochure inside or outside the school where the fair was held," said Frolov. From this, he concluded that the information was in demand and reached the families of people who participated in the celebration. He stated his hope that these families in turn shared the information with others.

Media covered the fair and that evening local residents saw themselves on the news. "Our first fair was such a grand and lively event that it made a lasting impression on the village," Frolov said, concluding that from the experience, partners understood immediately that a fair was a very effective way to work with the public to prevent disease and to promote healthy lifestyles.

In September 2003, another fair was held under the auspices of the partnership in the village of Oktyabrskoye, attracting one out of every four local residents. Frolov noted that there is nothing surprising about this success, because the organizers already had the necessary experience and the partners from Svetly worked hard to help colleagues organize the event in the best possible way.

Like the Svetly Health Fair, the Oktyabrskoye event was held at a high school. "The fair served as an example of fruitful cooperation between healthcare and educational institutions in preventing disease and promoting healthy lifestyles," Frolov asserted. The participation of chief physicians and nurses from three rural regions of the Tomsk Oblast, employees of the Oblast and City health departments, and members of the Oblast nursing council added value to the fair. Medical professionals came to learn, gain experience, and take this type of work back to their communities. According to Frolov, this type of learning happens more quickly and effectively when people can see everything in person and share their experiences—an approach that has been used throughout the work of the partnership.

**The Svetly CHEC Model Catches on in Molchanovo**

As an example of how successful and progressive approaches to address public health challenges are spread, conference participants had the opportunity to visit the Central Regional Hospital in the village of Molchanovo, which is getting ready to formally open a CHEC, but where work with the public is already underway.

Molchanovo is located 200 kilometers from Tomsk, and although its regional hospital is not part of the Tomsk/Bemidji partnership, their work is closely connected. Chief Physician Mikhail Chinyayev participated in AIHA's 2003 Community Leadership Development Program exchange, which is part of the Open World Leadership Center financed by the US Library of Congress. Through AIHA, Chinyayev was hosted by the Bemidji community where he learned about the partnership model and the CHEC project. Upon his return to Russia, his interest led him to travel with colleagues to the village of Svetly to see for themselves, how the center operated. "What we saw in Svetly surpassed all our expectations," said Chinyayev. "Watching the work of the focus groups and learning about unique ways to work with the public—such as health fairs—we came to understand that in order to instill the proper attitudes toward health in people, we cannot just do theoretical propaganda. We also have to provide practical training in habits that will have a positive effect on their health."
Chinyayev and colleagues decided to focus their outreach activities on children because they believed that while it is difficult to change the mindset of an adult, proper lifestyle choices taught to children will be carried with them into adulthood and making healthy choices will become a natural component of their lives.

Since visiting Svetly at the beginning of this year, Chinyayev and his colleagues have already accomplished a lot. They have prepared topics to be addressed through 22 focus groups and have selected trainer-volunteers to lead these groups from among CHEC staff. In fact, several focus groups are already meeting, including ones on preventing hypertension and promoting healthy lifestyles among schoolchildren. For the latter effort, a special classroom is being prepared at the high school in which medical professionals will work with teachers to educate children about living a healthy life. The group in Molchanovo has also renovated a facility where the Center will be located and a local nurse who is currently pursuing a degree in higher education at Tomsk State Medical University will be the Center's manager. In addition, Chinyayev noted, they is making plans to hold a health fair in the near future.

**Spreading the Partnership Experience and Making More Communities Healthy**

According to Yuri Sukhikh, chief physician at Tomsk Central Regional Hospital and Tomsk partnership coordinator, community health education centers will soon open in two more Oblast communities—Asino and Kolpashevo. Noting that the Tomsk Central Regional Hospital will serve as a methodological center and distribute the partnership’s best practices throughout the Oblast, Sukhikh emphasized that specialists from Tomsk have already started to work closely with medical professionals in these communities to organize the CHECs. They have shared not only their experiences, but also the educational materials they have developed.

"We have big plans for the future," said Sukhikh. "We must keep spreading the benefits that we received from our cooperation with the American partners, and this is the focus of our efforts now." Sukhikh underscored that the opening of the CHECs in Asino and Kolpashevo is only the beginning. He said that they also plan to create centers in adjacent areas, and then open them at rural clinics, concluding with the comment that "We must now work to change people's attitudes toward their health and help them develop a world view in which health is seen as the most precious thing we have."


—Unless otherwise noted, all stories in this issue are written by AIHA Staff Writer Vira Illiash who is based in Kiev, Ukraine.