

# Meeting Report

## MORNING SESSION

## OPEN WORKSHOPS

*Chair: B Walewska-Zielecka*

**Workshop 1:** *Developing the Global HPH Strategy 2019-21 (including discussion of Value for membership; Coordinator role)*  
*/ S Fawkes, M Kristenson, YW Wang, A Siu*

*Discussion:* During the first open workshop session, the past processes for strategy development and related strategy follow-up, monitoring and reporting were presented and discussed by the GA. Additionally, the documents and discussions pertaining to value for membership and the role of National/Regional Coordinators were considered. In break-out groups, the process and contents for the next strategy development were rapidly discussed and then each presented in plenum. Finally, a plenum discussion ensued. The GB and Secretariat will follow up on all input from this session and utilize this as basis for the development of the first draft of the 2019-21 strategy and for the development of the document on Role of National/Regional Coordinators. The development will be conducted in a participatory process with GA members.

**Workshop 2:** *Presentation and discussion of the update of WHO Standards: Health Promotion in Hospitals and Health Services*  
*/ M Kraymer von Krauss WHO Regional Office for Europe*

*Discussion:* During the second open workshop session, the updated WHO Standards and their development process were presented by WHO, GB and Secretariat. The GA applauded the hard work towards finalization. The GA commented that it has been a long process and that a published product is anticipated by the networks. Also, it was noted that simplicity, minimal documentation requirements and ease of use is of the essence. WHO informed that, in the most recent version circulated, an effort had been made to situate these new standards in relation to those being developed by HPH Task Forces – e.g. those on equity.

The GA further commented that the new standards represent an opportunity for inclusion of broader visions in terms of integrated/coordinated care, patient preferences/perspectives and self-efficacy, relevant links to and overlap with national guidelines, the evidence-based effects of interventions, the unique conditions of the clinical setting and patients as a group as well as modern IT tools such as mobile devices and apps. It was also suggested that, the present standards may possibly be regarded as only representing a part of the comprehensive HPH concept, a change in the title to reflect this may be considered relevant. Another aspect noted was that the originally intended focus on primary care should not be overlooked, and that a main pointer from primary care pilot sites was the necessity to keep the standards manual as simple as possible to ensure viability in these settings. Moreover, there are today several other sets of HPH standards at place e.g. for Migrant Friendly and Culturally Competent Health Care, Age-Friendly Health Care, HP for Children and Adolescents, HPH and Environment.

A suggestion was also made to develop “Umbrella Standards”, which link all standards produced under HPH and its Task Forces together to give an instrument, or a set of “packages”.

A vote on the mandate of the GB to endorse the final version would be held during the afternoon GA session. After finalization by WHO and GB, the TF could be made responsible for testing in practice as well as for the further developments relating to implementation and monitoring as outlined in the existing Task Force mandate. Such an extension of the Task Force mandate would be put to a vote in the afternoon GA session.

*Decision:* The GA agreed that the focus should now be on getting a publishable product ready.



**AFTERNOON SESSION**

**GENERAL ASSEMBLY**

*Chair: S Frampton*

**Attending delegates:**

- Bozena Walewska-Zielecka (Poland, GB Chair)
- Susan Frampton (Connecticut, USA, GB Vice Chair)
- Sally Fawkes (Australia, GB)
- Alan Siu (Hong Kong, GB)
- Margareta Kristensson (Sweden, GB)
- Ying-Wei Wang (Taiwan, GB)
- Oliver Groene (Germany)
- Dong-won Lee (Republic of Korea)
- Gernard Brunner (Austria)
- Heli Hätonen (Finland)
- Cristina Iniesta Blasco (Catalonia)
- Kjersti Fløtten (Norway)
- Kazuhiro Ogata (Japan)
- Milena Kalvachova (Czech Rep.)
- Kaja Pölluste (Estonia)
- Alda Cosola (Piedmonte (IT))
- Cristina Aguzzoli (Friuli Venezia Giulia (IT))
- Antonio Chiarenza, Emilia-Romagna (IT), Migration Friendly TF)
- Ilaria Simonelli (Children & Adolescents TF (IT))
- Manel Santiña (Catalonia (ES), TF Implementation and Monitoring of Standards)
- Shu-Ti Chiou (Age-Friendly Hospitals TF)
- Chin Lon Lin (Environment TF)

**Excused delegates:**

- Herman Suherman (Indonesia)
- Akbar Nikpajouh (Iran)
- Yanhou Zou (Hunan, China)
- Emanuelle Torri (Trentino (IT))
- Giorgio Galli (Vosta Valley (IT))
- Simone Tasso (Veneto (IT))

**Observers:**

- Martin Kraye von Krauss (WHO EUR)

**Partners:**

- Anna Myrup Cichowska (WHO EUR)
- Rudi Gasser (GNTFHS)

**Secretariats:**

- Jurgen Pelikan (WHO CC Vienna)
- Rainer Christ (WHO CC Vienna)
- Thor Bern Jensen (WHO CC Copenhagen)
- Mandy Rutherford (WHO CC Copenhagen)
- Hanne Tønnesen (WHO CC Copenhagen)
- Jeff Kirk Svane (WHO CC Copenhagen, Rapporteur)

## 1. Governance Board / B Walewska-Zielecka

- *Welcome partners, observers, TF Leaders and other participants*  
BWZ welcomed the GA, partners, TF Leaders and observers.

- *Governance Board Progress Report*

*Report:* BZW presented the progress in achieving GB activities since last GA. The GB and Secretariat had focused heavily on the consensus process regarding the finalization of the HPH standards being undertaken by the WHO CC. The process had caused postponement of several other deliverables of the current strategy – e.g. webinars. A new website was also being developed, and this would be presented in detail under the report of the Secretariat.

In stepping down from GB duty after her two terms, BZW thanked the GB, Secretariat and GA for collaboration and commonly achieved successes of the period. BZW noted that is by now a mature network, and advised the next GB to focus on maintenance of the good developments, capacity building, value, visibility, independency and HPH branding worldwide.

BZW invited AM Cichowska to inform the GA about the changes currently taking place at WHO Europe and their ramifications for HPH.

AMC informed the GA that WHO Europe has new policies for collaborations with WHO CCs and other organizations (including HPH). The aim of these new policies is to safeguard WHO independence and neutrality. For mature networks in collaboration with WHO (such as HPH), this means that MoUs and common action plans, outlining activities of value for both, are now the preferred framework for collaborations. For WHO CCs, it means a stricter enforcement of due diligence reviews. On this basis, and since a MoU is in place, HPH secretariat functions have been made separate to the WHO CCs in Vienna and Copenhagen. Both WHO CCs either have (Copenhagen) or are being (Vienna) re-designated, but without HPH secretarial functions as part of their terms of reference. For this reason, the HPH Secretariats will now be separate entities placed adjacent to, but separate from, the WHO CCs. For Copenhagen this means as a part of the Clinical Health Promotion Centre at Bispebjerg-Frederiksberg Hospital – the same as today. The MoU with WHO continues to run until 2020.

These changes are purely technical and administrative and they do not decrease WHO/HPH collaborations, which will remain as strong as ever, with several mutual projects – like the update of the Who HPH Manual and Self-assessment forms for health promotion in Hospitals. WHO also wishes to remain in the GB as observer and to be part of the HPH conferences. Secretariat placement outside of the WHO CCs is not in direct conflict with the HPH Constitution and thus functions and organizational placement will remain virtually the same. The WHO CCs will also continue to support HPH as always. For the N/R Networks and for members of HPH these changes will, however, entail discontinued use of the WHO emblem. The international HPH secretariat will start a process of sending out new certificates to all HPH members.

Also, the emblem will no longer be on HPH websites and other materials, whether print or online. Use of the HPH logo will remain unaltered.

*Decision:* These changes were approved by the GA.

## 2. International HPH Secretariat

*Report:* The HPH Secretariat thanked the GB Chair and Vice Chair, who were stepping down, for the collaboration and their many efforts. The GA applauded them for their service.

- *Report on HPH Network membership status and trends*

The Secretariat presented the membership status and trends. The total number of current HPH members is 643 members, of which 45 are individual members and 8 are affiliated members. In 2018, there had so far been a growth of 15 new members. These were from China, Czech Republic, Italy, Iran, Japan, Pakistan and Spain.

- *Report on HPH Network budget and balance*  
 The Secretariat presented the budgets and balances.

## Balance 2017

|              |                | Budget         | Estimated<br>November 2017 | Balance        |
|--------------|----------------|----------------|----------------------------|----------------|
| INCOME       | Fees           | 175,000        | 180,651                    | 178,296        |
|              | (CR-DK)        | 46,011         | 46,011                     | 46,011         |
|              | <b>Total</b>   | <b>221,011</b> | <b>226,662</b>             | <b>224,307</b> |
| EXPENDITURES | Salaries       | 160,000        | 159,050                    | 157,175        |
|              | Meeting        | 7,000          | 6,112                      | 6,159          |
|              | IT             | 3,000          | 3,401                      | 3,370          |
|              | (CR-DK)        | 46,011         | 46,011                     | 46,011         |
|              | MISC           | 3,500          | 1,016                      | 227            |
|              | <b>Total</b>   | <b>219,511</b> | <b>215,590</b>             | <b>212,942</b> |
|              | <b>Balance</b> | <b>+ 1,500</b> | <b>11,072</b>              | <b>11,365</b>  |

The 2016 balance had a deficit of (-)134 EUR. The accumulated HPH balance had a deficit of (-) 38.402 EUR. The budget for 2017 expected a 1.500 EUR surplus, but the balance had a higher surplus of 11.365 EUR. The Capital Region Denmark continues to support the Secretariat with 46.011 EUR each year that covers office accommodation and IT support, among other things.

In 2017 there was a total of 619 paying members. The vast majority of members (90%) are in the 300 EUR category.

Following GB requests, the financial report to the GA this year featured additional detail on each budget line.

For 2017 salaries, this was as follows:

|                           | 100 %<br>Euro | Euro           |
|---------------------------|---------------|----------------|
| Technical Officer 1 (90%) | 81.001        | 72.901         |
| CEO (4 %)                 | 13.800        | 13.800         |
| Student1                  | 12,212        | 12,212         |
| Student2                  | 902           | 902            |
| Technical Officer 2 (67%) | 85.612        | 57.360         |
| <b>Total</b>              |               | <b>157,175</b> |

For 2017 meetings, it was as follows:

| <b>HPH meeting in Vienna (GA &amp; GB &amp; Conf.)</b> |  |       |
|--|--|-------|
|  |  | Euro  |
| Conference fee   |  | 858   |
| Travel   |  | 1.166 |
| Accommodation  |  | 1.621 |
| Per Diem Staff   |  | 436   |
| Per Diem GA  |  | 199   |
| Extra Student preparation                              |  | 774   |
| Misc   |  | 80    |
| <b>Other GB Meetings (December)</b>                    |  |       |
| Catering   |  | 148   |

|   |  |                |
|---|--|----------------|
| Per Diem GB                                     |  | 795            |
| <b>Other meetings related to HPH (WHO RC67)</b> |  |                |
| Per Diem Staff                                  |  | 81             |
| <b>Total</b>                                    |  | <b>6159,20</b> |

For IT, it was as follows:

|                     |  |              |
|---------------------|--|--------------|
|                     |  | Euro         |
| IT subscription     |  | 1.177        |
| 98 hours IT student |  | 2.193        |
|                     |  | <b>3.370</b> |

For miscellaneous, it was:

|                          |  |            |
|--------------------------|--|------------|
|                          |  | Euro       |
| 2 Frames for HPH Awards  |  | 10         |
| DHL package to Russia    |  | 120        |
| A1 poster: HPH World Map |  | 97         |
| <b>Total</b>             |  | <b>227</b> |

With the 2017 surplus the accumulated HPH deficit was reduced to (-) 27.099 EUR. This deficit will be carried over to 2018.

*Decision:* The GA acknowledged the deficit carry over.

*Report:* The 2019 budget projection showed an expected surplus for the year of 6.296 EUR and is presented below:

## Budget 2019

|              |              | 2018           | 2019           |
|--------------|--------------|----------------|----------------|
| INCOME       | Fees         | 175,000        | 178,296        |
|              | (CR-DK)      | 50,612         | 50,612         |
|              | <b>Total</b> | <b>225,612</b> | <b>228,908</b> |
| EXPENDITURES | Salaries     | 160,000        | 159,000        |
|              | Meeting      | 7,000          | 7,000          |
|              | IT           | 3,000          | 3,000          |
|              | (CR-DK)      | 50,612         | 50,612         |
|              | MISC         | 3,500          | 3,000          |
|              | <b>Total</b> | <b>224,112</b> | <b>222,612</b> |
|              | Balance      | + 1,500        | + 6,296        |

*Decision:* The GA approved the balance (current), and the GA approved the 2019 budget.

- *Report on HPH platforms for exchange and discussion*

*Report:* The Secretariat presented the new website. The website, which is still under finalization, had been tentatively released on the hphnetwork.org domain (NB: not the hphnet.org domain, on which the existing site in use is placed) for commenting by and input from GA. Following a GB decision to enhance look, feel and recruitment potential, the new site features enhanced visual presence, usability

and navigation. Also, it has been made mobile device friendly and SEO optimized. The Secretariat now welcomes all GA feedback to finalize the site and publish it on the hphnet.org domain, replacing the old site.

- *Report on Secretariat staffing, roles and changes*

*Report:* HT will, to not put HPH in an unconstitutional situation (given the WHO changes, see above), formally remain CEO of the Secretariat in Copenhagen until the GA in Warsaw 2019, but in effect, the new and acting management team will be JS and TBJ.

*Discussion:* There were comments on the Clinical Health Promotion journal and lacking editorial board meetings as well as fewer than planned issues produced. HT agreed, but noted that the journal has been lacking basic funding (e.g. the annual contribution from HPH budgets originally agreed by GA). On that basis, plans had been scaled-down. The hope is currently to be able to gain more funding and support from the Malmö Sweden WHO CC to maintain the developments that had been reached nonetheless – such as the finalization of DOI for all back-catalogue of articles.

### **3. GB Election / TB Jensen**

- *Voting procedure, briefing and election*

*Clarification of procedure:* The Secretariat presented the constitution's rules for voting, the amendments related to GB duty and the practical voting procedure rules. In advance, all GA members had been contacted regarding potential candidacies. A final call for last-minute candidates was also officially made in advance of the voting.

*Decision:* Susan Frampton was elected the GA voting official.

*Candidates:* The candidates for GB duty 2018-2020 were:

- *GB for re-election:* Taiwan (YWW), Australia (SF), Sweden (MK), Hong Kong (AS).
- *New candidates:* Norway (KF), Spain (CI), Finland (HH), Italy (AC).

All 8 candidates presented themselves.

*Vote & decision:* The GA then voted for the 7 seats of the GB. The following networks were elected:

- Emilia-Romagna (IT) (16 votes)
- Australia (16 votes)
- Sweden (15 votes)
- Taiwan (15 votes)
- Hong Kong (15 votes)
- Catalonia (ES) (15 votes)
- Norway (13 votes)

The GA applauded the new GB. The new GB will constitute itself and elect its chair and vice chair the next day in the morning. Results of this will be communicated to the GA by the Secretariat.

### **4. HPH Conferences and Budgets**

- *Report of 2018 Conference /A Chiarenza*

*Report:* AC presented the budget and balance for the 2018 conference in Bologna. Conference fees were reduced by 10% in comparison to last year. There was a negative balance of 49.068 EUR. But regional government funding of 50.000 covered the deficit.

There were 672 attendees for the conference. In total, 985 abstracts had been received, of which 732 had been accepted. AC's report in full is available in the appendix. The GA applauded AC and the Italian HPH Network for the successful organization. AC thanked the secretariats for their support.

- *2019, 2020 Candidates & election of host /J Pelikan*



*Report:* B Zielecha-Walewska presented the plans for the 2019 conference. It will take place in Warsaw, Poland, on the 29<sup>th</sup> to the 31<sup>st</sup> of May 2019. The conference will be co-organized by the Warsaw Medical University.

Regarding 2020, a GA decision was previously made naming Estonia the host. Meanwhile, Estonia had reported that they would not be able to host after all, as the network is currently facing difficulties.

All GA members were thus invited to make their proposals for 2020 and for 2021.

Currently, China is the only country to have reported an interested in hosting either 2020 or 2021. AS and JP will continue to work on government and other support for thus, in collaboration with HT and STC.

JP reminded that a final proposal from China should ideally be presented to the GA in 2019 the latest, or alternatively GA voting will have to be done electronically.

The GA applauded this possibility of a conference in China. Other networks still considering are warmly welcomed to make contact to WHOCC Vienna too, and JP reminded the GA that hosting an HPH conference creates valuable ownership and visibility of the HPH work at all levels and that this has hitherto proved to be a good booster for NR networks.

## 5. HPH MoU Partnerships

- *WHO Europe/ M Kravyer von Krauss*

*Report:* MKVK presented the work under the WHO/HPH partnership and MoU. There are many exciting new developments currently – not least the new standards. Another important task ahead is to develop the new global HPH strategy. MKVK noted that WHO's commitment is strong and WHO will continue to support the International HPH Network as previously.

MKVK then asked the GA to vote that the GB be mandated to endorse the final version of the revised standards, on behalf of the GA.

*Decision:* The GA agreed to give this mandate to the GB.

- *Global Network of Tobacco Free Healthcare Services / R Gasser*

*Report:* RG presented the developments from the (now) Global Network of Tobacco Free Health Care Services.

The network has appreciated the collaboration with HPH on conferences – e.g. for the 2017 in Vienna, where 66 delegates also attended the preconference on smoking. In 2018, this number of preconference attendees had grown to 87. Currently, the network had 15 new global gold forum members receiving their recognition. Also, the network has made significant progress with new members in e.g. the Netherlands and the Czech Republic. The network has also produced new standards, which have been well received and used, and which have now also been translated into 7 languages. The network also has a new website, [www.tobaccofreehealthcare.org](http://www.tobaccofreehealthcare.org) and an increase in the number of meetings each year with several regional meetings in e.g. Andalusia last year and Switzerland this year. RG thanked HPH for the great collaboration, and the GA applauded the developments.

- *Proposed partnership: IUHPE / TB Jensen*

*Report:* TBJ presented the proposed International Union of Health Promotion and Education (IUHPE) partnership. The previous GB has continued the work on initiating a partnership with IUHPE. An invitation had been sent officially, to formalize the partnership, which has by now been in the pipeline for a few years. The Secretariat hopes to have more news on this soon. The GA applauded the developments and noted that there is a coming World Conference on HP, which is organized by IUHPE, to which all GA members have been invited to submit abstracts. Abstract submission is already open and will close on August 31<sup>st</sup>. The conference will take place in New Zealand on April 7-11, 2019.

## 6. Establishment of new Working Groups and Task Forces

- *Updating Terms of Reference for HPH Task Force on implementation and monitoring of Standards / M Santina*

*Report:* MS presented the proposed new terms of reference following the morning workshop discussions. The TF proposed that the objectives were extended to also include working with GB and WHO towards finalization (i.e. further needed changes etc. not to extend the process, but take it forward after publication) and a validation of the new standards. The contents of the old terms of reference would remain in the new mandate too. It was suggested that the mandate include an added bullet point on collaboration with other TFs that have developed standards.

*Decision:* The GA acknowledged this need and approved the extended TF mandate as suggested by the TF and with the extra bullet point.

- *Proposal for a working group on the HPH Global Strategy 2019-2021 /S Fawkes*

*Report:* SF presented a proposal on the next steps to be taken after the workshop session in the morning. Work would include the actual development process and reflections on the context of HPH, for example, the UN SDGs, Universal Health Coverage, national health promotion agendas and roles of Secretariats, GB, GA and networks in decision-making and in action.

*Discussion:* OG queried why strategies were made for two-year periods. The GA discussed this point.

*Decision:* The GA agreed that HPH strategies could be for a longer period. This will be discussed in the GB and in the WG (if approved).

*Discussion:* The GA discussed a proposal for a WG to be established to produce a draft strategy. The process would be participatory and include the draft going to the GB and then the GA qualifying and approving the draft. Implementation would follow. Timing will be determined by the WG and the GB, but it will likely be very tight to allow for GA approval in Warsaw in 2019. SF will put a document together regarding the WG and then put it to GB for approval.

- *Proposal for working group on generating additional income sources and resources for International HPH Network/S Fawkes*

*Report:* SF presented the proposal, a written version of which had been discussed in the GB in May. Income from Network fees is constrained, and thus it could be supplemented by additional income sources and mobilisation of resources from within the Network. Income from sources other than fees is permitted by the HPH Constitution. It had been proposed in the GB to set up a WG to consider this, and this would then be developed further in the new GB. The GB welcomed any volunteers for the WG, and anyone interested should contact the new GB. M Kristenson noted that a main goal of having these two WG is to involve more people than just the GB to more fully utilize the good ideas and resources in the NR networks

## 7. Presentation by HPH Task Forces and Working Groups

- *HPH and Environment TF/M*

*Report:* The TF presented its terms of reference and the work undertaken since the last GA. The TF has many collaborations with other international organizations – not least Health Care Without Harm (HCWH). Many dissemination activities had also taken place along with several publications. The TF was also to host a workshop during the Bologna conference (Friday afternoon), to which all GA members were cordially invited. The TF is currently working on guidelines for environmental sustainability. This is expected to be finalized within the next years, and so the TF asked for an extension of its mandate. The GA applauded the work.

*Decision:* The GA agreed to extend the TF from 2018 to 2022.

- *Age-Friendly Health Care TF/ST Chiou*



*Report:* STC presented the work of the TF, which has the goal of innovating practices for age-friendly health services. The TF's terms of reference were presented, and current work included the development of a framework of principles, with supportive indicators. The TF at present has 15 members from 11 countries. The framework had been translated into different languages, and is currently being spread to more countries, while it has so far been tested mainly in Taiwan. In total, there are 469 health settings that have worked with the framework. The TF had also focused on dissemination in publications and at conferences. The TF asked for an extension to further work on alignment with WHO policies (e.g. integrated care for elderly people), to continue to support health services in this work, to support partnerships with Age-Friendly Cities as well as to continue dissemination of best practices.

*Decision:* The GA approved the TF extension.

- *HP for Children and Adolescents TF/ I Simonelli*

*Report:* The TF presented its work since last GA. Currently, the TF is developing its set of standards. A first draft has already been made. The TF includes international experts and several countries take part. The draft standards had been updated and a final version produced. Expert feedback has been collected alongside and so has a quick evaluation sheet for easy reference in busy clinical life. The next steps include development of an online training module for staff, research on costs and gains related to promoting children's health as well as a new focus on children's rights in other life-settings such as schools, justice system and associations. The GA applauded the work.

- *Equity Sensitive Health Care TF/ A Chiarenza*

*Report:* AC presented the work of the TF, which is a continuation of the previous TF Migrant Friendly and Culturally Competent Health Care. Many countries are still participating in this work and standards have been developed for equity, migrants and vulnerable groups. These have also been tested in several countries. There is a need to continue the work to support the many policies in countries and organizations that exist currently. The phase of work ongoing now predominantly relates to the needed support towards successful implementation of the standards, while development a rapid implementation tool is also a current focus. The TF is also working on an online tool to allow individual countries to make their own reporting of the standards and compare results to those of other countries. Additionally, the TF is looking to enlarge its target audience and expand to more countries. The GA applauded the work.

- *Patient-Centered Health Care WG/ S Frampton*

*Report:* S Frampton presented the work of the WG and invited all interested delegates to join the first plenary session in Bologna (Thursday), where a further report of the WG and its goals will be the focus.

- *Health-Literate Health Care Organizations WG/ J Pelikan*

*Report:* JP presented the work of the WG, which is working on adoption of health literacy in organizations: The WG so far has members from Asia, Europe and the Americas. An existing instrument has been translated already (Mandarin, French and Italian) and its fit within different country context is being explored. The WG has also initiated several important international collaborations with other organizations, and in September pilot testing of a SAT will start along with planned collection and dissemination of best practices and a development of a new database for health literacy in hospitals.

## **8. AOB**

There was no other business.

## **9. Closure /Representative of the newly elected Governance Board**

On behalf of the new GB, MK thanked the GA for participation and for the successful meeting.

APPENDIX

Report: HPH Conference 2018, Bologna (Antonio Chiarenza)



**Facts and figures**  
 related to the organisation of the 26<sup>th</sup> International  
 HPH Conference 2018

Antonio Chiarenza  
 HPH Network of Emilia-Romagna  
 AUSL-IRCCS Reggio Emilia (ITA)

### Conference expenses

|  |                |
|--|----------------|
| Conference Venue   | 123,068        |
| Coffee breaks, lunches, Gala dinner (+ entertainment)  | 86,075         |
| On line registration system  | 12,000         |
| Support travel planning of invited speakers + support social programme + onsite reception desk and hostesses | 16,570         |
| Travel and accommodation of invited speakers   | 9,230          |
| International coordination by WHO-CC-HPH, Vienna   | 53,000         |
| HPH Secretariat, Copenhagen  | 10,000         |
| Conference programme, conference badges, and shoppers  | 3,891          |
| <b>TOTAL</b>   | <b>313,834</b> |

### Registration fees (10% reduction from previous years)

| Category  | Early registration | Late registration |
|---|--------------------|-------------------|
| <b>Conference fees (Wednesday to Friday)</b>          |                    |                   |
| Developed country - HPH member                        | € 425              | € 520             |
| Developed country - NDI member                        | € 675              | € 845             |
| Transition/Developing Country - HPH member            | € 195              | € 245             |
| Transition/Developing Country - NDI member            | € 220              | € 280             |
| Student   | € 220              | € 280             |
| <b>Day-pass for conference - Thursday or Friday</b>   |                    |                   |
| Day-pass - Developed country - HPH member             | € 290              | € 290             |
| Day-pass - Developed country - NDI member             | € 425              | € 425             |
| Day-pass - Transition/Developing Country - HPH member | € 125              | € 125             |
| Day-pass - Transition/Developing Country - NDI member | € 140              | € 140             |
| Day-pass - Student                                    | € 140              | € 140             |
| <b>Fees for additional conference modules</b>         |                    |                   |
| Pre-Conference Tobacco                                | € 20               | € 20              |
| HPH Summerschool                                      | € 100              | € 100             |
| HPH Newcomer workshop                                 | € 25               | € 25              |
| Accompanying person                                   | € 70               | € 70              |
| Gala Dinner   | € 20               | € 20              |

(Countries were defined according to World Bank classification)

### Summary of conference income

| Type of income       | Quantity | Amount         |
|----------------------|----------|----------------|
| Main conference fees | 643      | 246,375        |
| Preconference fees   | 83       | 6,800          |
| Summer school fees   | 22       | 2,200          |
| Newcomer workshop    | 10       | 350            |
| Gala Dinner          | 133      | 9,040          |
| <b>Total</b>         |          | <b>264,765</b> |

### Balance

|                       | Amount         |
|-----------------------|----------------|
| Conference expenses   | 313,834        |
| Conference income     | 264,765        |
| <b>Balance</b>        | <b>-49,069</b> |
| Regional gov. funding | 50,000         |
| <b>Balance</b>        | <b>931</b>     |

### Conference participants

| Continent    | Number of participants | %           |
|--------------|------------------------|-------------|
| EUROPA       | 303                    | 45,4%       |
| ASIA         | 350                    | 52,1%       |
| AFRICA       | 4                      | 0,6%        |
| AMERICA      | 7                      | 0,9%        |
| OCEANIA      | 6                      | 0,1%        |
| <b>Total</b> | <b>672</b>             | <b>100%</b> |

### Participants by country

| Country          | n.  | %     | Country           | n. | %    |
|------------------|-----|-------|-------------------|----|------|
| 1 Taiwan         | 270 | 12,1% | 19 HongKong       | 1  | 0,0% |
| 2 Italy          | 117 | 11,8% | 20 Israel         | 1  | 0,0% |
| 3 Spain          | 85  | 9,7%  | 21 Thailand       | 1  | 0,0% |
| 4 Sweden         | 32  | 3,3%  | 22 United Kingdom | 1  | 0,0% |
| 5 Sud Korea      | 31  | 3,1%  | 23 France         | 3  | 0,0% |
| 6 Japan          | 21  | 2,1%  | 24 Switzerland    | 2  | 0,0% |
| 7 Austria        | 12  | 1,2%  | 25 China          | 2  | 0,0% |
| 8 Norway         | 10  | 1,0%  | 26 Congo          | 1  | 0,0% |
| 9 South Republic | 8   | 1,2%  | 27 New Zealand    | 1  | 0,0% |
| 10 Mexico        | 8   | 1,2%  | 28 Tanzania       | 1  | 0,0% |
| 11 Finland       | 7   | 1%    | 29 Afghanistan    | 1  | 0,0% |
| 12 Denmark       | 6   | 0,6%  | 30 Greece         | 1  | 0,0% |
| 13 United States | 6   | 0,6%  | 31 Iran           | 1  | 0,0% |
| 14 Belgium       | 3   | 0,3%  | 32 Korea          | 1  | 0,0% |
| 15 Canada        | 3   | 0,3%  | 33 Netherlands    | 1  | 0,0% |
| 16 Ireland       | 1   | 0,1%  | 34 Singapore      | 1  | 0,0% |
| 17 Australia     | 1   | 0,0%  | 35 Malasia        | 1  | 0,0% |
| 18 Germany       | 1   | 0,0%  | 36 Poland         | 1  | 0,0% |

### Conference papers

|                   |     |       |
|-------------------|-----|-------|
| Abstract received | 985 | 100%  |
| Abstract included | 732 | 74,3% |
| Abstract excluded | 252 | 25,7% |

| Type of presentation | n.  | %     |
|----------------------|-----|-------|
| Plenary              | 19  | 2,6%  |
| Oral                 | 160 | 21,8% |
| Mini oral            | 90  | 12,3% |
| Workshop             | 10  | 1,4%  |
| Poster               | 453 | 61,9% |
| Total                | 732 | 100%  |

### Conference income

| Category  | Early registration |        | Late registration |        |
|---|--------------------|--------|-------------------|--------|
|   | Quantity           | Amount | Quantity          | Amount |
| Conference fees (Wednesday to Friday)                 |                    |        |                   |        |
| Developed country - HPH member                        |                    |        |                   |        |
| Developed country - NON member                        |                    |        |                   |        |
| Transition/Developing Country - HPH member            |                    |        |                   |        |
| Transition/Developing Country - NON member            |                    |        |                   |        |
| Student   |                    |        |                   |        |
| Day-pass for conference - Thursday or Friday          |                    |        |                   |        |
| Day-pass - Developed country - HPH member             |                    |        |                   |        |
| Day-pass - Developed country - NON member             |                    |        |                   |        |
| Day-pass - Transition/Developing Country - HPH member |                    |        |                   |        |
| Day-pass - Transition/Developing Country - NON member |                    |        |                   |        |
| Day-pass - Student                                    |                    |        |                   |        |
| Fees for additional conference modules                |                    |        |                   |        |
| Pre-Conference Tobacco                                |                    |        |                   |        |
| HPH Summerschool                                      |                    |        |                   |        |
| HPH Networkers workshop                               |                    |        |                   |        |
| Accompanying person                                   |                    |        |                   |        |
| Gala Dinner   |                    |        |                   |        |
| Total   |                    |        |                   |        |