European Journal of Public Health, Vol. 26, Supplement 1, 2016

(DGS-Health Directorate of Portugal)). A mix of qualitative and quantitative methods screened data provided by a total of 32 participants (81% females). Demographic information, experiences or professional domain, questions related to the relevance, strengths and weaknesses of HP, and open questions explored the reasons for several ratings

Only 22% of respondents stated that HP is well developed (with 6% fully agreeing). 31% of respondents (25% fully agreeing) felt that overall knowledge of HP has progressed, and the majority (80% fully agreeing) felt that health promotion needs a deeper reflection since Ottawa, felt that health promotion needs a deeper reflection since Ottawa. Regarding the five HP action areas, the percentage of use (regularly/very often) was rated highest for "Developing Healthy Public Policy" at 28%, "Reorientation of Health Services" with a total of 25%. "Developing Personal Skills and Knowledge" with 25%, followed by "Supportive Environments" with 19% and "Community Action" 12%. "Community Action", 12%.

Conclusions

Strong emphasis is given to the fact that HP is not well developed and needs a deeper reflection. Strategies to apply the five action areas may be beneficial.

Meeting in Vienna 30 years after Ottawa: QuoVadis health promotion?

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Background

The complementary approach brought by the Ottawa declaration 30 years ago, emphasized that curative, palliative and preventive discourses and practices needed to work hand in hand with Health Promotion (HP). This study explores experts and practitioners opinions on the current trends that HP faces in Portugal, a European peripheral country.

Methods

The invitation to participate in a survey followed by a focus group was sent to several health stakeholders (e.g. community intervention (Healthy Cities Network), policy making