



Health and Care Forum Thursday 15th May 2008

Session 3

Social Care and Impact on PHC

Chair: Ms. Tamsin Rose, Consultant

Speakers: Mrs. Dagmar Domenig, Director of Health and Integration

Department, Swiss Red Cross

Mrs. Ingela Holmertz, Swedish Red Cross

Mrs. Ivana Dasic Marisavljevic, Health and Care Coordinator, The

Red Cross of Serbia

Abbreviations: PHC (Primary Health Care); IDPs (Internally Displaced Persons)

Ms. Tamsin Rose opened the session by emphasizing the importance of linking up social and health care, as well as the need to see interconnections as opportunities for change, as opposed to conflict.

The status quo is not acceptable and the recognition that change is important does not mean that it will happen automatically. People are often resistant to change and fear the unknown. Change therefore requires effort, negotiation, compromise and leadership.

For this reason it is vital that the Red Cross and Red Crescent Societies act as agents of change. It is important to have a shared vision of change and to communicate and engage people in that vision. Important factors include:

- Effectively communicating to all parties involved the importance and broader scale objectives of the movement (including beneficiaries and groups that may lose out);
- Clearly explaining the strategic action plan;
- Creating a sense of empowerment where individuals are given the opportunity to take a leading part in the process of change;

The unified response to primary health care needs to address the importance of synergy between health and social care. Social factors such as income, socio-economic status, living conditions and education, all have a huge impact on health. Thus poverty is the largest single determinant of health. It is therefore vital that health and social care are seen, not as two separate entities, but as part of the same problem.

Health is a source of leadership but health politics cannot be ignored. The challenge is to build on past experiences and effectively guide human resources to instigate something new. The foundation of the Red Cross was a revolutionary act; a refusal to accept the status quo and a call for action. Today, Red Cross and Red Crescent must continue to follow this vision without allowing for dilution, competition and fragmentation. The renewed vision of Alma Ata requires unified support: an opportunity that should not be ignored. Establishing health and social care policies can create conflict for resources and priorities or it can be an opportunity for moving towards PHC. As community-based organisations using volunteers, Red Cross and Red Crescent are ideally positioned to take on a role of leadership and deliver change. It can, and must, be able to demonstrate the impact of PHC.

Representatives from Swiss Red Cross, Swedish Red Cross and the Red Cross of Serbia then spoke of their own experiences of integrating health and social care.

Mrs. Dagmar Domenig, Director of Health and Integration Department, Swiss Red Cross, spoke of the Swiss Red Cross Outpatient Clinic for victims of torture and war. In particular, she highlighted the following key points:

- A 2002 study on the integrative approach between health and social care indicates a direct correlation between psychosocial problems and health disintegration.
- Clients have a complex range of needs and services that must be addressed. A multidisciplinary approach, combining health and social care, is therefore vital.
- Importance of addressing the needs of vulnerable new groups. The provision of health and social care is often particularly important in the case of migrants who may require help integrating into a new society and developing new options, whilst also perhaps finding themselves stigmatized by the healthcare system.
- Importance of overcoming the challenges of configuring services, fostering proper integration and implementation, and ensuring that everyone feels equally valued.

Mrs. Ingela Holmertz from the Swedish Red Cross highlighted the following key points:

- Example of a traditional professional medical service broadened out to include a range of activities uniting social and health care and drawing in volunteers and professionals.
- Recognizing the challenge in ensuring that multi-disciplinary teams worked together and that everyone (volunteers and staff) felt equally valued in their role.
- Imperative need to use the Red Cross and Red Crescent network to link social

care (psychosocial support) and health care.

Mrs. Ivana Dasic Marisavljevic, from the Red Cross of Serbia, pointed out the following key points:

- Exemplified the correlation between socio-economic status and poor health conditions by referring to a Serbian project on tuberculosis (TB) control in Serbia targeting high risk groups (Refugees, IDPs and the Roma population) passed onto the Red Cross by the Ministry of Health.
- Project also demonstrated the strength of volunteer capacity. Six hundred and eighty volunteers were educated and trained to strengthen the health care system and increase knowledge of TB through health promotion as well as providing medical help and checks. In this way a total of 20'000 people were reached through the project.

The plenary panel went on to discuss the formation of a **European Health and Social Care Managers Forum**, which met for the first time in December, 2007. The network was formed as a platform through which to exchange ideas, share experiences and challenges. The forum aims to try to ensure a more holistic approach towards health and social care, whilst considering a shared vision for change and the means through which this can be converted into operational ideas and action.

Attendees were then invited to submit their questions and comments. A key issue introduced concerned the role of the government in integrating social and health care and how the work of the Red Cross and Red Crescent can point out and address gaps in the system.

Ms. Tamsin Rose summed up the session by emphasizing the need to learn from experiences. Existing resources are good, but the real challenge is to efficiently utilize these tools in practice and to unite to advocate change.

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