

# Chance – „Healthy Simmering“

Community Health Management to Enhance Behaviour in Vienna, Austria

Petra Rust<sup>1</sup>, Wencke Hertzsch<sup>2</sup>, Ibrahim Elmadfa<sup>1</sup>, Jens Dangschat<sup>2</sup>, Elisabeth Hödl<sup>1</sup>



<sup>1</sup>Institute of Nutritional Sciences, University of Vienna

<sup>2</sup>Department of Spatial Development, Infrastructure and Environmental Planning, Centre of Sociology, Vienna University of Technology



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## Objective

The prevalence of chronic diseases - like obesity, diabetes or cardiovascular diseases - is still rising. Especially socially disadvantaged population groups are affected by these medical conditions, although in theory they have the same access to health information. The main goal of the EU-wide project CHANCE, Community Health Management to Enhance Behaviour, within the framework of the lifelong learning programme GRUNDTVIG, is to figure out the influence of a community's structure, the social environment, and the living situation on its residents' health pattern.

## Subjects and methods

The area of investigation was the "Schneiderviertel" Vienna, a part of the 11<sup>th</sup> district called Simmering. It has a high percentage of immigrants, elderly people and single parents. The first survey, including 20 qualitative interviews and 254 quantitative questionnaires, took place during August and September 2008. 161 (63.4%) of all participants were female and 93 (36.6%) male. Around 30% women and 26% men had an immigration background. The majority of the interviewees was aged between 31-40 years (26.8%). 76.0% of all respondents mentioned secondary school level minimum and 23.2% maximum.

## Results and discussion

Women mostly worked as housewives and part time workers and infrequently work full time ( $p < 0.001$ ), although they had the same education level as compared to men ( $p = 0.803$ ).

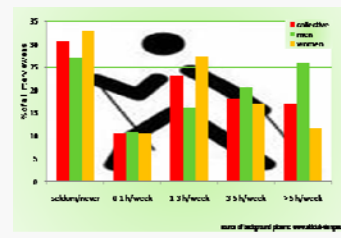
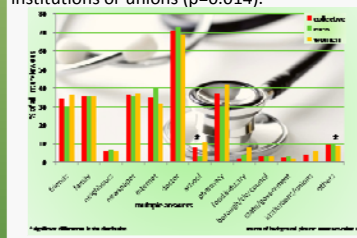
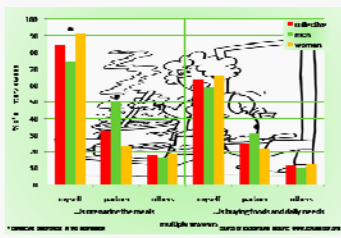
Women, as the families managers, purchased foods and daily needs of the household ( $p = 0.015$ ) and prepared meals ( $p < 0.001$ ). As a result of their role, women were better informed about the storage of minced meat ( $p < 0.001$ ).

Women represent ideal mediators to influence the diet of the families.

Asked what the interviewees think to be important public facilities in their neighbourhood, women considered shopping malls ( $p = 0.002$ ), schools ( $p = 0.001$ ), kindergartens ( $p < 0.001$ ), health services ( $p = 0.038$ ), social services ( $p < 0.001$ ) and social clubs ( $p = 0.033$ ) of greater importance than men. These observations show the needs of women's daily business concerning family life. Regarding health recommendations, most of the participants got their health information from their doctor (70.5%). Men did not get health information from their children's school ( $p = 0.037$ ) however they received it from institutions or unions ( $p = 0.014$ ).

The evaluated frequency of physical activity showed need for action. 30.7% reported to do infrequent or no physical activities.

Women were less interested in physical activities than men ( $p = 0.001$ ) and spent consequently less time on it ( $p = 0.015$ ). But no difference in the mean time spent outside, which correlates with time spend for physical activities ( $p = 0.001$ ), was observed between the sexes ( $p = 0.267$ ).



In the community, women in their role as mothers and wives represent ideal health mediators. Due to the results of the first questionnaire, the intervention "Healthy Simmering" with its three main focuses, i.e. lectures about healthy nutrition, cooking classes and physical activity, was developed:



Simmering is cooking



Simmering is informed  
Within the framework of "University Meets Public"



Simmering is moving

## Conclusion

Women bear responsibility for their families regarding nutrition, daily needs and consequently for the health of their family members. According to this full time job they need public facilities, e.g. health services, which support them in their daily routine. These institutions, which enjoy the women's confidence, should communicate resources to the public with the objective to improve the knowledge on and the facilities for a healthy life style.



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Contact: Ass.-Prof. Dr. Petra Rust, Institute of Nutritional Sciences, University of Vienna, petra.rust@univie.ac.at

