DEBATING STATEMENTS

All first year medical students have to learn the principles of **public health**

An active attitude of doctors towards **lifestyle** is a necessary asset for good prevention

**Privacy** in healthcare is a contradiction

**Governments** have to take control again over the healthcare systems

USEFUL OBSERVATIONS

Preventive atmosphere in communities → successful prevention

- Participation of residents ‘from scratch’
- Information: simple, repeating, in non medical public places and frequent media coverage

Small scale data management → planning of human capital and resources

- Based on real-time data on district level
- Local differences in morbidity and mortality → local initiatives in health care policy by periodic decisions
- Health professionals decisions are decisive

Risk-attribution system → key in patient motivation

- 1=healthy, 2=risk factors, 3=chronical illness + risk factors, 4=complications with hospitalization
- Known by the patient
- Evaluated 1 to 4 times a year

Focus on health instead of illness

- Community members and -workers focus on health and prevention
- Compulsory public health education for all medical students

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