



EuroHealthNet

EUROPEAN PARTNERSHIP FOR IMPROVING HEALTH, EQUITY & WELLBEING

Three large, overlapping stars in blue, purple, and yellow are positioned behind the main title. The blue star is on the left, the purple star is in the middle, and the yellow star is on the right. They are all slightly offset from each other, creating a layered effect.

Championing a healthier and fairer Europe

EUROHEALTHNET ANNUAL REPORT 2015-2016



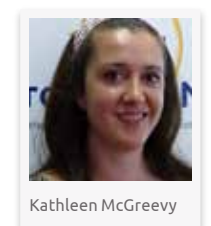
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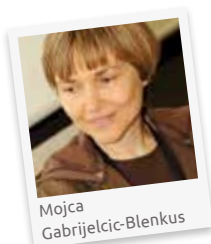
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Ineta Zirina



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Welcome from our President and Executive Board

Championing a healthier and fairer Europe in this day and age is a complex affair. It needs to build on the best available evidence and requires commitment, creativity, and a very good understanding of policy dynamics. Other essential building blocks include partnerships and joint sense of direction.



Nicoline Tamsma, President

Every day, EuroHealthNet members and partners are working tirelessly to serve the health and well-being of their community, region or country. Our network organization supports them in that mission and takes it to a European level.

On behalf of the Board I welcome you to this annual report, which is testimony to the diversity and richness of EuroHealthNet's activities and achievements. In a Europe under pressure we continued to make the case for health and social investment, liaising with different European Commission Directorates also at high level.

It has been a year in which we have stepped up our work with and in countries, engaging members in EU policy processes and strengthening their position at their home ground. Our Technical Working Groups are fully operational now. They offer members additional opportunities for in-depth learning and broaden the thematic expertise within of our network.

I am delighted all three pillars of our Partnership attract new members and partners from across Europe. This enables us to further develop as a strong and well-balanced organization. Now the restructured framework of our organization is well established, the Board has devoted some of its time this year to developing plans to safeguard a sustainable financial future.

The past year has also seen the adoption of the universal UN 2030 Agenda for Sustainable Development. This agenda and its 17 goals offer exciting new opportunities for policy coherence and integrated approaches at national and at EU level. Sustainability is also a key theme in INHERIT, our major new Horizon 2020 research project that makes the link between health promotion, sustainable development and equity.

I hope you will find this report useful, inspiring and interesting. The work it reflects would not have been possible without the contributions of our members, partners and external associates, and I would like to thank them for that. A special word of appreciation from the Board goes out to our Managing Director as well as to our Policy & Advocacy Director and all office staff, for whom the past year has been exceptionally busy. Their dedication and expertise is key to the success of our Partnership. Together with my fellow Board members I am looking forward to the coming year, inviting you to join us in our efforts to contribute to equitable health and well-being.

Nicoline Tamsma, President

Introduction by our Managing Director

You may note that this year's annual report, covering June 2015- June 2016, is somewhat bigger than usual. The reason is that we have expanded our activities, developed exciting new projects and strengthened work within countries. We were also able to welcome several new institutes and centers of excellence to our Partnership. This has contributed to an increased engagement to generate, identify and promote integrated approaches that influence the health and well-being of European citizens and their ability to contribute to a more prosperous and sustainable society.



↳ Caroline Costongs,
Managing Director

Such an expansion of activities comes with certain challenges. On a daily basis, we are juggling our various roles in terms of EU policy monitoring and advocacy, project development and implementation, providing membership services and facilitating useful exchanges and capacity building. Our world has increasingly become complex and our playing field has changed with emerging new actors influencing health and wellbeing. As we take such "whole-of-society" approach to promoting health equity and wellbeing, it is our role to monitor these developments, new actors and activities, identify "windows of opportunity" and respond adequately so that the health equity perspective is highlighted and put forward as much as possible.

Persisting economic slow-down in most EU Member States has also been affecting public institutions and initiatives targeting the more and most vulnerable members of our societies. We are therefore more committed than ever to pursuing our mission: to champion and help implement what makes individuals and societies in the EU thrive and to keep core values like health equity, justice and solidarity at the forefront, and find sustainable solutions to the challenges that we face.

We are grateful to the EaSI core grant we receive, which facilitates our policy work on the social determinants of health. Our new Horizon2020 project, called INHERIT, allows us to extend into new areas linked to environmental inequalities, health and sustainable development. The various Joint Actions such as CHRODIS and other initiatives described in this annual report support action in Member States and at EU level that promote health, equity and well-being.

I would like to thank the Executive Board and all members and partners for their trust, contributions and commitment to EuroHealthNet. We are pleased to have received such positive external evaluation results, as reflected by some of the quotes included in this annual report. If you, reader of this report, are interested in our work and wish to get on board, please do not hesitate to get in touch!

Caroline Costongs, Managing Director



↳ Clive Needle, Policy and
Advocacy Director

EuroHealthNet at a glance

EuroHealthNet is a European Partnership for improving health, equity and wellbeing. Our aim is to identify, generate, and promote approaches that improve health and reduce health and social inequalities in order to improve quality of life for all people and ensure a strong foundation for European growth.

We know that the health and quality of life of large numbers of European people is being harmed by diseases that are mostly caused by lifestyle-related behaviours like smoking, lack of physical activity, bad diets, and abuse of alcohol. We also know that trying to change these behaviours without addressing the underlying factors driving them (social and economic challenges like unemployment, inequalities, demographic and cultural changes) is often ineffective. To achieve our mission of improving health, equity and well-being we take a multi-pronged, integrated approach and operate across different policy levels and sectors (e.g. health, social, environmental, economic) to influence key determinants of health. This work is not only about improving individual lives and promoting fairer societies, it is about contributing to smart public policy: health is an enabler of social and economic participation and a prerequisite for smart, sustainable and inclusive growth.

The various aspects of our work -network development, policy monitoring, communication and exchange, capacity building, provision of evidence- offer ways to foster change in relevant policies and legislation. EuroHealthNet acts as a knowledge broker between the health and social systems and makes sure the public health community actively engages with the EU priorities. We for example facilitate exchanges with member states' authorities in order to raise awareness on the EU Semester process and ensure that health promotion and disease prevention play a stronger role in the pursuit of social and employment objectives.



↳ David Hargitt, Management Assistance, and Renaud Rollet, Administrator and Financial Officer

EuroHealthNet's office has been located in Brussels since 1996 and staff members are experienced in engaging with the EU Institutions and a broad variety of stakeholders. We also have a good understanding of how evidence and information on health equity can best be introduced in current policy making agendas.



↳ Ingrid Stegeman and Claudia Marinetti, Programme Managers

EuroHealthNet's members and partners collaborate through its three different bodies:

- **Health Promotion Europe (HPE)** is the core high status network that brings together organisations at national and subnational level that are publically responsible for health promotion and disease prevention. Within HPE we aim to identify and implement effective health promotion policy and practice, build capacities and strengthen the resource base and the impact of health promotion across the EU. HPE Members are also involved in PHASE and CIRI activities.
- **The European Platform for Action on Health and Social Equity (PHASE):** through PHASE, our policy development and advocacy body, we engage with and involve our members and additional partners in EU policies and processes like the EU 2020 Strategy, the European Semester, the Social Investment Package and a potential EU "Social Pillar" that can make a real impact on health inequalities on the ground.
- **Centre for Innovation, Research and Implementation (CIRI):** EuroHealthNet's research body. Partners include leading centres of research and public health that are committed to improving the uptake of evidence in policy making processes. CIRI aims to promote evidence-based approaches to health and wellbeing for all.

Health Promotion Europe

Annual and General Council meeting
Study visits and Technical Working Groups
Participation in Joint Actions and projects
JA CHRODIS, JA RARHA, Quality Action,
Mental Health, Health Inequalities initiatives,
Country Visits, Opportunity alerts

Platform for Action on Health and Social Equity

Advancing health in the EU Semester
A collective voice for health and health equity
Policy briefings and consultation responses
Partnerships and collaborations

Centre for Innovation, Research and Implementation

INHERIT • research on health promotion
and sustainable development
DRIVERS • disseminating research
findings on key determinants of
health inequalities
IROHLA • developing guidelines
for health literacy
Evaluations – active and healthy
ageing strategies
-HiNews

Communication and administration



Health Promotion Europe

Over the 20 years of EuroHealthNet's existence, thinking around what is needed to build healthier and more sustainable societies has flourished. There have been growing calls for investments in health promotion strategies for more effective and sustainable health systems. Nevertheless, persistent economic problems have meant that key implementing bodies, like public health institutes, have faced challenges to maintain their funding, while the need to address social and health equity is more essential than ever.

Health Promotion Europe provides EuroHealthNet members with an essential platform to meet, inspire and learn from one another, and re-inforce available resources. Members can also collaborate to help shape and benefit from international initiatives like the WHO Europe 2020 Strategy and the EU Public Health Programmes.

Our Annual Meeting, study visits and country visits provide members with opportunities to update and learn from each other and to raise awareness about relevant initiatives, while our involvement in EU Joint Actions, projects

and technical working groups enable collaboration on a range of health-related topics. Members also receive a range of additional information through our Calls and Opportunities Alert service that they can use to spur further action at national and sub-national level. It is through such activities that we strengthen members' and our collective capacities to promote health and health equity.



→ HPE staff: Anna Gallinat, Communications Officer; Clotilde Cattaneo, Communications Assistant; and Anne Pierson, HPE Manager

"To be a member of EuroHealthNet means not standing alone."

HPE MEMBER ON THEIR EXPERIENCE OF BEING A PART OF THE NETWORK

"A network is a treasure trove of creative and committed people, inspiration, expertise and opportunities. For me personally the past five years have been great in terms of learning, sharing and being able to contribute to more equitable health. It has helped me a lot in my own work and I know it has made a real contribution to the institute I serve."

HPE MEMBER ON THEIR EXPERIENCE OF TAKING PART IN THE NETWORK

Annual and General Council Meeting

Members and partners took part at the Annual and General Council Meeting on 2-3 June 2015, in Newcastle, England to meet and exchange on current public health priorities in the EU and at national levels as well as key developments in their organisations. They discussed developments within the European Commission in relation to health equity, including the new political, investment and regulatory agendas. The EC Directorate General for Employment & Social Innovation presented on health and social investment in the EU Semester process. Participants also considered challenges and opportunities for health promotion globally with particular reference to WHO debates.

Break-out sessions on Technical Working Group themes were organised to launch the start of these groups and to engage in an initial exchange of information. Three inspiring on-site visits took place:

- **'Wellbeing Apprenticeships'** led by the Newcastle City Council, which offers young people 'Not in Education, Employment and Training' (NEET) with the ability to engage in training or employment in the context of an environment that promotes well-being;
- **North East Better Health at Work Award (BHAWA)** which was established by NHS practitioners and encourages work-places in the whole NW region to



↪ EuroHealthNet's General Council Meeting participants in Newcastle, June 2015

achieve high standards of workplace health, based on the outcomes of Health Needs Assessment conducted amongst staff;

- The **Newcastle United Foundation**, which runs programmes to e.g. coach youth, teach youth about history through football, help youth develop employable skills and find a job, and encouraging older people to play walking football. The Foundation's programmes reach approximately 50,000 people.

EuroHealthNet's business was formally debated and approved. Six new Members and Partners were welcomed, and all Members and Partners discussed new opportunities for collective work.



↪ EuroHealthNet members at Newcastle United Foundation visit, June 2015



↪ Caroline Costongs welcomes Sibila Marques, Centre for Social Research and Intervention - Lisbon University Institute (ISCTE-IUL), a new EuroHealthNet partner

Study Visits

Study visits are an important vehicle to facilitate peer-learning and in-depth exchanges between member agencies. The following two study visits took place in autumn 2015:

Action on the Social Determinants of Health: Sweden

A study visit to Gothenburg was organized in October 2015 in collaboration with the Västra Götaland Region, the national association SALAR, the National Institute for Public Health and Stockholm County Council. The purpose was to study actions on social determinants of health and equity. Visits were organized to an important centre for welfare and civic government, as well as an innovative hospital integrating community care, social inclusion and public health. A third visit encompassed a social innovation and entrepreneurial operation at a community shop offering new opportunities for excluded people and a social guidance centre providing advice and support. In addition to these inspiring local examples, briefings were delivered by the hosts on the National Commission reviewing social determinants of health and equity and on regional and municipal initiatives regarding social sustainability. There were also briefings on the use of EU instruments for health system developments



↳ EuroHealthNet study visit in Sweden, October 2015

and integration with employment objectives and on innovative approaches to engage people from migrant and refugee communities in health promotion and social empowerment. EuroHealthNet Members in Finland, Greece, Italy, Netherlands, Slovenia and Spain participated in the visit and shared mutual learning. Follow ups from this learning have been incorporated in EuroHealthNet activities and by participants in countries and regions.

Health Promotion Offices: Hungary

In partnership with the Hungarian National Institute for Health Development (NEFI) we organised a study visit that took place from 16-18 November to explore the development, implementation and maintenance of Health Promotion Offices (HPOs). These were first implemented throughout Hungary in 2013-2014, as a result of a grant scheme operated within the Széchenyi Plan co-financed by the European Structural Funds (ESF). Twenty HPOs were implemented in the most disadvantaged micro-regions. The HPOs take different forms, and are managed by different types of organizations (e.g. hospitals, out-patient clinics, local authorities) depending on context. They establish health



↳ EuroHealthNet study visit in Hungary, November 2015

promotion as an active and integrated part of the community and provide free, individual and community based health promotion services, which vary widely based on local needs. Each HPO brings together local partners like local authorities, GPs and healthcare providers, Roma community lead-

ers, school teachers, social workers etc to ensure these services have a broad reach. The kinds of services provided range from: personal assessments of health status and risk assessment and person oriented counselling; the implementation of lifestyle programmes and health education and health promotion programmes (swimming, cooking classes etc.) at community level in different settings (settlements, workplaces, schools); the organization

and implementation free screenings via e.g. screening buses and “health days”. The Director General of the National Institute for Health Development (NEFI) also introduced participants to the work of the Institute and to Hungary’s health plan 2014-2020. Representatives from EuroHealthNet Members from Belgium, Czech Republic, Finland, Slovenia and the Netherlands took part in the visit.



Technical Working Groups

In 2015-16 EuroHealthNet Partnership launched a series of Technical Working Groups (TWIG) to bring together experts from member and partner organisations who share a common interest around jointly identified health-related priorities. The following TWIGs were established:

TOBACCO

The Tobacco TWIG considered progress on the implementation of the EU Tobacco Products directive, welcomed the adoption of the Roadmap of Actions on tobacco by the WHO Regional Committee for Europe and followed developments with the global Framework Convention on Tobacco Control. Liaison with the European Smoke Free Partnership continued, for example to express concerns at aspects of a potential Trans-Atlantic Trade & Investment Partnership which could have negative consequences for public health.



→ EuroHealthNet is part of the European Smoke Free Partnership

MENTAL HEALTH

The Mental Health TWIG participants concentrated on work taking place in the context of relevant initiatives like the EU Joint Action on Mental Health and Wellbeing and the redevelopment of DG SANTE’s EU Compass for Action on Mental Health and Wellbeing. They also discussed priorities for Mental Health in the different countries represented. A MH-TWIG Update document was developed to be sent out regularly to participants, and face-to-face meetings and teleconferences are planned to advance joint work on this theme.

NON-COMMUNICABLE DISEASES

Participants in this TWIG exchanged on European developments in the area nutrition, healthy diets and physical activity, like the EU Action Plan on Childhood Obesity 2014-2020 and the EU Platform for Action on Diet, Physical activity and Health meeting outcomes. They also focused on the following WHO Europe initiatives: its new nutrient profile model; progress made in relation to its Health 2020 targets; its Physical Activity Strategy for 2016-2025; its policy brief on eliminating trans-fats in Europe.

SUSTAINABLE DEVELOPMENT

The work of this TWIG focused on the 2030 Agenda for Sustainable Development as well as relevant policy documents and studies, including EuroHealthNet's *Policy Précis* on Sustainable Societies and the outcomes of the Plenary on "Healthy People, Healthy Planet" at the 2015 Public Health Conference (see CIRI). TWIG participants responded to the consultation on the EU Strategy for Energy Union 2016 and stressed health and social equity aspects.

ACTIVE AND HEALTHY AGEING

Discussions in this TWIG revolved around relevant initiatives that EuroHealthNet is involved in, like the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA), the re-development of the Healthy Ageing website (www.healthy-ageing.eu) and the outcomes about the IROHLA health literacy project and the Age Friendly Environments (AFE) initiative (see CIRI).

HEALTH SYSTEMS

TWIG participants were updated and consulted on the following EU level initiatives: the Joint Assessment Framework in the area of Health; the EU Health System Performance Assessment (HSPA) initiatives; the European Commission Communication on effective, accessible and resilient health systems and were invited to identify priorities and needs from their countries that can inform the future work of the TWIG.



Participation in Joint Actions and Projects

EuroHealthNet has developed, coordinated and participated in a wide range of projects and Joint Actions funded under the EU Health Programme. This gives HPE Members the opportunity to help shape these initiatives and to engage with an even wider network of bodies working on public health issues across Europe. The learning gained from the outcomes of the projects and Joint Actions is communicated back to members so that they can apply findings to develop capacities in their countries and influence decision makers.

EuroHealthNet is currently involved in the following Joint Actions and Initiatives:

EU Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS) (2014-2017)



The general objective of JA-CHRODIS, which is now in its third year, is to identify, exchange, scale-up and transfer best practices and effective interventions on health promotion and chronic diseases prevention, multimorbidity and diabetes. In total, 63 organisations from 26 countries across Europe participate in this Joint Action, which is being led by the Spanish Ministry of Health and Social Services and the Institute of Health Carlos III (ISCIII).

The health promotion and primary prevention work strand, which is led by EuroHealthNet member BZgA and co-led by EuroHealthNet, completed a report on *"Health Promotion and Primary Prevention in 14 European countries: a comparative overview of key policies, approaches, gaps and needs"*. The report is based on the 14 countries reviews on health promotion and prevention produced in 2014-15. Work-strand partners also collected 41 good practices in health promotion and prevention that were presented in the report *"Good practices in health promotion & primary prevention of chronic diseases"*. We co-organised a confer-

ence on "Joining forces in health promotion to tackle the burden of chronic diseases in Europe" that took place in Vilnius in November 2015. EuroHealthNet was also responsible for organising six study visits to selected good practices that raised the most interest amongst partners, taking into account their potential for transferability.

The good practices and interventions from this and other JA-CHRODIS work strands will be included in a Platform for Knowledge Exchange (PKE) that will serve as online source of information from across the EU on chronic diseases. The PKE will be piloted in late 2016.

EuroHealthNet leads JA-CHRODIS dissemination activities. In this capacity, we amongst other things designed and maintained the website and published newsletters and monthly updates. We also produced a video in collaboration with the European Patient's Forum that introduces the topic and the initiative.

🔗 [For more information and outcomes visit: www.chrodis.eu](http://www.chrodis.eu)



→ EuroHealthNet's Programme Manager Ingrid Stegeman speaking at JA CHRODIS' First General Assembly



→ JA CHRODIS Executive Board

EU Joint Action on Alcohol Related Harm (JA-RARHA) (2014-2016)



EuroHealthNet is one of 32 Ministries, Institutes and other relevant organisations, including several members, taking part in the three year EU Joint Action on Reducing Alcohol Related Harm. This Joint Action has focused on 1) comparable monitoring systems; they developed and translated a survey instrument and collected data from 20 European countries on alcohol consumption, 2) reviewing the scientific evidence regarding drinking guidelines in EU Member States; they did research into how countries define 'low risk' as well as guidelines for young people, and 3) providing guidance and tools to policy makers on effective approaches to reduce alcohol related harm.

We are involved in the dissemination work package of this initiative, which is being coordinated by the Ministry of Health, General-Directorate for Intervention on Addictive Behaviours and Dependencies, in Portugal. During the first two years of the project we produced four newsletters that are available on the RARHA website.

🔗 For more information, visit: www.rarha.eu

The EU Joint Action on Improving Quality in HIV Prevention (Quality Action) (2014-2016)



EuroHealthNet played a key role in this Joint Action that was led by our national Member in Germany, BZgA. The three year Joint Action aimed at increasing the effectiveness of HIV prevention in Europe by developing and adapting practical Quality Assurance (QA) and Quality Improvement (QI) tools. Our role focussed on promoting the use of these tools across public health policies and interventions.

European-level workshops were organised that trained more than 400 prevention experts in the use of five quality improvement tools that are available in a range of languages. The workshops, which encouraged collaboration between these experts, led to a community of quality improvement practitioners who implemented more than 80 practical applications of the tools and published case studies on the Quality Action's website. The Quality Action's final conference in January 2016 in Berlin, Germany, co-organised by EuroHealthNet, brought together more than 120 representatives from governmental and non-governmental organisations to share their experiences in applying five quality



↳ EuroHealthNet's Senior Policy Coordinator Cristina Chiotan speaking at Quality Action's final conference in Berlin, January 2015

improvement tools. Based on the results of pilot applications of QA/QI tools, a "*Charter for Quality in HIV Prevention*" was agreed that provides key principles for reinforcing the effectiveness of HIV prevention through quality improvement. A Policy Kit was also developed to promote the integration of QA/QI into HIV prevention strategies, policies and action plans at EU, MS and Regional levels.

🔗 For more information and outcomes see: www.qualityaction.eu

Mental Health Joint Action and Compass (2015-2018)



EuroHealthNet is part of the Mental Health Policy Consortium (MHPOL) which aims to support the EU Executive Agency for Health (CHAFAE) and DG-SANTÉ's ef-

forts to improve the EU-Compass for Action on Mental Health and Well-being. MHPOL aligns itself with the work of the framework for action developed as part of the EU Joint Action on Mental Health and Well-being and supports the work of the Group of Governmental

Experts on Mental Health and Wellbeing.

EuroHealthNet was also a collaborating member of the three year (2014-2016) EU Joint Action on Mental Health and Well-Being coordinated by the Universidade Nova de Lisboa, Portugal. It aimed to develop previous work initiated under the European Pact for Mental Health and Well-being. The final Conference took place in January 2016, where the EuroHealthNet Managing Director was a plenary speaker.

Health Equity Initiatives

VulnerABLE: Improving the health of those in isolated and vulnerable situations (2016-2017)

EuroHealthNet is taking part in a new pilot project funded through the European Parliament that is being led by ICF Consultancy. It aims to increase our understanding of how best to improve the health of people who are living in vulnerable and isolated situations across Europe. This pilot is taking place in a context in which health inequalities are worsening, particularly amongst children and families from disadvantaged backgrounds, those living in rural/isolated areas; those with physical, mental and learning disabilities or poor mental health and the

long-term unemployed. The project will assess their health needs and challenges as well as identify best practices to support them and ultimately improve their health.

We will in particular be responsible for the capacity building component of this initiative which allows engagement of our member agencies.

🔗 For more information see:
www.health-inequalities.eu

Reducing health inequalities among LGBTI people (2016-2017)

This is another pilot project supported by the European Parliament aiming to reduce health inequalities experienced by lesbian, gay, bisexual, trans and intersex (LGBTI) people. There is substantial evidence demonstrating that LGBTI people experience health inequalities. Social determinants such as discrimination, social exclusion and stigmatisation are well-recognized roots of such inequalities. There is also evidence to suggest that



direct and indirect discrimination against LGBTI people, along with a lack of specific knowledge and sensitivity, also exists within the health sector contributing to and reinforcing LGBTI health inequalities. While the issue of social exclusion and discrimination against LGBTI persons is being tackled to a certain extent through specific EU

legislation, various EU funding mechanisms and national initiatives, the specific topic of health inequalities experienced by LGBTI people requires further investigation.

For more information see:
www.health-inequalities.eu

Country Visits and engaging Members in EU processes

During the course of 2015/16 EuroHealthNet Directors visited members in a range of countries where they met with senior officials to discuss national priorities in health, wellbeing and equity. A focus of these meetings was to make stronger linkages between national and EU policy, in particular in relation to the EU Semester process, ESIF funding and other relevant EU policy processes (see section on PHASE).

PORTUGAL

Linked with participation in the European Social Services Conference, EuroHealthNet carried out an illuminative programme of meetings with authorities and institutions in Lisbon, kindly organised by our member National Institute Dr Ricardo Jorge. We met with: Ministry of Health officials, including the Secretary of State; Directors and senior representatives of the National Health Service including the President of the Board; the National School of Public Health; and with Directors and Department Heads of the National Institute. Discussions focused on reforms to health systems in the context of the EU Semester process, namely the modernisation of primary care and family health facilities, decentralisation, and the implementation of extensive technological developments, both medical and in relation to governance. Portuguese partners shared learning on work across sectors in relation to smoking prevention and nutrition, and legislation supporting such processes. Throughout the meetings, participants highlighted the strong links between national research outcomes, EU health, environment and social programmes and professional development.

LATVIA

Linked to the EU Presidency Conference in Riga on access to health care, EuroHealthNet carried out an extensive programme of meetings and discussions with key authorities and stakeholders in Latvia, kindly organised by our member Riga City Council. EuroHealthNet met with the Ministry of Health including the State Undersecretary for Health, with the national Centre for Disease Prevention & Control, and with various representatives of Riga City Council, including the Chair of the Social & Health Committee, Directors of the Welfare Department and the Healthy Schools initiative. Amongst the subjects discussed were national and municipal strategies for integrated health and social care, EU urban planning policies and funding instruments, tackling health inequalities and social inclusion, vocational training and employment, and research, and Latvia's EU Semester priorities. The Latvian hosts also organized a visit to a local food market to share national health promotion initiatives.



Ineta Zirina at the Riga City "nutrition pyramid" in the market, during the country visit.

FINLAND

EuroHealthNet and The Finnish Society for Social Affairs (SOSTE) co-organised a senior level meeting, in which participants discussed opportunities to tackle health inequalities in Finland using the EU Semester and Social Investment Package as potential frameworks. The meeting took place alongside the ICSW Helsinki Expert Seminar on Social Investments scheduled for 9 June 2015. Managing Director Caroline Costongs presented at the Seminar and led the meeting. The Finnish Public Health Institute, the Ministry of Health and Social Affairs, the Association of Local Authorities and the European Anti-Poverty Network Finland participated in the discussions. It explored how EU mechanisms can advance health and social investment in Finland and reduce health inequalities, linking EU and national level policy processes. Participants also examined the priorities of the new Finnish government in health and social affairs, as well as the EU's social and health agenda.

IRELAND

EuroHealthNet carried out an exploratory series of meetings in Dublin, Ireland. Visits were organised by our member the Public Health Institute. EuroHealthNet met with representatives of health bodies and authorities responsible for health and care planning and implementation in the context of the EU Semester and the economic governance developments in the country. This included the Ministry of Health, Health Services Executive, Royal College of Physicians, Regional Health Promotion agencies based in Galway and Healthy Cities Ireland. EuroHealthNet was also pleased to participate in and report the national launch by the Minister for Health of the Healthy Ireland annual study on population health and wellbeing status. Finally, EuroHealthNet participated in the annual Public Health Conference for the whole island of Ireland, held at the national sports stadium Croke Park.

LITHUANIA

Linked with participation in the EU Joint Action on Chronic Diseases CHRODIS, EuroHealthNet held

meetings with the Ministry of Health in Vilnius, kindly organised by the EU Affairs Division Chief Specialist. EuroHealthNet met with Directors of Public Health and Care departments, Heads of Risk Management and Strategic Development, among others including the country representative of WHO. Discussions focused on measures outlined in the 2015 National Reform Programme and Council Recommendation in the context of the EU Stability & Growth pact. Topics discussed included the wellbeing of children and young people, the development of health related products and services, the roles of municipalities, active ageing strategies, employment and apprenticeships, integrated approaches to sustainable health, transport and environment policies, and tackling health inequalities.

SLOVENIA

Linked with a major national event to follow up the recommendations of the AHA-SI EU co-funded project on active and healthy ageing (see section on CIRI), in the context of the EU Semester and national programmes, EuroHealthNet carried out a series of meetings in Ljubljana, kindly organised by our member the National Institute of Public Health NIJZ. EuroHealthNet spoke about EU developments at the conference and was featured in national media on topics such as tobacco legislation and older people. EuroHealthNet held productive meetings with Institute Directors and senior representatives from several ministries involved in the active ageing collaboration, which included four State Secretaries. In a series of briefing



→ EuroHealthNet's Policy and Advocacy Director
Clive Needle speaking in Slovenia

sessions with senior stakeholders from authorities, expert bodies and civil society, EuroHealthNet presented and discussed on latest policy developments at EU level. Follow up processes will take place in 2016 and beyond, including national reviews and strategies on active ageing, health inequalities and health system reforms.

UK

EuroHealthNet carried out another series of meetings in London with the Department of Health of England, with Public Health England and with the UK Health Forum in September 2015, where we discussed EU policy regarding health inequalities and how we can maintain cooperation considering the current situation in the UK. In addition, EuroHealthNet supported Public Health Wales in the organization of the conference on Sustainable Development and International Health Partnerships in Wales (December 2015). Taking place in Cardiff, this event sought to explore the implications of the Sustainable Development Goals for Europe, the UK



↳ Managing Director Caroline Costongs speaking at the Sustainable Development and International Health Partnerships in Wales, December 2015

and Wales in particular. EuroHealthNet presented on EU policy scenarios in relation to health, environmental, social and economic sustainability and how the concept of sustainable development is paramount to tackling social and health inequalities. EuroHealthNet also co-presented a parallel session on available and imminent EU funding opportunities for health and well-being.

Opportunity Alerts

EuroHealthNet sends out regular Call and Opportunity Alerts, notifying members about:

- Timely information about relevant EU funding calls;
- Opportunities to engage in partnerships or take part in project proposals
- Opportunities to take part in important EU Events
- Information to take part in EuroHealthNet's capacity building activities (e.g. Study Visits, webinars)

This service is exclusively for HPE Members. 22 Alerts were sent between June 2015 and May 2016.



PHASE



Improving population health and reducing health inequalities can only be achieved through strong partnerships across different sectors. That is why EuroHealthNet has established the **European Platform for Action on Health and Social Equity (PHASE)**. EuroHealthNet Members and PHASE partners work together and with other organisations and networks to raise awareness about the social determinants of health and influence the different EU-level processes and instruments that affect them, to promote health, well-being and health equity.

PHASE is therefore our policy and advocacy-oriented body that actively engages with the EU's broader policy strategies, like the EU 2020 Strategy and

the European Semester Process.

This work is crucial in the EU's current political context, to which the European Commission is responding by focusing on economic growth and employment. It is our challenge to demonstrate how health is a pre-requisite to achieving growth and employment but also to highlight the fact that EU citizens systematically value their health above all other aspects of their lives. The initiative on a European Pillar on Social Rights is a potentially positive development that can provide an entry point for PHASE action on promoting health, well-being and equity.

→ PHASE staff: Cristina Chiotan, Senior Policy Coordinator; Ana Oliveira, Junior Liaison Officer; and Rita Fober, Liaison Officer

"It is very important to have the opportunity to work in partnership with organisations 'beyond the health promotion scene', working in the social, education and labour sectors"

PHASE MEMBER

"Fresh and innovative approaches are needed to keep health and social inequalities on the EU's agenda, given strong focus on economic policy. New ways of presenting the issues are required to stimulate interest, encourage participation and attract commitment from officials and politicians."

PHASE MEMBER

In 2015/16 we engaged with a wide range of actors from other sectors and took part in and reported on over a hundred events, meetings, seminars and workshops in Brussels and EU Member States to make links between health, equity and social well-being. The following highlights some of our activities under PHASE:

Advancing health in the EU Semester process

The EU's key economic and social objectives, including those impacting health, are implemented through the European Semester process. As part of this process States prepare National Reform Programmes and the EC issues Country Specific Recommendations (CSRs) on how they can improve efforts to achieve these objectives. This process therefore provides a potential opportunity to help improve and support Member State reforms in relation to health, equity, social inclusion and well-being.

Will EC's Country Specific Recommendations contribute to Health Equity?

Following the release of the EC's CSR in May 2015, EuroHealthNet analysed them with a focus on three issues: 1) recommendations to increase retirement ages, 2) recommendations aimed at children and families, and 3) recommendations concerning health. The analysis found a reduced focus on health promotion and integrated services that prevent and tackle the underlying causes of poor health in recommendations relating to health system reform. It also found that simple calls to increase retirement ages 'in line with life expectancy' need to be considered in the light of Healthy Life Years (HLY), since for example only 6 of the 13 countries receiving CSRs to increase pension/retirement age can expect people to work longer without facing long-term activity limitations. There were also a lack of recommendations on adequate investment in children and families. These findings, which were brought together in a Report, led EuroHealthNet's Managing Director

Caroline Costongs to conclude that: *"Our analysis clearly shows that the EU Semester undervalues the crucial role of health promotion and health investment throughout the life course. Heads of state and governments should reconsider the design of CSRs so that reforms are implemented that benefit health and wellbeing for all European citizens, and contribute to long-term economic recovery at the same time"*

The results of our analysis were presented at a policy dialogue organised by the Coalition for Health, Ethics and Society (CHES) on Economic governance and health (January 2016), focusing on how the European Semester process can contribute to improving European health systems. The CSRs should go beyond assessing the fiscal dimension of health systems and rather foster the health and well-being of citizens.

Participation in EU's Annual Convention for Inclusive Growth

EuroHealthNet staff and a delegation of members participated in the EC's Annual Convention for Inclusive Growth, a reconfigured version of the annual EU Platform against Poverty event, that took place in March 2016.

Prior to the Convention, we participated in several strategic dialogue meetings, opened by Commissioner Marianne Thyssen, with the European Commission



during the course of 2015 that contributed to the organisation of the Convention. We raised the issue of involving local and regional authorities in the EU Semester process and contributed to the debate on the follow-up of the Social Investment Package.

The Convention for Inclusive Growth brought together policy makers and civil society to discuss what the EU can do to ensure that all citizens reap the benefits of truly inclusive growth. Discussions on the European Pillar of Social Rights initiative were central to debates.

Contribution to the consultation of the European Pillar on Social Rights

European Commission President Jean-Claude Juncker first raised the concept of a European Pillar on Social rights in September 2015. This will bring together, build on and complement the full body of EU legislation and initiatives in the area of social and employment policies, to ensure that they support well-functioning and fair labour markets and welfare systems. The EU can apply the Pillar as a framework to provide guidance to EU Member States.

In March 2016, the European Commission put forward a first, preliminary outline of the Pillar. It covers the following three areas: 1) Equal opportunities and access to the labour market; 2) Fair working conditions; 3) Adequate and sustainable social protection. Since the focus of the Pillar affects key determinants of health, it can be an important potential tool to encourage and guide member states efforts' to reduce health inequalities. An important focus of our work in 2016 will be to analyse the EU's proposals and respond to the Consultation.

EuroHealthNet meets EC Cabinets

EuroHealthNet met with Ms. Raquel Lucas of the Cabinet for Vice President Dombrovskis and Ms. Paula Duarte Gaspar from the Cabinet of Health Commissioner Andriukaitis. The meeting reflected 'health in all EU policies' in practice, as it brought together the EC official responsible at the most senior level for the EU Semester, economic development and governance across Europe, and a senior EC official from the Cabinet for health, social and research responsibilities. The parties engaged in a constructive discussion about EuroHealthNet's role to work with national and regional partners on the ground to connect better with needs and priorities agreed between the EU and MS, such as in the na-



↳ Meeting with Cabinet Dombrovskis and Andriukaitis cabinets

tional reform programmes. EuroHealthNet has followed up with further meetings with officials from relevant DGs and briefings for our Executive Board and members.

Dialogue on the EU Structural and Investment Funds (ESIF)

EU Structural and Investment Funds (ESIF) offer substantial opportunities to improve health and health equity. Although health (equity) is not explic-

itly mentioned in the ESIF headline objectives, it is included



in priorities relating to, for example, 'Improving Employment' and 'Social Inclusion and Combating Poverty'. EuroHealthNet therefore continues to encourage its members and partners to work with partners in other sectors to identify and pursue funding opportunities. EuroHealthNet is now part of the Structured Dialogue with ESIF's group of experts for EC DG RREGIO.

We are maintaining the 'Funds for Health' guidance tool (www.fundsforhealth.eu) which provides concrete examples and practical information on how EU

Structural Funds can be directly applied to improve health equity.

EuroHealthNet was part of the advisory board of the HealthEquity 2020 project (2013-2015), which focused on assisting European regions develop evidence-based regional action plans to tackle health inequalities. In December 2015, Managing Director Caroline Costongs moderated a panel discussion at the final Conference on the adoption of evidence-based approaches in regional planning to tackle health inequalities.

A collective voice for health promotion and health equity

"We, as a single institute can never raise a voice in such an effective and strategic way as EuroHealthNet does on behalf of all its members ... We would not get listened to in the same way."

HPE MEMBER ON THE IMPACT OF EUROHEALTHNET

The third EU's Health for Growth' Programme (2014-2020) is the main instrument of the European Commission, DG-SANTE to implement its EU Health Strategy. It has four overarching objectives, namely to: 1) Promote health, prevent diseases and foster supportive environments for healthy lifestyles taking into account the 'health in all policies' principle; 2) Protect Union citizens from serious cross-border health threats; 3) Contribute to innovative, efficient and sustainable health systems; 4) Facilitate access to better and safer healthcare for Union citizens. EuroHealthNet liaises closely with DG-SANTE in a variety of ways:

Meeting with EU Health & Food Safety Commissioner Dr Vytenis Andriukaitis

EuroHealthNet Directors and President met with EU Health & Food Safety Commissioner Dr Vytenis Andriukaitis in October 2015 and presented the mission, aims and objectives of the partnership, and expressed concern at the situation for sustainable health improvement and social equity across the EU in the wake of the well-documented financial crisis and its consequences. Commissioner Andriukaitis engaged positively in a lengthy discussion about what can be done in concrete terms by the European Commission and other Institutions, the factors



→ Meeting Commissioner Andriukaitis

which need most urgent attention, and the instruments which could be available. EuroHealthNet welcomed this dialogue and made several suggestions for follow up work.

EU Health Policy Platform

EuroHealthNet has long been an active member of EC's Health Policy Forum (HPF), which brings together European organisations active in the field of health to engage with each other and DG SANTE in the context of the EU Health Programme. In 2016 the HPF evolved into the 'Health Policy Platform', as DG SANTE launched a new IT platform that it hopes will provide a framework for more effective exchange between EU health stakeholders.

EuroHealthNet has proposed health inequalities to be taken up as one of the topics for the planned online thematic networks, to ensure that this cross-cutting topic becomes more firmly integrated in EU and Member State policy agendas. We will therefore be in charge of piloting one of four thematic areas by coordinating the development of a statement on health inequalities in relation to the EU Social Pillar, to be endorsed by other EU Health Policy Platform members as a tool for policy and advocacy.

EU Platform for Action on Diet, Physical Activity and Health

In 2015/16 EuroHealthNet took part in three meetings of this Platform. These meetings focused on Physical Activity (December 2015), the issue of Food Reformulation (September 2015) and on the Platform's Annual Monitoring Report of 2015 (May 2015), which summarized and analyzed the quality of reporting commitments in 2014. The Report highlighted the need to strengthen Platform's com-

mitments to addressing health inequalities, and the use of EU funds to improve quality of food for the most vulnerable populations (i.e. through food banks).

EuroHealthNet was part of an internal Platform group that assessed the criteria to monitor and evaluate its work.



Gastein Public Health Forum

The European Health Forum Gastein is a leading annual health policy event in the EU that takes place every autumn. At the 2015 event, President Nicoline Tamsma took part in a civil society round table session organized with Commissioner Andriukaitis. Ms. Tamsma highlighted the importance to work on

tackling social and lifestyle health determinants, and on the Health in All Policies Approach in EU Member States and regions. She also stressed the need to advance work on the renewed joint agenda with WHO Europe, especially in relation to health inequalities, NCDs and sustainable systems.

Expert Group on Social Determinants and Health Inequalities

In 2015/16 EuroHealthNet took part in three meetings of the EU Expert Group on Social Determinants and Health Inequalities, where it presented on the

outcomes of the DRIVERS research project that was coordinated by EuroHealthNet (see section on CIRI) and on the VulnerABLE tender work.

Policy briefings and responses to consultations

“For most of us, EU policy can get very complicated - especially when it deals with themes like trade or economic issues - and it's great to have its relevance explained from a health perspective.”

HPE MEMBER

EuroHealthNet's Policy Précis focus on topical issues bridging health and social policies. In 2015/6 we produced four Policy Précis on the following issues:

- **Health Promoting Systems Can Help Inclusive Employment in Europe:** This featured examples from our study visits and evidence on the major contribution better health promoting systems can make to tackling the top priority of EU policy makers.
- **Building People-Centred and Integrated Health Services for Health Equity:** Integrating health systems is a major factor for all States towards more sustainable and effective care; this summary included examples from our members and latest thinking.
- **Health equity and alcohol:** The impact of alcohol abuse has risen to the top of health and social agendas. This publication focused on the inequalities aspects and identified initiatives.
- **Building Sustainable Societies in Europe and Globally:** Health promotion, health inequality and sustainable development agendas are closely related. The adoption of the UN Sustainable Development Goals by world leaders and the launch of EuroHealthNet's major project INHERIT reflects that there is much that can and must be done.

All issues of our Policy Précis are available under the publications section of the EuroHealthNet website.

In 2015/16 EuroHealthNet also responded to a number of EU policy consultations, thereby raising awareness on health and social inequities in several areas relevant to the European Commission's agenda:

- **Long term-unemployment**—highlighting the points for action proposed by EuroHealthNet's DRIVERS project on fair employment and income & social



protection, as well as their relevancy to policies tackling the issue of long-term unemployment.

- **Equality between women and men in the EU** – focusing on the greater difficulties experienced by women, comprising areas such as work, health, caring activities, EU policy-making and violence, and presenting recommendations on how to address gender inequalities.
- **Audiovisual Media Services Directive**—stressing the importance of regulation of advertisements that promote unhealthy dietary habits (food containing high amounts of salt, trans-fatty acids and sugar) and unhealthy lifestyle choice (alcohol and tobacco), as well as adverts and programmes that perpetuate gender stereotypes.
- **Access to health services in the European Union** – contributing to the sustainability of health systems across the European Union by strengthening preventative and integrated services whilst noting the importance of the social determinants of health for effective and meaningful reforms and transformations.

We continue to contribute to EU policy-making through public consultations in 2016, having worked already on answers regarding consultations on work-life balance and the Energy Union.

In addition, we developed a policy briefing in early 2016 examining the European Council's

Recommendation on the integration of the long-term unemployed to the labour market. It describes certain avoidable bad practices that could exacerbate the difficulties faced by people experiencing long-term unemployment, affecting health and wellbeing.

Partnerships and Collaborations

Alliance for Investing in Children

In 2015/6 EuroHealthNet continued its partnership with the EU Alliance for Children, which was set up by EuroChild and others to promote effective, child-centred policies to tackle child poverty and promote child well-being. We contributed to its efforts to collect signatures from European Parliamentarians in support of a Written Declaration launched by 11 MEPs that calls upon the European Commission to introduce specific indicators and use EU funding to implement the Commission Recommendation 'Investing in Children: Breaking the cycle of disadvantage. The Declaration was ultimately signed by 428 MEPs, the highest number supporting a Declaration since 2011.

In addition, we issued a press release welcoming the adoption of an own-initiative report on "Reducing

inequalities with a special focus on child poverty" by the Employment and Social Affairs Committee of the European Parliament. The report makes several recommendations that could make a real contribution to reducing child poverty and improving health equity, which are in line with the evidence from DRIVERS research.

EuroHealthNet also, together with other leading organizations in the fields of human rights, child rights, health and social inclusion, including UNICEF, OHCHR and the European Network of Ombudspersons for Children, sent an open letter to the European Council to take action to ensure children's rights in the EU's migration policy. The letter is available on the following website: www.picum.org



Covenant on creating age-friendly environments

EuroHealthNet was part of the AFE-INNOVNET Thematic Network of local and regional authorities and other relevant stakeholders across the EU that worked together to find smart and innovative evidence based solutions to support active and healthy ageing and develop age-friendly environments across the EU. The EU-funded network ran from February 2014 to January 2016 and involved 29 stakeholders from 16 countries. The network devel-

oped methodologies to help local and regional authorities assess the impact of age friendly environments developed a repository of replicable practices in innovative ICT and services solutions. It also established an open and sustainable platform where European cities and regions can continue to exchange and collaborate on the topic of age-friendly environments. See: www.agefriendly-europe.org



Alliance for Mental Health in All Policies

The EU Alliance for Mental Health in all Policies (EUMHAlliance) aims to influence EU policies in the field of mental health, with a particular focus on mental health in the workplace. Alliance members, such as EuroHealthNet, are committed to

promote and improve mental health in Europe. The EUMHAlliance helps to define a common EU mental health agenda, set EU mental health priorities and contributes actively to EU mental health policy development.

Health and safety in the workplace

EuroHealthNet actively works on advocating for fairer employment and working conditions in order to promote health equity. In 2014-15 EuroHealthNet took part in the European Agency for Health and Safety at Work (EU-OSHA) 'Manage Stress' Campaign. We organised a roundtable on Mental Health at Work for EuroHealthNet members in May 2015, where participants learned about the EU and OSHA's activities in this area and discussed the latest developments in mental health at work. We are currently a partner in the OSHA 2016-17 Campaign on 'Safer and Healthier Work at Any Age'.



Chris Nas, Dutch Association of Mental Health and Addiction Care (PHASE Partner), at EuroHealthNet Mental Health Roundtable, May 2015

See: www.healthy-workplaces.eu

Liaison with WHO Europe

Throughout our business plan, EuroHealthNet aims to link to WHO developments and strategies. Our activities support their European Action Plan to strengthen Public Health capacities, we developed a response to their Consultation on their Physical Activity Strategy in 2015 and we participated at the sixty-fifth session of the WHO Regional Committee for Europe (September 2015). Managing Director Caroline Costongs presented a statement in re-

sponse to the Regional Committee's proposal on Health in All Policies. We indicated the need to ensure actors beyond governments, like NGOs, community organisations and businesses are also involved as partners. We asked for further guidance on health in economic and fiscal policies and highlighted the need to scale up efforts to build capacities of the health workforce to work across sectors.



CIRI

EuroHealthNet's Centre for Innovation, Research and Implementation (CIRI) brings together our core Members, as well as research bodies, senior experts and social innovators with the aim of investigating, analyzing and evaluating effective and sustainable approaches to health and wellbeing across all groups of society.

and practice and contribute evidence-based solutions to tackling societal challenges like social and health inequities and environmental threats to health.

Many of CIRI's activities take place in the context of the EU's Horizon 2020 research programme and the EU's financial instrument to support research for Smart, Sustainable and Inclusive Growth. In line with the Horizon 2020 objectives, we focus on developing and taking part in multi-sectoral research consortia working in the areas of 'social sciences and humanities', and 'health, demographic change and well-being'. The aim of our research activities is to help build the evidence base to influence policy

CIRI's links to universities, research organisations and other networks across Europe means that we are a valuable source of information on the social determinants of health and health equity. We focus on cross-cutting issues like early years, ageing, working conditions, poverty and social exclusion, sustainable development and the environment. In addition, CIRI evaluates European projects, supporting consortia's performance and helping them identify and respond to problems.

"EuroHealthNet is seen as an important stakeholder at the European level, with a significant role in building the evidence base for public health interventions to level up the social gradient."

CIRI MEMBER

CIRI partners and HPE members identify funding opportunities and design projects that contribute to all parties' strategic priorities. The process of

taking part in the development of such proposals and of collaborating with new organisations is in itself of benefit to many CIRI partners:



↪ CIRI staff: Monica Aberg-Yngwe, Senior Research Coordinator, and Elise Schabus, trainee

"The support, advice and actual work by EuroHealthnet staff in developing bids is priceless."

CIRI MEMBER

"The opportunity to bid for a small part of a large project was absolutely crucial to us to enable us to establish a profile amongst partners and develop a little experience for later on."

CIRI MEMBER

The evidence, examples and case studies produced through CIRI's activities have been used to support the work of EU bodies like the Social Protection

Committee, EuroFound and the European Environmental Agency (EEA).

"If EuroHealthNet were not there, there would be no impact for sure"

CIRI MEMBER

INHERIT: Intersectoral Health and Environment Research for Innovation (2016-2019)



In 2015 EuroHealthNet led on the development of a new large scale research proposal under a Horizon 2020 Call. The proposal was successful and the new research project, Intersectoral Health and Environment Research for Innovation (INHERIT) kicked off in January 2016.

consume-dispose' models of economic growth, are damaging the environment and our health, as reflected by our unsustainable food production systems, the high levels of obesity in our societies and the large number of deaths attributable to air pollution. People in lower socio-economic groups tend to suffer most from the consequences of environmental degradation, while they are often trapped in circumstances that make it difficult to adopt healthier behaviours.

Our current lifestyles, characterized by 'take-make-



↳ Lisbeth Hall, National Institute for Public Health and the Environment (RIVM), during the INHERIT kickoff meeting



↳ Angela Donkin, Deputy Director of UCL Institute of Health Equity, during the INHERIT kickoff meeting



↳ INHERIT Kickoff Meeting in Brussels, February-March 2016



↳ Prof Sir Michael Marmot presenting on health equity at INHERIT Kickoff Meeting

INHERIT aims to address this situation. The goal of the research project is to identify effective inter-sectoral policies, interventions and innovations that encourage individuals and communities across Europe to lead healthier and more environmentally sustainable lifestyles. Health equity will take centre stage throughout.

The research will focus on the areas of living (housing, the built environment), moving (active travel) and consuming (food, nutrition, eating habits). It will identify promising practices, test and evaluate pilot activities, roll-out models of good practice, evaluate them on (cost) effectiveness and support

decision makers in efforts to strengthen well-being and environmental sustainability research project.

Over 50 participants, including from EuroHealthNet member agencies, took part in the project Kick off meeting in Brussels on 29 February/1 March. The first year of the project will focus on literature reviews to identify the key environmental stressors of health and how these can best be addressed, to identify criteria for best practice, and on the development of a Common Analytical Framework.

🔗 [For more information, see: www.inherit.eu](http://www.inherit.eu)

DRIVERS (2013-2015) – active take up of results and dissemination



DRIVERS was a research project funded under the EU's Seventh Framework Programme (FP7) that aimed to find solutions to improve health equity through policy and practice in early childhood, fair employment and income and social protection. It was coordinated by EuroHealthNet and involved leading research centres and organisations representing public health, civil society and business, including the University College of London's Institute of Health Equity, headed by Professor Sir Michael Marmot.

DRIVERS put forward four principles to ensure policies are good for health and health equity: 1) the need for policies and programmes to be universal;

2) the need for them to respond to disadvantage; 3) the need to respect the rights of people concerned and adapt policies and interventions to context and 4) the need to use evidence to inform the design of policies. The project formally ended with a final Conference that took place in Brussels in January 2015, in which MEPs and representatives of the Social Protection Committee and the European Commission took part.

EuroHealthNet presented the findings of the DRIVERS project to the EC Social Protection Committee's Indicator Sub-Group (ISG), which is developing a tool to monitor the performance of health systems. Here,

EuroHealthNet argued that this tool must include suitable social indicators if we are to assess how health systems impact on health inequalities.

Several new papers and policy briefs were published since the formal completion of DRIVERS, adding to those produced during the lifetime of the project. New papers arising from the project have been added to the publications page of the website

www.health-gradient.eu, which remains the key repository of the project.

The systematic review of EuroHealthNet on the grey and scientific literature on advocacy for health equity was the second most accessed article published by Milbank Quarterly magazine in 2015 (93: 392 – 437).

Research into Health Literacy of the Ageing Population (IROHLA) (2013-2015)



This FP7 research project led to the identification and validation of 20 interventions, which together constitute a comprehensive approach for addressing health literacy needs of the ageing population in Europe. These interventions served to develop evidence-based guideline for policy and practice for local, regional and national government authorities and to inspire action.

As the project's communication lead, EuroHealthNet produced a number of the project outcomes, including the Policy Guidelines and a 'Brochure of lessons and interviews with project partners'. These and other project outcomes are available on the IROHLA website: www.irohla.eu

In November 2015 IROHLA hosted a Conference in Brussels, *Towards Sustainable Health Systems: The IROHLA evidence-based guidelines on improving health literacy in the ageing population* that was co-organised by EuroHealthNet. We also moderated two plenary sessions on examples from member states and stakeholders of health literacy strategies.

The project involved 20 partners from 10 European countries representing the ageing population, academia, all levels of governments, the business community and other stakeholders to ensure the feasibility, usefulness and effectiveness of the selected interventions. It was coordinated by the University Medical Center Groningen.



↳ Member States panel (Sweden, Scotland, Belgium) at the IROHLA conference in Brussels, November 2015



↳ Pania Karnaki, PROLEPSIS, at IROHLA conference, November 2015

EVALUATIONS

In addition to designing and implementing projects, CIRI staff evaluated projects and can provide this service to our members, partners and outside bodies. This role also enables us to draw on our knowledge of EU-level processes and health and social issues to guide and advise consortia. In 2015/16 EuroHealthNet evaluated two projects on Active and Healthy Ageing, that received co-funding from the EU PROGRESS programme:

Active and Healthy Ageing in Slovenia

This project (2014-2015) aimed to support the development of the new comprehensive Active and Healthy Ageing Strategy for Slovenia. The work focused on three specific themes: promoting seniors employability and postponing retirement decisions; actions to promote active and healthy ageing (e.g. fall prevention campaigns); assisted independent living and long-term care (LTC). The project's broader aim was achieved through: the creation of a sustainable network of relevant sectors and stakeholders in the area of AHA; an analysis of the situation in relation to AHA in Slovenia and of possible solutions, also based on approaches in other countries; the development of recommendations relating to the three specific themes. The project also led to greater awareness of the urgent need to adopt an AHA Strategy in Slovenia.

A major objective and outcome of the project was that it brought together different ministries, in particular Ministers and officials from the Ministry of



↳ Mojca Gabrijelc Blenkus, National Institute of Public Health Slovenia, at AHA-SI conference, January 2016

Labour, Family, Social Affairs and Equal Opportunities and the Ministry of Health to discuss solutions to the many challenges that Slovenian people face in relation to their ageing society.

As part of its evaluation role, EuroHealthNet attended three major AHA-SI Conferences and project Steering Group meetings in Ljubljana.

Active Ageing Going Local (AGL)

This EU co-funded project that focused on integrated activities in the field of active ageing in Italian regions. AGL supported the design and implementation of new, integrated, multidisciplinary strategies to promote active ageing initiatives at the local level. The project has also facilitated the exchange of experiences and expertise among public authorities through a wide range of research and mutual learning activities mainly

implemented by Apulia, Marche and Veneto, the three Italian Regions involved in AGL. EuroHealthNet acted as an evaluator to the project, provided feedback and information for European Policy Guidelines for the planning and implementation of a regional comprehensive strategy on active ageing (www.agl-project.eu/library/), and regularly supported the dissemination of all AGL outputs.

Other CIRI activities

EuroHealthNet is continuously involved in identifying, pursuing and taking part in new research opportunities that can help advance our core objectives of improving health, well-being and health equity. In 2015-16 CIRI also engaged in the following activities:

HiNEWS: Research into Health inequalities & the welfare state

We are involved, as a collaborating partner, in a new project that focuses on why social inequalities in health persist in European welfare states and what can be done to reduce them.

The welfare state (social policy, healthcare, public health policy) can play an important role in mediating the effects of the social determinants of health. The project will use a variety of cutting edge data sources at the micro and macro level and employ state-of-the-art statistical techniques, such as coun-

terfactual policy analyses and multilevel models. Expected outcomes and the impact of this project include the refinement, testing and development of social inequalities in health theory, the identification of policies and interventions with the potential of reducing health inequalities, and a new policy agenda on how health inequalities can be reduced most effectively. The project will impact on both the academic and policy spheres, and EuroHealthNet will use the evidence and learning for its advocacy.

8th European Public Health Conference, Linking health and sustainable development

The European Public Health Conference series was established by the European Public Health Association (EUPHA) to bring together public health researchers and experts for professional exchange and collaboration. Throughout the years these annual Conferences have been growing in both number of delegates and scientific abstracts submitted. The 2015 Conference, which took place in Milan, Italy, involved circa 1700 participants.

EuroHealthNet organised and moderated a plenary session entitled '*Healthy People, Healthy Planet*', which explored the common goals shared by sustainable development and public health. Presentations and discussions focused on how we can implement Sustainable Development Goals, on synergies between public health and sustainable development communities, and on ways of achieving more equitable economic growth while reducing unsustainable consumption patterns damaging our health and the environment. Speakers included: Professor Ilona Kickbusch on the social, environmental and economic dimensions of sustainable development;



→ Caroline Costongs moderating the session *Healthy People Healthy Planet* at the 8th European Public Health Conference, in Milan

Professor George Morris on ecosystem thinking and how this can shape better policies for health and wellbeing; Professor Tim Lang on some of the difficulties facing food, nutrition and sustainability.

EuroHealthNet is planning involvement in the 2016 Conference in Vienna that will focus on '*All for Health and Health for All*', and the 2017 event in Stockholm on '*Sustaining resilient and healthy communities*'. See: <http://www.ephconference.eu>

Communications

Facilitating an exchange of information and advocating for health, well-being and health equity is at the core of what we do. Our communication activities therefore cut across all areas of our work.

"We have often used the EuroHealthNet dissemination channels to promote our work, outcomes and results"

HPE MEMBER



Ariane Moret,
Communications Coordinator

Our communication channels are...

Health Highlights Newsletter – our monthly newsletter offering an overview of all developments pertinent to health, equity and well-being, deriving from EuroHealthNet, the EU Policy context and other relevant bodies.

EuroHealthNet Online Magazine – our bi-annual online magazine with background articles on topical subjects, allowing members to highlight, share and promote their activities.

Calls & Opportunity alerts for our core membership

Press Releases & blogs – a selection of timely articles focusing on important developments in the EU and their relation to health and social equity.

Our **online and social media communications** channels:

www.eurohealthnet.eu

[facebook.com/EuroHealthNet.eu](https://www.facebook.com/EuroHealthNet.eu)

[@Eurohealthnet1](https://twitter.com/Eurohealthnet1)

www.linkedin.com/company/eurohealthnet

<https://www.youtube.com/channel/UCVKKXwTtG9AYlmX4YulwbeQ>

Some facts and figures:



85,938

WEBSITE VIEWS BY
16,588 USERS
IN 2015



112

NEWS ITEMS INCLUDED
IN HEALTH HIGHLIGHTS
REGARDING MEMBER
GOOD PRACTICES



10,625

CONTACTS ON
CIVICRM CONTACTS
DATABASE



2,479

FOLLOWERS



739

SUPPORTERS

How we are funded and how we manage our funds

The Executive Board has set an objective for the 2014 – 17 Business Plan period of increasing the proportion of overall funds received from direct participation, compared to those received from EU co-funded projects, to encourage autonomy and sustainability.

It is important to state that, while we are interested to consider working partnerships with private sector bodies wishing to help address our mission, we have adopted and practice a transparent Code of Conduct for ourselves and our HPE members and Ethical Guidelines for our partnership building. It is vital that our work on evidence building, advocacy and policy development is transparent, ethical and independent.

Therefore also for the period 2015-2016, as in the year before, we have not accepted funding for any of our work from private sources.

From 2014 EuroHealthNet started analytical accounting which improved our reporting capacity in terms of

accuracy and clarity. It allows a precise comparison of expenditures from one year to the next. The annual balance sheet and final accounts are prepared by our external accountant Pyxis and certified by the independent accounting and advisory firm RSM Belgium.

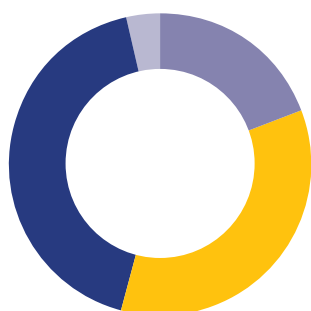
Annual reports and balance sheet are approved and validated by the General Council at its annual meeting.

Our procurement, risk assessment, asset management and financial rules are set out in our “How We Work” document available upon request.



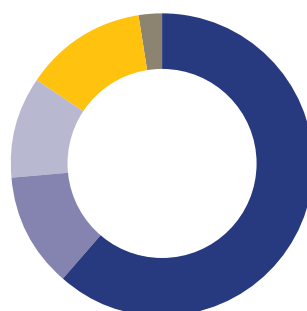
→ EuroHealthNet Executive Board meeting in Brussels

INCOME 2015



■ MEMBER & PARTNER FEES	226,000
■ CO-FUNDED PROJECTS GRANTS	410,000
■ EASI CORE GRANT	494,000
■ RESERVE	40,000
→ TOTAL	1,170,000

EXPENDITURES 2015



■ EMPLOYEES	719,000
■ GENERAL OPERATIONS	143,000
■ EXTERNAL SERVICES	128,500
■ PROJECT DELIVERABLES	150,000
■ VARIOUS	29,500
→ TOTAL	1,170,000

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*awaiting endorsement by General Council June 2016

