



**EuroHealthNet**

EUROPEAN PARTNERSHIP FOR IMPROVING HEALTH, EQUITY & WELLBEING

EUROHEALTHNET ANNUAL REPORT

# MAKING AN IMPACT

2017-2018

# EuroHealthNet overview

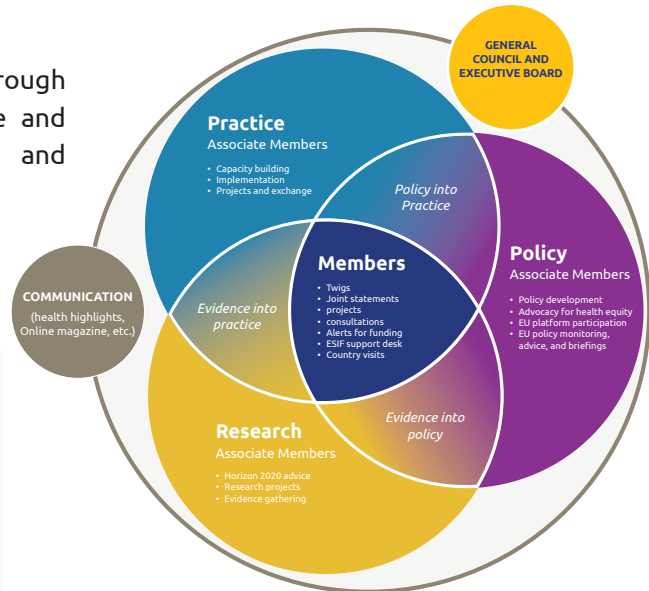
## EuroHealthNet

EuroHealthNet is a not-for-profit partnership of organisations, agencies and statutory bodies working on public health, promoting health, preventing disease, and reducing inequalities.

EuroHealthNet supports members' work through policy and project development, knowledge and expertise exchange, research, networking, and communications.

### Mission

Our mission is to help build healthier communities and tackle health inequalities within and between European States.



## REJUVENATE

In 2016 EuroHealthNet developed the REJUVENATE statement and framework. They examine how modern health promotion approaches can contribute to the UN 2030 agenda including the Sustainable Development Goals. The framework is made up of ten ways to promote health in a rapidly changing world which will create a healthier, more equitable, and sustainable future.

- |  |   |
|--|---|
|  <p><b>1. BE RESPONSIVE</b><br/><i>adapt to challenges and use opportunities</i></p>                |  <p><b>6. BE ETHICAL</b><br/><i>promote fair standards in all we do</i></p>                        |
|  <p><b>2. BE EQUITABLE</b><br/><i>address the 'causes of the causes'</i></p>                        |  <p><b>7. BE NEW</b><br/><i>create and implement new ideas</i></p>                                 |
|  <p><b>3. BE JOINED-UP</b><br/><i>build partnerships and governance across sectors</i></p>          |  <p><b>8. BE ACTIVE</b><br/><i>practice inclusive engagement</i></p>                               |
|  <p><b>4. BE UPDATED</b><br/><i>act smartly to influence 21st century realities</i></p>             |  <p><b>9. BE TECHNOLOGICAL</b><br/><i>understand and apply technical and digital advances;</i></p> |
|  <p><b>5. BE VALUE DRIVEN</b><br/><i>develop values and the right to health in new contexts</i></p> |  <p><b>10. BE ECOLOGICAL</b><br/><i>sustain and protect our environments</i></p>                   |

➔ These items can be found throughout the report, reflecting the REJUVENATE approach

# Highlights of the year: making an impact

## **BUILDING CAPACITIES AMONGST MEMBERS AND THE BROADER PUBLIC HEALTH COMMUNITY TO IMPROVE HEALTH AND REDUCE HEALTH INEQUALITIES.**

Organising:

- Three Country Exchange Visits in Berlin (health equity), Stockholm (mental health and suicide prevention) and Athens (health of migrants and refugees)
- Four workshops on improving access to health services for people in vulnerable situations, in Lisbon, Prague, Cardiff, and Venice
- Two conferences in Brussels, including one on health for LGBTI people

## **FACILITATING COLLABORATION BETWEEN HEALTH AND SOCIAL BODIES ACROSS EUROPE, AND THE EXCHANGE OF KNOWLEDGE AND GOOD PRACTICE.**

- Organising a seminar, this year on tackling health inequalities in a fast changing world and publishing a Call for Action.
- Organising the first plenary of the European Public Health Conference on the need to strengthen the social dimension of health.

## **STRENGTHENING THE EVIDENCE BASE, AND PUTTING EVIDENCE TO WORK.**

Collecting more than 100 promising practices and a policy route map for healthy, fair and sustainable societies in 2040.



### **ANALYSING THE IMPACT OF CHANGING POLICY LANDSCAPES ON HEALTH AND SOCIAL EQUITY AND SUPPORTING THE IMPLEMENTATION OF EFFECTIVE POLICIES.**

Reporting policy developments in the Health Highlights newsletter, contributing to and advocating for the European Pillar of Social Rights, and raising awareness nationally.

### **MONITORING POLICIES AND ADVOCATING FOR HEALTH AND SOCIAL EQUITY AT EUROPEAN AND NATIONAL LEVELS.**

- ➔ Analysing the EU Semester – the EU's macro-economic policy cycle – and how it relates to health.
- ➔ Responding to key EU policy consultations on vaccination, long term employment, EU budgets, and more.
- ➔ Presenting two statements on health and sustainability at the WHO Regional Committee meeting in Copenhagen.

### **MAKING CRUCIAL LINKS BETWEEN SECTORS, POLICIES, ORGANISATIONS AND PEOPLE FOR UNIFIED AND DYNAMIC PROGRESS.**

- ➔ Taking part in high level conferences on digital health, alcohol, and social protection.
- ➔ Producing Policy Précis on gender, health information systems and mHealth.
- ➔ Producing a video on the causes of good health.

# Welcome to EuroHealthNet

It is with great pleasure that we welcome you to this annual report highlighting EuroHealthNet's activities and achievements between June 2017 and 2018. As such, it showcases our work on practice, policy, and research in what has proven to be a very productive year. While we take pride in the quality and diversity of that output, its value also depends on the impact it makes.

That impact was subject to an external evaluation that was concluded this year. To make the relevance of our efforts come alive for you as a reader you will find various quotes and references based on the outcome of that evaluation throughout this report.

Our work on practice supports cross-national learning and the implementation of effective strategies, programmes and initiatives. As of June 2017 our practice platform is also open to associate members. This year, our quest to advance equitable health in and across Europe included dedicated work to improve the health needs of people in vulnerable situations, migrants and refugees, people with mental ill health, and the LGBTI community. We also kicked off our co-leading role on health promotion in the EU's second Joint Action on chronic diseases (CHRODIS+) and contributed to WHO's Coalition of Partners to strengthen essential public health services and capacities across the WHO European Region.

Many European policies that impact on health and health inequalities lie outside the health domain. One of our core tasks is to support our members understand those policies and maximise the opportunities they provide to advance health in their own country or locality. We also bring members' expertise to European tables. Our policy work is all about analysing, advocating, translating, and building two-way bridges across policy areas and governance levels. Our various activities relating to the EU Pillar on Social Rights that EU leaders agreed to enact in the autumn of 2017 are a very good example of this.

Policy and practice should be underpinned by sound knowledge and evidence. Our ambition is to stay on top of the latest developments, and to help generate new knowledge and innovation where possible. The INHERIT project is at its midway point and already producing concrete and ground-breaking results at the interface of sustainable living, moving, and consuming. We are also taking forward a major piece of research on health inequalities in European welfare states (HINEWS). This was shared with a large audience of public health researchers at the European Public Health Conference in Stockholm



Nicoline Tamsma, President



Mojca Gabrijelčič Blenkuš-  
Vice President



Malcolm Ward - Treasurer



Birger Carl Forsberg



Ineta Zirina

where EuroHealthNet organised a plenary session on the need to strengthen the social dimension of the EU. Like the seminar we organised in Helsinki on innovative collaboration between health and social sectors, this event reflects how our policy, practice and research activities mutually reinforce each other.

Good health and wellbeing is a precursor to cohesion, stability and economic growth, and is inseparable from social and economic conditions. As the EU prepares for crucial decisions about its new multiannual financial framework and future role of in health, we will continue to make the case for health equity and support efforts to build healthier communities across Europe. Over the years we have established strong links across policy areas at EU level, and our REJUVENATE framework on promoting health and wellbeing towards 2030 will operate as an inspirational compass.

It is our members, associate members and staff that make EuroHealthNet the strong and unique organisation it is today. We are very grateful to them, to the Executive Board and of course to the European Commission for its financial support via the EaSI programme. We look forward to the future, inviting you to join us, so together we can further advance equitable health in Europe.



José Maria Albuquerque



Prof. Mirosław J. Wysocki



Dr. Paolo Stocco



Nicoline Tamsma, President



Caroline Costongs, Director

A handwritten signature in black ink, appearing to read 'Nicoline Tamsma'.

A handwritten signature in black ink, appearing to read 'Caroline Costongs'.

# EuroHealthNet in Numbers



**431**

participants at events organised  
by EuroHealthNet in nine  
countries



**76%**

100% participants rated EuroHealthNet  
General Council meeting and Seminar in  
Helsinki positively 76% rated it 'excellent'



**58**

members, associate  
members, and observers



**52**

presentations made and  
events moderated



**154**

external meetings  
attended in 2017



**16**

press releases sent to thousands  
of people across Europe



**72%**

increase in magazine  
readership



**6727**

social media followers



**3** COUNTRY  
EXCHANGE VISITS

to Germany, Sweden,  
and Greece



**4** WORKSHOPS

in the Czech Republic, Italy,  
Portugal, and the UK, and for  
the VulnerABLE project



**10**

policy briefings and  
consultation  
responses



**163303**

website views





# The partnership: How we work

EuroHealthNet's work is spread across three collaborating Platforms that focus on Practice, Policy, and Research. Core and cross-cutting activities unite and amplify the partnership's activities. The partnership is made up of members, associate members, and observers. It is governed by a General Council and Executive Board.



## Members

EuroHealthNet members are accountable public bodies with responsibilities and/or expertise in public health, health promotion, health inequalities, disease prevention, or other relevant fields. Usually national or regional institutes, authorities and government departments, they work on improving health, addressing the social determinants of health, and/or reducing health inequalities.

Members are part of all platforms and receive a number of additional core member services. They set the direction of the partnership.

## Associate members

Associate Members are universities, NGOs, civil society organisations, and others which are not necessarily statutory bodies but identify with EuroHealthNet's mission and want to take part in the work of EuroHealthNet that is most relevant to them. Associate members can join one or more of one of the three platforms, and pay a reduced fee for the more limited services received. They have no voting or governance role.

**The [external, four-year] evaluation showed that the way in which EuroHealthNet has supported its members is multifaceted:**

- Empowering agents of change
- Enhancing expertise through capacity building
- Opening doors that facilitate access to EU structures and resources
- Targeted support that encourages an inter-sector approach
- Facilitating European collaboration
- Supporting national initiatives
- Advocating on issues and building alliances
- Working in partnership and providing mutual support
- Making a personal connection, supporting individuals
- Supporting individuals over time



## General Council

The General Council is one of EuroHealthNet's two governing bodies. It is made up of members and partners. The General Council meets annually to discuss progress, and to approve annual reports and budgets. The General Council also elects the Executive Board.

## Executive Board

Members of the Executive board are elected from the General Council. They serve terms of two years during which they develop annual strategies, work plans, and budgets. The Executive board is informed by an external evaluator.

## Observers

Observers are mostly Ministries of Health. They play a specific, mutually agreed role. Their status is reviewed and granted on an annual basis by the General Council, and is by invitation only. They do not have a voting or governance role.

## Staff

EuroHealthNet's office is based in Brussels, near the European institutions, and staffed by a highly-skilled team of 13 full and part time employees working in an active, diverse, and dynamic work environment.



↪ Executive board

# Funding

During 2017, funding came from Member and Associate Member fees, co-funded project grants, and tenders. In addition, a large part of EuroHealthNet's funding comes from a core grant from the EU programme for Employment and Social Innovation (EaSI). Efforts are being made to increase the share of funding from direct participation. Whilst we are interested in collaborating with the private sector, EuroHealthNet does not accept funding from for-profit bodies.

In addition to internal financial management and planning, an external accountant prepares annual financial and balance reports which are then certified by a separate auditing firm. The General Council approves the financial reports at its annual meeting.

EuroHealthNet works in a transparent, ethical, and independent way. We have adopted a Code of Conduct for the organisation and membership, and Ethical guidelines for partnership building. Procurement, risk management, and financial rules are set out in the 'how we work' document which is available on request. We consider and evaluate the environmental impacts of all actions and procurement decisions.

In 2018, a data policy was developed covering the collection, use, and storage of data. It is available on request and can also be downloaded from [www.eurohealthnet.eu](http://www.eurohealthnet.eu).



It is EuroHealthNet's openness and transparency, its flexibility and fairness that facilitate a positive relationship. She [the member representative] sees EuroHealthNet as an organisation she can trust.

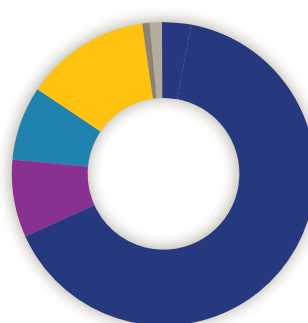
↪ External evaluation

## INCOME 2017



MEMBER & PARTNER FEES	€ 209,000
CO-FUNDED PROJECTS GRANTS	€ 296,000
EASI CORE GRANT	€ 522,000
TENDERS	€ 83,000
MISC	€ 14,000
→ TOTAL	€ 1,124,000

## EXPENDITURES 2017



EMPLOYEES	€ 757,500
GENERAL OPERATIONS	€ 96,000
EXTERNAL SERVICES	€ 91,500
PROJECT DELIVERABLES	€ 155,000
DEPRECIATION	€ 9,000
VARIOUS	€ 15,000
→ TOTAL	€ 1,124,000

# General Council Meeting and Annual seminar

## General Council Meeting

Each year the partnership meets to discuss the strategic direction of EuroHealthNet, its work, and common issues faced by its members. The General Council Meeting is preceded by a half-day seminar. In 2017, the Finnish Federation for Social Affairs and Health (SOSTE) hosted both events.

During the meeting, EuroHealthNet and its partners unanimously agreed on a call and commitment for action on developing sustainable and equitable health and wellbeing, to help achieve the UN Sustainable Development Goals and EU objectives such as the proposed European Pillar of Social Rights. The call urges policy makers, practitioners, and researchers to work in partnership to tackle health, economic, social, and environmental priorities and inequalities.

The call and commitment for action is based on the REJUVENATE Statement and Framework, which was developed in 2016. EuroHealthNet and its members commit to lead and support efforts towards sustainable health equity and wellbeing by applying a life-course approach; acknowledging that disadvantages accumulate over life and a good start in life is key; supporting healthy places, environments, and communities; and working together across sectors and policy levels.

At the meeting EuroHealthNet marked the retirement of its first president, Bosse Pettersson and former treasurer, Helene Reemann, both longstanding Executive Board members.

**"Sometimes it's not easy to keep a network together, because people may be far away from their Brussels working base ... they never gave up, they were always friendly and always very, very supportive ... I am very thankful that I have those people." – Member representative**

↪ External evaluation





## Annual Seminar 2017: Tackling health inequalities in a fast changing world

Europe is confronted by demographic, economic, social, environmental, technological, political, and cultural changes. Income and wealth inequalities have, for example, been rising since the 1970s. Forms of inequality and poverty are changing, whilst the number of people in the EU living at risk of poverty and social exclusion increased by 4.5 million between 2010 and 2014. The world of work is also in transition. New forms of work are emerging and technological advances are reshaping the way we work.

These changes have clear effects on physical and mental health, equity and wellbeing. The greatest impact falls on the most vulnerable people and those with lower levels of education, amplifying social and related health inequalities.

The annual seminar 2017, Tackling health inequalities in a fast changing world, explored how the health and social sectors can work more closely together to address emerging challenges in a rapidly changing world, and meet common objectives in terms of building a fair and socially sustainable society with health and wellbeing for all. Speakers included:

- ➔ Paivi Sillanaukee, permanent secretary of the Ministry of Social Affairs and Health
- ➔ Ana-Carla Pereira, Head of Unit Social Protection, EC DG Employment, Social Affairs and Inclusion
- ➔ Juhani Eskola, Director General of the Finnish National Institute for Health and Welfare (THL)
- ➔ Professor Clare Bambra, Institute of Health and Society at Newcastle University
- ➔ Dr Mojca Gabrijelcic, National Institute of Public Health in Slovenia
- ➔ Elisabeth Bengtsson, Public Health Committee - Region Västra Götaland, Sweden
- ➔ Jussi Ahokas, Chief Economist at the Finish Federation for Social Affairs and Health (SOSTE)
- ➔ Professor Olli Kangas, the Social Insurance Institution of Finland (KELA)
- ➔ Dr Eileen Scott, NHS Health Scotland UK

The presentations and discussions reflected that politics matter to health, since achieving more equitable health is beyond the ability of health care systems, and requires coordinated action across government. The seminar highlighted innovative policies and practices in health and social policy exist; it is possible to work more closely together and have shared agendas with shared responsibility. Outcomes were taken forward by members during discussions at the General Council which informed the Call for Action.

 [More information is available at eurhealthnet.eu](http://eurhealthnet.eu)



# Communication

## Health Highlights

Health, equity, and wellbeing headlines are delivered in a monthly roundup to professionals across Europe through EuroHealthNet's newsletter *Health Highlights*. This year, following a reader consultation and analysis, *Health Highlights* was further developed and refined to give readers a quick and easy-to-digest overview of activities across the continent.

31

[The] activities of EuroHealthNet are valued by members as a means of enhancing awareness and knowledge not only about the EU and how it works, but also the initiatives taken by other members.... Through its publications, newsletter and policy précises members acquire up to date, relevant information.

## EuroHealthNet Magazine

External evaluation

The aim of EuroHealthNet magazine is to inspire professionals. Published twice per year and distributed to more than 12,000 people, the online magazine provides an in-depth look at the most interesting projects and developments in Europe today, showing how challenges are tackled in different settings. Over the last year, the magazine has covered topics such as **new food and activity guidance for the public in the Netherlands, digital marketing to children, the Spanish health promotion strategy, and senior volunteering as a way to improve health and reduce isolation** amongst many others. Readership continues to increase.

[www.eurohealthnet-magazine.eu](http://www.eurohealthnet-magazine.eu)



## News Releases

News releases are published whenever wide audiences both within and outside the health sector need to be informed about important changes and developments. Between July and March 2018, 17 news releases were sent. Topics included the European Pillar of Social Rights, mental health in the workplace, and health equity in the European semester.

<https://eurohealthnet.eu/media/press-releases>



## Calls and Opportunities alerts

Calls and opportunities alerts are sent to EuroHealthNet members approximately once per month or as opportunities emerge. They cover topics such as funding opportunities, new projects, events, and training which members can benefit from. Between July and April 2018, 13 alerts were sent.

Involvement with EuroHealthNet has enabled [the member] to keep in touch with international discussions about health promotion, disease prevention and tackling health inequalities. It has enabled her to contact experts, access a range of opinions on issues, learn about strategies, ideas and good practice from different countries.

↪ External evaluation

## Blogs, Statements, Letters, and Articles

Blogs provide an opportunity to analyse topical issues such as migration and health from a health equity perspective. EuroHealthNet also publishes position statements on behalf of the partnership, often in collaboration with other organisations. This collaboration gives member organisations a stronger voice in Europe.

In the last year topics have included **environment and health, the future of EU health policy, and the need for continued public health research**. More information about the statements is provided in the Policy Platform section of this report.

EuroHealthNet also published two articles in academic journals this year: ***What is the future of Public Health Policy within the European Union?*** (Nicoline Tamsma (EuroHealthNet President) Natasha Azzopardi-Muscat, Katarzyna Czabanowska, and Archie Turnbull) was published in the European Journal of Public Health, and a letter to the editor on ***Promoting health and well-being in the context of the United Nations Sustainable Development Agenda*** (Nicoline Tamsma, President EuroHealthNet and Caroline Costongs, Director EuroHealthNet) was published in the Scandinavian Journal of Public Health.

🔗 <https://eurohealthnet.eu/publications/blogs>

## Videos

EuroHealthNet published a new video highlighting the **value of European action on health and its determinants**. It explains the links between social and economic conditions and health outcomes, and the importance of tackling health inequalities to build successful societies. It has been translated and is available for members to use in their work.

🔗 <https://www.youtube.com/watch?v=BCKYkcBIRTE>





## Social media Channels

EuroHealthNet is active on Twitter, Facebook, and LinkedIn. These channels provide an opportunity to spread news from the partnership and engage in dialogue.



## Websites

**EuroHealthNet.eu** is the online home of the partnership. It includes publications, tools, information and other useful resources. It also includes a members' section for private documents. This year the website content was reorganised and the homepage redesigned based on user feedback.

**Health-Inequalities.eu**, the European Portal for information on health equity, has also been redeveloped and streamlined. It now includes more information on using European funds for projects that tackle health inequalities.

**HealthyAgeing.eu** continues to host resources for active and healthy later years.



**163,303**

VIEWS IN 2017



**14,330**

CONTACTS IN OUR  
DATABASE



**4,073**

FOLLOWERS



**1,246**

FANS



**1,408**

FOLLOWERS



# Practice Platform : *overview*

## What we do

The Practice Platform focuses on the implementation of effective strategies, programmes, and initiatives to promote health and reduce health inequalities.

It facilitates knowledge exchange amongst members and associates about 'what works', and encourages the take-up of good practices through capacity building initiatives. The partnership collaborates on, shapes, and implements new international initiatives including some that can be supported by different EU funding instruments

## Our Impact

### Facilitating knowledge exchange

- Country exchange visits facilitate peer learning and exchanges between agencies
- Outreach visits to meet members and partners bilaterally

### Collaborating to strengthen health promotion and to build capacities

- Defining health promotion and prevention actions to reduce chronic diseases.
- Developing evidence-based strategies to improve the health of people in vulnerable situations.
- Reducing the inequalities experienced by lesbian, gay, bisexual, trans, and intersex people.
- Facilitating information exchange on how to improve mental health and wellbeing.

# Practice: a closer look

## Facilitating knowledge exchange

NEW

### Country exchange visits

Country exchange visits stimulate exchange on best practices and policies addressing core themes, and examine the role of European action in national and regional outcomes. They enable senior staff from EuroHealthNet Member organisations to examine how common issues are addressed in different contexts. Between mid-2017 and mid-2018, three visits took place.

#### IMPACT of Country Exchange Visits:

- Acquiring new knowledge, understanding and insight
- Personal and professional development, renewed confidence and motivation
- Discovering new ideas, backed by evidence - concrete projects and research
- Inspiration to develop and implement new strategies, policies and initiatives
- Finding new contacts and creating opportunities for bi-lateral exchange

↪ External evaluation

### HEALTH EQUITY AND PREVENTIVE CARE ACT IN GERMANY – THE BERLIN EXPERIENCE (BERLIN, GERMANY, OCTOBER 2017)

The *Health Equity and Public Health Act*, recently introduced in Germany, aims to reduce health inequalities, reduce health risks, and support self-reported good health. The Act foresees a mandate for all social health insurance funds (including private funds) to support this new health promotion structure, and improved coordination between bodies that can promote and enable good health. During this Country Exchange Visit, hosted by The German Federal Centre for Health Education (BZgA), participants explored what other countries can learn from the German experience and visited a number of local initiatives in Berlin. They also explored how EU processes and instruments can support health equity at national and local levels.



### APPROACHES TO SUICIDE PREVENTION AND MENTAL HEALTH PROMOTION IN STOCKHOLM AND THE EU (STOCKHOLM, SWEDEN, NOVEMBER 2017)

The aim of this visit, organised in collaboration with Stockholm City Council, was to examine approaches to suicide prevention and mental health promotion in Stockholm and in the European Union. Delegates heard about the guidelines for suicide prevention in Sweden, emergency support services, and discussed mental health promotion, policies, and services in various European countries. Participants discussed the Swedish national suicide prevention

strategy, investment strategies such as social impact bonds to reduce sick leave, as well as digital tools to support mental resilience.



Support from EuroHealthNet has helped [the member representative] to show her colleagues in the Council that the concept of health promotion is not limited to the health sector and enabled [the city's] welfare department to engage with a range of other departments that go beyond health and social care to include education and environmental health.

↪ External evaluation



### MIGRANT AND REFUGEE HEALTH (ATHENS, GREECE, DECEMBER 2017)

This Country Exchange Visit was hosted by the Institute of Preventive Medicine, Environmental and Occupational Health (Prolepsis) and focused on the Greek approach to addressing the health needs of migrants and refugees, and to training health staff. Participants learned about the European initiative Mig-HealthCare, led by Prolepsis, which aims to reduce health inequalities by improving the physical and mental health services delivered to migrants. Participants also visited a local refugee camp which sparked further discussions on the role of local and regional health services in health promotion and prevention and community integration, and the European approach to addressing the health needs of migrants and refugees.



🔗 Summaries of the visits can be found at [EuroHealthNet.eu](https://eurohealthnet.eu), and full documentation is available in the Members' section of the website.

## Outreach visits

In addition, EuroHealthNet staff made several outreach visits. These included bilateral meetings in the following countries to exchange information, learn about the priorities of each organisation, and investigate how EuroHealthNet can help:

- **France:** Santé publique France / City of Nice
- **Belgium:** the Walloon Agency for a Life of Quality (AVIQ) / Belgian Federal Public Service for Health, Food Chain, Safety and Environment
- **Italy:** Tuscany region / the Puglia region / Federsanita Anci
- **Finland:** Finnish Society for Social and Health (SOSTE)
- **Austria:** Austrian Ministry of Health
- **Germany:** the Federal Centre for Health Education (BZgA)

## Collaborating to strengthen health promotion and build capacities

EuroHealthNet leads and participates in a number of international projects, initiatives, and actions that strengthen and develop health promotion practices. This enables members of the partnership to stay informed about and use the most up to date, evidence-based knowledge.

### Defining health promotion and prevention actions to reduce chronic diseases.

EuroHealthNet is a partner in the CHRODIS+ Joint Action (2017-2020) which focuses on the implementation of policies and practices that have proved to be effective in reducing the burden of chronic diseases and related premature death and disability.

EuroHealthNet is leading work on health promotion and disease prevention in close cooperation with its member, the Finnish National Institute for Health and Welfare (THL). Since CHRODIS+ began in September 2017, EuroHealthNet has analysed and assessed countries' health promotion and disease prevention landscapes. The organisation of 15 policy dialogues at national level and two at European level has also begun. Work is now underway to coordinate the transfer of good practices in health promotion across Europe, particularly those targeting children, the working population, and older people. EuroHealthNet is also looking into ways to better integrate health promotion and disease prevention in the healthcare and wider social care systems. Five member agencies are participating in CHRODIS+



**Learning from the capacity-building projects and wider involvement in EuroHealthNet activities has enabled members to take advantage of opportunities to apply for EU resources to effect change at a national level.**

↪ [External evaluation](#)

### Building capacities to improve the health of people living in isolated and vulnerable situations

The VulnerABLE project (2015-2017) identified evidence-based strategies to improve the health of people in isolated/and or vulnerable situations. It specifically addressed, for example, children and families from disadvantaged backgrounds,





those with physical disabilities or poor mental health, those from lower income brackets, the elderly, the homeless, and prisoners. EuroHealthNet was a key partner in this project funded by the European Parliament and led by ICF, and on coordinated the task on capacity building work.



In summer 2017, EuroHealthNet organised four capacity building workshops the Czech Republic, Italy, Portugal, and the UK. Each workshop focused on specific target groups and addressed common themes like inter-sectorial collaboration and service design. They provided participants, including delegates from member agencies, with insights on effective policies and approaches to improve the health of the groups addressed by the project.

Many outputs, including a policy guidance framework and a toolkit for capacity building are available on the project website.

## Exploring inequalities experienced by lesbian, gay, bisexual, trans, and intersex people

EuroHealthNet was a partner in this project to increase understanding of how best to reduce specific health inequalities experienced by lesbian, gay, bisexual, transgendered and intersex (LGBTI) people. Health4LGBTI focussed in particular on overlapping inequalities stemming from discrimination and unfair treatment on other grounds (e.g. older, younger, refugee, immigrant, disability, rural, poverty). Two members of the partnership were also involved: the Veneto Region (Italy) led the project and the NIPH-NIH (Poland) was a partner. The initiative was funded by the European Parliament.

**Involvement in EuroHealthNet has provided a valued source of ideas and a sounding board for exploring the feasibility of initiatives and strategies to address mental health issues at a European Level.**

↪ [External evaluation](#)



EuroHealthNet's role concerned knowledge exchange, organisation, and moderation of the successful final conference, which was held in February 2018.

The outputs of the project include a training package for health professionals on how to reduce health inequalities amongst LGBTI people, and conclusions of research into the causes of inequalities and barriers to providing care.

🔗 [Resources are available on the project website.](#)





## Facilitating information exchange on how to improve mental health and wellbeing.

Building on the work of the EU Joint Action on Mental Health and Wellbeing and its deliverables, in particular the European Framework for Action on Mental Health and Wellbeing, the European Commission established the EU Compass for Action on Mental Health and Wellbeing. The compass is a mechanism to collect, exchange, and analyse information on policies and activities between Member States and non-governmental stakeholders in mental health. In this last year of the Compass, priority areas included the prevention of depression and promotion of resilience, mental health in the workplace, mental health in schools, and the development of integrated governance approaches.

As part of the consortium commissioned to further develop the Compass, EuroHealthNet supported the participation of interested members and partners in the various activities organised, including Mental Health Forums, surveys, and the collection of good practices. EuroHealthNet also supported the implementation of national mental health awareness raising workshops.

## Encouraging the use of European Structural and investment funds to improve health and reduce health inequalities



European structural and investment funds (ESIF) are five separate funds designed to reduce inequalities within and between EU Member States by supporting investments in job creation and by contributing to a more sustainable and healthy European economy and environment. The European Commission and Member States manage the funds, which represent a large percentage of total EU expenditures. There is much potential for Member States to use some of these funds to improve health and to reduce health inequalities, but the processes involved in doing so can be complex.

EuroHealthNet is therefore engaged in various activities that build on its earlier work to develop the expertise of public health and health promotion professionals in this area. It is, for example, involved in a project led by Milieu that aims to build capacities to use ESIF funds to (i) improve access to health-care, (ii) support the reform of processes for effective and resilient health systems and (iii) support active and healthy ageing, healthy workforce, health promotion and disease prevention. During the course of 2018, EuroHealthNet will be involved in the development and implementation of three thematic capacity-building workshops and the final conference and in the communication and dissemination of the initiative's outcomes.

EUROPEAN PORTAL FOR ACTION ON  
**HEALTH INEQUALITIES** 

In addition, EuroHealthNet continues to run an ESIF support desk, providing information, advice, and updates to member organisations interested in the Funds. Information about the funds, how they can be used for health-related projects, and how to apply has been developed and published on the [health-inequalities.eu](http://health-inequalities.eu) portal.

# Policy Platform : *overview*

## What we do

The policy platform aims to ensure that policy initiatives at European and (sub) national levels are joined-up, and reflect real needs on the ground. It forms a vital link, translating European policies and initiatives for national audiences, and ensuring national and regional bodies have a strong representation in Brussels. The policy platform monitors and influences changing policy landscapes in health and related fields, advocating for a health in all policies approach.

## Our Impact

### Informing the policy process, and advocating for health

- Translating European policy and initiatives for member and wider national and regional health audiences with policy précis and factsheets.
- Monitoring the European semester (economic and fiscal policy coordination) and assessing its impacts on health.
- Supporting the development of the European Pillar of Social Rights and helping members to explore its potential
- Providing expert opinions to public consultations that feed into policy and action

### Making the connections and strengthening links

- Engaging with European policymakers and participating in key events
- Forming alliances with other organisations to widen impact, collaborate, and influence
- Joining forces for a stronger collective voice to develop shared positions and statements

# Policy: a closer look

## Informing the policy process, and advocating for health



### Policy Précis and factsheets: mHealth, gender equality, the European Pillar of Social Rights, and using health and social data to monitor health inequalities.

Policy Précis give a clear and concise overview of policy, research, and action on specific issues at European and national levels. This year's policy précis addressed the growth of mHealth, the impact of gender (in)equality on health, and using health and social data to monitor health inequalities.

EuroHealthNet is seen as an organisation that listens, evaluates and takes action as an effective advocate in the context of public health. As a partnership it highlights issues, consults its members, judges what is important and distils this into a position that is presented at a European level to effect change.

↪ External evaluation

In 2017, the European Commission developed a 'European Pillar of Social Rights', a set of principles, initiatives, recommendations, and monitoring measures that will affect European labour markets and welfare systems. EuroHealthNet published a factsheet explaining the new measures and their relevance for health.



"EuroHealthNet is really a door-opener to European Commission activities and also provides expertise and at a time when so many agencies are changing. It provides an important knowledge base to keep on track about new developments in Europe in terms of health promotion, disease prevention and equity and health. This is really important."

↪ External evaluation



## Monitoring the EU's broad economic policies and making the links to health



The European Semester is the European Union's economic policy coordination mechanism. It is used to analyse EU Member States' economic situation, monitor progress, and provide country specific recommendations towards the EU2020 strategic objectives. As it provides recommendations for progress in national economic and social policy, it can have an impact on health and health equity. The EuroHealthNet partnership believes more could be done to improve health sustainability through the semester process.

In November 2017, EuroHealthNet published an analysis of how three key social determinants of health are addressed in the EU semester process: (i) Access to health care, for all population groups; (ii) Early childhood education and care; and (iii) Poverty and income inequalities. It also looks at how these factors are addressed in reports and guidance related to a selection of countries: Austria, Slovakia and Ireland.

The analysis highlights possible entry points and opportunities for tackling health and social inequalities, and how integrating the principles of the European Pillar of Social Rights (see below) could increase the impact of the EU Semester as a coordination tool for social, health and well-being policies.

## Supporting the development of the EU Social Pillar

EuroHealthNet contributed to the process of shaping the EU's new Pillar of Social Rights in the preparatory phases. The aim of the pillar is to stimulate upward convergence towards better living and working conditions. By addressing these conditions, it will influence health outcomes. The 20 principles cover health care; access to social protection, work/life balance; childcare and support for children; and education, training and life-long learning.

The agreement to enact it, which came in November 2017, was a public health milestone.

Since the enactment of the pillar, EuroHealthNet has worked with members, associates, and partners to establish how the pillar can be used as a tool to strengthen health and reduce health inequalities in their countries, and to ensure that policies are aligned.

## Providing expert opinions to public consultations

The European Commission and other organisations regularly organise consultations, the results of which feed into future policy and action. Many member organisations do not have the capacity to respond to all relevant consultations, so EuroHealthNet supports them by collecting opinions on specific issues, and compiling them into collective responses. This also strengthens their position in the policy-making environment. In the last year, EuroHealthNet has responded to a number of consultations. The following highlights some of the main points raised. A full list of responses and their content can be found on the EuroHealthNet website.

**EuroHealthNet is seen as an organisation that not only listens to the views of its partners, but also facilitates the sharing of ideas to develop a position to advocate for action on issues in the context of health promotion.**

↪ External evaluation

### ON THE POST 2020 MULTI-ANNUAL FINANCIAL FRAMEWORK (MFF)

This consultation was part of a review of all current EU spending programmes, revenue measures, political priorities, and commitments. There is serious concern that some public health, social and cohesion programmes could be merged, reduced in scale and scope, or ended. EuroHealthNet submitted three responses to this consultation, which stated that good health and wellbeing is a precursor to cohesion, stability, and economic growth.

EuroHealthNet stressed that in the next multiannual budget, the EU's role for health and social equity should be further developed to support a stronger, fairer Europe. There is a need for a common strategic vision based on EU Treaty objectives on wellbeing and cohesion, taking forward the principles of the European Pillar of Social Rights, and the Sustainable Development Goals. All future EU expenditure programmes should adhere to such a strategic vision and ensure that upcoming EU policies on digital single markets for health, food chain policy, agricultural priorities and cohesion policy, amongst others, are aligned and broadly reinforce one another.

### ON VACCINATIONS

This response addressed vaccine hesitancy, vaccine policy, and EU coordination. EuroHealthNet stressed that priority should be given to addressing the needs of the underserved. This requires better commitment, investment and outreach programmes to tackle the under-coverage of marginalised, migrant, or socially -disadvantaged children and families. It is important to invest in health promotion and education programmes, and fight vaccine hesitancy by providing transparent and evidence-based information to the public in targeted and tailored ways.

### ON HEALTH AND CARE IN THE DIGITAL SINGLE MARKET

EuroHealthNet's response was summarised in the European Commission's synopsis report of the consultation: 'EuroHealthNet gave positive feedback on the Roadmap with caveats calling for more action on trust, inequalities and access for all'

### ON THE EU URBAN AGENDA: AIR QUALITY, INCLUSION OF MIGRANTS AND REFUGEES, AND URBAN POVERTY

Concerning air quality, EuroHealthNet considers that integrated approaches combining different policy areas need to be developed to enable people to engage in healthier and more environmentally sustainable lifestyles. These approaches need



to consider health, environmental, social and economic impacts simultaneously to create healthier cities. EU funds should be used in a complementary way to support action from all relevant sectors and concentrate action at community level.

Concerning the inclusion of migrants and refugees, EuroHealthNet noted that actions that support and facilitate social and labour market integration of migrants are important ways of addressing health inequalities while supporting diversity and participation in local communities. It is important that action recognises the need to endorse the rights of migrant children and include access to health care and social protection.

Concerning urban poverty, EuroHealthNet noted that it is crucial to link strategies that tackle health inequality and poverty as both are intrinsically linked. Health problems accumulate and enhance social problems and vice versa.

## ON THE LONG-TERM UNEMPLOYED RECOMMENDATION

The link between unemployment and ill-health is well established. Unemployment has a higher negative impact on the physical and mental health of people from low socio-economic groups. These effects are compounded by long-term unemployment. Health services can play a useful role for integrated and personalised approaches that support the long-term unemployed, but more emphasis is needed on the importance of the right balance between flexibility and security in employment.



## Making the connections and strengthening links

### Engaging with European policymakers and participating in key events

Throughout the year, EuroHealthNet meets European policy makers to exchange information on changes, progress, and to stress the need for effective action on health equity and health promotion. Between mid 2017 and mid 2018 EuroHealthNet staff met with a number of officials, and spoke at and moderated several important events.

- ➔ The Ministerial Health and Environment conference in Ostrava (speaking) June 2017.
- ➔ Our Health futures, high level foresight workshop in Leuven (active engagement) July 2017.
- ➔ 14th International Conference on Urban Health in Coimbra (speaking) September 2017.
- ➔ The FRESHER workshop on future scenarios for health in Brussels (speaking) September 2017.
- ➔ Transforming Food Chains for better health and nutrition in Gastein (moderation) October 2017.
- ➔ The Estonian Presidency Digital Health conference in Tallinn (active engagement) October 2017.
- ➔ The Estonian Presidency Cross Border Alcohol conference in Tallinn (moderation) October 2017.
- ➔ The European Conference on Biodiversity and Health in the Face of Climate Change (speaking) October 2017.
- ➔ Federal Policy Dialogue on Anti-Microbial Resistance in Belgium (moderation) November 2017.
- ➔ Workshop on the future of EU health policy in Stockholm (speaking) November 2017.
- ➔ Macro-economic Policies and Health in Brussels (speaking) December 2017.
- ➔ A seminar on Gender and Women's Health in Brussels (speaking) December 2017.





## Forming alliances

EuroHealthNet participates in a number of platforms and alliances, and collaborates with WHO Europe on a range of public health initiatives.

### THE EU PLATFORM ON DIET, PHYSICAL ACTIVITY, AND HEALTH

EuroHealthNet is a member of the EU platform for action on diet, physical activity, and health which is a forum of European organisations including NGOs, and the food and advertising industries. As of 2018, until 2020, EuroHealthNet supports the ICF team in their annual monitoring and evaluation of the EU Platform commitments for the European Commission's DG for Health and Food Safety. EuroHealthNet's input relates specifically to reviewing the monitoring framework, case-by-case individual qualitative assessment, and reviewing the final analysis and annual monitoring reports prepared by ICF.

### THE ALLIANCE FOR INVESTING IN CHILDREN

EuroHealthNet is a key member of the Alliance for Investing in Children, a broad coalition of organisations working together at the European Level to tackle child poverty and promote child wellbeing, taking a child-rights based approach.



The Alliance promotes effective and comprehensive policies to promote child wellbeing by feeding into the development of relevant European and national policies and funding programmes. Alliance members meet regularly to exchange intelligence to identify the best entry points for collective action. They have developed and issued joint statements on, for example, the Social Pillar and the Multiannual Financial Framework.



EuroHealthNet hosted a meeting with EU officials from five DGs to discuss the importance and status of the EC Recommendation on investing in children, and to encourage and facilitate more coordinated action around its implementation. In early 2018, the Alliance organised a side-event at the Annual Convention for Inclusive Growth, and plans to organise a meeting with health attachés from Member State representations to the EU.

### THE EUROPEAN ALLIANCE FOR MENTAL HEALTH: EMPLOYMENT AND WORK

EuroHealthNet is part of this informal coalition of organisations working to promote mental health in the workplace, to advocate for equal access to employment for people experiencing mental ill-health, and to stimulate appropriate policy action. In 2017 the EUMH Alliance organised, in collaboration with the European Committee of the Regions Interregional Group on Health and Wellbeing, the successful event 'Mental health in the workplace – A multi stakeholder dialogue'. Nicoline Tamsma, EuroHealthNet's President, opened the event and chaired the first session on 'Why international action is needed: Addressing the socio-economic factors of mental health at work'. In 2018, EuroHealthNet took over the chair of the alliance. Activities in 2018 include the submission of amendments to the work-life balance directive, a statement for the World Day for Safety and Health at Work, an analysis of the Country Specific Recommendations with a focus on mental health, and speaking at various events.



### OTHER ALLIANCES

EuroHealthNet is also a partner in the Covenant on Demographic Change, the EU Occupational Safety and Health Administration (EU-OSHA) healthy workplaces campaign, and the South-Eastern Europe Health Network (SEEHN).

## WHO EUROPE

EuroHealthNet has a long history of engagement and collaboration with WHO-Europe. Over the past 10 years, the EuroHealthNet office in Brussels has been involved in various activities with colleagues from the WHO-Europe Copenhagen, Bonn, and Venice offices. These activities included a general exchange of information and experiences on various topics like health inequalities, social determinants of health, working across sectors, environmental health, health economics, and health promotion advocacy and Health in All Policies.

**EuroHealthNet provides a gateway to connect with institutions and agencies in other Members States.**

↪ External evaluation

## WHO Regional Committee

The EuroHealthNet Director presented two oral statements to the 67th session of the WHO Regional Committee for Europe. The Statements addressed the 'Roadmap to implement the 2030 Agenda for Sustainable Development, building on Health 2020 – 'the European policy for health and wellbeing' and the 'outcomes of the Sixth Ministerial Conference on Environment and Health'.

The statements stressed that a 'determinants approach' to health is the best way to link public health and the sustainability agenda. This approach involves active mobilisation of other sectors, achieving a participatory society, guidance on the commercial determinants of health, and strengthening public health and health promotion institutions.

**[The member representative's] association with the partnership since 2004 has enabled her to actively participate in the national policy changes that benefitted her nation**

## WHO Environment and Health Economics

EuroHealthNet also participated in the WHO-Europe Environment and Health Economics Network meeting. The WHO EHEN network facilitates implementation of WHO Europe's strategic framework on environmental health and economics. The meeting focused on the circular economy, and the impacts of proposed and partly implemented circular economy models on health.

↪ External evaluation



## WHO Coalition of Partners to strengthen Public Health Services

In order to strengthen comprehensive public health services that can contribute to the achievement of the Sustainable Development Goals (SDGs), the WHO set up a Coalition of Partners in 2017. Agreed actions are delivered through collaborations between members of the coalition, pooling together expertise and other resources. EuroHealthNet is leading a small group of partners, including the International Union for health promotion and Education (IUHPE) and the Austrian Health Foundation, to develop an online guide that supports states to set up adequate health promotion services.

## WHO Health Information Initiative

Through the European Health Information Initiative (EHII), the WHO Regional Office for Europe aims to improve the information that underpins health policies in the European Region. The WHO, in cooperation with the European Commission and the OECD, is collaborating on modern health data and indicators. They are building mechanisms to support and assist Member States striving to develop and improve their public health related statistics systems, and indicators and data related to wellbeing. Bosse Petterson, honorary advisor to EuroHealthNet, participated twice in meetings contributing advice on implementation and policy relevance.



## Other WHO Initiatives

EuroHealthNet contributed to the WHO ad hoc Expert Group on health promotion for migrants and refugees (March 2018) and to the ad hoc Advisory Group on taking forward the Shanghai Declaration on health promotion in the Sustainable Development Goals (December 2017). EuroHealthNet contributed health promotion and determinates perspectives to the High-level regional meeting - Health Systems Respond to NCDs: Experience in the European Region in Sitges, April 2018



## Joining forces for a stronger collective voice

EuroHealthNet has released a number of joint statements throughout the last year, many in collaboration with the EU Health Policy Platform, an EC-led knowledge exchange platform. These were:

- Call to action on Migration and Health (Policy Platform)
- Joint Statement on Improving the Employment of People with Chronic Diseases in Europe (Policy Platform)
- The Post-2020 MFF Must Invest in Children and Aim to End Child Poverty (EU alliance for investing in children)
- The Continued Need for Public Health Research in Europe (EuroHealthNet, EUPHA, and EPHA)
- EU: Do More for Health (multiple organisations) EuroHealthNet supports the #EU4Health campaign but has not co-signed any statements.

# Research Platform : *overview*

## What we do

Policy Makers and professionals need a reliable evidence base on which to develop their actions and investments. EuroHealthNet's research platform provides that. It shapes and identifies opportunities and leads research projects relevant to health promotion and the social determinants of health. It supports research bodies, experts, and social innovators to disseminate results and translate evidence into policy and practice.

## Our Impact

### Leading in research to inform policy and practice

EuroHealthNet leads the **INHERIT research project**, identifying ways of living, moving, and consuming that protect the environment and promote health and health equity

### Influencing the research agenda

Organising the first plenary at the **European Public Health Conference in Stockholm**

### Connecting and informing researchers

A new **research newsletter** provides an overview of the latest publications and opportunities.



# Research: a closer look

## Leading in research to inform policy and practice.

### INHERIT



EuroHealthNet leads INHERIT, a research project (2016-2019) involving a multi-disciplinary consortium that is funded under the EU Horizon 2020 research and innovation programme.



INHERIT is contributing to more sustainable societies by defining effective policies, interventions and innovations that can encourage people to live and behave in ways that simultaneously improve environmental conditions while also improving their health. The focus is on improving conditions for people in vulnerable situations in particular, and enabling them to improve their health. The interventions cover the areas of living (green space and housing), moving (active transport), and consuming (food).



Amongst the main outcomes developed during the course of 2017-2018 were:

- ➔ An online database of 'promising practices' featuring almost 100 initiatives from across Europe that promote environmental sustainability, health, and contribute to health equity.
- ➔ An extensive 'visioning, scenario-building and back-casting' process, which resulted in the development of four future scenarios of what more sustainable societies could look like in 2040.
- ➔ The process also led to a policy route map, highlighting 20 policy interventions that are overarching or which focus on the INHERIT areas of living, moving and consuming, which can lead to more environmentally sustainable, healthier and more equitable and European societies.

INHERIT partners are defining and implementing 15 'pilot studies' in Europe. These were selected from, or inspired by, the promising practices identified. They involve piloting a new initiative, or investigating specific aspects of an existing practice in depth, or transferring a practice from one country to another. A qualitative evaluation of almost all pilot studies will be undertaken to examine the impacts of inter-sectorial collaboration. Approximately half of the pilots will undergo quantitative evaluations while a third will undergo cost-benefit analysis.



This year EuroHealthNet organised the INHERIT project steering group meeting in Athens, hosted by Prolepsis (a EuroHealthNet member) and a 'back casting' workshop in Brussels together with the Centre for Sustainable Consumption and Production (CSCP).

🔗 [For more information, and to follow the progress of the pilots visit www.inherit.eu](http://www.inherit.eu)

## Influencing the research agenda

EuroHealthNet influences the European research agenda by engaging in EU processes and with EC officials that shape this agenda. For example, in March 2018, the EuroHealthNet Director presented on the need for public health and health promotion research at a workshop of the Scientific Panel for Health that is advising the European Commission on the post-2020 research framework programme (FP9).

EuroHealthNet also influences the research agenda by highlighting and encouraging broader support for effective, innovative and integrated approaches that improve health and reduce health inequalities.



For example, EuroHealthNet organised and moderated the first plenary session of the **European Public Health Conference**, which brings together public health researchers from across Europe. Birger Carl Forsberg, an Executive Board member chaired the conference. The plenary session was entitled ***Sharing our common wealth: the need to strengthen the social dimension of the EU***. One of the main conclusions was the idea that for true sustainability, we should move from a model of resilience based on repair, towards one based on prevention.

## Connecting and informing researchers

In spring 2018, EuroHealthNet started a newsletter for Members and Research associate members. It covers new publication and academic opportunities.

The platform continues to liaise with partners in former Horizon 2020 and FP7 research projects, in which EuroHealthNet has participated or led such as DRIVERS which examined how tackle health equity through policy and practice in early childhood development, employment and working conditions, and income and social protection; IROHLA which developed evidence-based guidelines to improve health equity in the ageing population; and Gradient which identified measures that could level-up socio-economic gradients in health among children and young people in Europe.

EuroHealthNet is also collaborating with research groups and projects such as CHAIN – Centre for Global Health Inequalities Research, HiNews – Health Inequalities in European Welfare States, and the alliance for health promotion researchers.

### IMPACT of EuroHealthNet as a partner in collaboration

- Crucial in helping the consortium to come together and stay together
- Reliable and available for whatever is needed
- Respect and reputational value
- Authority and legitimacy
- Tenacious advocate
- Bringing a multi-disciplinary perspective

↳ External evaluation



# Increasing Knowledge

Collaboration between the platforms is crucial to EuroHealthNet's success. Research informs policy and practice, whilst practice and policy interact to respond to needs and realities on the ground. One of the ways in which all parts of EuroHealthNet collaborate is through TWIGS.

## Thematic Working Groups (TWIGs)

The four Thematic Working Groups bring together European specialists to share and build knowledge, stay up-to-date, and build common positions. The TWIG facilitators and members monitor policy and research and identify opportunities for collaboration and action.

Respondents identified various benefits of TWIG membership that included: news of what is happening at the European Level on their theme; latest information about studies, publications, research, policy activities, conferences, workshops, calls for proposals; projects and initiatives in international settings; identifying experts in the field; preparing joint projects in response to calls for funding, research and interventions.

↪ External evaluation

## Chronic Diseases

This TWIG works with the EU Platform for action on diet, physical activity and health, and the Joint Action on chronic diseases (CHRODIS+). It responds to World Health Organisation (WHO) initiatives on nutrition, physical activity and alcohol, and works on tobacco related issues.



## Mental health

This TWIG monitors the EU Mental Health Compass and other policy and practice developments in the area of mental health. This year, the TWIG has been informed about events, been given the possibility to submit promising practices in community-based mental health services, and has been invited to a funded capacity building workshop on access to healthcare and other services for people with poor mental health.



## Health Systems

This TWIG develops work on health promotion, social determinants, and equity as part of health systems. This year the TWIG has focused on the digital transition; both mHealth and eHealth are growing rapidly creating both opportunities and specific challenges. Health systems are moving towards community-based services, where the individual becomes a partner. The TWIG monitors this trend, and members were involved in a European consultation on related proposals.

## Healthy Ageing

This TWIG works with the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA), AFE-INNOVNET, the covenant for demographic change, and with the WHO on age friendly environments.

# Be part of EuroHealthNet

EuroHealthNet welcomes members, partners and associate members from all sectors who share our vision of a healthier, fairer Europe.

## Why people enjoy working for EuroHealthNet

- Focus and diversity of the work - shared values and commitment, stimulus for learning.
- Organisational culture - flat hierarchy, openness, mutual appreciation and support.
- Working environment - open, positive interaction.
- Process and impact - ownership of work from inception to implementation, making a difference.

↪ External evaluation

## Contact us

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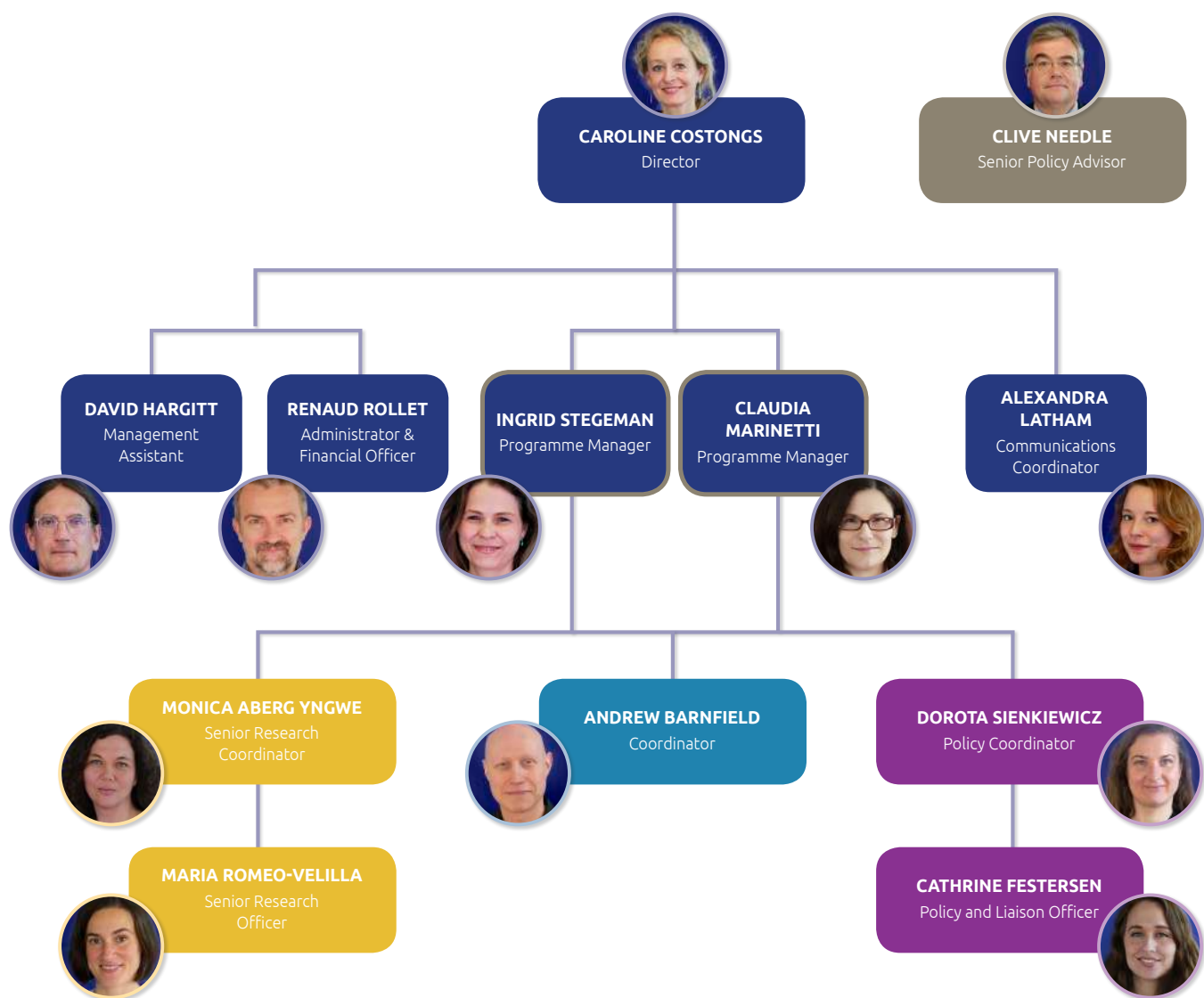
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## Join us

For full information about our work or new Membership, Partnership and other participation opportunities please contact [d.hargitt@eurohealthnet.eu](mailto:d.hargitt@eurohealthnet.eu)

# Staff



# Thank you

We are immensely grateful for the hard work and strong results delivered by our staff throughout the year. Their work would not be possible without the ongoing support of members, partners and associates, as well as the European Commission's EaSI fund which supports our work. We are proud of the work we do and thank all those that make it possible.

In 2017-2018, we welcomed three new members of staff: Andrew Barnfield, María Romeo-Velilla, and Dorota Sienkiewicz. We said a fond farewell to Cristina Chiotan, Anna Gallinat, and Anne Pierson. We wish them the very best in their future endeavours.

Four interns made valuable contributions in the same period: Quentin Bennett Fox, Zina Cotoman, Paola Hernández Olivan, and Hannes Jarke.

This year we began working with Tandem volunteering, an initiative to get refugees and European NGOs learning, working and growing together. We are grateful to them for pairing us with Süheyla U. who was a welcome addition to our office.

We benefitted greatly from the valuable insights from our external evaluator Geoff Wykurz (PHAST, UK) who has interviewed many members, partners and stakeholders and reported on our performance and impact during 2015-2017.

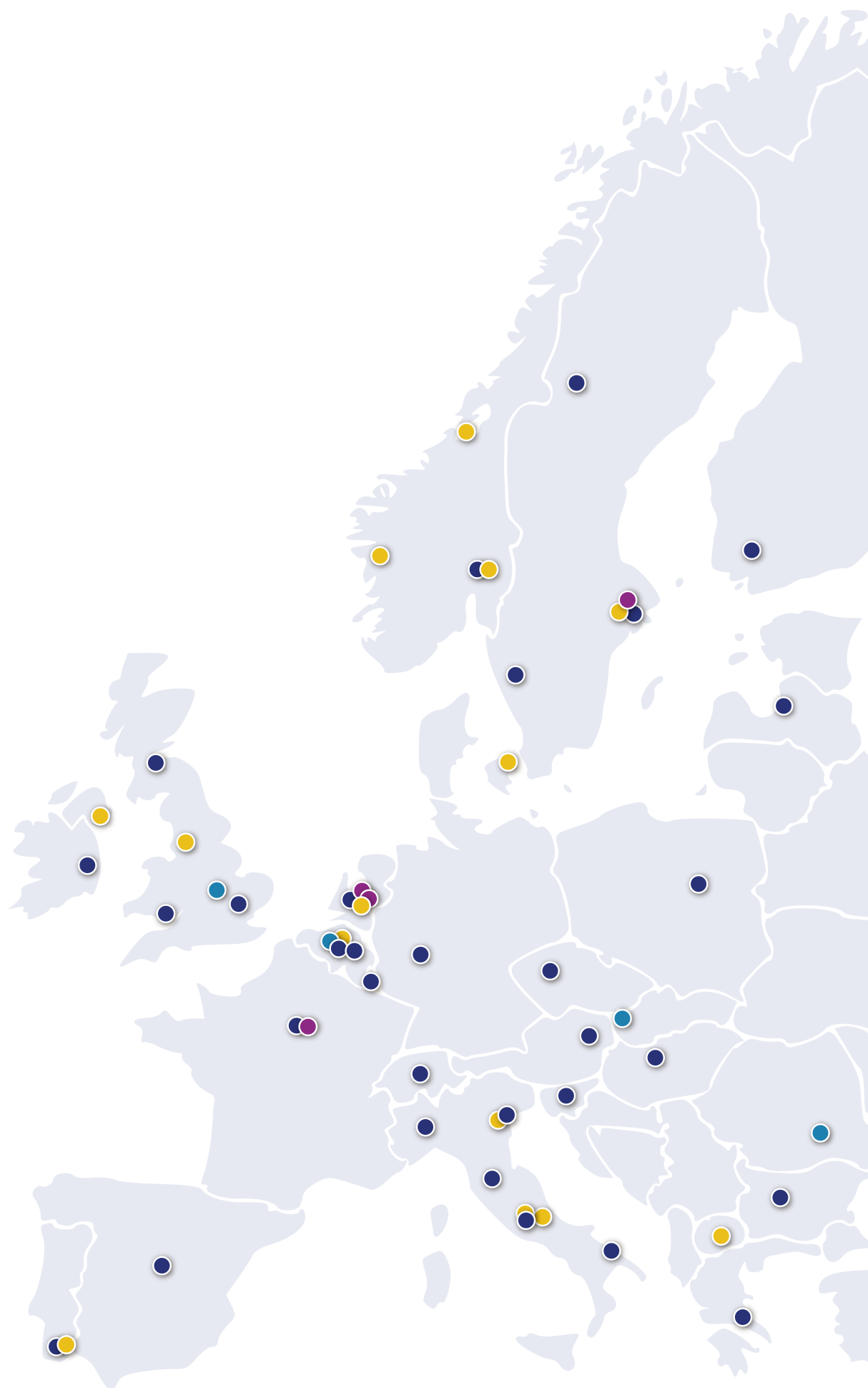
Three new members joined the partnership this year: Bulgaria's National Centre of Public Health and Analyses, the Regional Healthcare and Social Affairs Agency of Puglia (Italy), and The Centre for Disease Prevention and Control of Latvia. The Ministry of Health of the Slovak Republic became an observer.







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# EUROHEALTHNET – MEMBERS AND PARTNERS

<b>Austria</b>	Austrian Health Promotion Foundation (FGOE)	<b>Italy</b>	Piedmont Regional Health Promotion Documentation Center (DoRS)
<b>Belgium</b>	Flemish Institute for Healthy Living.	<b>Latvia</b>	The Centre for Disease Prevention and Control of Latvia*
<b>Belgium</b>	Agence pour une Vie de Qualite (AVIQ)	<b>Latvia</b>	Riga City Council Department of Welfare
<b>Bulgaria</b>	National Center of Public Health and Analyses (NCPHA)*	<b>Luxembourg</b>	Luxembourg Institute of Health (LIH)
<b>Czech Republic</b>	National Institute of Public Health (SZU)	<b>Netherlands</b>	National Institute for Public Health and the Environment (RIVM)
<b>England</b>	The Health and Europe Centre, NHS Kent & Medway	<b>Netherlands</b>	Pharos Dutch centre of expertise on health disparities
<b>Finland</b>	National Institute for Health and Welfare (THL)	<b>Norway</b>	Norwegian Directorate of Health
<b>Finland</b>	Finnish Federation for Social Affairs and Health (SOSTE)	<b>Poland</b>	National Institute of Public Health - National Institute of Hygiene
<b>France</b>	French National Public Health Agency	<b>Portugal</b>	National Institute of Health Doutor Ricardo Jorge
<b>Germany</b>	Federal Centre for Health Education (BZgA)	<b>Scotland</b>	NHS Health Scotland
<b>Greece</b>	Institute of Preventive Medicine Environmental and Occupational Health (PROLEPSIS)	<b>Slovenia</b>	National Institute of Public Health (NIJZ)
<b>Hungary</b>	Ministry of Human Capacities	<b>Spain</b>	Ministry of Health, Social Services and Equality
<b>Ireland</b>	Institute of Public Health in Ireland (IPH)	<b>Sweden</b>	Stockholm County Council
<b>Italy</b>	Regional Healthcare and Social Affairs Agency of Puglia*	<b>Sweden</b>	Public Health Agency of Sweden
<b>Italy</b>	Veneto Region	<b>Sweden</b>	Public Health Committee - Region Västra Götaland
<b>Italy</b>	Tuscany Region	<b>Wales/</b>	
<b>Italy</b>	Federsanita ANCI	<b>United Kingdom</b>	Public Health Wales

## RESEARCH ASSOCIATE MEMBERS

<b>Belgium</b>	Catholic University of Louvain - Institute of Health and Society
<b>Denmark</b>	Roskilde University
<b>England</b>	Blackburn with Darwen Borough Council Public Health Department
<b>England</b>	Newcastle University, Institute of Health and Society
<b>Italy</b>	Università dell'Aquila
<b>Italy</b>	Comunità di Venezia Società Cooperativa Sociale
<b>Italy</b>	Fondazione Giacomo Brodolini
<b>Macedonia</b>	National Public Health Institute of Macedonia
<b>Netherlands</b>	Netherlands Institute of Mental Health and Addiction (Trimbos Institute)
<b>Norway</b>	Norwegian University of Science and Technology (NTNU), Faculty of Social and Educational Sciences
<b>Norway</b>	Oslo and Akershus University College of Applied Sciences
<b>Norway</b>	University of Bergen
<b>Portugal</b>	Centre for Social Research and Intervention - Lisbon University Institute (ISCTE-IUL)
<b>Spain</b>	Universidad de La Laguna
<b>Sweden</b>	Swedish Association of Local Authorities and Regions (SALAR)

## POLICY ASSOCIATE MEMBERS

<b>Netherlands</b>	Dutch Association of Mental Health and Addiction Care (GGZ Nederlands)
<b>Netherlands</b>	NutsOhra Foundation
<b>Sweden</b>	Swedish Association of Local Authorities and Regions (SALAR)
<b>France</b>	Ecole d'Assas*

## OBSERVERS

<b>Belgium</b>	Federal Public Service Health, Food Chain Safety and Environment
<b>England</b>	Department of Health
<b>Romania</b>	Ministry of Health
<b>Slovakia</b>	Ministry of Health of the Slovak Republic*