



ACTIVITIES REPORT





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Our Members

- Fund Healthy Austria, a unit of: Health Austria GmbH (AT)
- Flemish Institute for Health Promotion (BE)
- National Centre of Public Health Protection (BG)
- Health Promotion Switzerland (CH)
- National Institute of Public Health (CZ)
- Federal Centre for Health Education – BzgA (DE)
- National Board of Health – National Centre for Health Promotion & Prevention (DK)
- National Institute for Health Development (EE)
- Ministry of Health and Consumer Affairs – Public Health Division (ES)
- University of La Laguna – School of Nursing and Physiotherapy (ES)
- Finnish Centre for Health Promotion (FI)
- National Institute for Prevention and Health Education – INPES (FR)
- Institute of Preventive Medicine, Environmental and Occupational Health – Prolepsis (GR)
- National Institute for Health Development (HU)
- Department of Health & Children (IE)
- Public Health Institute of Iceland (IS)
- Veneto Region (IT)
- State Agency - Public Health Agency (LV)
- State Environmental Health Centre (LT)
- Netherlands Institute for Health Promotion and Disease Prevention (NL)
- Norwegian Directorate of Health (NO)
- National Institute of Public Health – National Institute of Hygiene (PL)
- Institute of Public Health Iasi (RO)
- Institute of Public Health Bucharest (RO)
- Swedish National Institute of Public Health (SE)
- Stockholm Center for Public Health (SE)
- National Institute of Public Health (SI)
- Institute of Public Health Murska Sobota (SI)
- Public Health Authority of the Slovak Republic (SK)
- Department of Health (UK)
- Kent & Medway NHS and Social Partnership Trust (UK)
- NHS Health Scotland (UK)
- North West Health Brussels Office (UK)

Who we are

EuroHealthNet is an organisation that aims to contribute to a healthier Europe with greater equity in health between and within European countries.

This is achieved by networking and cooperation among relevant and publicly accountable national, regional and local agencies in EU member states, in states seeking EU membership and in the European Economic Area.

EuroHealthNet has no profit making aims and seeks funding from a range of public sources and donors only to carry out its objectives. All partners and members are asked to be transparent concerning their interests.

→ To meet our participation criteria, you must be:

- **A not for profit organisation** – individuals or private companies may buy certain information services by agreement of our Board, but may not influence or participate in our decisions. All applicants complete a Declaration of Interests and we apply an ethical code of conduct.
- **Publicly responsible and accountable** – working for health promotion, public health or disease prevention in a demonstrable way.
- **Willing to disseminate** our information within and beyond the organisation environment.
- **Prepared to contribute** information to other members and partners about work and relevant issues in the network context and environment.
- **Content to participate** in EuroHealthNet activities without necessarily being reimbursed. Invitations to contribute to and benefit from EU projects will be managed separately.
- **Able to pay** annual fees that are set by the General Assembly.

→ Details of how to apply and current fees are available from our website www.eurohealthnet.eu

We hope you enjoy reading this brief summary and perhaps follow it by accessing us via www.eurohealthnet.eu. But more than that please use it to help your field of work, or to help us to do even better in future. If we can help you in any way, our various contact points – and those of our partners – are scattered within.

EuroHealthNet and its members.... represent a unique and vital group of stakeholders for public health. I very much welcome your focus on equity oriented health strategies as a priority which I am sure will be helpful as we develop our own initiatives on health inequalities outlined in the EU health strategy.”

Robert Madelin, Director General for Health & Consumer Protection, European Commission.

What we do

The past year saw the successful completion of projects on health inequalities, healthy ageing, capacity building for health promotion and health impact assessments, plus other collaborative work on health systems equity. We launched work on social determinants and took forward input into counteracting obesity. Now we aim to strengthen each of those areas, plus contribute to cutting edge implementation and research on health equity and progress in house work on key EU priorities such as demographic change and sustainable development.

We are growing

We have an expanded membership and encourage new applicants from publicly accountable bodies at national and regional levels. We have a renewed Board including members who took that key step to participate since the dramatic expansion of the EU in 2004. That Board has prioritised equity based work and we plan to put our expertise to good use to help to influence positive change.

We have linked work to policy priorities at EU levels: healthy ageing throughout life, counteracting obesity, equitable care services, and effective interventions across all relevant policy sectors. We have developed co-operation with partners and donors, particularly the European Commission, World Health Organisation (WHO) offices across Europe, the International Union for Health Promotion and Education (IUHPE) and via an innovative consortium of stakeholders in the promising DETERMINE project on the causes of the causes of health.

We have worked hard to communicate effectively

We took key lessons very publicly right to the heart of Brussels and national capitals, and built links with representatives of all EU institutions, governments and civil society. We improved knowledge and built capacity of members. We are indebted to the member and partner organisations that continually stand up to be counted – contributing more money, assistance and support, leading the project teams, advocating at home and abroad. The hard work of staff at the network office in Brussels has made a major contribution to our development.

We still have much to do.

The new EU Health Strategy has been launched with many questions unresolved in terms of process and content. The start of a new Public Health Action Programme offers promise. Other more specific policy developments – on determinants of health such as nutrition and physical activity, alcohol and tobacco, mental health and care – have major implications for health promoters in states and regions across Europe.

Those issues need sustained input and action, as do wider economic, social and environmental actions impacting hugely on the root causes of those determinants. We hope EuroHealthNet is increasingly well placed to offer trustworthy advice, guidance and leadership to policy makers and practitioners, and to support innovative partnerships to help turn policy into practice.

How we do it

DETERMINE: Action on Socio-Economic Determinants of Health

June 2007 marked the start of this ambitious new project, which is being managed by EuroHealthNet, in close collaboration with the National Institute of Public Health in the Czech Republic as contract holder.

The main aim of DETERMINE is to ensure greater awareness of the responsibility that all policy sectors have in improving the health of EU citizens and to reducing health inequalities, and to gather evidence of the benefits of greater collective investments in health. The project therefore lies at the heart of EuroHealthNet's work.

Building on the outcomes of the 'Closing the Gap' project as well as the work of the WHO Commission on the Social Determinants of Health, DETERMINE seeks to provide the leadership to take forward a Social Determinants of Health approach in the EU, and to develop capacity and stimulate further action in this area.

DETERMINE is innovative and different from previous projects in some ways:

The Consortium is comprised of 59 governments, health bodies, organisations and institutions from 26 countries, committed to various extents to DETERMINE's activities.

DETERMINE's activities take place in the context of 7 Work Packages, led by different project partners collaborating via a management team. The initial work so far has included:

- Workshops at the IUHPE global conference in Canada and the Nordic Public Health Conference in Sweden
- A meeting of the full Consortium in Lisbon with the support of the Portuguese EU Presidency, and in Ljubljana with backing from the Slovenian EU Presidency.
- Preparation of reports for the three key content work packages (Evidence, Innovation and Policy Making Approaches) with a series of consultative meetings.
- Wide use of national mapping and questionnaires by partners.
- Advocacy and awareness raising at events e.g. those linked to the WHO Commission on Social Determinants of Health and the EU expert group.
- Evaluation under way already.
- Transfer from the health inequalities portal started by Closing the Gap to the host site for DETERMINE and all associated work. All details are at www.health-inequalities.eu.

Closing the Gap

An important priority of EuroHealthNet's work has been completion of the 'Closing the Gap: Strategies for Action to tackle Health Inequalities in Europe' project, which was coordinated in collaboration with the German Federal Centre for Health Education (BZgA). This three year project, co-funded through the EU Public Health Action Programme and participant contributions, ended in May 2007, but its impact continues.

The 21 project partners mostly included EuroHealthNet members plus a Scientific Advisory Board consisting of leading experts in the field of health inequalities. During the final phase participants identified key feasible actions (**'Strategic Initiatives'**) that could build on the specific situation in their countries to address health inequalities.

They also organised national seminars to raise awareness of health inequalities and to share key actions to be taken to tackle the issue in their countries, the majority of which took place during an **'EU Week of Equity in Health'**. This was a major collective achievement in raising national awareness of issues and actions, and the added value of EU co-operation.

For example, an event was held to coincide with a major WHO European conference on social determinants of health. A reception was held in the British Parliament bringing together WHO experts, parliamentarians and Closing the Gap participants.

EuroHealthNet staff developed information sources (including a film about the project), provided other tools for local use, and helped advise the EC through its Health and Consumer strategic planning and the EU Expert Group on Health Inequalities.

Our publication **'Taking Action for Health Equity'** provides an overview of what each participating country is currently doing to address health inequalities, and incorporates the project's key conclusions and final recommendations.

A Conference **'Action for Health Equity'** was held in Brussels, as part of the German EU Presidency Programme. Some 130 participants (policy makers from the health and other policy sectors, representatives from various European organisations and networks, as well as EU government officials) took part.

Ongoing work continued to provide information on the project and share outcomes on the **Health Inequalities Portal** (www.health-inequalities.eu). The content includes the **'Directory of Good Practices'** with over 90 good practice projects and programmes, which is now being used as a national and international resource.

Closing the Gap has helped to raise awareness about health inequalities in partner countries. It has brought together valuable information - and in some cases given impetus to small and large scale initiatives that are being carried out to tackle health inequalities across European countries.

Health Promotion Capacity Building

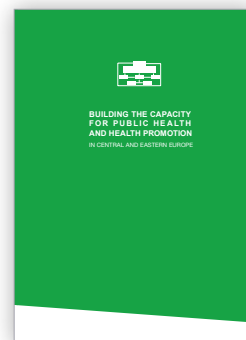
EuroHealthNet has concluded its Capacity Building work in collaboration with the contract holder The Health Promotion State Agency in Latvia. We organized three training sessions in Riga, Brussels and Bratislava. Two intensive workshop sessions were organized based on the Framework for Building Capacity to Promote Health on the following 5 key action areas:

1. Organisational change
2. Workforce development
3. Resources allocation
4. Partnership and coalitions
5. Leadership

An investment in health promotion as a multi disciplinary and integrated approach is crucial to address health inequalities, to promote health, to prevent non-communicable diseases and to reduce the costs of ill-health in Central-Eastern European countries. Building and enhancing the institutional capacity to deliver sustainable and quality health promotion is therefore essential to improve health in those countries. This means increasing the range of people with expertise in health promotion and in addressing health problems that arise out of social inequalities and social exclusion.

As a follow up to this training, the different institutes then organized meetings with partner institutes or other relevant actors in their country, in order to jointly draft a **National Capacity Plan**. Results of the project were presented at the **open days** organised by the EC Regional Affairs Directorate in Brussels.

The different capacity plans are available in English at www.eurohealthnet.eu together with the final report on capacity assessments and an analysis of the plans in Central and Eastern Europe. The executive summary of the final report was **translated** in all 10 languages of the CEE countries.



Healthy Ageing

By 2025 one third of Europe's population will be aged over 60. A three year project (co-funded by EC DG SANCO and led by the Swedish National Institute for Public Health) published the results of its work across 17 European countries on the state of the art in promoting healthy ageing.



Evidence based recommendations include:

- ➔ It is never too late to start to promote health among older people – health initiatives can work throughout and prolong life
- ➔ Discrimination against older people, in workplaces and communities, can be tackled and bring health benefits
- ➔ The involvement of older people in designing approaches is crucial
- ➔ Europe wide agreement on exchanges of good practices and indicators of progress is cost effective and needed

EuroHealthNet supported the project manager (NIPH Sweden) in the management and financial aspects of the project, and drafted a response to the European Commission consultation process for the new EU Health Strategy.

We helped to organise the final conference, held opposite the EU Headquarters in Brussels, featuring the Minister of Public Health for Sweden, the Head of the WHO directorate for older people and EU officials with active support from parliamentarians, EU Institutions and civil society in Brussels.

The outcomes are summarised and links for follow-up work are provided at www.healthyageing.eu

Health Impact Assessment

EuroHealthNet was part of the steering committee of a three year project on the '**Effectiveness of Health Impact Assessment**' that was coordinated by The WHO European Observatory on Health Systems and Policies. The project mapped the use of HIA both within and outside of governments, evaluating the effectiveness of the tool and advancing understanding of the determinants of successful implementation.



HIA is integral to advancing health equity and the socio-economic determinants of health. EuroHealthNet therefore benefited from the learning gained through this project. Our role was to contribute expertise from a health inequalities perspective and to comment on the tools that were developed to carry out the project and its outcomes. EuroHealthNet attended the final project meeting, the book launch of the final publication and a European Meeting on Health and Health Systems Impact Assessment that took place in Lisbon, Portugal.

Further information is available from the lead partner <http://www.euro.who.int/observatory>

Health Quest



EuroHealthNet participated in a project funded by the Employment & Social Affairs Directorate of the EC about the quality in and equality of access to health care services, coordinated by The European Health Management Association (EHMA).

The aims were to identify and analyze barriers to access health care services that are faced by certain vulnerable groups (older people, people with mental health problems, and migrants) and to review the most effective policy initiatives to ensure equal access. The project provided an in-depth description of the situation in selected countries and a mental illness case study, following a stock-taking using a country report template and a request for good practices

EuroHealthNet contributed to 'Health Quest' by analysing and building on the work that we have undertaken in the 'Health and Social Inclusion', 'Closing the Gap' and 'Healthy Ageing' projects. EuroHealthNet examined the 150 good practices that were collected in the context of these projects, and identified those that are related to improving access to health care. We subsequently produced a report on **"The contribution of health promotion related policies and interventions to promote and facilitate equal access to health care services"**.

An analysis of these good practices reveals that health promotion measures can contribute to improving access, for example, in the following ways:

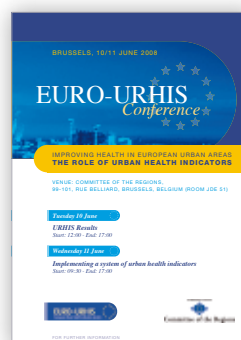
- The establishment of low barrier community health programmes and centres that address needs that have been identified by target groups themselves, through programmes that they also then facilitate (participation)
- The use of (intercultural) mediators, and of primary health care nurses and 'coaches' that provide health related information and help guide people through the process of adopting healthy patterns of behaviour.
- Partnership working between public/private sector and to ensure a holistic approach to health, to cross reference social and medical facilities to maximise efficiency, reduce administrative burdens and to ensure that the necessary assistance is sought and provided.
- Social marketing campaigns to reduce stigma and health literacy campaigns to raise awareness and encourage people in need to seek treatment.

The outcomes of this project are now highlighted on the EU website:
http://ec.europa.eu/employment_social/spsi/docs/social_inclusion/2008/healthquest_en.pdf

Euro-Urhis

EuroHealthNet has been pleased to support the excellent work begun by the Urban Health Indicators System project (Euro-Urhis) managed by partners from our member agency in NW England.

A summary of the first phase of the project, which is expected to continue as a major EU Research project from 2009, is at: http://ec.europa.eu/health/ph_information/indicators/urban_en.print.htm





What next?

Gradient

At the time of writing, we are hopeful of the award of a major grant within the EU 7th Framework Research Programme to begin in 2009. It is part of our purpose to operate an office in Brussels to identify such options, and as information emerged about potential funding in the programme for work on health equity, EuroHealthNet staff and partners were able to negotiate a successful proposal.

'Tackling the Gradient' aims to address the lack of implementation knowledge about health inequalities and that the basis is clear for operational strategies to make progress on this issue. The focus of the research project will be on families and children, since the greatest impact on reducing the health gradient can be achieved through early life policy interventions and by creating equal opportunities during childhood and adolescence.

Tackling the Gradient involves the following components:

- Develop a common Evaluation Framework that can be applied across the EU to assess and determine what works.
- Determine whether and why traditional public health and health promotion policy measures don't reach or fail to change behaviours amongst the more socially deprived groups.
- Explore some currently understudied protective factors (particularly the influence of social capital on children, adolescents and families).
- Identify what targeted and universal policy approaches to protect families and children from falling into poverty and ill health are currently being applied, and appear to be effective in tackling the health inequalities gradient.
- Disseminate the outcomes and results to politicians and practitioners in the form of scientifically sound recommendations.

This work will be undertaken by a research consortium comprising of 34 researchers and 12 institutions. It will be coordinated by EuroHealthNet, and a Scientific Advisory Board will help to ensure scientific excellence. Further news and information will be carried at www.eurohealthnet.eu

How do we network?

One of the less tangible but more vital benefits of operating an EU network is the bilateral and multilateral contacts that develop between members and other institutions or bodies.

Communications

Online

The revamped websites www.eurohealthnet.eu and www.health-inequalities.eu was often cited as a useful source of information by interested organisations globally. Based on comments some improvements have been made. Most news items are now contained within a section for member organisations. The management tool was upgraded to provide each member and partner the opportunity to input material directly with ease. This offers a “shop window” to international seekers of information about health promotion activities.

Newsletters

Monthly editions of the EU Health Highlights newsletter were circulated. The primary aim of this is to communicate to member and partner organisations relevant activities in the EU context. Favourable comments continued to be received about the timely usefulness of this information. A by-product is the reverse direction communication of health promotion issues and updates to the EU institutions which are included in the circulation list. This is deliberately targeted rather than widely distributed.

Members only received regular updates of key opportunities for action via the internal publication Health Action Memo. This is arguably the most important benefit of EuroHealthNet membership, a valuable tool to communicate project work, funding opportunities and networking needs.

Meetings

We hold an annual meeting in Brussels or a member state which includes an open policy seminar, and also run workshops or exhibitions at international events, especially in Brussels. Information about participation or subscription is available at www.eurohealthnet.eu

Partnerships

→ WHO

Many people are aware that the World Health Organisation (WHO) operates from its Geneva HQ <http://www.who.int/en/> and Copenhagen European regional centre <http://www.euro.who.int/>, bodies with which our national and regional member agencies are closely connected. Fewer, however, are aware that they also operate a major Brussels liaison office with whom we link directly, as well as the Centre for Investment in Health and Development in Venice <http://www.euro.who.int/ihd> with whom we have an ongoing collaboration, as we do with the Observatory for Health Systems and Policies <http://www.euro.who.int/observatory>

We have worked increasingly closely with the WHO Commission on the Social Determinants of Health, through for example our DETERMINE project and our response to its Report http://www.who.int/social_determinants/en/

→ IUHPE

Particularly important is our collaboration with the International Union for Health Promotion and Education (IUHPE) www.iuhpe.org, a global organisation with a European branch, with whom we have a practical co-operation agreement. We are working together in the following three key policy areas to develop knowledge and help inform practitioners and policy makers:

→ Evidence & Effectiveness

EuroHealthNet is supporting the work of the group organised by IUHPE Europe as part of its global programme. A meeting was held at the Vancouver global conference and work is being taken forward online plus a workshop at the IUHPE Europe Conference.

→ Counteracting obesity through health equity approaches

EuroHealthNet is a participant in the EU Platform on Diet, Physical Activity and Health, a multi stakeholder body energetically led by DG SANCO officials to encourage voluntary commitments by food and advertising industries, health and consumer groups. We completed and published a modest report outlining current activities and some progress in each member state on health promotion actions to counteract obesity, which mirrored a broader based publication by WHO Europe.

A workshop at our General Assembly recommended how to progress, and we participated in the EU Presidency Conference on this topic in Germany which reached a declaration. Our member for NW England kindly took on direct responsibility for coordinating our work and how we can contribute by focussing on equity and obesity.

→ *Healthy Ageing*

The theme of Healthy Ageing is important to EuroHealthNet members so it was decided to start a Special Interest Group on Healthy Ageing (SIG-HA) in order to take this issue forward. The coordinator is: the Stockholm County Council - Public Health Department. The aim is to keep the issue of 'Healthy Ageing' on the agenda of national public health institutes and other bodies accountable for public health and health promotion, to promote the existing Healthy ageing outputs (in particular the set of recommendations), to exchange further information and to work together where possible.

The SIG-HA consists of 19 organisations from 12 EU Member states. Two groups were formed: (1) Lifestyle & Healthy Ageing and (2) Health Equity & Healthy Ageing. Three workshops, at the EuroHealthNet policy seminar, the IUHPE Europe conference and the Nordic Health Conference, will lead to a report with recommendations on actions in the EU.

→ *EU Health Policy Forum*

EuroHealthNet is a founder member of the EU Health Policy Forum, a consultative body of over 50 non profit European umbrella organisations in the health field run by the EC. After a reflective period for this body with much consideration of its future structure, EuroHealthNet has been pleased to support a EUPHA seminar on the proposed EU Health Strategy in liaison with IUHPE Europe, and to make a significant contribution to the EU Budget review process in partnership with leading NGOs.

http://ec.europa.eu/health/ph_overview/health_forum/policy_forum_en.htm

→ *Euregha*

Regional partners are extremely important for EuroHealthNet. Liaison was continued with Euregha, a group linking EU regions for health in Brussels. www.euregha.net

→ *EPHA*

EuroHealthNet is an associate member of the European Public Health Alliance and participates in its policy coordination and other meetings. We also liaise with the related European Health and Environment Alliance.

www.ephpa.org

→ EHN

EuroHealthNet was a signatory to the European Heart Health Charter and supported other initiatives of the European Heart Network.

www.ehnheart.org

→ HBSC

EuroHealthNet supports the advisory board of the Health Behaviour in School aged Children database and reporting initiative, including its events with the WHO.

www.hbsc.org

→ Social Platform

EuroHealthNet is an observer member of the Platform of EU Social Organisations, participates occasionally in its events and liaises on policy issues or through projects such as DETERMINE with many of its members, including AGE for older people, the European Youth Forum, the Anti Poverty Network and FEANTSA, the advocacy body for homeless people.

<http://www.socialplatform.org/>

How are we run and financed?

EuroHealthNet is legally established under Belgian law and accountable via its Board to the members comprising the annual General Assembly. An audited financial report is considered there and has been approved in all years to date. In 2007, our headline accounts were:

Income

Membership fees
186,000.00

Contributions from EU co-funded projects
356,445.18

Miscellaneous
3,584.98

Total
546,531.16

Expenditure

Office and communications
36,013.52

Travel and events
72,313.40

Professional fees & staff costs
277,902.68

Miscellaneous
36,255.78

Sub total
422,485.38

Surplus carried over
124,045.78

Balance
546,531.16

Our Board

Elected for a two year period from 2008 are:



*President: Maggie Davies
(England)*



*Treasurer: Graham Robertson
(Scotland)*



*Honorary Former President:
Bosse Pettersson (Sweden)*



*Members: Helene Reemann
(Germany)*



*Members: Tatjana
Nicolaj-Kranj (Slovenia)*

Our Office Team

We have operated a liaison office in Brussels throughout our existence, moving to our current site nearby the EU institutions in 2000.



Caroline Costongs is our Programme Manager, responsible for our work programme and office management plus project development and leadership and the Health Action Memo series.

Ingrid Stegeman is our Project Co-ordinator, focussing particularly on DETERMINE and other health equity related projects, also impact assessment, indicator and other policy work.



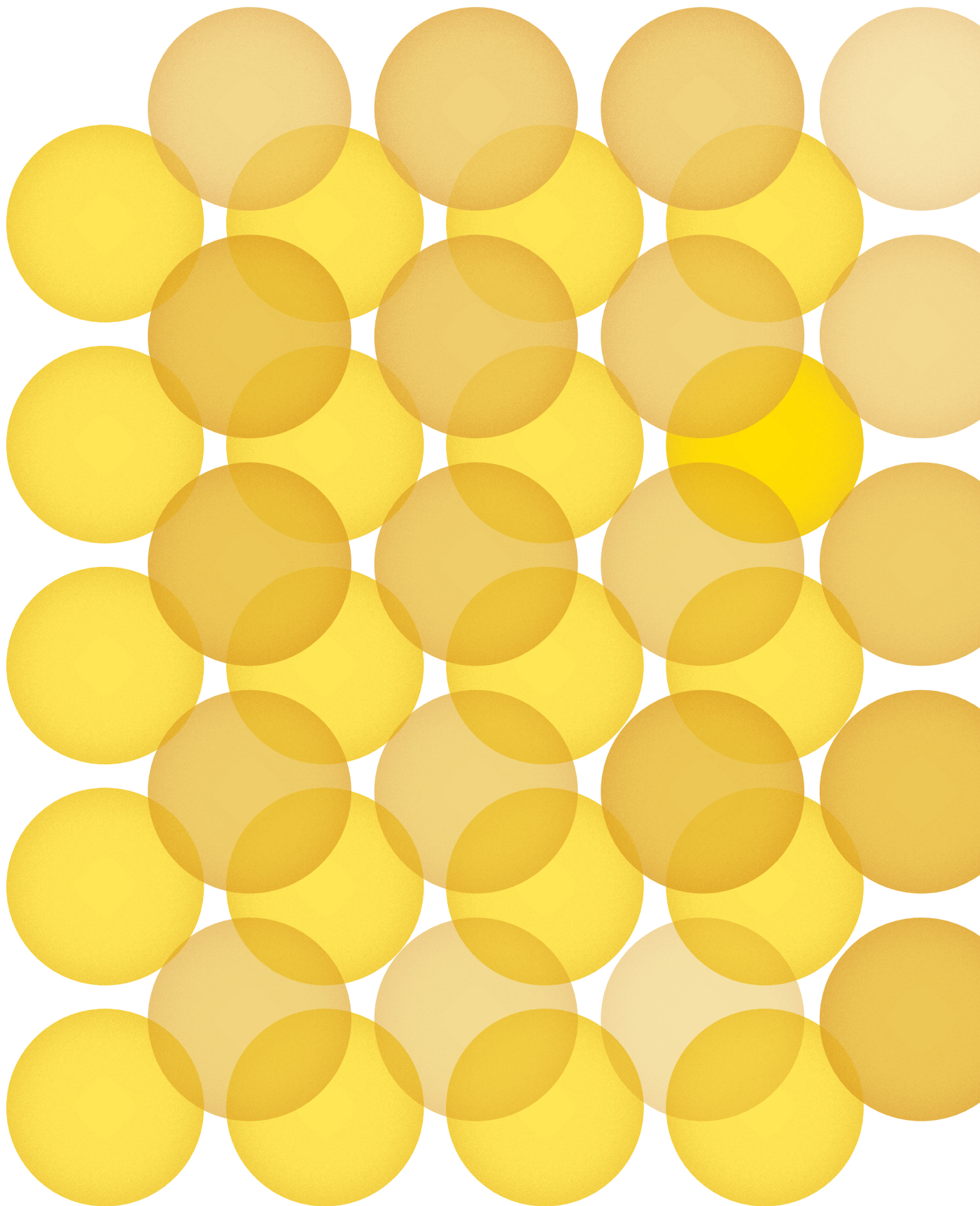
Karin Lotz is our Finance and Administration Officer and provides support to projects, events organisation, our website and our special interest groups.

Serena Fasso is our Policy Officer working primarily on social and economic determinant issues, a position funded by a major grant from DH for England.



Clive Needle is our director and policy advisor on a consultancy basis, editing Health Highlights and contributing to policy and project work. He also works with other international health organisations, chairs and presents at events and undertakes other media-related activities.





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