



EuroHealthNet

EUROPEAN PARTNERSHIP FOR IMPROVING HEALTH, EQUITY & WELLBEING



**A stronger
partnership
for a changing
Europe**

EUROHEALTHNET ANNUAL REPORT 2014-2015



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Welcome from our President and Executive Board

It is with great pleasure and pride that I present you with this report, which highlights the wealth of EuroHealthNet's activities and achievements between June 2014 – 2015.

This past year has been one of growth, transition and commitment. Only two years after introducing our new network structure, EuroHealthNet and its three pillars are going from strength to strength. We are attracting a new and wider range of members through CIRI and PHASE, while also expanding our membership among the (sub)national public health and health promoting bodies that form the backbone of our network under the umbrella of Health Promotion Europe. The FP7-funded DRIVERS project we completed this year is a great example of synergy between the three pillars: excellent science generating new policy-relevant insights as well as an agenda for action on social health determinants at the heart of the EU social agenda. In the coming year, we plan to set up thematic technical working groups to maximize mutual learning and streamline our contribution to international activities and debate. The core grant we are receiving from the EaSI Programme is a prominent lever in EuroHealthNet's strategic and operational planning.

Meanwhile in Brussels, a new European Parliament was sworn in and the Commission Juncker presented its New Start agenda, with a strong and more exclusive focus on jobs, growth and investment. The considerable shifts in policy portfolios raised concern about the lack of reference to reducing health inequalities and promoting public health.

In our contact with all relevant new Commissioners, EuroHealthNet sought dialogue to understand how their priorities might impact on health and health equity. We also offered support to help improve the health and social situation within the European Union. Since then, the Commission's aspirations to be 'big on big things and small on small things' has already resulted in an unprecedented legislative review. As the first major cross-cutting strategies are being launched, it becomes clearer that we can indeed expect far fewer new initiatives from the Juncker team, and that health will be no exception to this. The various transitions may, however, also bring opportunities for new partnerships for social investment and for a renewed focus on sustainable and equitable health promoting systems.

First and foremost, this report reflects the dedication and achievements of our members and partners, directors and staff. The output of their efforts has been incredibly rich and diverse. Together with my fellow Executive Board members, it has been a privilege to support their work in this first year of my Presidency. I would like to commend this annual report and hope you will find inspiration reading it. If you are not yet part of our network I would be delighted if you would consider joining us, as EuroHealthNet is keen to continue building new partnerships.



Nicoline Tamsma, President

Nicoline Tamsma, President

Introduction by our Managing Director

Ever since EuroHealthNet was set up as a network of health promotion agencies almost twenty years ago, we have facilitated effective exchange and cooperation among responsible authorities in Member States. We liaise with EU institutions and contribute towards progress on the EU treaty objectives for improved health and well-being. We have a specific mission, which is to achieve greater equity in health outcomes across all groups in society.

Throughout these 20 years we have learned that health equity cannot be addressed by the healthcare sector alone. It needs the involvement of various sectors and a mix of policy measures to address those factors that shape health and social inequalities. I am pleased to say that our work in the last year 2014-2015, has resulted in further successful multi-sectoral operations with the establishment of our three new pillars.

We developed Health Promotion Europe (HPE), including participation in EU Joint Actions which primarily involve government authorities and delegated organisations. For example, during 2014-2015, we have taken part in the Joint Action to combat Chronic Diseases www.chrodise.eu and the Joint Action to improve quality assurance in HIV/AIDS prevention www.qualityaction.eu. HPE builds capacity on health promotion policy and practice and organises study visits, webinars and out-reach work.

We also created a new Centre for Innovation, Research and Implementation (CIRI). In 2015, we concluded our FP7 co-funded DRIVERS study www.health-gradient.eu which focused on tackling the root causes of health inequalities in close cooperation with leading scientists and civil society organisations. We studied investments in early childhood as well as better employment conditions and universal social protection systems and results were presented at a successful major conference in January 2015.

The European Platform for Action on Health and Social Equity (PHASE) is EuroHealthNet's advocacy and policy-oriented body. PHASE brings together a broad range of stakeholders from relevant fields and sectors willing and able to work on the wider health and social determinants. With PHASE we seek to raise awareness and engagement of members and partners in the EU Semester process, including addressing health-relevant Country Specific Recommendations (CSRs) and on the use of EU Structural and Investment Funds.

Thanks to the core grant from the EaSI Programme and with the support of our members and partners, and without the use of any private sector funding, EuroHealthNet continues to play a pro-active and visible role. We stimulate and support integrated approaches by operating at all levels, in relevant health, social and employment sectors. I am committed to working with the EuroHealthNet team and Partnership to further explore new and exciting ways to invest in and build sustainable societies in 2015- 2016 and beyond.

Caroline Costongs, Managing Director



↳ Caroline Costongs,
Managing Director



↳ Clive Needle, Policy and
Advocacy Director

Health Promotion Europe (HPE)

HPE is the core network of our partnership. The criteria for participation is to be a publicly responsible body or centre of expertise for health promotion, disease prevention or addressing health and social inequalities. All HPE participants are automatically also part of PHASE and CIRI, in addition to those bodies which specifically choose to join those pillars. So promoting health and wellbeing for all is at the heart of EuroHealthNet's core operations.

Studies and training

EuroHealthNet gratefully acknowledges the valued support from its Framework Contract 2014-2017 with the European Commission programme for Employment and Social Innovation (EaSI). For full information see: ec.europa.eu/social/main.jsp?catId=1081



→ Study visit on cross sectoral health equity – September 2014



→ Study visit on intersectoral approaches for Active and Healthy Ageing – October 2014



→ Study visit on intersectoral approaches for Active and Healthy Ageing – October 2014

This annual grant, plus the investments of our members and partners, facilitates us in consistent training, learning and capacity building towards our core mission and commitments. We have offered online webinars and discussions for groups of countries or various partners within a state, to share learning on subjects relevant both to them directly and for EU policy or programme priorities.

With the kind support of one of our Finnish Members - the National Institute for Health and Welfare (THL) - we organised a study visit to Helsinki on cross sectoral health equity, particularly on employment, research and health system reform related approaches. We know moving towards health equity requires concerted action on the social determinants of health across policy sectors. Yet, despite a wealth of evidence policy action has been limited or seemingly ineffectual at reducing persistent health inequalities. Representatives from ten countries studied how THL and the national Government in Finland are tackling such concerns with cross sectoral approaches including advocacy.

In partnership with the Tuscany Region EuroHealthNet organized a two day study visit in Florence. The focus was on discussing intersectoral approaches for active and healthy ageing. Representatives from ten European countries along with several colleagues from within the Tuscany health community took part. Subjects studied included research, attitudes/beliefs, older people's involvement, reaching out to excluded people, adequate evaluation and the establishment of a hub for active and healthy ageing ideas, projects and experiences.

The learning from these focussed visits was well evaluated and is reported via eurohealthnet.eu/hpe/capacity-building

Annual Meeting

Our 2014 Annual Meeting was held over three days in central Berlin with the kind support of our national member BZgA. Participants were pleased to receive presentations on the national situation, not least from Dr Elisabeth Pott shortly before her retirement as director of BZgA after many years of active support for EuroHealthNet, for which we have been most grateful.

Over forty senior representatives of members and partners actively participated in plenary sessions and planning groups considering options for activities within HPE, PHASE and CIRI. This included considerable international exchanges, learning and capacity building.

There was a formal meeting of the governing EuroHealthNet General Council which holds our Executive Board and Secretariat to account. They approved our 2013-14 Report and Financial Report, ratified new membership applications, and elected our Executive Board to 2015. Representatives at the Annual Meeting were pleased to receive key note addresses from the European Commission and the World Health Organisation Regional Office for Europe, to hold follow up meetings with their representatives, and to discuss key developments at European levels, including the EU 2020 and WHO Health 2020 headline strategies in which we are involved.

The Executive Board has held further meetings in Brussels and by frequent call and video meetings to take forward the Annual Work Programme, Budget and ongoing Business Plan. Progress is reported to our next Annual Meeting held in Newcastle, England in June 2015.



↳ Prof. Dr. Elisabeth Pott – BZgA
Director until 2014



↳ Ingrid Stegeman – HPE Manager with
some of EuroHealthNet's members



↳ Agis Tsouros - WHO



↳ EuroHealthNet's General Council – Berlin - June 2014



↳ Michael Hübel – European
Commission – DG SANTE

Funds for health

The Structural Funds Guidance Tool for Health equity has been developed by EuroHealthNet following our role in Equity Action, the EU funded Joint

Action on Health Inequalities which concluded in 2014. The tool provides concrete examples and the practical information on EU Structural Funds and health equity that can directly be applied.



EU Structural and Investment Funds offer great opportunities for the improvement of health and health equity. Although health (equity) is not explicitly mentioned in the new Structural and Investment Funds headline objectives and has not been allocated a specific budget, health is explicitly included in priorities relating to, for example, 'Improving Employment' and 'Social Inclusion and Combating Poverty'. We are encouraging health and equity bodies to look into other sector areas to identify funding opportunities and partnerships. We offer online support that is:



Practical

The tool provides you with concrete examples and the practical information on Structural Funds and health equity that can directly be applied.



Easy to use

The tool has been developed in such a way that you can easily navigate between the topics and items.



Interactive

The tool offers you the possibility to comment, respond and promote your own work.

To access the guidance tool on European structural and Investment Funds for health please see: fundsforhealth.eu

Further information and reports on "Health Equity and Regional Development in the EU (Applying EU Structural Funds)" is available via: www.equityaction-project.eu/regions/structural-funds-2

Technical Working Groups (TWIGS)

To engage its partners most effectively in making the link for actions within and between states, EuroHealthNet has re-developed its mechanisms for specific expert inputs. This brings to bear the knowledge and experience of our members and partners on specific subjects or topics important at EU and national levels, all with a special focus on equity.









- For many years we have worked with the EU Platform on Diet, Nutrition & Physical Activity, where our annual commitments include support for actions tackling child obesity, monitoring approaches on equity, liaising with partners, and ensuring our participants are informed about evidence based approaches. Now we have established a new Technical Working Group on **NCDs** which will connect that work with that we are undertaking in the EU Joint Actions on chronic diseases and alcohol harm prevention which are reported below.
- For many years we have worked on Healthy Ageing and have established and updated a website focussed on that, connected with the EU Innovation Partnership on **Active & Healthy Ageing**. www.healthyageing.eu EuroHealthNet is part of research projects set out in our CIRI report. Now that is backed by a new TWIG of our member experts.
- In order to support the implementation of the WHO Framework Convention on **Tobacco** Control plus the EU Tobacco Products Directive, we have participated in the WHO advisory Group developing a draft roadmap of actions for states and partners. Our Tobacco TWIG will contribute to this and our new collaboration with the EU Smoke Free Partnership. www.smokefreepartnership.eu
- EuroHealthNet sees mental health and wellbeing as intrinsic to all our work. We are a collaborating partner in the EU Joint Action on **Mental Health & Wellbeing** www.mentalhealthandwellbeing.eu. We have therefore established a new TWIG to support that and our cross sectoral work, for example on psycho social factors at work, which was the focus on a policy dialogue that we organised in Brussels.
- Linking our extensive work with European Commission Directorates General for Health (DG SANTE) and for Employment & Social Affairs (DG EMPL) plus WHO Europe, we have contributed to evidence for health promoting **health systems**, performance assessments, and processes for sustainable investments in health. Our new Health Systems TWIG will take this forward.

Our Executive Board is leading the introduction and review process for TWIGS and will consider further possible initiatives during 2015 onwards.

Communications

This year we produced a new video, showing how people we work with see what we do: eurohealthnet.eu/about-us/who-we-are

Other new or improved communications tools and outputs this year have included:

-  – Three videos aiming at presenting EuroHealthNet and its working areas. [View videos online](#)
-  A bi-annual Online Magazine where we offer background articles on topical subjects and provide platforms for our Members to highlight bright ideas.
-  – Blog posts on events and topical subjects.
-  – EuroHealthNet's Facebook page: facebook.com/EuroHealthNet.eu
-  – EuroHealthNet's Twitter account: @Eurohealthnet1
-  – EuroHealthNet's LinkedIn account: www.linkedin.com/company/eurohealthnet

In particular, HPE consulted with our partnership to evolve a new online service from our familiar Health Action Memo which was sent monthly to our members. We introduced Calls & Opportunities Alerts: an exclusive service provided only to EuroHealthNet's members notifying:

- ✓ Relevant, timely and priority EU funding calls;
- ✓ Partnership and project opportunities;
- ✓ Opportunities to participate at high level EU events
- ✓ Information for taking part in EuroHealthNet's capacity building activities.

This valued rapid service has been welcomed by our members as great added value in their work at national, regional and municipal levels as well as connections with international organisations.

In addition to this core work, we are pleased to be associated with the EU Health for Growth Programme in Joint Actions established with EC and Member State contributions:

The EU initiative on tackling chronic diseases: JA-CHRODIS

The Joint Action CHRODIS addresses chronic diseases and promoting healthy ageing across the life cycle. The European Commission (DG SANTE) and associated European governments are collectively investing almost



€10 million in this work, which aims to identify and share the best approaches to reduce the burden of chronic diseases. The focus is on promoting health by addressing the underlying risk factors (mainly for cardiovascular disease and diabetes), and on identifying comprehensive and effective treatment and care paths for people, especially those suffering from more than one chronic condition.

In total, 63 organisations from 26 countries across Europe participate in JA-CHRODIS, which is led by the Spanish Ministry of Health and Social Services and the Institute of Health Carlos III (ISCIII). In addition to BZgA, EuroHealthNet members are also involved: the Institute of Public Health in Ireland, the Dutch National Institute of Public Health and the Environment (RIVM), the Finnish National Institute for Health and Welfare (THL), the Slovenian Institute of Public Health (NIJZ) and the Norwegian Directorate of Health.



↳ CHRODIS General Assembly – February 2015

- EuroHealthNet is leading the work on communication throughout the Joint Action. We were, for example, responsible for its visual branding. Over the past year, we also developed the JA-CHRODIS website (www.chrodis.eu) and maintain and update this on a continuous basis. We developed a dissemination strategy, that serves as the JA-CHRODIS 'communication roadmap'. We have in addition produced a newsletter as well as a number of press releases.
- In addition, EuroHealthNet is co-leading the work strand on "Good practices in health promotion and prevention of chronic diseases" together with our member the Federal Centre for Health Education in Germany (BzGA). The goal is to identify highly promising, cost-effective and evaluated policies and practices in the area of health promotion and chronic disease prevention, and to promote the exchange, scaling up, and transfer of effective approaches to different regions and countries. In 2014, EuroHealthNet conducted a review of existing work, a situation analysis and needs assessment relating to health promotion and disease prevention in Europe, to lay the foundations for this strand of work. This resulted in 14 country reports that are available for download on the JA-CHRODIS website.



For more information, visit our website
www.chrodis.eu

↳ CHRODIS Team

The EU initiative on effective HIV prevention: QUALITY ACTION

EuroHealthNet and our national member in Germany, BZgA, play leading roles in the EU Joint Action "Quality Action". This aims to increase the effectiveness of HIV prevention in Europe by using practical Quality Assurance (QA) and Quality Improvement (QI) tools.



Quality Action develops and adapts QA/QI tools especially for use in HIV prevention. The project will train at least 60 trainers and facilitators to support at least 80 HIV prevention programs and projects across the EU that will be applying the QA/QI tools.

Each country selects key people to be trained as part of the project. The HIV prevention projects or programs to apply the QA/QI tools are also selected and organised on the local level. Quality Action will provide a 'participation guide' to assist partners with getting involved. Based on the results of these pilot applications of QA/QI tools, the project will create a 'Charter for Quality in HIV Prevention' with agreed quality principles and criteria to assess and improve quality. A Policy Kit will promote the integration of QA/QI into HIV prevention strategies, policies and action plans at the European, Member State and Regional levels.

For more information about the Quality Action see www.qualityaction.eu

The EU initiative on preventing harm from alcohol: RARHA

32 Ministries, Institutes and other relevant organisations are taking part in the EU Joint Action on alcohol (RARHA). EuroHealthNet is involved in the dissemination work package of this three-year-initiative (2014-2016), which is being coordinated by the Ministry



of Health, General-Directorate for Intervention on Addictive Behaviours and Dependencies, in Portugal. We have produced two newsletters that are available on the RARHA website. EuroHealthNet Members the Finnish National Institute for Health and Welfare (THL), the Slovenian Institute of Public Health (NIJZ), Federal Centre for Health Education in Germany (BzGA) and the Norwegian Directorate of Health are also involved. This work focuses on:

- ✓ Improving comparable monitoring systems relating to alcohol consumption in EU Member States;
- ✓ Reviewing the scientific evidence regarding drinking guidelines in EU Member States;
- ✓ Providing guidance and tools to policy makers on effective approaches to reduce alcohol related harm.

During the course of the first year, much of the background work on the different topics has taken place. This includes data collection on drinking patterns and alcohol consumption, a survey on existing drinking guidelines and standard drink measures, and a study on the lifetime risk of dying from alcohol attributed conditions. Work undertaken in 2014 also involved a needs assessment amongst public health experts to identify the focus of a policy tool kit, plus collection of good practices, which will be on early intervention services, school based programmes and public awareness programmes.

For more information, visit the website www.rarha.eu

The EU Joint Action on mental health & wellbeing

EuroHealthNet is a collaborating partner in the Mental Health and Wellbeing EU Joint Action. This 3-year initiative that aims at building a framework for action in mental health policy at the European level and builds on previous work developed under the European Pact for Mental Health and Well-being. Involving 50 partners representing 27 EU Member States and Associated Countries and 12 European organizations, the Joint Action focuses on the promotion of mental health at the workplace and schools, development of actions against depression and suicide and implementation of e-health approaches, developing community-based and socially inclusive mental health care for people with severe mental disorders, and promoting the integration of mental health in all policies. The Joint Action is coordinated by the Universidade Nova de Lisboa, Portugal. It will end in January 2016.

For more information on Mental Health and Wellbeing EU Joint Action:

www.mentalhealthandwellbeing.eu

2014-2015 Healthy Workplaces campaign “Manage Stress”

EuroHealthNet is a partner of the 2014-15 Healthy Workplaces Campaign ‘Manage Stress’. The campaign, run by the European Agency for Safety and Health at Work (EU-OSHA), draws attention to the importance of tackling stress in workplaces. EuroHealthNet actively works on health equity through fairer employment and working conditions, most recently through its DRIVERS research project but also on successive policy and practice processes via PHASE, CIRI and HPE. Through 2014-2015 EuroHealthNet has disseminated campaign developments.

For more information see www.healthy-workplaces.eu/en



↳ Ingrid Stegeman, Health Promotion Europe Manager



↳ Cristina Chiotan, Public Health Senior Coordinator



↳ Anna Gallinat, Communications officer



The Platform for Health and Equity (PHASE)

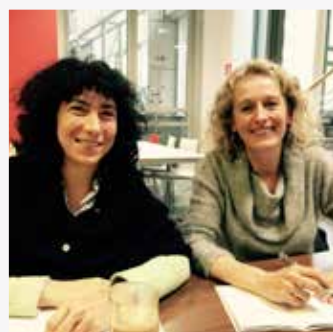
Created to actively contribute to the EU 2020 Strategy and the EU Semester approach, support the achievement of the related poverty target and help implement the European Social Investment Package, the European Platform for Action on Health and Social Equity (PHASE) is EuroHealthNet's advocacy and policy-oriented body. It brings together our Health Promotion Europe core network with a wider range of partners from relevant fields in public, private and voluntary sectors willing and able to work on addressing determinants of health and wellbeing.

In line with that open approach, we have produced a short video of people with whom we work to explain how PHASE can help: eurohealthnet.eu/phase/what-phase-doing



EU Semester

Europe 2020 is the EU's headline growth strategy for the coming decade; the Semester is the process by which the key economic and social objectives, including those impacting on health, are implemented. ec.europa.eu/europe2020/index_en.htm



↳ Boriana Goranova - European Commission - DG Employment
- Caroline Costongs

PHASE has monitored, analysed and disseminated the component parts, contributing evidence and advice to EU institutions and our partners on the ground. We are actively working with 12 states and regions on aspects of country specific recommendations to stimulate collaboration and action to meet goals. We use learning from the evaluations being carried out by CIRI (see later). We attended the Belgian Peer Review on Health Systems Performance Assessment (HSPA). We organise teleconferences and webinars; we advise on potential funding instruments developed by HPE; we plan cost effective "outreach" sessions at our own meetings and alongside EU Presidency and other external events.

The EU Platform against Poverty



The European platform against poverty and social exclusion is one of seven flagship initiatives of the Europe 2020 strategy for smart, sustainable and inclusive growth. It is designed to help EU countries reach the headline target of lifting 20 million people out of poverty and social exclusion. In order to achieve this, the European Commission has set quantitative targets including reducing the number of Europeans living below the national poverty lines by 25% by 2020. For more information see ec.europa.eu/social/main.jsp?catId=961

PHASE contends health systems have major roles to play by sustaining quality employment but also by promoting equitable wellbeing. We have participated on that basis in the stakeholder group of the Platform and its Annual Convention as well as the major EU conferences and events addressing poverty and exclusion, reporting widely through our communications channels.

We consulted our partnership to contribute a major input to the EC review of the EU2020 strategy, recommending deeper focus on equity, wellbeing and sustainable development to replace pro-austerity measures in states and at EU levels. EuroHealthNet is fully compliant with the EU Transparency Register; PHASE contributed to additional EC online public consultations relevant to stakeholder involvement, research, TTIP and other key objectives.

Social Investment Approaches

PHASE continues to advocate and develop the EU Social Investment Package (SIP): ec.europa.eu/social/main.jsp?catId=1044. To achieve this PHASE directly supports and actively contributes to the European policy framework for social investment and innovation, through a direct involvement in senior EU policy dialogues inside and outside the health domain. These dialogues continue to take place through active participation in the European platforms and fora as well as through the Social Open Method of Coordination and European Semester processes.



Partnerships and collaborations

PHASE has strengthened its collaboration agreements and partnerships with bodies of common interest. As part of EuroHealthNet it has engaged in, reported and disseminated over a hundred events, meetings, seminars and workshops with organisations in Brussels and EU state capitals to make the links between health, equity and social wellbeing that few others consistently do.

The EU Alliance for Investing in Children is a coalition established in the framework of an EU Joint Action within the EU Programme for Employment and Social Innovation (EaSI). The EU Alliance works together to provide expert support on EU policy, legislation and funding on tackling child poverty and social exclusion; promote child-centred, quality and comprehensive policies to tackle child poverty; and promote well-being, by providing expert support in the development of EU and national policies, legislation and funding programmes, in line with the European Commission Recommendation 'Investing in Children - Breaking the cycle of disadvantage'. Through the EU Alliance for Investing in Children, EuroHealthNet wants to work together with the European Institutions to tackle and prevent child poverty and social exclusion, which are key to achieving the Europe 2020 headline targets. EuroHealthNet has linked this Alliance closely to the learning from the DRIVERS study (See CIRI section later) www.alliance4investinginchildren.eu





EuroHealthNet and European Forum for Primary Care (EFPC) have agreed a mutual partnership to build understanding of objectives and activities, and to develop common and supportive approaches to tackle common goals where appropriate. As partners, PHASE and EFPC share position developments and policy statements. To cement this, we supported a workshop at the 2014 Primary Care Conference on community based approaches for health equity, featuring examples in Belgium and elsewhere. www.euprimarycare.org



PHASE is developing collaborations on integrated health and social care with particular relevance to EU processes on long term care and social protection. In late 2014 we co-hosted a seminar in Brussels with AGE Europe and Eurodiaconia on these topics featuring inputs from parliamentarians, regional representatives and EC officials. PHASE will continue to participate in the EU Social Care Conference and other related events, developing its work through the new EuroHealthNet Health Systems TWIG (see HPE earlier).



EuroHealthNet is also supporting AGE Platform Europe in the thematic network – AFE INNOVNET. The AFE-INNOVNET network's overarching goal is to set up a large EU wide community of local and regional authorities and other relevant stakeholders across the EU who want to work together to find smart and innovative evidence based solutions to support active and healthy ageing and develop age-friendly environments across the EU.

A strong collaboration exists with WHO thanks to the involvement of WHO-Europe in an advisory capacity into AFE-INNOVNET. In addition to that the technical proposal 'Age-Friendly Environments in Europe' conducted by WHO-Europe with the funding support of DG Employment, Social Affairs and Inclusion is very complementary to the work to be developed by AFE-INNOVNET consortium. www.afeinnovnet.eu

Equity in EU Health Programmes

The EU Health for Growth Programme seeks to strengthen and emphasise the link between healthy populations as a key driver for economic growth. The programme is geared towards actions with clear EU added value and that are in line with the Europe 2020 objectives. The general objective of the Health for Growth Programme is to work with the Member States to encourage innovation in healthcare, increase the sustainability of health systems, to improve the health of the EU citizens and to protect them from cross-border health threats. The programme seeks to improve the way Member States cooperate in the area of health which clearly fits with the EuroHealthNet Strategic Development Plan to 2020.

ec.europa.eu/health/programme/policy/proposal2014_en.htm

EuroHealthNet is a founding member of the EU Health Policy Forum. PHASE has participated actively in discussions and development planning, with frequent liaison with DG SANTE, other relevant EU Institutions in Brussels, stakeholder bodies from member States and component organisations.

Events in which we have participated

Apart from its “outreach” programme on the EU Semester in Member States, the role of PHASE is to engage primarily in EU Institutional centres of Brussels, Luxembourg or Strasbourg. In so doing over 100 events have been attended, monitored, reported, disseminated and followed up, in many cases with presentations, speeches or comments made. Beyond those regular events, there has been exceptional cost effective participation by EuroHealthNet in international conferences:

European Public Health Conferences

At the 2014 event in Glasgow a significant presence was achieved by a direct partnership with the organising committee. EuroHealthNet helped lead a major plenary session on health and social equity, took part in several symposia and workshops and gained prominent attention for its outputs on measures to address social determinants of health equity in welcome liaison with other EU FP7 research projects. Preparations are similarly developed for participation in Milan 2015 linking equity with sustainable development.

ephconference.eu



↳ Caroline Costongs & Nicoline Tamsma at the European Commission - Meeting with the health representative from EC President Juncker Cabinet



↳ EuroHealthNet presents DRIVERS – November 2014



↳ Linden Farrer – EuroHealthNet's Research & Evaluation Co-ordinator presents DRIVERS-November 2014



↳ Caroline Costongs EuroHealthNet's Managing Director



↳ Group Picture at 64th annual meeting of WHO Europe

European Health Forum Gastein

EuroHealthNet supported a workshop on social and economic progress through health in states seeking EU accession in the South East Region of Europe, contributed to a Foresight for Public Health initiative led by RIVM and was able to participate fully in this annual event through welcome partnership with conference organisers. www.ehfg.org/home.html

WHO European Regional Committee

EuroHealthNet was again invited to attend this crucial 64th annual meeting of WHO Europe member states as a valuable opportunity to confirm collaboration on numerous action plans and programmes. www.euro.who.int/en/about-us/governance/regional-committee-for-europe.

The recorded statement of Caroline Costongs can be found here: eurohealthnet.eu/media/eurohealthnet-statement-first-implementation-report-who-health-2020-strategy

A dynamic approach to communications and advocacy

In 2014 -15, PHASE helped EuroHealthNet to reshape its brand and elaborated some new communication channels with a clearer, easy access gateway linking them all via www.eurohealthnet.eu With the aim to always be present on the European stage EuroHealthNet wants to stimulate action not only at European level, but also at national, regional and local levels.

Let's talk: Let's talk about policies and practices is a new section for stakeholders interested in social issues and partners from relevant fields in public, private and voluntary sectors willing to advocate for health and wellbeing, and reduced inequalities are invited to engage in the discussion.

Health Highlights: We delivered monthly issues of our popular online newsletter. How do we know it is popular? We experimented with a change to a smaller subscription list, but demand from our 2000 readers made us open it to all!

Policy Précis: We produced four issues of our Policy Précis summaries of topical issues bridging health and social policies; during this year we featured Social Inclusion; Economic Crisis Impacts; Long Term Care; Mental Wellbeing. Our series continues through 2015 based on analysis and demand.



News & press releases: We issued frequent news and media releases on activities, events and public policy subjects, always based on evidence-led advocacy.

Briefings and policy papers on key developments were provided for partners, accessed via the internal section of our site, with some published for public use.



Shared learning and ideas for communicating

EuroHealthNet set up “EuroHealthComm”, EuroHealthNet’s internal working group that aims to communicate better at all levels of governance. It is composed of those people responsible for external communications within the EuroHealthNet partnership. EuroHealthComm multiplies communication campaigns and projects at European and at national, regional and local levels. Its learning continues to be shared with partners in and beyond the EU, for example members of the South East Europe Health Network (SEEHN).



↳ Leonardo Palumbo,
Senior Health & Social
Investment Co-ordinator



↳ Karoline Noworyta,
Advocacy and Healthy
Ageing Co-ordinator



↳ Ariane Moret,
Communications
Co-ordinator



Centre for Innovation, Research & Implementation (CIRI)

CIRI is our research and knowledge building pillar. It comprises not only our core Health Promotion Europe members, but also senior experts, researchers and social innovators from bodies aiming to develop case studies, to test innovative pilot projects, to evaluate and to analyse examples of effective and sustainable approaches to health and wellbeing across all groups in society. Links are made to related and relevant sectors including employment and social affairs, economic sectors and in particular with sustainable development and environment.

CIRI supports the work of the Social Protection Committee and initiatives by EU agencies such as EuroFound, the EEA and others, as well as the WHO2020 Wellbeing targets and indicators 'beyond GDP'. CIRI also links health with other cross-cutting issues: early years, ageing, disabilities, working conditions, poverty and social exclusion.

CIRI also evaluates European projects, supporting consortia's performance and collectively identifying and responding to problems. It successfully evaluated the ReTHI project, which aimed to develop regional action plans to reduce health inequalities. In 2014-2015 it is involved in evaluating active and health ageing strategies in three Italian regions and in Slovenia.

Case studies and pilot projects are developed in the context of Horizon 2020 or in relation with other funding mechanisms.



DRIVERS: a research study on social determinants of health

DRIVERS was a three-year research project funded by the EU's Seventh Framework (FP7) Programme. It aimed to find solutions to improve health equity through policy and practice in early childhood, fair employment, and income & social protection. It was co-ordinated by EuroHealthNet and involved leading centres of research and organisations representing public health, civil society and business.

DRIVERS has now ended and it is possible to reflect on its many achievements: 19 peer-reviewed papers in leading academic journals and more to come, three public scientific reports, 19 case studies carried out across Europe involving many EuroHealthNet members, five synthesised case study reports, publication of three concise and high-quality policy briefs explaining the issue, solutions and opportunities to take action in the DRIVERS areas,

a set of recommendations laying out how policy makers can implement policies across sectors to improve health equity across the life course, three final events involving many important stakeholders and decision makers, and finally translations of the policy briefs and recommendations into several different European languages.

The project had some very strong and clear messages to disseminate, which EuroHealthNet is working hard to promote. These were informed by an innovative package of work - led by EuroHealthNet - that focused exclusively on advocacy for health equity, and whose main 'lessons' are provided on a tailor-made section of the DRIVERS website, the "Advocacy for health equity toolkit". health-gradient.eu

In the final recommendations the project and its partners described four key principles by which policy makers can implement cross-sectoral policies to improve health equity:

1. Universality of access,
2. Addressing disadvantage,
3. Accounting for context and respecting rights,
4. Evidence-based policy.

These four principles are reflected in the solutions put forward for improving health equity in the DRIVERS areas:

➤ **Universal, quality early childhood programmes that are responsible to need.** A range of services and policies are required to reduce health inequalities in early childhood. This includes parenting and family support, high-quality early childhood education and good healthcare in the pre- and postnatal period. These need to be tailored to social and economic need and recognise and build on the knowledge, skills and capacities of parents. Interventions that are particularly effective appear to be those that augment parental capacities, improve housing conditions, and those that provide day care, speech and psychological therapies for children. The earlier these programmes are offered, the better the outcomes will be.

➤ **Improvements in quality of work,** particularly for people in lower occupational groups. No single sector can tackle 'unfair' work and employment (defined by material and psychosocially stressful conditions). It requires the active involvement of many stakeholders, including employers, trade unions and occupational health and safety professionals. As a first step, adversities at work need to be systematically monitored. As a second, organisational-level interventions should tackle the multiple sources of adversity and take a participatory approach involving employers and employees. Finally, EU-level policies are needed to reduce the variations in the quality of work seen in different parts of Europe. Particular efforts are for those lower occupational groups that suffer workplace adversities the most.



↪ Claudia Marinetti EuroHealthNet's Research Manager





- Well-designed social protection systems.** Higher levels of social spending are generally linked to smaller health inequalities. However, DRIVERS' research goes further, and suggests that the proportion of those covered by social protection is crucial. This means that 1) countries with low coverage rates should increase them to 90 per cent or higher, 2) countries should strive to increase replacement rates once an almost complete coverage rate is attained. Social protection should be designed to protect against a variety of risks and particular efforts need to be paid to those at risk of being marginalised. One way of doing this is minimum income benefits, and another is to invest in active labour market programmes. Finally, the case studies suggested that helping people to obtain the protection they are legally entitled to, providing integrated support to those with complex needs, and providing front line staff with the means to treat their clients appropriately are also important aspects of a well-designed social protection system.

DRIVERS Final conference



↳ Ralf Jacob - European Commission - DG Employment
- Social Protection and Activation Systems



↳ Julie Ward - MEP; Sir Michael Marmot - UCL Institute of Health Equity; Caroline Costongs – EuroHealthNet's Managing Director



↳ Panel "Policy solutions to inform social and health agendas" : MEP Nessa Childers; MEP Cristian-Silviu Busoi; MEP Biljana Borzan; Rudi Van Dam -Social Protection Committee



↳ Panel "Taking stock of the evidence base advanced by DRIVERS": Peter Goldblatt - UCL Institute of Health Equity; Johannes Siegrist - University of Düsseldorf; Sir Michael Marmot - UCL Institute of Health Equity

IROHLA – a research study on health literacy and older people

EuroHealthNet is part of the FP7 project - IROHLA, which aims to take stock of on-going health literacy programmes and projects. It makes use of knowledge and experience of programmes in other sectors (e.g. private and social sectors) to be applied to the health sector. The project identifies, validates and presents a set of up to 20 interventions, which together constitute a comprehensive approach for addressing health literacy needs of the ageing population in Europe.

These interventions will be part of an evidence-based guideline for policy and practice for local, regional and national government authorities to start action. The project involves representatives of the ageing population, academia, all levels of governments, the business community and other stakeholders to ensure that feasibility, usefulness and effectiveness of the selected interventions. In January 2014 EuroHealthNet organised a policy debate on health literacy and active ageing in the European Parliament.

For more information: www.irohla.eu



↪ Heinz Becker, MEP, workshop organised by EuroHealthNet – January 2015

ROAMER: a research project on mental health and wellbeing

ROAMER is a three-year project funded by the European Commission, under the Seventh Framework Programme, to create a coordinated road map for the promotion and integration of mental health and well-being research across Europe, based on a common methodology and conceptual framework that covers the full spectrum of biological, psychological, epidemiological, public health, social and economic aspects of mental health and well-being. ROAMER combines a consortium of renown mental health research scientists, with a methodologically sound, pragmatic and comprehensive approach with an extensive stakeholder involvement. EuroHealthNet is a collaborative partner, through which CIRI has sought to provide relevant advice and disseminate knowledge based outputs.

For more information: www.roamer-mh.org



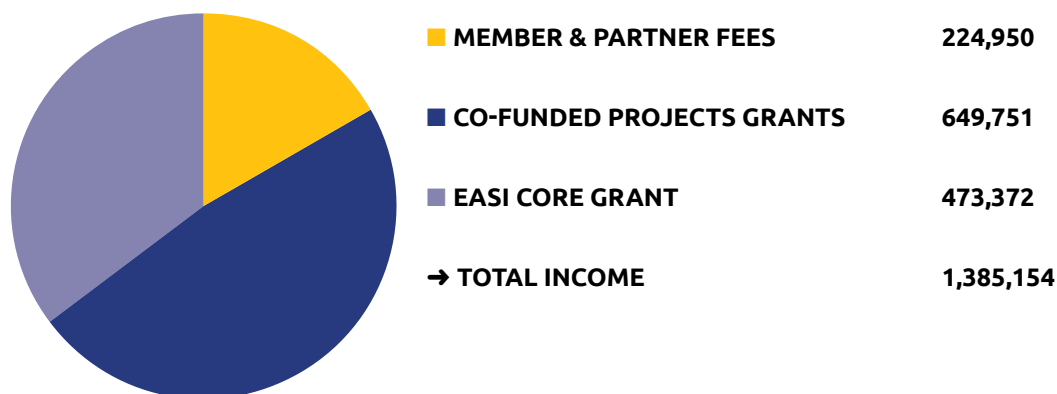
↪ Claudia Marinetti, Research and CIRI Manager



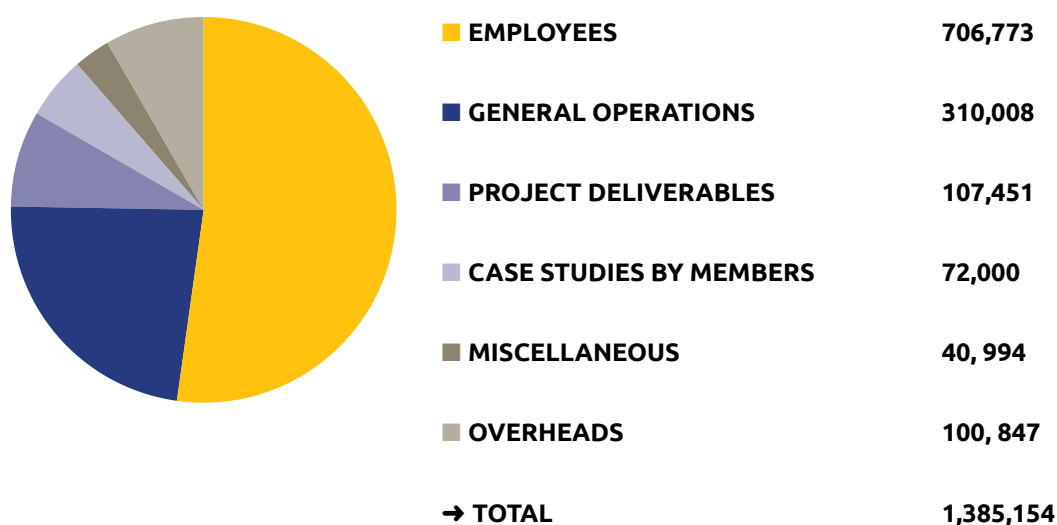
↪ Linden Farrer, Research & Evaluation Co-ordinator

Financial Report 2014

INCOME 2014



EXPENDITURES 2014



How we are funded – and how we manage our funds

The purpose of all our members unanimously adopting our Strategic Development Plan 2014 – 2020 was to demonstrate a strong commitment to pursuing our mission for the foreseeable future in sustainable ways, and to empower participation from a wider range of stakeholders than was possible previously. Therefore we have an ambitious Partnership Development Strategy, which includes the operation of a constant rolling Business Plan

- Consulted with our partners and key stakeholders;
- Decided by the annual General Council of all our members and partners;
- Governed and scrutinised by our elected Executive Board;
- Managed and implemented by our Brussels office.

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

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

Therefore also for the period 2014 -2015, as in the years before, we have not accepted funding for any of our work from private sector sources.

Each quarter we produce an updated financial report for our Executive Board to scrutinise via our elected Treasurer. Our annually audited financial report is reported to all partners and scrutinised by our General Council. EU co-funded projects are independently audited according to EC rules. Our procurement, risk assessment, asset management and financial rules are set out for all members, partners and employees in our How we work Operational Framework Document.



↪ Renaud Rollet,
Administrator and Finances

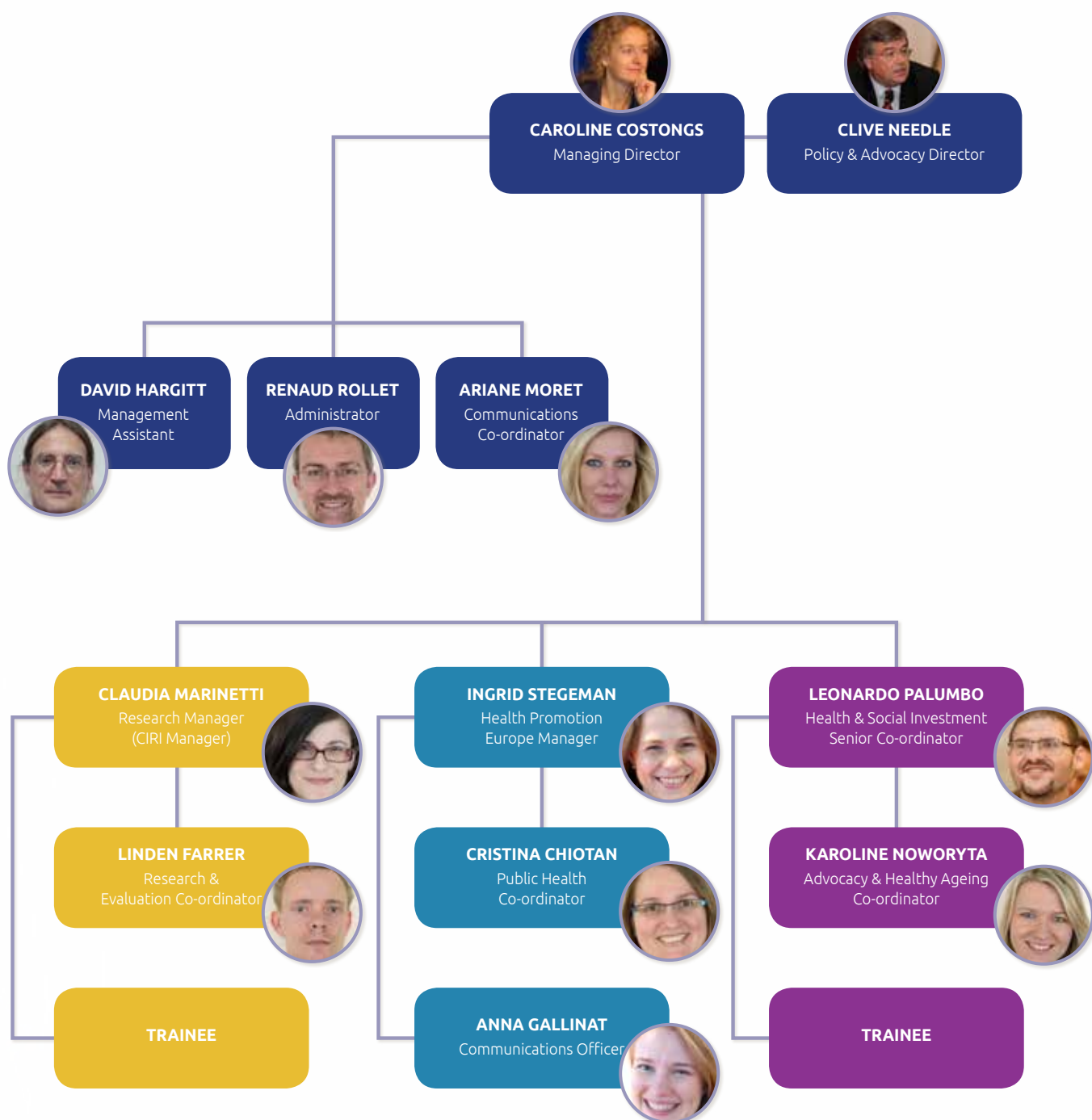


↪ David Hargitt,
Management Assistant



↪ EuroHealthNet's Executive
Board – April 2015

How we work



In 2000 EuroHealthNet had just two part time staff in a shared office, with support from projects co-ordinated by our member agencies. Now we have a high quality professional office near to EU institutions and many highly qualified employees, advisors and technical support providers.



↳ Team away day 2015



↳ Meeting with EuroHealthNet's accountant Pyxis

We are grateful for the diligence and hard work of all employees during the period of this report, and for the inputs and commitment of member agencies.

Stecy Yghemonos and Makfire Alija have moved on to develop careers elsewhere in which we wish them well and thank them for their contributions while with us. We have since been fortunate to recruit Leonardo Palumbo and David Hargitt to our Brussels office.

We thank all our interns and volunteers who have contributed and, we hope, learnt much in their temporary work with us:

Marta Anguera, Marie Assmann, Ann Marie Borg, Enrico Camerin, Denitsa Dimitrova, Philip Hines, Adrián Lucio González Brito, Ana Oliveira, Ana Marija Pongrac.

We could not have developed our communications so well without the technical expertise of Jason Hood, Christel Beulque and Lee Glasby.

We thank our accountant Pyxis, our professional property providers at Rue de la Loi 67 in Brussels and our suppliers of necessary office provisions and welcome healthy fresh food, plus others too numerous to mention who help us function.

We thank our former President David Pattisson for his leadership up to his retirement at the Berlin Annual Meeting in June 2014 and his valuable facilitation of the Florence study visit.

How to join or contact us

For full information about our work or new Membership, Partnership and other participation opportunities for 2015 -16 please contact

David Hargitt

Management Assistant

Email: d.hargitt@eurohealthnet.eu



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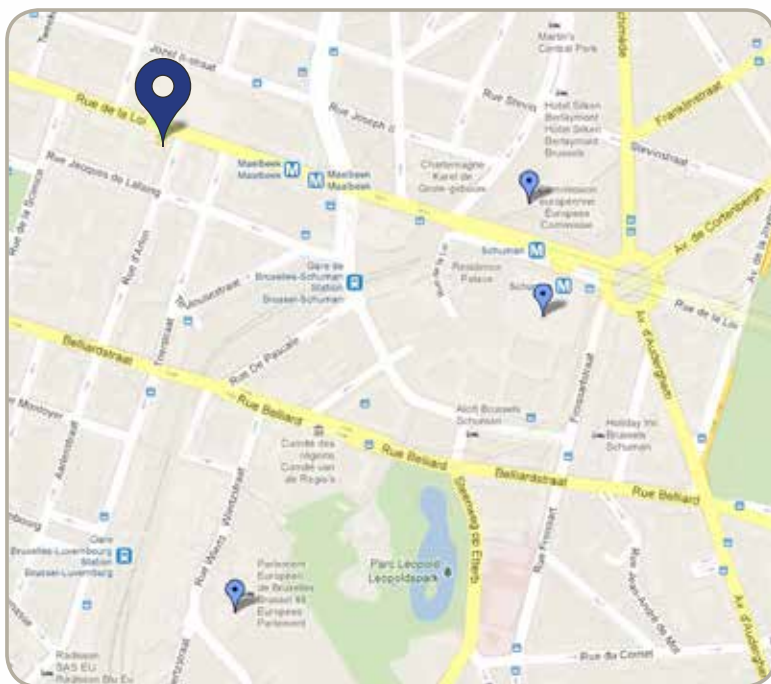
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www.eurohealthnet.eu



**A strong presence in Brussels,
working for health and equity
close to the EU, stakeholders
and Member State Institutions:**



A strong presence online, at your desk, in your community:

www.eurohealthnet.eu

We are a not for profit partnership of organisations, agencies and statutory bodies working from local to regional, national and international levels across Europe. Our mission is to help build healthier communities and tackle inequalities within and between European states.

EuroHealthNet achieves this through its partnership framework, by supporting members' work in EU and associated states through policy and project development, networking and communications.

EuroHealthNet is committed to partnership growth, thus ensuring the organisation continues as a valued partnership for networking and policy development. We welcome applications for eligible new bodies to join us.

To see the benefits our members and partners receive and to apply, contact d.hargitt@eurohealthnet.eu



Our Members *on 2nd June 2015*



Austria	Austrian Health Promotion Foundation (FGOE) - www.fgoe.org
Belgium	Flemish Institute for Health Promotion and Disease Prevention (VIGeZ) - www.vigez.be
Czech Republic	National Institute of Public Health (SZU) - www.szu.cz
Denmark	Danish Health and Medicine Authority (SST) - www.sundhedsstyrelsen.dk
England	North of England EU Health Partnership (NEEHP) - www.northofenglandeuhealth.eu
England	The Health and Europe Centre, NHS Kent & Medway - www.healthandeuropecentre.nhs.uk
Finland	National Institute for Health and Welfare (THL) - www.thl.fi
Finland	Finnish Society for Social and Health (SOSTE) - www.soste.fi
France	National Institute for Prevention and Health Education (INPES) - www.inpes.sante.fr
Germany	Federal Centre for Health Education (BZgA) - www.bzga.de
Greece	Institute of Preventive Medicine Environmental and Occupational Health (PROLEPSIS) - www.prolepis.gr
Hungary	National Institute for Health Development (OEFI) - www.oefi.hu
Ireland	Institute of Public Health Ireland - www.publichealth.ie
Italy	Veneto Region - www.regione.veneto.it
Italy	Tuscany Region - www.regione.toscana.it
Italy	Local Health Authority for Social and Health Integration (Federsanità Anci)* - www.federsanita.it
Latvia	Riga City Council Department of Welfare - www.ld.riga.lv
Netherlands	National Institute for Public Health and the Environment (RIVM) - www.rivm.nl
Netherlands	Dutch Institute for Healthcare Improvement (CBO) - www.cbo.nl
Norway	Norwegian Directorate of Health - www.helsedirektoratet.no
Poland	National Institute of Public Health - National Institute of Hygiene - www.pzh.gov.pl
Portugal	National Institute of Health Doutor Ricardo Jorge* - www.insa.pt
Scotland	NHS Health Scotland - www.healthscotland.com
Slovenia	National Institute of Public Health (NIJZ) - www.nijz.si
Spain	Universidad de La Laguna - www.ull.es
Spain	Public Health Secretary - Ministry of Health of Catalonia - www.salutpublica.gencat.cat
Spain	Ministry of Health, Social Services and Equality - www.msssi.gob.es
Sweden	Stockholm County Council - www.sll.se
Sweden	Public Health Agency of Sweden - www.folkhalsomyndigheten.se
Sweden	Public Health Committee - Region Västra Götaland - www.vgregion.se
Wales	Public Health Wales - www.publichealthwales.org

Our Partners *on 2nd June 2015*

Belgium: Erasmus University College – Department of Healthcare and landscape Architecture - www.old.erasmushogeschool.be	Montenegro: Institute of Public Health of Montenegro - www.ijzcg.me
Belgium: Observatoire Wallon de la Santé* - www.wallonie.be	Netherlands: ADAPT - Adapting European health Services to Diversity - www.cost.eu
Czech Republic: The Public Health Authority of Olomouc Region - www.khsolc.cz	Netherlands: Dutch Association of Mental Health and Addiction Care (GGZ Nederland) * - www.ggz nederland.nl
England: Blackburn with Darwen Borough, Council Public Health Department - www.blackburn.gov.uk	Norway: Faculty of Social Sciences and Technology Management - Norwegian University of Science and Technology - www.ntnu.edu
England: Health Equalities Group* - www.hegroup.org.uk	Portugal: Centre for Social Research and Intervention - Lisbon University Institute ISCTE-IUL * - www.cis.iscte-iul.pt
England: Centre for Health and Inequalities Research, University of Durham * - www.dur.ac.uk	Sweden: Swedish Association of Local Authorities (SALAR) - www.skl.se
Greece: Society for the Development and Creative Occupation of Children (EADAP) - www.eadap.gr	Switzerland: Global Health Equity Foundation - www.ghef.org
Macedonia: National Public Health Institute of Macedonia - www.iph.mk	

* Organisations to be approved as a member or as a partner at EuroHealthNet's General Council on 2-4 June 2015

We gratefully thank all our members and partners for their active support, contributions to and investment in the work of HPE, PHASE and CIRI in 2014-2015.