



EuroHealthNet Policy & Strategy Meeting 2022

– Monday, 21 February 2022

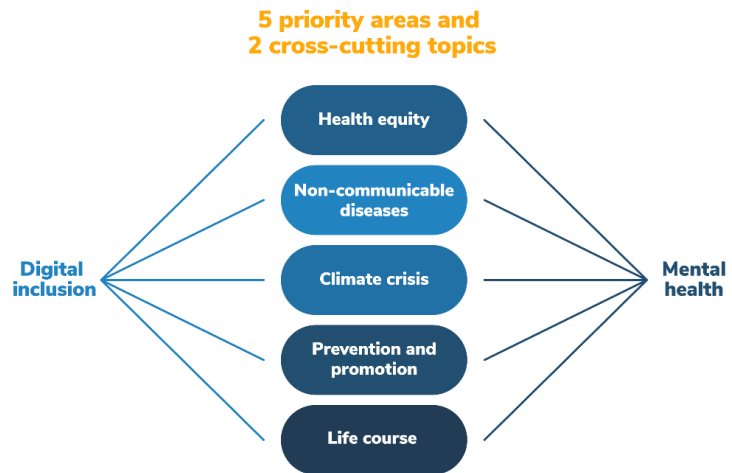


The EuroHealthNet Annual Policy and Strategy Meeting for members, associate members and observers was held on Monday, 21 February 2022, online. The meeting focused on taking stock of the most relevant initiatives of the EU and WHO to achieve health equity, to strategise and discuss how we can work together in 2022.

Session 1: Introduction: Our health equity mission

Dr Mojca Gabrijelčič (President EuroHealthNet, Senior Advisor at National Institute of Public Health, Slovenia) – EuroHealthNet Strategic Development Plan and our core operating grant

Dr Gabrijelčič opened the meeting and offered a summary of the EuroHealthNet's [Strategic Development Plan \(SDP\)](#) for 2021-2026. She highlighted key topics for engagement to improve health equity and wellbeing, as well as the need to enhance interaction between partners. The SDP consists of three parts: (1) Building on the Foundations (2) Looking at the Future and (3) Achieving Change.



Dr Gabrijelčič also provided a brief overview of the EuroHealthNet core operating grant from the European Commission's Directorate General Employment and Social Affairs (DG EMPL) for 2022-2025, including annual policy spotlights. The theme for 2022 is 'Redefining the value of care and skills across the life course for a strong social Europe.'

She concluded that the Strategic Development Plan and 4-year operating grant give the EuroHealthNet office a sound platform from which to continue developing the Partnership through 2025. The strong focus on the European Pillar of Social Rights (EPSR) in the core grant complements the SDP and ensures that EuroHealthNet brings an 'EU policy' lens into its strategy and work to enhance overall impact. The new core grant also supports new activities which are designed to make EuroHealthNet's work – and the opportunities offered by the EU – even more accessible to members.

She closed by encouraging all members to remain actively involved to help define priorities for the annual business plan and inform the content of EuroHealthNet activities.

The image shows a Zoom meeting interface. At the top, there is a grid of video thumbnails for participants. The main content area displays a presentation slide with the following text:

Annual "Policy Spotlights" 2022-2025

2022	2023	2024	2025
<p>Redefining the value of care and skills across the lifecourse for a strong Social Europe</p> <ul style="list-style-type: none"> • EPSR principles 1-3, 9, 11, 12, 16, 18 • EU Care Strategy • EU Child Guarantee • OSH Framework • EU Pact for Skills 	<p>Social protection and health systems fit for the new world: Investing in resilient, equitable and integrated health and social protection systems</p> <ul style="list-style-type: none"> • EPSR principles 10, 12, 14, 16, 18 • European Health Union plans • WHO Barcelona office on financial insecurity work • Intersectoral solutions (ESF+, EaSI, Erasmus) 	<p>Fair transitions to a new world of work: the economy of wellbeing and ensuring a socially just green and digital transformation</p> <ul style="list-style-type: none"> • EPSR principles 1,3, 4, 8,9, 10 • EU Social Climate Fund • Wellbeing Economy Alliance (WeAll) • UNFCCC • Green Deal • Action Plan on Social Economy 	<p>EU social rights and health equity: the way forward to achieve EU 2030 and SDG targets</p> <ul style="list-style-type: none"> • All 20 EPSR principles • UN Sustainable Development Goals SDGs • 2025 review of EPSR • State of health equity in EU

Prof Dr Martin Dietrich (Executive Board Member, Director Federal Centre for Health Education Germany – Reflection on our Health Equity Mission)

Reflecting on EuroHealthNet’s Health Equity Mission, Prof Dietrich noted that the pandemic has shown that governments need to start prioritising health equity and pave the way for a fairer society. Covid-19 has led to more awareness of health inequalities and the need to invest in disease prevention and health promotion. There is a need to ensure health equity is on policy agendas at all levels of governance. Building capacities within our institutions to do so is important, as is taking the actions possible within our sector and working with other sectors to encourage them to act.

There is a big opportunity following Covid-19 to work together to play a role in ensuring that the societal transitions are fair and equitable. EuroHealthNet and some of its members have recently participated in JAHEE (the EU Joint Action Health Equity Europe). This Joint Action produced considerable resources and political momentum, which – along with better and comparable data – needs to be more widely circulated. With this evidence, the injustices faced by many can be understood, and we can get a clearer picture of the barriers and enablers of health equity to identify how we can make improvements. Continued investments in health and social infrastructure are essential to strengthen our capacities to advocate for, and act on health inequalities. EuroHealthNet has a valuable role to play, and Prof Dietrich called on all members to take forward lessons and resources from JAHEE via the EuroHealthNet Partnership.

Session 2: Health Equity relevant Initiatives from the European Commission and WHO Europe

In Session 2, EuroHealthNet members heard from leaders in DG SANTE, DG EMPL and at WHO Europe about relevant initiatives and opportunities for the coming year.



John F Ryan, Director Public Health at the European Commission's Directorate-General for Health and Food Safety (DG SANTE) – The NCD Initiative ‘Healthier Together’ and SANTE’s priorities around health equity

Mr Ryan presented a number of SANTE’s activities of relevance to EuroHealthNet Partnership members. He particularly focused on DG SANTE’s new initiative – “[Healthier together - EU Non-Communicable Diseases \(NCDs\)](#)” – calling for best practices on helping Member States to reduce the burden of NCDs. The initiative will cover the period 2022-2027 and include five strands: cardiovascular diseases, diabetes, chronic respiratory diseases, and mental health and neurological disorders, and a horizontal strand on health determinants. In each of these strands, the initiative will promote the reduction of health inequalities, contribute to Health in All Policies principles, and guide the European Commission’s (EC) investments in health. In close consultation with representatives of national Ministries of Health, international organisations, and stakeholder community, for each of the strands the European Commission will produce policy papers to steer potential new policy initiatives at the EU level but also for (sub-)national implementation via future EU4Health-funded projects and joint actions.

Mr Ryan continued by highlighting ECs work implementing the Roma and the LGBTQI+, youth and ageing health initiatives, and [Europe’s Beating Cancer Plan](#). The plan is accompanied with the launch of the [Cancer Inequalities Registry](#) to boost EU Member States quality of statistics on inequalities in cancer incidence, and policy frameworks, including in prevention. Beyond focusing

on cancer and direct covid-19 health systems responses, the [EU4Health](#) and [Horizon Europe](#) Programmes for 2022, as well as the [Recovery and Resilience Funds \(RRF\)](#) are expected to invest heavily into NCD prevention, mental health, and reducing inequalities in health, including among vulnerable groups. But all of this requires strategic prioritisation and linking policy creation, reflections on the NCD priorities and EU financial instruments. In reaction to this, the audience debated (sub-)national capacity of various public health authorities to absorb EU funds for health, and combine and dedicate them to long-term public health improvement objectives (reforms, underlying structural determinants).

[Katarina Ivanković-Knežević, Director Social Affairs at DG EMPL – Taking forward the European Pillar of Social Rights, new EU Care Strategy and EU Child Guarantee](#)

Ms Ivanković-Knežević started with her appreciation of EuroHealthNet's value for capturing and ensuring synergies between health and social inclusion policies of the European Commission, with a particular attention to health inequalities and socio-economic determinants of health, and keen interest in the wellbeing economy approach.

She further outlined the way that covid-19 has exposed and exacerbated all the challenges for health care and long-term care, including the impact on workforces and quality of care. This year, a new Communication on a [European Care Strategy](#) will be presented. The new strategy will highlight opportunities for improving the working conditions in the sector and closing the gender employment gap, while highlighting the importance of access to, availability and quality of care across the life course. It will include a revision of EU targets for early childhood education and care (the “Barcelona targets”), and a proposal for a Council Recommendations on long-term care. She mentioned several opportunities to contribute with evidence and practice to targeted consultations on the 2022 dossiers.

Lastly, Ms Ivanković-Knežević presented the [European Child Guarantee](#) for securing access to essential services for children in need and under risk of poverty and social exclusion. DG EMPL is working closely with national coordinators designing the implementation of the Guarantee on the ground. Ms Ivanković-Knežević thanked and encouraged EuroHealthNet to continue working on health aspects of the Guarantee and to dedicate attention to other Social Pillar principles across the life course.

[Katrine Bach Habersaat. Regional Advisor World Health Organisation \(WHO\) Europe – The Behavioural and Cultural Insights Resolution and Action Framework](#)

Ms Bach Habersaat presented the [Behavioural and Cultural Insights \(BCI\) Flagship](#) from WHO Europe, an core element of the European Programme of Work 2020-2025, The WHO defines BCI as “understanding the contextual and individual factors that affect health behaviours and using those insights to design and strengthen health policies, health services, health communication and other health promotion effects”.

Since Covid-19 broke out, the BCI Flagship has supported many countries to understand population behaviours and inform containment measures. The WHO Europe has published several policy consultations and held a number of meetings for Member States to share their experiences. It is now preparing a Resolution and Action Framework to be adopted at the Regional Committee meeting in September 2022. WHO Europe plan for countries to commit to meeting strategic commitments and reporting back their findings in areas which include: research; resources and structures; awareness and support; applying insights; monitoring and evaluation; and national strategies.



The image shows a Zoom meeting interface. The top portion displays a grid of participants' video feeds. The main content is a presentation slide with the following elements:

- Title:** Proposed partner engagement and commitment in the expanded framework
- Logo:** World Health Organization Regional Office Europe
- Illustration:** A person in a patterned jacket standing next to a large book titled "HEALTH".
- List of Commitments:**
 - Review text
 - Provide case examples, intro to your work
 - All logos (to be confirmed)
 - Annual update on activities related to BCI for health in the Region
 - Participate in annual meeting
 - Co-organize and/or co-fund annual meeting
 - Commitment to support and enhance BCI work for health in the Region
- Footer:** HABERSAAT, Katrine Bach and the number 10.

Session 3: The EuroHealthNet Policy and Strategy Plan

Session 3 offered the opportunity for EuroHealthNet Members to learn more about specific EuroHealthNet activities and discuss how to get involved. It began with presentations from EuroHealthNet staff, introducing the topics that would be discussed in the breakout sessions.

Dorota Sienkiewicz, Senior Policy Coordinator – EuroHealthNet policy and advocacy action plan for EU and WHO (working groups 1 & 6)

Ms Sienkiewicz presented EuroHealthNet’s 2022 policy and advocacy plans. The plan is currently being finalised and will build on EuroHealthNet’s mission and collective objectives,

priority areas identified in the [Strategic Development Plan 2021-2025](#), European Commissions' WP 2022, WHO EPW, and other policy developments and processes ongoing and planned at the EU level. There is a need to shape policy to EuroHealthNet's advantage, ensuring bottom-up collaboration. EuroHealthNet's proposal is to advise and work on EU/European policy dossiers including:

- Healthier Together in the EU (EC's NCDs initiative)
- EU's Health Emergency Response and Crisis Preparedness
- the European Care Strategy
- developing adequate minimum income schemes
- EU Occupational Health and Safety and Psychosocial Risks
- a new EU mental health strategy
- EU Skills Agenda focusing on digital-health literacy

Ms Sienkiewicz called on all Members to carefully consider their priorities for the year to help guide EuroHealthNet's policy monitoring and analysis activities.

[Alison Maassen, Programme Manager – Specific opportunities for engagement \(EPSR, EU4Health, national contact points – working groups 2&4\)](#)

Ms Maassen built on the first presentation from Dr Gabrijelčič, further describing specific opportunities for engagement for Members under the core operating grant for 2022-2025. One specific activity relates to the European Pillar of Social Rights (EPSR). The EPSR offers EuroHealthNet a way to frame its actions on the social determinants of health and to address systematic inequalities and injustices. EuroHealthNet proposes developing EPSR flashcards involving developing a webpage dedicated to each of the principles. The flashcards should guide policy and provide inspiration and case studies to develop actionable solutions for each country.

Another opportunity for Members lies in collaborating on the [EU4Health 2021-2027 programme](#), which represents the EU's largest investment in health to date. The goal is to foster health throughout the Union, with specific objectives on disease prevention, health promotion, and international health initiatives and cooperation. EuroHealthNet will prioritise ensuring members can access funding and information on this new strategy. It will hold an information day later in 2022 to break down and inform members on how they can be involved in EU4Health. Following this, there will be a 'matchmaking' scheme to allow members to identify their areas of interest to discuss and suggest launching and leading projects.

National focal points (NFPs), or national contact points or coordinators, for various EU and WHO-related initiatives are an underutilised resource for project and funding opportunities. EuroHealthNet will place more emphasis on this resource through compiling contact information for various NFPs/coordinators across the EU to improve connections with EuroHealthNet Members. EuroHealthNet will also plan at least one annual dialogue with NFPs on a certain topic (cross-country) or in a certain country or region to discuss ways to enhance coordination and information sharing.

Ingrid Stegeman, Programme Manager – Specific opportunities for engagement (RRP, EU Child Guarantee, TSI – working groups 3&5)

EuroHealthNet will continue its valuable work related to the [European Semester](#), a high-level instrument used to monitor and coordinate EU economic and employment policies. In recent years, the Semester has started to focus focus on social rights, too, as they have a direct impact on macroeconomic budgets for social protection funded systems. Member States now are required to demonstrate how they are integrating progress on the Sustainable Development Goals (SDGs) in the Semester process, as well.

Related to activities on National Focal Points (NFPs), EuroHealthNet will engage with National Child Guarantee Coordinators who are helping to develop Child Guarantee National Action Plans (NAPs) across Europe. These plans will include measures related to health and care services, social inclusion, nutrition, and education, amongst other issues. Working with the Child Guarantee Coordinators will help ensure the available funds are being used effectively to support childhood equity and wellbeing in all Member States.

Ms Stegeman closed by presenting the [Technical Support Instrument](#) (TSI). This is an EU technical programme designed to help countries to implement national reforms. It provides a unique combination of expertise from the European Commission, EU Member States' national administrations, international organisations, and/or the private sector, to delivery tailor-made responses to Member State challenges. EuroHealthNet members are encouraged to consider using this instrument, as the Spanish Ministry of Health has successfully done recently (further discussed below, in Working Group 5).

Working group 1: EuroHealthNet policy and advocacy action plan regarding EU and WHO

Chaired by Dorota Sienkiewicz and Caroline Costongs - EB member: Lorna Renwick

The discussion focused on which EU and WHO Europe initiatives should be prioritised by the EuroHealthNet Partnership in 2022. Participants emphasised the importance of mental health and finding ways to mainstream it into other government strategies. Another area of interest was sustainable food initiatives, with Belgium's national plan on promoting healthy nutrition and preventing overweight and obesity highlighted. Participants agreed that the Child Guarantee, and health inequalities related to children and families, remain an important issue. Finally, issues related to employment/occupational health (e.g., linked to tele-working, right to disconnect, and non-traditional ways of work) are also still very relevant in this continuing pandemic context.

Ultimately, however, it was felt that EuroHealthNet's priorities must complement current EU priorities and directions, as it is key to correlate with EU policy processes. It is essential that EuroHealthNet maintains its focus on informing Members (e.g., through policy briefs) about current priorities, while also selecting a few areas on which to advocate as a priority (e.g., EU

mental health initiative, NCDs prevention initiative, etc.). Participants stressed that just because something is not currently at the top of the EU agenda does not mean that it can be 'forgotten about', but it is important to help members track which dossiers are currently open and closed at EU level. An increasingly important topic on the agenda is healthy living environments and addressing environmental inequalities along with promoting the importance of healthy workforces and retaining staff.

Working group 2: How to build our European Pillar of Social Rights Flashcards tool?

Chaired by Gabriella Sutton and Alison Maassen - EB members: Plamen Dimitrov and Paolo Stocco

This session focused on how the EPSR can improve members' and partners' work, and on identifying which principles should receive a priority focus in 2022. Participants agreed that effectively working on different EPSR principles requires links with different actors, like Ministries of Health or Social Affairs. An important concept to explore is the idea of social resilience, as closely connected to health equity. This ties in with [EuroHealthNet's European Semester report](#) findings which highlighted that the focus is very much to improve recovery rather than to build resilience.

The EPSR flashcards present a good opportunity to prioritise children (in light of the forthcoming National Action Plans of the European Child Guarantee). Participants from the Andalusian Regional Ministry of Health and Families (CSJA) are prioritising gender equality, childcare and support to children, and education, training, life-long learning. They indicated that they would be interested to contribute to the flashcards. An important point raised in this discussion centred around who the target audience for the flashcards is? It was found in Denmark that there is a correlation between citizens' trust in the system and their motivation for participation. Maybe one of the aspects to think about for the flashcards could be the "trust in government"? Informing the public of health concerns and strategies could encourage governmental changes.

Working group 3: How are national Recovery and Resilience Plans being implemented in your country, what health equity relevant projects do they cover?

Chaired by Vania Putatti and Ingrid Stegeman - EB member: Giovanni Gorgoni

EuroHealthNet opened the workshop with an introduction to the European Semester and the Recovery and Resilience Facility (RRF). The Semester, traditionally the EU mechanism for macroeconomic coordination, has been repurposed to support the implementation of the RRF (and other funds). EuroHealthNet analysed the initial implementation of the RRF in its report "[Recovery and Resilience Plans: drivers to promote health and wellbeing in the European Union?](#)". The working group then heard a presentation from the Austrian Ministry of Health showcasing their experience in the development and implementation of RRF projects.

- Community nursing: The establishment of community nursing services foresees the hiring of 150 community nurses to take care of older people.
- National roll-out of "early aid" for socially disadvantaged pregnant women, their children and families: The project intends to foster promotion of equal health and social opportunities for all and discontinue the transfer of health inequalities from one generation to the other through early childhood interventions.
- Strengthening primary care: Primary care will be expanded through interventions aimed at facilitating access to primary care, especially in rural areas.
- Electronic Mother-Child Pass: *The Mutter-Kind-Pass (MuKiPa)* is a screening programme for early detection of health risk factors, diseases and disorders during pregnancy and up to the 62nd month of the child's life.

The Austrian presenter, as well as other participants, described the challenges of developing projects applications under tight deadlines. Several critiques were also put forward, specifically on limitations around use of current expenditures. EuroHealthNet then presented its plans for the 2022 analysis and investigated progress in the implementation of the RRF projects.

Working group 4: How to respond to the opportunities of the EU4Health work programme, including the new NCD initiative?

Chaired by Lina Papartyte and Alison Maassen - EB member: Mojca Gabrijelčič

Participants were asked to consider the following questions: What is missing from the EU4Health information you receive which would help you build consortia and submit applications to the programme? How could EuroHealthNet support this process?

Participants indicated that information needs to arrive earlier in order to improve application preparation and quality. Members from Sweden noted that it is now common practice to have information meetings on the annual EU4Health work plan, which has facilitated an earlier start to the planning process. EuroHealthNet can have an important role in connecting prospective coordinators with reliable partners. The EuroHealthNet office has a good idea of members' specific capacities, and it is therefore efficient that they reach out to specific partners. The 20-40% co-funding rate is another struggle – it is one of the highest co-funding rates amongst all EU funding instruments. The budget limitations dictate the inclusion of fewer partners, in comparison to for example Horizon Europe, so there is less representation in project consortia.

Another important challenge for the Health Programme funding is EuroHealthNet's current inability to participate as a full consortium partner in Joint Actions. Several suggestions were raised, such as exploring the role of EuroHealthNet as an affiliate, rather than a service provider. EuroHealthNet is well placed to support the policy and sustainability work packages of Joint Actions (e.g., JAHEE, Best-ReMaP). Moreover, via participation, EuroHealthNet gathers policy intelligence which it can then share with the wider Partnership. Usually, EuroHealthNet

Members (the institutes) can be easily involved since they are in themselves affiliated with Member State governments.

Members also discussed National Focal Points for various initiatives, indicating that the level of engagement varied widely across programmes and from one country to another. Finally, Ms Papartyte briefly discussed the “Healthier Together” initiative, described by Mr Ryan in Session Two. The European Commission is inviting stakeholders to share best practices on tackling NCDs, as part of the “Healthier Together” EU NCD Initiative. EuroHealthNet will be collecting feedback on the initiative, and we invite any interested members to [share further information about potential good practices](#) happening at country-level, that can be included.

Working group 5: What health challenge do we wish to cover with a submission to the Technical Support Instrument?

Chaired by Ingrid Stegeman, Vania Putatti and Samuele Tonello - EB member: Raffaella Bucciardini

EuroHealthNet briefly presented the Technical Support Instrument (TSI). The TSI is an EU programme (€864 Million for the period 2021-27) that provides tailor-made technical expertise to EU Member States to design and implement reforms. The Spanish Ministry of Health presented their experience with several TSI projects related to health equity. Their TSI projects were conducted between 2019 and 2021 with the objectives of (1) improving the capacity to collect, analyse and communicate data on social determinants of health (SDH) and equity; and (2) improving good practice identification in health promotion interventions as well as their evaluation at the local level. They received valuable advice and support and their TSI projects resulted in the following reports on:

- Equity and social determinants of health - international and national experiences on monitoring and visualising equity and SDH
- Evaluation framework for health promotion programmes in local settings
- Health promotion best practices report – health promotion interventions analysis and workshop

The TSI instrument can now also be applied across different Member States. EuroHealthNet intends to set up a small group of interested members to submit a TSI application in 2022.

Working group 6: What can be our contribution to the WHO Behavioural and Cultural Insights Initiative?

Chaired by Alba Godfrey and Caroline Costongs - EB member: Daniela Kállayová

The production of the Action Framework for the Behavioural and Cultural Insights (BCI) Initiative will be finalised in June and implemented in November with the involvement of various stakeholders and non-state actors, including EuroHealthNet. The current stage of the process focuses on gathering input and expertise. The WHO is looking for examples on how behavioural insights are being used, both through theoretical foundations and practical tools. Participants

provided examples such as in the area of AIDS prevention and addiction by BZgA in Germany. The Institute for Healthy Living Flanders developed their own [behavioural change tool](#), which uses insights to apply to healthy lifestyle topics such as nutrition, mental health, sedentary behaviour, tobacco interventions and policies. SALAR in Sweden has not used the BCI term before, but the concept is part of their public health work. RIVM in the Netherlands set up a research unit to during the covid-19 pandemic. The research focused on how to help people keep following behavioural rules – with a focus on their own health and the people around them. RIVM are now trying to demonstrate that BCI can be useful for other areas of preventative health care. The need to build relationships with policymakers was brought up.

The discussion further highlighted that people’s behaviours must also be placed into the larger political and societal context, because otherwise it places too much responsibility on the individual for his/her health. If actions are not in accordance with policies, it may also indicate a need to adapt the policy rather than try to achieve behaviour change to match the policy.

The discussion moved on to addressing what EuroHealthNet should be advocating for specifically in relation to BCI legislation and what information is available from Members. Ms Bach Habersaat explained that there will be two phases for contribution to the BCI Initiative. Until September, WHO Europe will be developing and adopting a Resolution on behavioural and cultural insights. As this resolution is being developed, it would be very helpful to receive case examples, lessons, and, in particular, evidence for impact from Member States. The second phase will focus on delivering strategic commitments at country level, and offering support to all Member States. EuroHealthNet’s members’ work can directly help achieve this.

Concluding remarks

The working group leads shared their main messages and outcomes from the group discussions in a final session, moderated by Dr Gabrijelčič. Dr Gabrijelčič highlighted the importance and value of having these high-level policy and strategy discussions at European level and expressed her thanks for the information shared during this meeting. Ms Costongs then noted that the General Council Meeting, scheduled for 31 May – 1 June in Brussels, will provide an opportunity to further discuss the key agenda items from today and to measure progress towards the objectives of our policy and business plans. In the interim, the EuroHealthNet Executive Board will continue to provide strategic feedback on behalf of the Partnership. Participants were thanked for their contributions to the discussions and encouraged to remain actively engaged in EuroHealthNet’s activities and in regular contact with the colleagues in the office. Dr Gabrijelčič then closed the meeting.

EuroHealthNet

European partnership for **health, equity & wellbeing**



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

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.

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

[EuroHealthNet.eu](https://eurohealthnet.eu)

[Health-inequalities.eu](https://health-inequalities.eu)

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