



NEWSLETTER

Issue 1

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The HealthEquity-2020 project

Equity is about fairness and justice. Promoting equity is essential if human and social development is to be combined with economically productive societies.

Health inequity results from unequal economic, social and environmental conditions. Such differences are inherently unfair, unjust and avoidable. Therefore reducing health disparities are essential, and the upward trends for such differences call for further innovative, collaborative actions at all levels.

Current strategies need to be strengthened and combined with new strategies, directly tackling social determinants of health. The potential for national and regional policies to help improve the population's health need to be maximised. Successful

actions can only be achieved within the framework of effective policy & planning, and through operative alliances at different administrative levels, supported by evidence and innovations.

The general objective of the project is to assist Member States/regions to develop evidence-based action plans on reducing health inequalities, which also informs the use of Structural Funds (SF) in the next programming period.

By targeting policy-makers and practitioners who make and shape policies and implement actions, the project seeks to both (i) explore potential action areas & (ii) make the case (including economic evidence) for investments to reduce inequalities through regional

actions within & beyond the health sector.

The project uses different methods and means to achieve its objectives: (i) developing a toolkit and a portfolio of policy actions sensitive to differing needs (ii) supplemented by a practical knowledge database with good practice case examples and (iii) organising an action learning workshop series & developing follow-up action learning sets to increase knowledge & capacity of local stakeholders using social innovation.

Intensive, targeted dissemination activities and accessible and interactive website and online database as a resource help uptake of project result by EU regions.

www.healthequity2020.eu

HE2020 IS RELEVANT FOR

I. Key stakeholders at regional & national levels

- governments,
- municipalities,
- SF operational programme managing authorities,
- ministries of health and social affairs,
- development agencies, actors of health systems

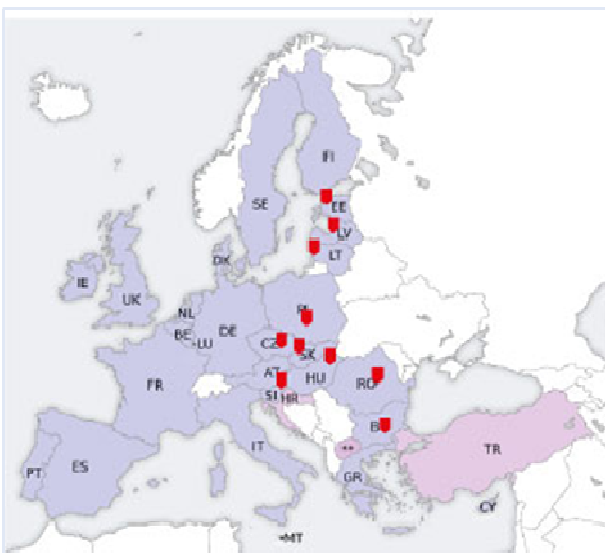
II. European stakeholders (EC line directorates, EIB, CP)

III. Citizens - to ensure that participating regions involve population groups & civil society organizations in regional/local action groups tasked with developing action plans.

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Participating EU10 countries/regions



1. Pomurje, Slovenia
2. Lodzkie, Poland
3. Vysocina, Czech Republic
4. Northern Great Plain, Hungary
5. Trencin, Slovakia
6. Klaipedia, Lithuania
7. Stara Zagora, Bulgaria
8. Covasna, Romania
9. Latvia
10. Estonia, Tallin

SELECTION CRITERIA

The activity prioritizes those member states & regions where premature mortality exceeds 20% of the EU average (defined by under 65 years standardized mortality rates). In effect, the EU10 (the group of 10 post-socialist countries that have joined the EU in 2004 & 2007).

Some regions in the EU15 also experience significant health inequalities so they are also a target group for dissemination through e.g. cooperation with the EC Joint Action on Health Inequalities (2011-2014).

Maastricht University & Health ClusterNet will be conducting baseline capacity building audits in collaborating partner regions. Baseline audits in the 2 pilot regions have been completed.

The aim of the activity is twofold: (i) examining actual capacities in the 2 pilot regions (and later in the further 8 EU10 regions) & (ii) development of a capacity audit self-assessment tool.

The tool should allow regional decision makers to get an overview about their capacities to address health inequalities.

The used capacity building framework focuses on five key domains and several action areas. The five domains are: (i) organizational development, (ii) workforce development, (iii) resource allocation, (iv) partnerships and (v) leadership. The results and learning from the audits will inform preparation of regional action plans and improving the audit tool for inclusion in a planned toolkit for regions. The Capacity Building Programme will also develop a policy matrix and create an expert network.

INFORMING STRUCTURAL FUND POLICY

A key role of SF is to reduce regional economic and social disparities and – in line with Europe 2020 strategy – to promote economic growth and employment as well as an inclusive society approach. Activities addressed to influence economic and social conditions have relevant indirect influences on health.

The project supports the innovative approach of using Structural Funds for health gains and social innovation, and the emerging emphasis on achieving added value from EU investments as part of Cohesion Policy 2014-2020.

The developed evidence-based & social innovation-informed action plans will be applied systematically through Structural Funds/other sources.

The capacity audits also examine the absorption capacities of structural funds in the regions.

Toolkit for evidence-based regional planning

The Department of Public Health at the Erasmus University Medical Centre is developing a toolkit which will help regions undertake evidence-based action planning in order to tackle health inequalities. The toolkit has 3 main parts: (i) needs assessment, (ii) a database (iii) impact assessment. Introduction and testing of the toolkit will start in 2013 autumn with 10 regions. The 'needs assessment' part focuses on indicators of health inequalities and data

collection techniques working mainly with existing data. The 'database' will contain two elements: (i) an action portfolio and (ii) a database with examples/best practices. The action portfolio will be based on effective actions gathered from the existing literature. The second part will provide useful examples/best practices of these possible actions at the field of tackling health inequalities at regional level. The impact assessment section will include a new tool

that complements existing HIA tools. The tool to be developed will be a so called 'quantitative HIA tool' in which certain actions can be modelled. Additionally a generic dataset will be compiled that can be used to model the interventions when no regional data exists. Guidance on the existing HIA methods will also be provided. The proposed toolkit will be shaped by the experiences of the testing process involving the EU10 regions.

A European study estimated that health inequalities-related losses to labour productivity amount to €141 billion per year in the EU. If health is valued in its own right, health inequalities-related losses amount to a staggering €1 trillion per year (9.4% of GDP) (Mackenbach, Meerding & Kunst, 2007).

1st regional workshop: Needs Assessment



Contact person: Oana Neagu (oana.neagu@maastrichtuniversity.nl)

A workshop focusing on "Needs Assessment" will take place 17-18 October 2013 in Lodz, Poland, hosting representatives from 10 European regions: local and national government representatives, medical professionals and regional development experts dealing with health inequalities. The event is part of an Action Learning Workshop Series, which will help taking regions from their starting points through translation of evidence & experience into action plans for each region.

The main question that the 1st workshop addresses is how to determine in a systematic manner the gaps between current conditions leading to health inequalities and desired outcomes, i.e. improving health and well-being? It will focus on (i) regions and regional priorities; (ii) performing a needs assessment - tools and applications; (iii) performing a capacity audit - tools and experiences. The next events will deal with 'Entry points', 'Impact assessment' & 'Action planning'.



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Partnership

Health ClusterNET, UK (Project management, Dissemination & Evaluation)

University of Maastricht, Department of International Health, The Netherlands (Action learning workshop series & Capacity building support)

Erasmus MC, Department of Public Health, The Netherlands (Translational evidence & policy)

Medical University of Lodz, Poland (Pilot actions)

Centre for Health and Development Murska Sobota, Slovenia (Pilot actions).

Lead partner organisation

University of Maastricht, Department of International Health, The Netherlands

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Contact persons:

Dr Carole Maignan, Health ClusterNet, Project manager
(carole@healthclusternet.eu)

Edit Sebestyén, Health ClusterNet, WP2 leader
(Dissemination) (edit@healthclusternet.eu)



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