



EU Action for Health Equity what does it mean to you?

Caroline Costongs, Director, EuroHealthNet

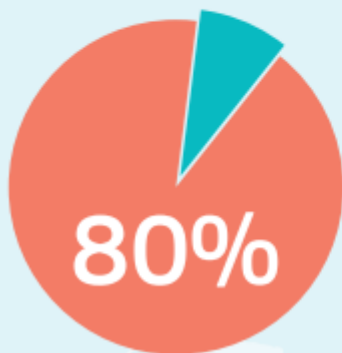
20 June 2018, Austrian Health Promotion Conference



Objectives EuroHealthNet

- Tackling persistent health inequalities in Europe
- Combatting chronic diseases
- Advocating for Health Promotion as part of sustainable health systems

HEALTH PROMOTION AND DISEASE PREVENTION PAVE THE WAY FOR A MORE EFFECTIVE AND EFFICIENT HEALTH SYSTEM



Non-communicable diseases account for up to 80% of HEALTHCARE COSTS



Yet only around 3% of health budgets are spent on PREVENTION



Fonds Gesundes Österreich



EU action for a healthier and fairer Europe

HOW?

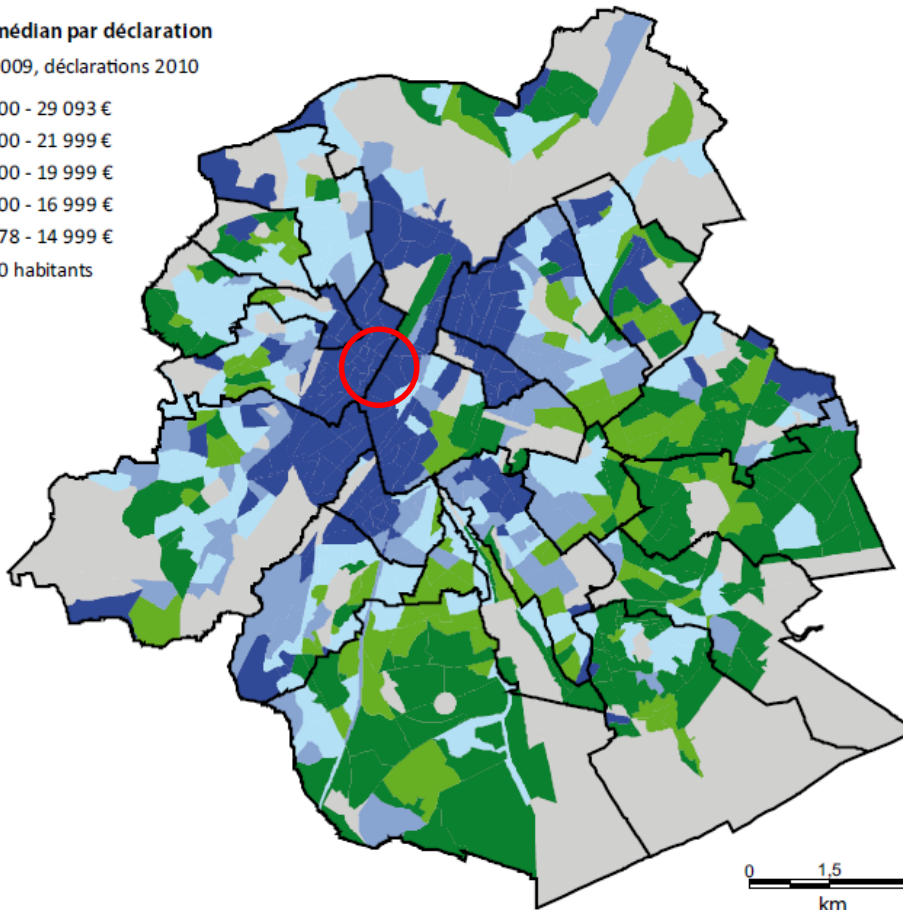
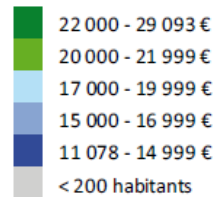
- Social determinants of health approach (HiAP)
- Life-course approach (healthy ageing)
- Sustainable development approach (Sustainable Development Goals)



health equity – example from Brussels

Revenu médian par déclaration

revenus 2009, déclarations 2010



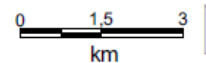
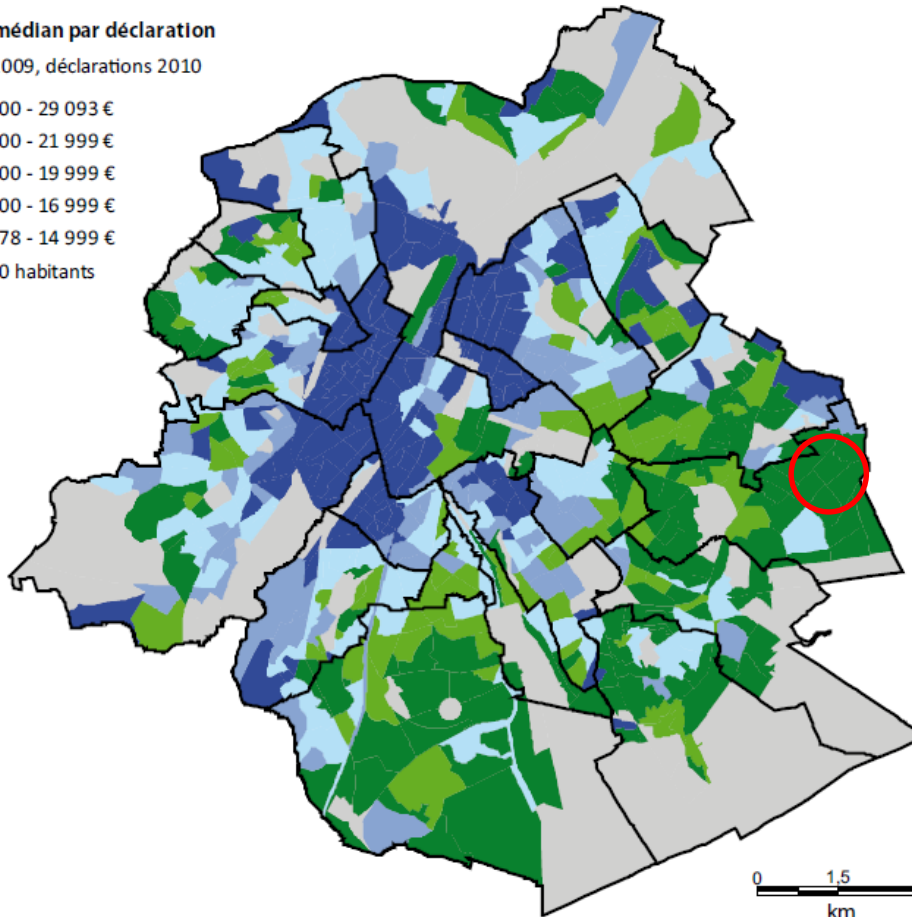
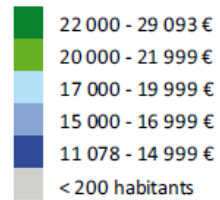
Source : Direction générale Statistique et Information économique, Statistiques fiscales 2010
Cartographie : Observatoire de la Santé et du Social de Bruxelles



... compared with...

Revenu médian par déclaration

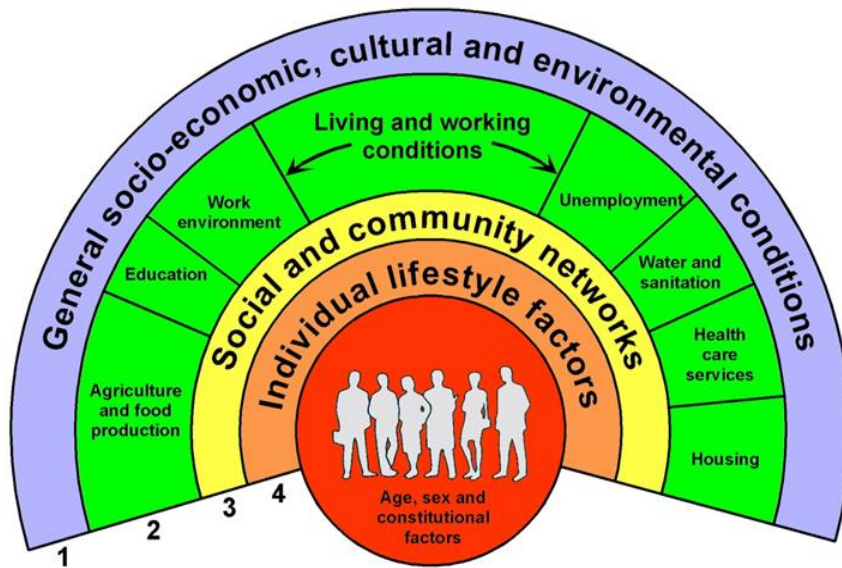
revenus 2009, déclarations 2010



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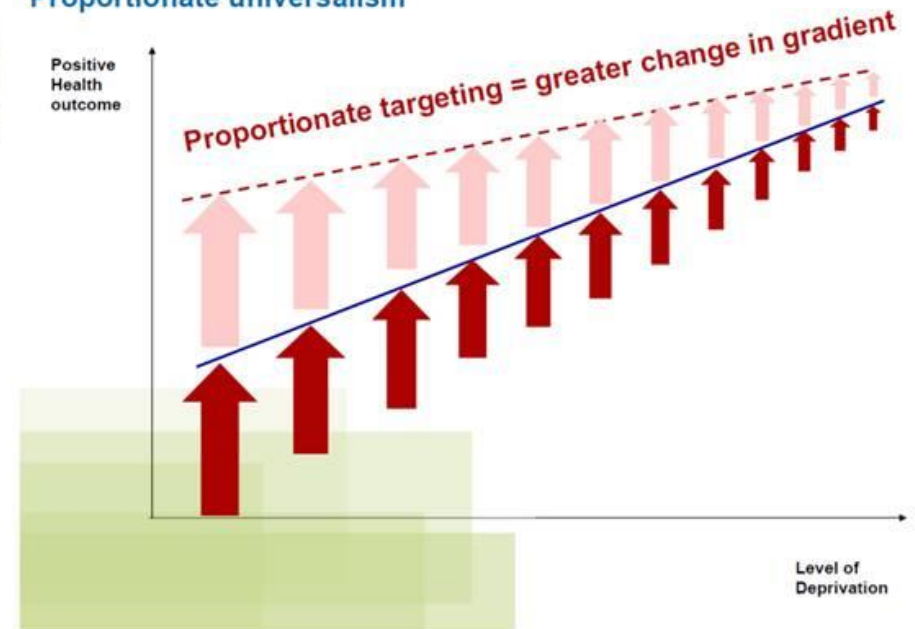
Health equity & healthy ageing: shaped through policy action



Source: Dahlgren and Whitehead, 1993

Focusing solely on most disadvantaged will not be sufficient – social gradient

Proportionate universalism



What is happening at EU
level that can tackle
inequality and achieve
healthy ageing?

www.menti.com code 53 27

EU legislation for health

Article 168 (1) of EU Treaty:

“A high level of human health protection shall be ensured in the definition and implementation of all EU policies and activities.

EU action, which shall complement national policies, shall be directed towards **improving public health, preventing physical and mental illness and diseases**, and obviating sources of danger to physical and mental health.”

Free
movements
(EU Single
Market)

Tobacco
Products
Directive

Alcohol
labelling - self
regulation...

Air quality
policies

Road safety
guidelines

NEW!
Work-life
Balance
Directive

And many others...

Data collection and comparison across countries

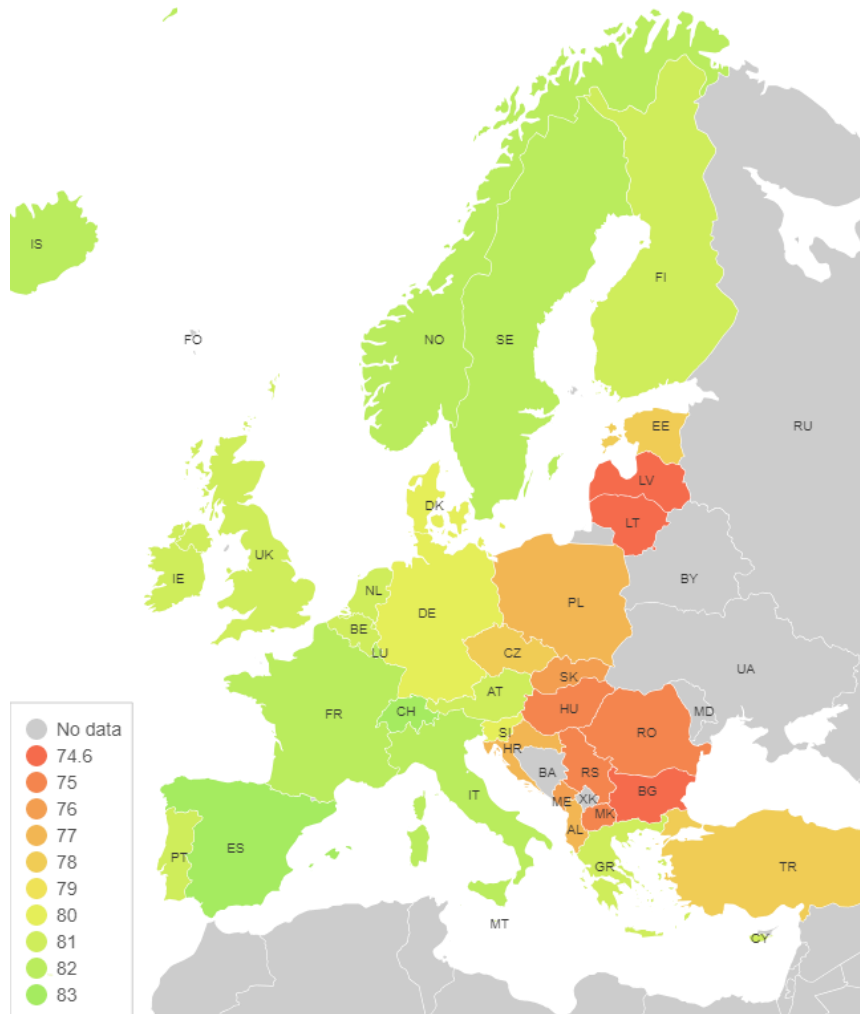
European Core Health Indicators (ECHI)

Surveys (EHIS, ESS, EU-SILC)

State of Health in the EU *report*

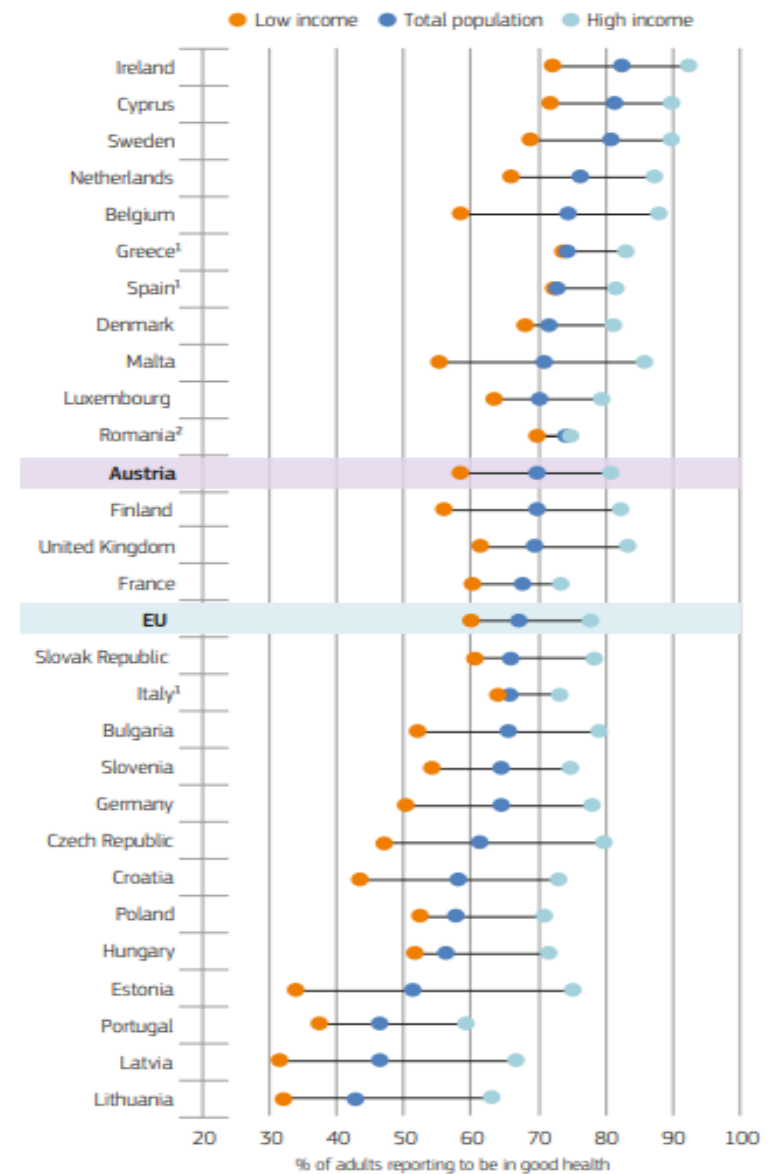
Active Ageing Index (AAI)

State of Health in the EU - Life expectancy



Life expectancy at birth in Europe [ECHI]
For Austria: 81.3 years

Most Austrians report being in good health but large disparities exist by income group



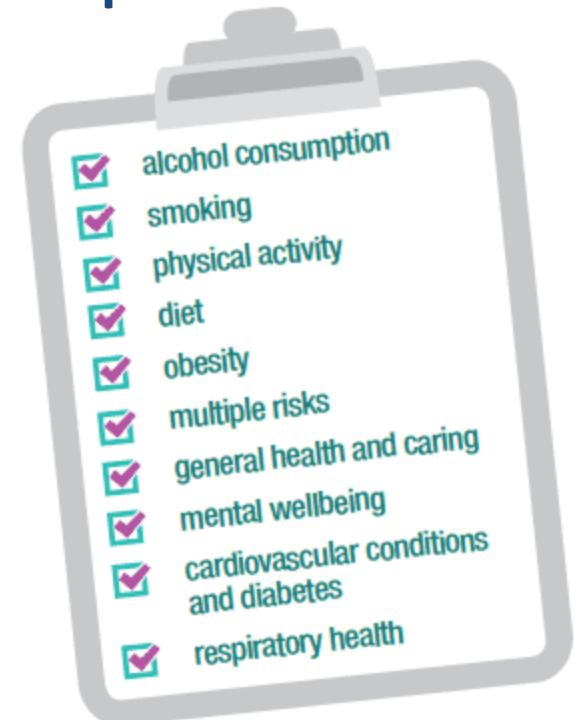
1. The shares for the total population and the low-income population are roughly the same.

2. The shares for the total population and the high-income population are roughly the same.

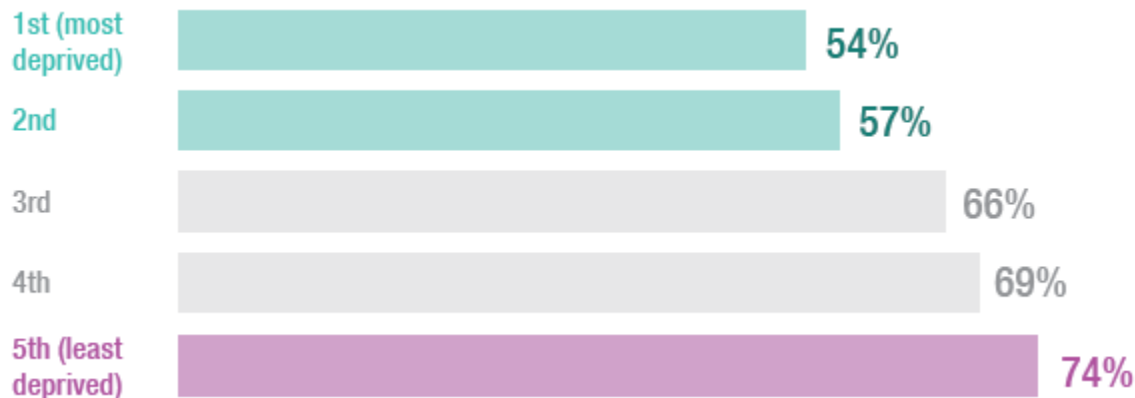
Source: Eurostat Database, based on EU-SILC (data refer to 2015).

Example: Scottish Health Survey & Scottish Index of Multiple Deprivation

Prevalence of smoking varied by area deprivation level (2016)



Adults meeting physical activity guidelines





Active Ageing Index

The Active Ageing Index (AAI) is a tool to measure the untapped potential of older people for active and healthy ageing across countries. It measures the level to which older people live independent lives, participate in paid employment and social activities as well as their capacity to actively age.

Domains



Employment



**Participation
in society**

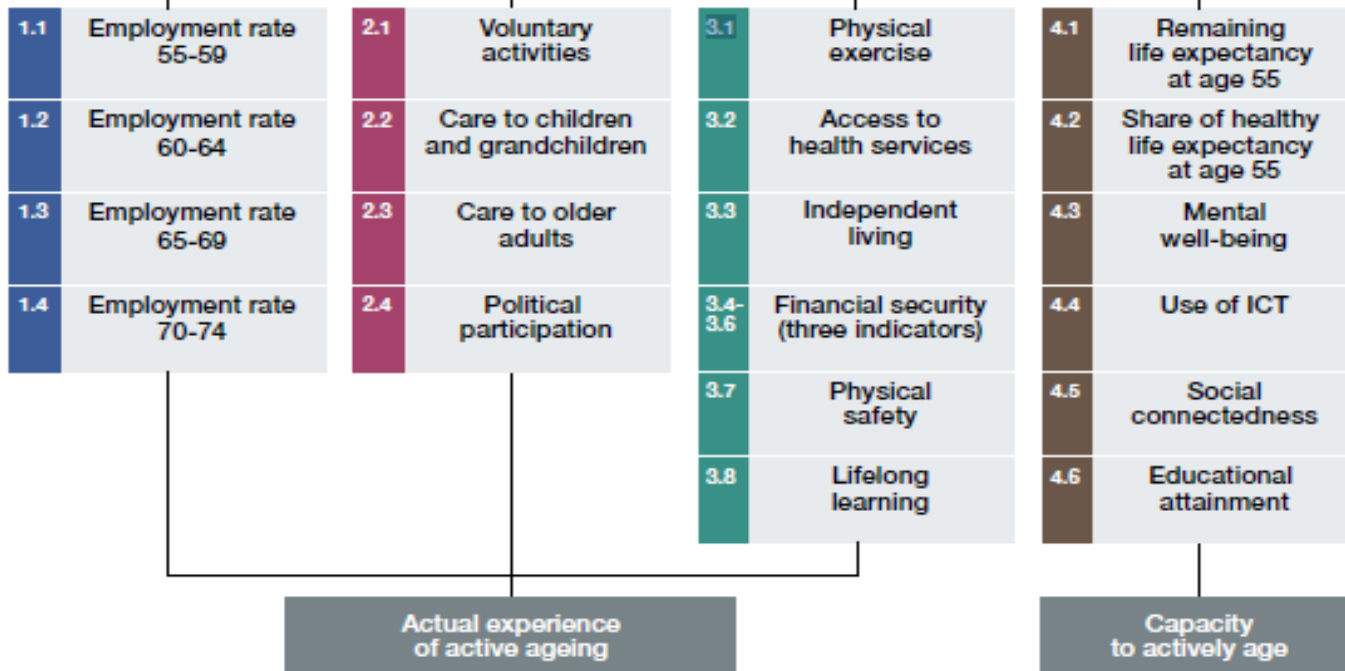


**Independent,
healthy
and secure living**



**Capacity and enabling
environment
for active ageing**

Indicators



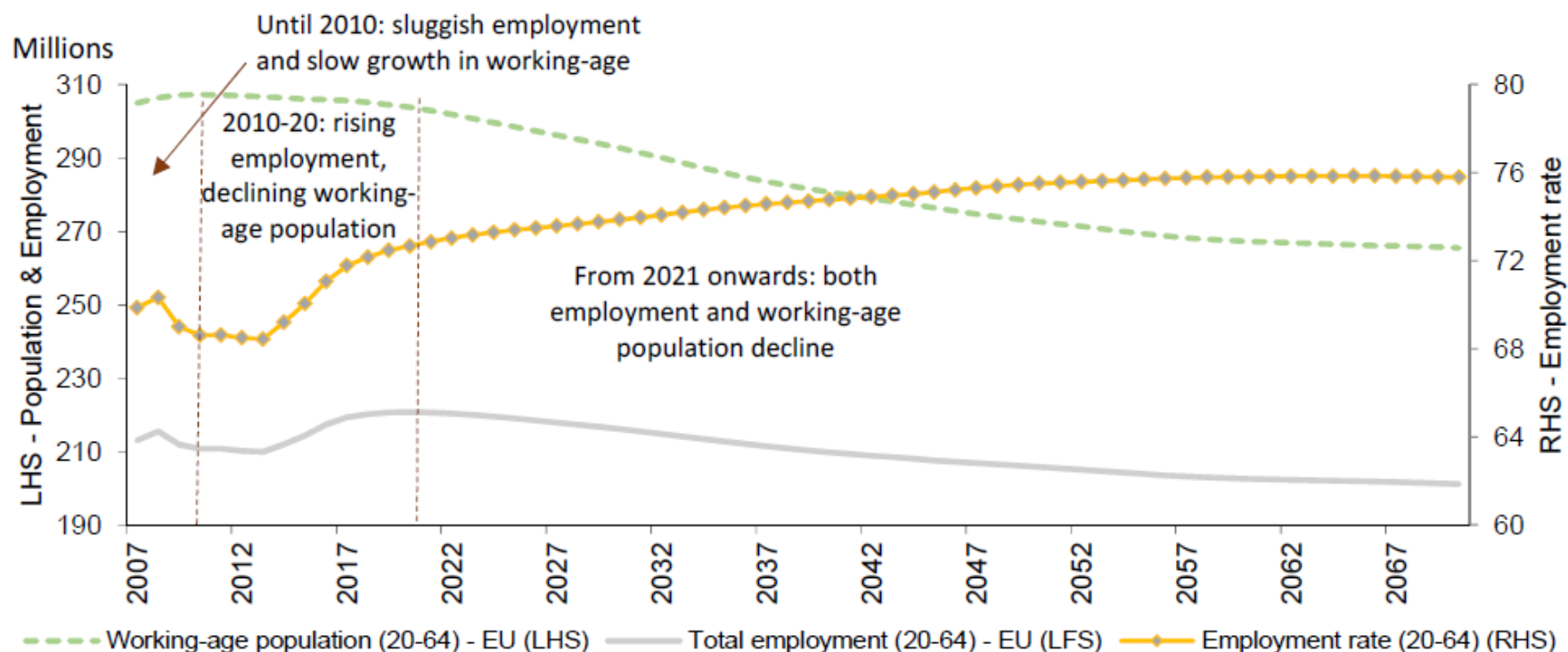
Active Ageing Index 2014

Ranking of EU-28 countries on the basis of the overall 2014
Active Ageing Index and its domain-specific scores

Rank	Overall		Employment		Participation in society		Independent living		Capacity for active ageing	
1	Sweden	44.9	Sweden	43.4	Ireland	24.1	Denmark	79.0	Sweden	69.2
2	Denmark	40.3	Estonia	39.7	Italy	24.1	Finland	79.0	Denmark	65.1
3	Netherlands	40.0	Denmark	35.8	Sweden	22.9	Netherlands	78.9	Luxembourg	63.6
4	UK	39.7	UK	35.8	France	22.8	Sweden	78.6	Netherlands	61.8
5	Finland	39.0	Germany	34.4	Netherlands	22.4	Luxembourg	76.7	UK	61.3
6	Ireland	38.6	Netherlands	33.9	Luxembourg	22.2	France	75.9	Finland	60.5
7	France	35.8	Finland	33.7	UK	21.6	Ireland	74.9	Belgium	60.3
8	Luxembourg	35.7	Portugal	32.6	Finland	20.5	Germany	74.4	Ireland	60.0
9	Germany	35.4	Latvia	32.0	Belgium	20.2	Slovenia	74.2	France	59.1
10	Estonia	34.6	Cyprus	31.4	Denmark	19.6	Austria	73.8	Austria	58.2
11	Czech Rep	34.4	Romania	31.0	Czech Rep	18.8	UK	73.7	Malta	57.1
12	Cyprus	34.2	Ireland	30.6	Croatia	18.7	Belgium	72.5	Spain	56.3
12	Austria	34.1	Lithuania	30.5	Austria	18.3	Czech Rep.	71.2	Germany	55.8
14	Italy	34.0	Czech Rep.	28.0	Cyprus	18.0	Malta	70.1	Czech Rep.	54.3
15	Belgium	33.7	Bulgaria	25.1	Spain	17.8	Spain	69.8	Italy	53.4
16	Portugal	33.5	Austria	24.7	Malta	17.3	Croatia	69.5	Croatia	52.8
	EU28 avg.	33.9		27.8		17.7		70.6		54.1

EU Active Ageing 2018 report

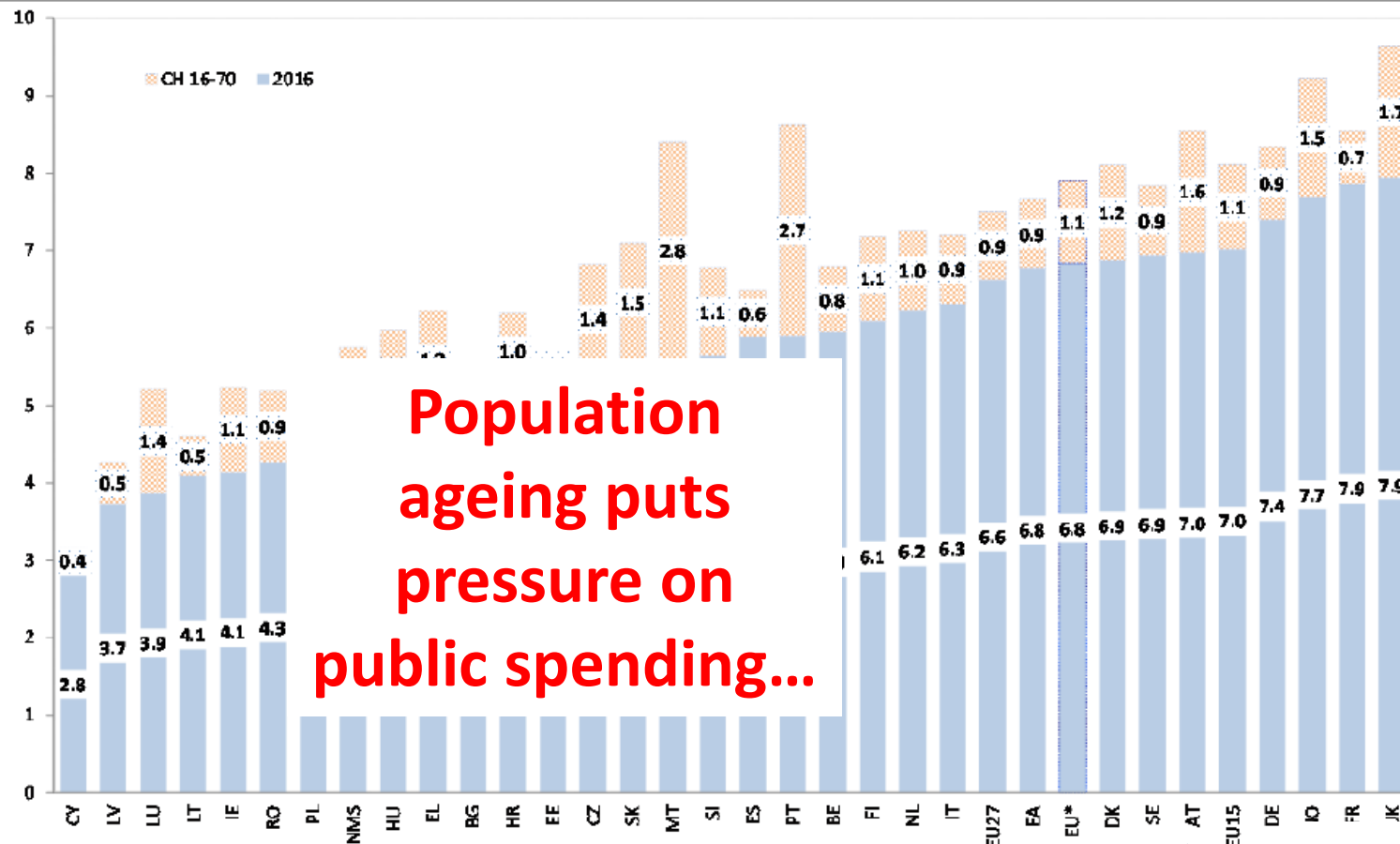
Graph 3: Population and employment developments (million), EU



Source: Commission services, Eurostat, EPC.

Health exp. due to demographic changes

Graph II.2.3: Projected increase in public expenditure on health care due to demographic change over 2016-2070, as % of GDP



Debates on health and working together



Debates on future health systems

“In the future, we will not see hospitals as we know them today, they will not disappear completely, but they will change significantly. Increase in chronic diseases, multi-morbidity, mental illnesses’, aging population is challenging the European health systems.”

European Parliament STOA



The ingredients of a health system in the future are:

- ✓ More disease prevention
- ✓ Shift from hospitals to more primary care centres in communities
- ✓ Integrated care around peoples needs
- ✓ Using technologies.

**+ Health
Promotion!**



Steering group on promotion and prevention

NEW



To facilitate the implementation of
evidence-based best practices by EU
countries

Criteria & best practices database...

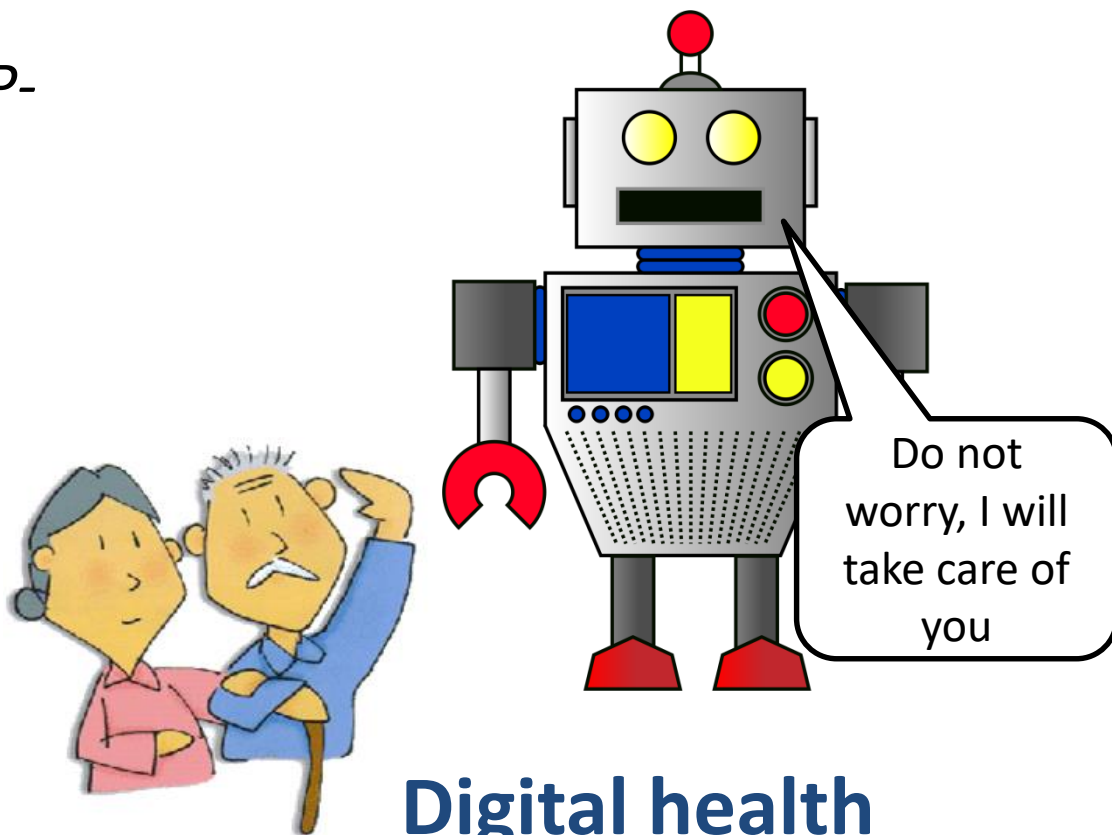
European Innovation Partnership – Active and Health Ageing (EIP-AHA)

“The sun is setting over EIP-AHA, and the new sun rise will be in the name of digitalisation”

EIP-AHA Reference Sites

“a catalyst for growth in their region.”

“pioneering some of the most advanced innovative digital solutions that improve the lives of ageing populations”



Digital health

- **Literacy?**
- **Equity?**

Monitoring & steering countries in their macro-economic policies relevant for health

www.menti.com - code 53 27

The European Pillar of Social Rights: 20 principles and rights

COVERS THREE AREAS:

Equal opportunities and access to the labour market

- 1 Education, training and life-long learning
- 2 Gender equality
- 3 Equal opportunity
- 4 Active support to employment
- 5 Secure and adaptable employment

Fair working conditions

- 6 Wages
- 7 Information about employment conditions and protection in case of dismissals
- 8 Social dialogue and involvement of social partners
- 9 Work life balance
- 10 Healthy, safe and well-adapted work environment

Social protection and inclusion

- 11 Childcare and support to children
- 12 Social Protection
- 13 Unemployment benefits
- 14 Minimum income
- 15 Old age income and pensions
- 16 Health care
- 17 Inclusion of people with disabilities
- 18 Long-term care
- 19 Housing and assistance for the homeless
- 20 Access to essential services

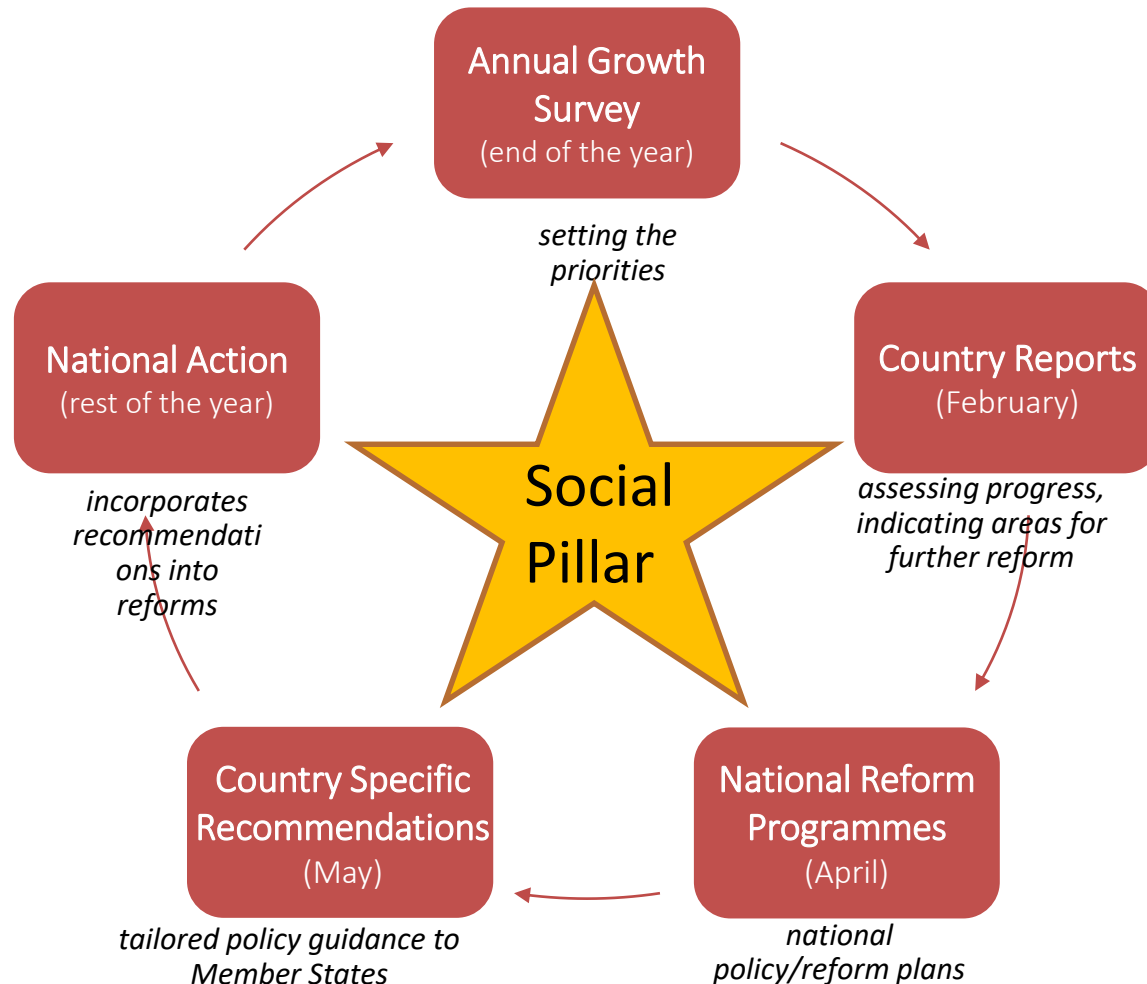
Glossary

All are important to
achieving equitable health
in old age

The European Semester

social

“The annual cycle for economic and ~~fiscal~~ policy coordination”



European Semester for Austria

Pre-amble i.e.:

The rate of **female part-time employment**, at **47.9 %** in 2016, remains one of the highest in the EU (EU average: 31.4 %).

Due to issues related to **access to formal childcare** (in rural areas) & women performing important unpaid tasks such as caring for children and relatives.

The high share of women in part-time work as well as lower hourly earnings contribute to a persistently **high gender pay gap**, resulting in a **large pension gap**.

At 60, the **statutory retirement age of women** is among the lowest in the EU.

Children aged less than 3 years in formal childcare (%), 2015



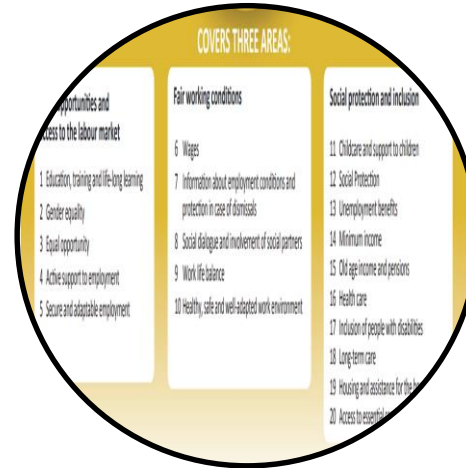
Source: the social
scoreboard (EU SILC)

Country Specific Recommendation 2018 for Austria

(CSR no. 1) ... Ensure the sustainability of the health and long-term care and the pension systems, including by increasing the statutory retirement age and by restricting early retirement.

(in CSR no 2) Improve labour market outcomes of women. Improve basic skills for disadvantaged young people and people with a migrant background....

European Pillar of Social Rights



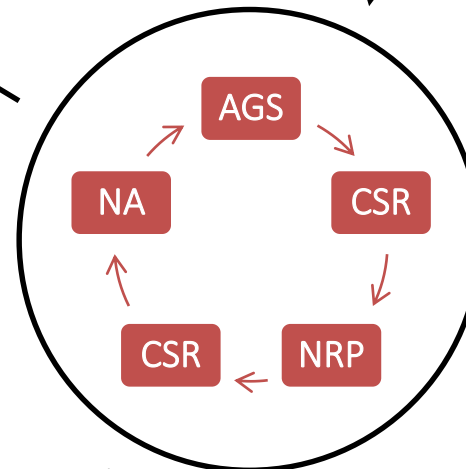
Social values

Multiannual Financial Framework



Money

European Semester



A large, dense crowd of people walking down a city street, viewed from a high angle. The crowd is diverse in age and appearance, filling the entire frame. The street is lined with buildings, and the overall atmosphere is one of a busy, crowded urban environment.

Funding Instruments for health and health equity

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EU Health Programme (2014-2020)



EQUITY ACTION

The Joint Action on Health Inequalities

NEW: JAHEE

NEW: Joint Action on
Health Information

Horizon 2020



INHERIT

Health | Equity | Environment



irohla

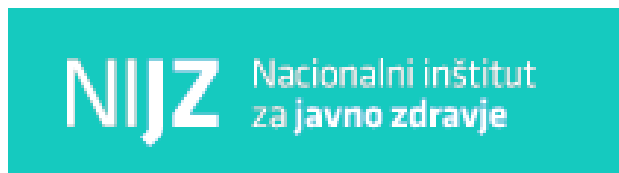
innovative policies for healthy ageing



EaSI: Employment and Social Investment

Example from **Slovenia**:
AHA.SI

- awareness on the needs and benefits of developing an AHA strategy across sectors;
- a sustainable network of relevant stakeholders



European Structural Funds (ESF, ERDF)

Example from **Croatia**:
Healthy Living programme

- Nutrition, physical activity, mental health
- Community based
- directed at all ages



CROATIAN INSTITUTE
OF PUBLIC HEALTH



EFSI – Fund for Strategic Investments

- Not yet used by HP
- BUT: Health promotion and disease prevention is cost-effective
- ROI 1 EUR → 14 EUR
- HiAP = health in finance policy. Understanding the world of investors.
- Health/social impact bonds



1 EUR becomes 14 EUR

New Multiannual Financial Framework (proposal for 2021-2027)

- ✓ From 1.10 % to 1.11 % of EU GNI
- ✓ Health in “Investing in People, Social Cohesion and Values” (ESF+)
- ✓ Health Programme **around 8% cut** (449 mil → 413 mil)
- ✓ EaSI Programme **cut** (815 mil → 761 mil)
- ✓ Horizon Europe extra funding (20 bill. extra), incl for health promotion, but more private engagement required
- ✓ Erasmus+ boosted (funding doubled)
- ✓ Health also in Global Health proposals, Agriculture, Digital Europe, LIFE+...
- ✓ InvestEU – increased importance, has now a social strand





Strengthen Health Promotion as part of EU action for more Health Equity

Opportunities are available!

Be aware of new actors & concepts of Health Promotion (“lifestyle drift”, lifestyle medicine, digital health). New challenges.

The 'REJUVENATE' Framework for Health Promotion



1. BE **R**ESPONSIVE
adapt to challenges and use opportunities;



2. BE **E**QUITABLE
address the 'causes of the causes';



3. BE **J**OINED-UP
build partnerships and governance across sectors;



4. BE **U**PDATED
act smartly to influence 21st century realities;



5. BE **V**ALUE DRIVEN
develop values and the right to health in new contexts;



6. BE **E**THICAL
promote fair standards in all we do;



7. BE **N**EW
create and implement new ideas



8. BE **A**CTIVE
practice inclusive engagement



9. BE **T**ECHNOLOGICAL
understand and apply technical and digital advances;



10. BE **E**COLOGICAL
sustain and protect our environments;

Experten fordern gesundheitliche Grundversorgung für alle



Ein europaweites Netzwerk von Gesundheitsexperten warnt vor den Folgen sozialer Ungleichheit.

Gesundheitsfragen dürften von den Verantwortlichen auf europäischer und nationaler Ebene nicht mehr als Randthema betrachtet werden, heißt es in dem am Montag in Brüssel veröffentlichten Aufruf. Initiator ist der Verbund Euro Health Net, dem unter anderem die Bundeszentrale für gesundheitliche Aufklärung angehört, unterschrieben haben eine Reihe zivilgesellschaftlicher Organisationen.

Die Lebenserwartung variiert stark zwischen den EU-Staaten: Kinder, die 2014 in Spanien geboren wurden, konnten im Durchschnitt auf 83,3 Lebensjahre hoffen, in Bulgarien nur auf 74,5 Jahre, so Euro Health Net unter Verweis auf OECD-Zahlen. Die reichsten 20 Prozent der Bevölkerung in Europa schätzen den eigenen Gesundheitszustand laut EU-Statistikbehörde Eurostat zudem deutlich besser ein als die ärmsten 20 Prozent.

Die Politik müsse sicherstellen, dass auch benachteiligte Gruppen wie Migranten ohne Dokumente oder Roma Zugang zu gesundheitlicher Grundversorgung haben, heißt es in dem Aufruf. Beschränkungen gefährdeten die öffentliche Gesundheit, verursachten Kosten und verletzten Grundrechte. Die Unterzeichner fordern unter anderem mehr gesundheitliche Bildung insbesondere für Risikogruppen und bessere Vorsorge. Auch Raucherbote und Mindestpreise für Alkohol könnten helfen, gesundheitliche Ungleichheiten zu vermindern.

Urheberrecht:

- Text: DfS / fw
- Foto: Shutterstock / Calanboto

WELT N24

HOME LIVE TV MEDIATHEK POLITIK WIRTSCHAFT SPORT MEHR ABO

Derzeit würden die bei ihm beschlagnahmten Datenträger ausgewertet. Der 21-Jährige war am Samstag von einem Spezialeinsatzkommando in seiner Wohnung in Neuss festgenommen worden, er sitzt inzwischen wegen des Verdachts der Vorbereitung einer schweren staatsgefährdenden Straftat in Untersuchungshaft. Der Mann hatte nach Angaben des Landeskriminalamts Kontakt zu einem 17-Jährigen, der in der österreichischen Hauptstadt Wien festgenommen wurde, weil er dort einen Anschlag geplant haben soll. Eine Verbindung zu dem Berliner Attentäter Anis Amri ist bislang nicht bekannt.

Experten warnen vor Gesundheitsschäden

Ein europaweites Netzwerk von Gesundheitsexperten warnt vor den Folgen sozialer Ungleichheit. Gesundheitsfragen dürften von den Verantwortlichen auf europäischer und nationaler Ebene nicht mehr als Randthema betrachtet werden, heißt es in dem in Brüssel veröffentlichten Aufruf. Initiator ist der Verbund Euro Health Net, dem unter anderem die Bundeszentrale für gesundheitliche Aufklärung angehört. Die Lebenserwartung variiert demnach stark zwischen den EU-Staaten: Kinder, die 2014 in Spanien geboren wurden, konnten im Durchschnitt

WELT AM SONNTAG

Testangebot sichern, 33% sparen + Gutschein



Advocacy = key

NEUE OSNABRÜCKER
OZ ZEITUNG

Zeitung | Lokalteil wählen

Anmelden und Registrieren

Suche

LOKALES

DEUTSCHLAND & WELT

SPORT

ANZEIGEN

ABO

MEHR

NEWSLETTER

EPAPER

Themen

Familie

Digitale Welt

Neue Gesetze und Regelungen

Fotografieren

Spielekenner

Mehr +

wohnwelt

jobwelt

n

LEBENSERWARTUNG VARIERT STARK

24.01.2017, 07:30 Uhr

Experten warnen vor gesundheitlichen Folgen sozialer Ungleichheit

0

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twitter

✉

...



Gerade benachteiligte Gruppen haben oft keinen Zugang zu gesundheitlicher Versorgung, kritisieren europäische Gesundheitsexperten. Foto: dpa

Brüssel. Ein europaweites Netzwerk von Gesundheitsexperten warnt vor den Folgen sozialer Ungleichheit.

Gesundheitsfragen dürften von den Verantwortlichen auf europäischer und nationaler Ebene nicht mehr als Randthema betrachtet werden, heißt es in dem am Montag in Brüssel veröffentlichten Aufruf. Initiator ist der Verbund Euro Health Net, dem unter anderem die Bundeszentrale für gesundheitliche Aufklärung angehört.



Take home messages

- EU level actions can help advance health equity and healthy ageing at national and local levels.
- Context and actors are rapidly changing: we need to adapt our policies and practices
- Prevention and promotion are considered important, but not high enough on the agenda. Ageing is seen as a burden – not as an asset
- Demonstrating cost-savings and cost-effectiveness of health promotion, across the life course, is key. Get engaged!
- Models for progress exist globally and in Europe: use the best of the new and known
- We are stronger together. By working in partnerships.

THANK YOU