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**Welcome** to the first issue of the News&Updates of JAHEE for the year 2021, including Extracts from JAHEE Newsletter n. 1, March 2021. The Newsletter is prepared by <u>WP2</u> and <u>EuroHealthNet</u>, which is subcontracted by ISS.

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# **General updates**

## **General Assembly**

The General Assembly (GA) of the Joint Action Health Equity Europe will be held online on 22 March 2021 – 9:30-14:00 CET. Please find below the link to register by 18 March 2021 at the latest.

#### https://zoom.us/meeting/register/tJEvde-rrzIpE9D3kAerQNGIQ03MBcUK17cT

The main purpose of this meeting is to discuss:

- the potential sustainability of the actions after the end of JAHEE
- the role of the Governmental Advisory Board (GAB) in supporting the integration of JAHEE results in countries policies and plans
- how to identify and promote JAHEE best practices on policy responses to reduce Health Inequalities (HI)
- the role of each country to in the development and implementation of the Recovery and Resilience Plan (RRP).

Discussion moments and breakout sessions are planned (see attached Program). We are happy to announce the participacion of Prof. Sir. Michael Marmot.

<u>The agenda</u> of the General Assembly is attached to this newsletter. The participation of all partners is warmly encouraged.

Please note that due to logistical limitations, only 100 participants will be allowed to attend this meeting.

For more information, contact Raffaella Bucciardini at raffaella.bucciardini@iss.it



# **Implementation Actions**

## Work Package 6 – Healthy living environments

## Poland – Health Equity – workshops

Health equity means ensuring social justice in accessing resources, and enabling the achievement of physical, mental, and social well-being for all. The Medical University Of Silesia deployed a series of 'Health Equity Workshop' between January and February 2020 for decision-makers in local health policy and organisers of health programs (e.g. NGOs, sanitary and epidemiological stations, etc.). The aim was to raise awareness of health equality and special needs of socially excluded groups.

The focus of these activities was primarily to identify which are the vulnerable groups to target and their needs. 127 people completed the workshops, which included an evaluation questionnaire before and after. According to the results of the evaluation, it can be concluded that the participants improved their knowledge of equality in health, while its application in practice is still somewhat problematic.

The workshops resulted in the creation of a health equality consultancy centre. If any of the workshop participants develops a public health program or initiative and has doubts as to whether the issue of equality in health is taken into account, they consult with a group of experts from Poland WP6 JAHEE Team.

For more information, please contact Katarzyna Brukało at kbrukalo@sum.edu.pl

## Work Package 9 – Health and equity in all policies

## The Netherlands – Working on reducing health disparities through a healthy environment

#### Reported by Sanne Niemer

What happens when municipalities work on the health of their citizens by improving their environment? Can this stimulate health equity in all policies? Pharos followed and guided three Dutch cities in their quest to reduce health inequalities by focusing on a healthy environment. We hope to publish our report with key elements for improving the focus on health soon.

Pharos is the Dutch expertise centre on health inequalities. We focus on sustainable improvement of the quality, effectiveness and accessibility of care and prevention for people with limited health literacy, non-western migrants, and refugees. Our aim is to reduce existing health disparities between different groups of people. We take part in the JAHEE project in the Netherlands, together with our other Dutch stakeholders, including the Ministry of Health. Our specific responsibility is within WP9. One of the Pharos projects relevant for this work package, is our <u>'HealthyIn Programme'</u>. This programme stimulates and supports 150 municipalities in the Netherlands to set up an intersectoral approach to tackle health inequalities, supported by the Ministry of Health.

A quick scan showed that intersectoral action between the (public) health sector and other 'social' sectors has improved in municipalities. However, the link between health and the physical environment needs more attention.

Therefore, our focus within our implementation action is to strengthen intersectoral collaboration between the health sector and physical environment on the topic of health equity, in three Dutch



municipalities. Windows of opportunity are the HealthyIn Programme and new legislation for physical environment. Due to this new legislation, municipalities have to take health into account in their vision and plans for the (built and natural) environment. As we learn from these actions, we can translate them into more generic advice on how to stimulate health equity in all policies.

In 2020 we followed and guided the three municipalities of Nunspeet, Maastricht and Utrecht on their journeys, whilst reflecting on these processes with other municipalities and experts. Now we are working on a report with key elements for improving a focus on health equity at policy level and an overview of relevant instruments and product. We will disseminate the lessons learned across other municipalities in the Netherlands and a number of ministries, to strengthen the vertical line between levels of government.

For more information, please contact Sanne Niemer at S.Niemer@pharos.nl

# News from partners and more

## Report on the impact of COVID-19 pandemic and inequalities in Spain

The COVID-19 crisis is having an unprecedented impact worldwide. However, it is not affecting everyone in an equal way. Three different, but interconnected, kinds of vulnerability can be identified: clinical vulnerability, social vulnerability and epidemiological vulnerability. The Spanish Ministry of Health recently published the report "Health Equity and COVID-19: Analysis and proposals to tackle epidemiological vulnerability related to social inequities".

The Report consists of analysis and proposals to tackle epidemiological vulnerability related to social inequities in Spain. It identifies challenges and difficulties encountered under the pandemic and develops a series of recommendations.

The issues addressed include employment, housing, economic conditions and digital divide. Overall, more the report calls for more actions are to strengthen prevention, detection and control measures as well as cross-sectoral initiatives to improve social conditions through structural reforms.

 English visual summary: Health Equity and COVID-19, Analysis and proposals to tackle epidemiological vulnerability related to social inequities. <u>https://www.mscbs.gob.es/profesionales/saludPublica/ccayes/alertasActual/nCov/docume</u> <u>ntos/HEALTH\_EQUITY\_AND\_COVID-19.pdf</u>

 Spanish visual summary: <u>https://www.mscbs.gob.es/profesionales/saludPublica/ccayes/alertasActual/nCov/docume</u> <u>ntos/COVID19\_Equidad\_en\_salud\_y\_covid19.pdf</u> Complete report in Spanish: Equidad en Salud y COVID-19. Análisis y propuestas para abordar la vulnerabilidad epidemiológica vinculada a las desigualdades sociales: <u>https://www.mscbs.gob.es/profesionales/saludPublica/ccayes/alertasActual/nCov/docume</u> <u>ntos/COVID19\_Equidad\_en\_salud\_y\_COVID-19.pdf</u>

For more information, please contact Ana Gil Luciano at agil@mscbs.es



## JAHEE in the Action Plan for the implementation of the European Pillar of Social Rights



On 4 March, 2021 the European Commission adopted the <u>Action Plan for the</u> Implementation of the European Pillar of Social Rights (EPSR).

The Plan puts forward concrete actions to further implement the principles of the EPSR promoting a joint effort by the Members States and the EU. It also proposes employment, skills and social protection headline targets for the EU to be achieved by 2030 and fosters active involvement of social partners and civil society. In the <u>Staff Working Document</u> accompaning the Action plan, a page has been fully dedicated to JAHEE, as reported below.

In the **Joint Action on Health Equity**<sup>663</sup>, funded under the 2014-2020 Health Programme, Member States worked jointly to address health inequalities and improve health and well-being in Europe. The action has also a specific focus on groups in vulnerable situations and migrants. Measures supported the formulation of national, regional and local policies and programmes to reduce inequalities in access to health and social services and capacity building to implement them.

Member States continue to modernise their health systems, e.g. by increasing access and availability of healthcare services. Some provide incentives or grants to family doctors or medical students to work in underserved areas (e.g. in Estonia, Latvia, France, Germany) or increase the salaries of (certain professions of) healthcare workers (in Bulgaria, Estonia, Latvia, Lithuania, Romania). Primary care is being strengthened by establishing community health centres, local health care units, or general practitioner group practices (in Austria, Czechia, Estonia, Greece, Luxembourg, Romania). Lithuania put in place measures to shorten waiting lists and reduce co-payment to prescriptions. Cyprus implemented the first phase of out-patient care in 2019, which is expected to reduce significantly out of pocket payments and further increase access to healthcare. The final phase of the general health system reform in Cyprus was launched on 1 June 2020, with the introduction of hospital care coverage as part of the benefits package. A number of Member States are planning or implementing improved health workforce planning and/or training (Sweden, Germany, France, Estonia, Spain, Lithuania, Luxembourg, Latvia).

The pandemic prompted some changes, such as the removal of user charges for primary care in Ireland, extending coverage for migrants in Portugal or covering for contributions for those out of work to some extent in Hungary, Slovenia, Greece and Croatia.

The cities of Leipzig, Ljubljana, Utrecht and Zagreb have pledged to renovate health centres and equipment, and promote healthy urban and work environments.<sup>664</sup> Ljubljana has pledged to continue working on the renovation of health centres and purchase of high-quality healthcare equipment.<sup>665</sup>

#### **JAHEE in the Health Inequalities Portal**

The recently launched Health Inequalities portal (<u>www.health-inequalities.eu</u>) is the information hub on health inequalities in Europe. It includes a resource database featuring research, policies, data, best

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practices, and tools on health inequalities. It also provides information about EU initiatives, financing opportunities, tools, a map of inequalities in Europe, and more. JAHEE received a dedicated space to describe its main achievements.

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