Calendar of events

July

25-27 July 2011 - Environmental Health Risk (Riga, Latvia)

August

2-4 August 2011: Health and Wellbeing Conference (Lanarkshire, Scotland)

25-26 August 2011: Swiss Public Health Conference "Chronic diseases - A global challenge" (Bale, Switzerland)

September

6 September 2011: European Respiratory Roadmap: A practical guide for a healthier future (Brussels, Belgium)

6 September 2011: Tackling obesity in early Childhood: Prevention (Brussels, Belgium)

7 September 2011: Nationale Tagung f"ur betriebliche Gesundheitsf"orderung 2011 - Bilanz und Arbeit: Die aktuellen Herausforderungen (Bam, Switzerland)

8-9 September 2011 - Public Health Conference 2011 (London, UK)

11-14 September 2011: 12th International meeting of the European Society of Gynaecological Oncology (Milan, Italy)

12-13 September 2011: Health Informatics, Scotland Conference 2011 (Edinburgh, Scotland)

12-13 September 2011: Right to land and livelihood (Geneva, Switzerland)

14-15 September 2011: Expert conference on the ability to work, health and productivity during professional life (Bregenz, Austria)

16 September 2011: EUROPEAN FORUM FOR PRIMARY CARE (EFP) CONFERENCE (Graz, Austria)

19-20 September 2011: United

Would you like to promote events or new publications of your organisation in health highlights? Please send us your contributions!

Want to express and share your views on Health equity issues?
Come and join the Equity Channel Community on the Equity Channel Website

EuroHealthNet launched its new Website!
Come and visit EuroHealthNet new Website at www.eurohealthnet.eu

EU News

EuroHealthNet news updates

Gradient – To address health inequalities among children and families

GRADIENT (April 2009 – 2012) aims to address this knowledge gap, to ensure that operational strategies can be developed to make progress on this issue. The focus of the research project is on families and children, since the greatest impact on reducing the health gradient can be achieved through early life policy interventions and by creating equal opportunities during childhood and adolescence.

- On the 15th of September, Aagje Ieven will present on the Gradient Project at the symposium organized by EuroChild "Working with under-threes: developing an integrative approach to education, care and health". The symposium is part of the EECERA (European Early Childhood Education Research Association) conference in Geneve. To know more about the symposium "Working with under-threes: developing an integrative approach to education, care and health", click here.

- On the 11th of November a roundtable organized by Eurohealthnet "Tackling the gradient in health amongst children and their families: analysis of evidence and policies", will take place in Copenhagen during the EUPHA (European Public Health Association) conference. Results from the GRADIENT project and first policy recommendations will be discussed. To know more about the roundtable "tackling the gradient in health amongst children and their families: analysis of evidence and policies", click here.

To know more about Gradient, click here or contact Aagje Ieven or Giorgio Barbareschi.

Health Inequalities - Overview of national and regional policy responses to health inequalities in the EU

The European Commission has asked EuroHealthNet to produce a comprehensive overview of national and regional policy responses to health inequalities in the EU since 2005. This work is being undertaken as part of a Consortium, led by Sir Michael Marmot (UCL), and will feed into a wider status report. EuroHealthNet, with the help of experts, has therefore compiled for each EU Member State an overview of such policy responses. We have now launched a "Call for Validation" where we would like to ask key actors to review the policy response profile of their country, and to let us know if we have missed important policy responses or whether responses have been
The European Commission calls on EU Member States to develop and pursue a common vision on how to coordinate research at EU level in the field of ageing. This was the message of a meeting between the Polish Presidency and the EP Committees, where MEPs backed the presidency’s aim to boost solidarity between generations, tackling worker demographics and creating partnerships between administrative organisations and citizens. The priorities of the Polish Presidency are available [here](#).

For more information on the meetings between the Polish Presidency and the EP Committees, click [here](#).

**Polish EU Presidency - EU Councils**

**Polish ministers meet European Parliament committees**

The priorities of Poland’s Presidency of the EU Council of Ministers have been presented to European Parliament committees by Polish ministers.

The work of the trio of the next three presidencies (Poland, Denmark and Cyprus) will focus on improving public health protecting European citizens against certain risk factors and ensuring good healthcare. The key issues in the coming months will be non-communicable diseases, health without borders and the work on diseases of the brain, including Alzheimer’s. Other issues to be tackled include prevention of smoking and alcohol abuse, e-health and diseases affecting the elderly. The minister underlined that a healthy childhood is a first step to a healthy and active old age, and added that the presidency will work on an improved Commission text on patient information which should be published soon.

Regarding employment and social affairs, the presidency’s priorities are building solidarity between generations, tackling worker demographics and creating partnerships between administrative organisations and citizens. MEPs backed the presidency’s aim to boost solidarity in this time of economic crisis, but warned that it will be difficult to create balanced regulation and to reconcile high youth unemployment with active ageing.

The priorities of the Polish Presidency are available [here](#).

For more information on the meetings between the Polish Presidency and the EP Committees, [click here](#).

**Ministers agree states need to act on demographic changes**

Regarding the demographic challenges issue, the Council asks the Member States to take better account of demographic challenges in their National Reform Programmes, drawing inter alia on findings from the research and information on best practices developed and made available in the framework of the European Alliance for Families. National authorities are also requested to take vigorous action to assist their citizens in optimising work and family life satisfaction, especially in the context of the proposed European Year of Families 2014.

The priorities of Poland’s Presidency of the EU Council of Ministers have been presented to European Parliament committees by Polish ministers. The work of the trio of the next three presidencies (Poland, Denmark and Cyprus) will focus on improving public health protecting European citizens against certain risk factors and ensuring good healthcare. The key issues in the coming months will be non-communicable diseases, health without borders and the work on diseases of the brain, including Alzheimer’s. Other issues to be tackled include prevention of smoking and alcohol abuse, e-health and diseases affecting the elderly. The minister underlined that a healthy childhood is a first step to a healthy and active old age, and added that the presidency will work on an improved Commission text on patient information which should be published soon.

Regarding employment and social affairs, the presidency’s priorities are building solidarity between generations, tackling worker demographics and creating partnerships between administrative organisations and citizens. MEPs backed the presidency’s aim to boost solidarity in this time of economic crisis, but warned that it will be difficult to create balanced regulation and to reconcile high youth unemployment with active ageing.

For more information, [click here](#).

**European Commission News**

**Digital Agenda: addressing the challenges of an ageing population**

The European Commission calls on EU Member States to develop and pursue a common vision on how to coordinate research at EU level in the field of ageing. This was the message of a Recommendation just adopted by the Commission entitled "More years, better lives - the potential and challenges of demographic change". The Recommendation urges Member States to participate in a Joint Programming Initiative on ageing populations in research areas such as how to retain people in the labour market, how to help older people remain active for as long as possible, in good health and with a better quality of life and how to make our future care systems sustainable.

The Recommendation calls on Member States to include the following actions, as part of their research agenda on ageing:

1. **For further information about this report, please contact Claudia Marinetti, Health Equity Project Coordinator.**

1. **You can find the country overviews via a link on the Health Inequalities Portal.**
20-21 October 2011: **European Mental Health Systems**
(Prague, Czech Republic)

21 October 2011: **Health Policy Forum**
(Prague, Czech Republic)

21-22 October 2011: **Evolving Challenges in promoting cardiovascular health**
(Badalona, Spain)

27-28 October 2011: **E-health 2.0 Europe 2011**
(Berlin, Germany)

**November**

2-3 November 2011: **Aging Globally: Ageing Locally - Planning all Our Futures**
(Dublin, Ireland)

7 November 2011: **AGE Platform Europe - Intergroup on ageing and intergenerational solidarity**
(Prague, Czech Republic)

7-11 November 2011: **Qualitative and Quantitative Research methods in Health care and Medicine Use**
(Copenhagen, Denmark)

9-11 November 2011: **6th World Congress on Tissue Banking**
(Badalona, Spain)

10-12 November 2011: **Wellness Development and health**
(Copenhagen, Denmark)

(Munich, Germany)

20-23 November 2011: **3rd International TEMOS Conference "Healthcare abroad and medical tourism"**
(Cologne, Germany)

23 November 2011: **Physio, Physical Activity and Cardiovascular Disease Prevention in Europe**
(Prague, Czech Republic)

23-25 November 2011: **ECDC Annual meeting on antimicrobial resistance and healthcare-associated infections**
(Warsaw, Poland)

**December**

5 December 2011: **Surgery in optimising the care of obese patients**
(Munich, Germany)

**January 2012**

(Prague, Czech Republic)

---

- Identifying and exchanging information on relevant national programmes and research activities as well as exchanging best practices, methodologies and guidelines
- Identifying areas or research activities that would benefit from joint coordination or pooling of resources
- Considering the changing needs of elderly people when defining the objectives for ageing research programmes
- Sharing, where appropriate, existing research infrastructures or developing new facilities such as coordinated databanks or the development of models for studying ageing processes
- Encouraging better collaboration between public and private sectors and between different research activities and business sectors related to demographic change and population ageing
- Creating networks between centres dedicated to demographic change and population ageing research.

The Joint Programming Initiative "More years, better lives, the challenges and opportunities of demographic change" will develop its common strategic research agenda on the ageing population over the coming months with the assistance of prominent experts. This agenda will then be implemented through joint actions and projects involving a substantial commitment of funding and participation from involved countries. The European Commission will provide financial support for the coordination of the initiative; which is expected to start delivering concrete results after 2012, such as science based recommendations for adapting pension systems based not only on age, as is currently the case, but on people's capacity to work.

For more information, click [here](#).

To access the European Commission press release, click [here](#).

The recommendation is available [here](#).

---

**Launching of the pilot European Innovation Partnership on Active and Healthy Ageing**

The pilot European Innovation Partnership on Active and Healthy Ageing aims to increase the average healthy lifespan in the EU by 2 years by 2020. It pursues a triple win for Europe:

- Improving the health and quality of life of Europeans with a focus on older people;
- Supporting the long-term sustainability and efficiency of health and social care systems;
- Enhancing the competitiveness of EU industry through business and expansion in new markets.

The pilot Partnership will provide a forum for stakeholders through a series workshops:

- Stakeholders from the demand and supply side;
- All actors in the innovation cycle, from research to translation (adaptation), deployment and final users;
- Stakeholders from standardisation and regulation.

A high-level Steering Group will assist with the preparatory work. Its main role is to draw up a strategic implementation plan (SIP) with operational recommendations.

For more information, click [here](#).

**Extra funds for education, youth and creativity aimed to boost jobs**

As part of its strategy for boosting employment, the European Commission is aiming to nearly double the number of young people, teachers and researchers who get EU grants for study and training abroad, from 400 000 recipients per year now to almost 800 000 in future. This is one of the key objectives behind the significant increase in EU investment for education, youth and creativity proposed by the Commission in its budget plan for 2014-2020. Improving education and training and helping people acquire the right skills are crucial for meeting future job needs and fighting poverty.

For more information, click [here](#).

**Horizon 2020 - the Framework Programme for Research and Innovation**

The website devoted to Horizon 2020 - the future Framework Programme for Research and Innovation - is now published. The proposed Framework Programme for Research and Innovation, which will be introduced from 2014, will build upon the successes of the current Framework Programme for Research (FP7), the Competitiveness and Innovation Framework Programme (CIP) and the European Institute of Innovation and Technology (EIT). The ultimate aim is to maximise the contribution of EU funded research and innovation to sustainable growth and jobs and to tackling the grand challenges facing Europe – for example...
climate change, energy and food security, health and our ageing population. On 29 June 2011 the European Commission presented the Multiannual Financial Framework (MAFF) which translates into financial terms the Union's political priorities for the period 2014-2020. Investment in research and innovation in the next seven years will be significantly increased. The common EU strategy “Horizon 2020” worth €80 billion will boost Europe’s global competitiveness and help create the jobs and ideas of tomorrow. It will gather all projects in this area to eliminate fragmentation and make sure EU-funded projects better complement and help coordinate national efforts. The MAFF needs to be agreed by Council and Parliament over the coming year.

Horizon 2020 Website is available here.

Launch of new support for innovation in the EU regions

The Commission launched the “smart specialisation platform” to support regions and Member States in better defining their research and innovation strategies. As there is no “one-size-fits-all” policy solution, the new facility will help the regions to assess their specific Research and Innovation (R&I) strengths and weaknesses and build on their competitive advantage. This is another step on the path to achieving the objectives set by the Member States in the field of research and innovation as part of the Europe 2020 strategy.

A look at the “European Regional Innovation Scoreboard” shows that there is considerable diversity in regional innovation performance all over Europe. Only 27 EU regions – one in ten – have achieved the goal of investing 3% of gross domestic product (GDP) in research and development. With regard to small and medium enterprises (SMEs), the European innovation landscape shows marked contrasts: the share of innovative SMEs in 2008, ranged from 13% in Hungary to 46% in Germany. There is a relative lack of vision in setting R&I priorities in Europe: sometimes either no clear priorities are defined or priorities are just copied from one region to another.

The new platform aims at encouraging national and regional authorities to design “smart specialisation strategies”. Each region should identify its best assets and R&I potential in order to concentrate its efforts and resources on a limited number of priorities where it can really develop excellence and compete in the global economy. The platform brings together expertise from universities, research centres, regional authorities and businesses.

For more information click here or here.

For more information about the Regions for Economic Change Conference, click here.

Speech by EC Commissioner for Health John DALLI - "Social and Health Effects of the new Tobacco Product Directive"

Commissioner Dalli reminds that 13 million Europeans suffer from diseases related to tobacco smoking and that at least 6% of national healthcare spending is eaten by tobacco-related diseases. The European Commission considers the possibilities to improve the rules on health warnings and packaging. It also considers how to regulate additives in tobacco products, which have been shown to be particularly attractive to young people. Finally, Commissioner Dalli underlines that tobacco control is about saving lives, about preventing diseases and about discouraging an addiction.

Speech by Commissioner Dalli is available here.

European Parliament News

Strong support to the European Year for Active Ageing and Solidarity between Generations (2012)

Member of the European Parliament expressed a strong support to the European Year for Active Ageing and Solidarity between Generations (EY2012). The overall objective of the European Year shall be to facilitate the creation of an active ageing culture in Europe based on a society for all ages. New specific objectives are defined as follows:

- to raise general awareness of the value of active ageing and its various dimensions;
- to stimulate debate, to exchange information and to develop mutual learning between Member States and stakeholders;
- to offer a framework for commitment and concrete action;
- to promote activities which will help to combat age discrimination, to overcome age-related stereotypes and to remove barriers, particularly with regard to employability.

The contents of measures have been amended in accordance with the specific objectives. The
Commission and Member States shall take into account gender mainstreaming in all their activities in connection with the running of the European Year. The Commission shall take into account the potential of cross-border activities taking place at a regional or local level for achieving the objectives. Lastly, efforts shall be made to ensure that all activities of the European Year addressed to the wider public are easily accessible to all, including people with disabilities.

The financial envelope for the implementation, at the level of the Union, of this Decision, for the period from 1 January 2011 to 31 December 2012, shall be EUR 5 million.

On 29 April 2011, the Coalition launched a joint leaflet on the EU Year 2012 to inform the public about the upcoming European Year and to mobilise a wide range of. Now that the European Parliament has adopted the proposal the Coalition will start to work on a Joint Roadmap and Manifesto for EY2012. The Roadmap will explain what the Coalition commits to do to support the objectives of the EY2012 and the Manifesto will outline what we would like others to do to foster participation of older people and create an age friendly environment across the EU. These documents will be presented at an event in the European Parliament on 7 November 2011.


- EuroHealthNet is part of the EY2012 coalition that includes some 20 European organisations.

For more information, click here or contact John Considine.

Responses to Parliamentary Questions

Obesity in the EU

David Casa (Malta, PPE) asks the European Commission about the EU strategy to tackle the issue was launched in 2007 and wants to know what results has this strategy produced in terms of increased awareness, access to proper treatment, and research into the social and economic impact of obesity in the EU.

Commissioner Dalli underlines that the report elaborated in the frame of the Strategy for Europe on Nutrition, Overweight and Obesity-related health issues, looked at progress achieved so far with activities to tackle health issues related to nutrition, overweight and obesity by promoting healthier diets and more physical activity, to help identify where to focus future activities under the Strategy. This report encourages members of the Platform on Diet to scale up their commitments; calls for greater focus and more innovation in action targeted at children and low socio-economic groups; more creativity in promoting physical activity; greater efforts in food reformulation, portion size, labelling and responsible marketing of food and drinks, in particular to children; and the creation of effective means to monitor the impact of actions. It further concludes that there are substantial variations in implementation between Member States and policy areas.

Other News from EU Institutions

European Economic and Social Committee (EESC) - Quality jobs for all ages must be a priority

The EESC underlined that the EU should strive to enhance job prospects and working conditions across the whole population to counter many of the difficulties we are currently experiencing. Dealing with the challenges of an ageing population and creating an agenda for new skills and jobs, particularly for young people were the subjects of two opinions, both aiming at contributing to a more expedient European labour market.

- Demographic changes and the subsequent effect on the labour market were evaluated in an exploratory opinion. The opinion not only analyses the risks and consequences of the aging population, but also the opportunities that can be realized through effective labour market policies.

Fully utilising all available employment potential is the key to improving the labour market integration of working age people and consequently to contain the economic dependency of an aging population. The EESC argues against changes to pension systems that result in less favourable terms for accessing schemes and for entitlements. In particular, proposals to raise the statutory retirement age are considered undesirable.

- Supporting job creation is the subject of the second opinion. This opinion scrutinises the European Commission’s agenda for new skills and jobs initiative. The EESC welcomes the
Commission’s efforts to increase employment and make labour markets more efficient, and calls upon Member States to make good use of social and civil dialogue to spur efforts to improve the current situation.

However, concerns are raised that the proposed initiative fails to encapsulate the urgent need to create good quality jobs, and does not contain a sufficient stimulus to encourage Member States to set ambitious policies, for securing real growth and new job opportunities. Whilst seeking a more effective labour market, a balance must be struck which preserves the protection of workers. Therefore, the Commission must ensure that EU-level legislation supports Member States’ efforts to implement beneficial labour market reforms and promote social investment.

For further information, please contact Torben Bachnielsen.

National and local news

Denmark – Centre for Health Promotion and Disease Prevention - A report on health status of men in Denmark and a review of effective intervention for promoting men’s health

The purpose of the report is to summarize the physical and mental health status of men in Denmark and selected determinants of health and risk factors for ill health and to identify sex differences where this is relevant. Thus, this report does not emphasize specifically focusing on sex differences. Another purpose of the report is to analyse whether selected sociodemographic factors (educational level and civil status) may contribute to explaining how men and women differ in their use of health services and differences in men’s and women’s health behaviour. The most important source of data is the 2005 Danish Interview Health Survey. The report uses a broad definition of health that does not merely emphasize the absence of disease or infirmity but also includes the quality of life. The report is intended mainly for municipal and regional health planners, professionals and politicians in Denmark, who will determine the health promotion and disease prevention initiatives for the coming years based on the municipal health profiles.

To access the report, click here.

Finland – Ministry of Social Affairs and Health - Downward trend in smoking and alcohol use, increase in the use of snus among adolescents

The downward trend in daily smoking among adolescents continued over the last two years, and adolescents start experimenting with smoking at an older age than before in Finland. Alcohol use and binge drinking have also decreased among adolescents below the age of 18 years. On the other hand, snus use and exposure to narcotic drugs have become more common. This information appears from the nationwide Adolescent Health and Lifestyle Survey 2011 carried out at the University of Tampere, School of Health Sciences. The questionnaire was responded by 4,566 adolescents aged from 12 to18 years. The survey, which is funded by the Ministry of Social Affairs and Health, has been conducted biennially since 1977. For more information, click here.

Germany – BzGA – “Kleemobil”: a best practice example on Equity in Health

‘Kleemobil’ is a good practice project from Mecklenburg Vorpommern on health promotion for people from lower socio-economic groups. The project supports young parents in socially difficult situations (e.g. poverty, unemployment, homelessness) from pregnancy to the first year of birth of their child. It is one of the already 105 good practices projects on Equity in Health that are collected by BZgA.

All those good practices can be found in the database developed by BZgA. More information on the project ‘Kleemobil’ can be found here.

Hungary - Hungary introduces ‘fat tax’ to boost nation’s health

Food considered to be unhealthy, including crisps, soft drinks and chocolate bars, may become subject to a new tax in Hungary. The new law is aimed at “improving the health of the nation”. Initially called ‘the hamburger tax’, the measure was dubbed ‘crisps tax’ or ‘fat tax’ after the Hungarian government decided that it would not affect fast food restaurants. The plan is to impose a 10 forint (3.7 eurocent) levy on products that contain “too much” salt, sugar, or fat,
while increasing the tax on liquor and soft drinks by 10%. The proceeds, estimated to be worth up to 30 billion forint (111 million euro), would pay for state-funded health care, which has a deficit of about 100 billion forints (371 million euro).

Hungary is among the most severely indebted countries in Eastern Europe. The bill will be put to parliament this summer and in all likelihood will easily pass, said Gabor Csiba, the author of the bill, who is president of the Strategic Alliance for Hungarian Hospitals and a member of the ruling Fidesz party. If Hungary does proceed with its 'fat tax', as seems likely, it would be the first country in the world to do so.

Hungarians have one of the lowest life expectancies in the European Union. However, the new law does not cover traditional Hungarian cuisine, like deep-fried goose fat. FoodDrinkEurope, a trade group representing the European food and drinks industry, says the proposed tax is "discriminatory" because it targets specific types of food and tends to hit low-income groups hardest.

For more information, click here

**Switzerland – Health Promotion**

- **National Conference on health promotion**

  The 13th conference for health promotion will be held in Bale on 26-27 January 2012.

  For more information, click here.

- **National Congress of Workplace Health Promotion 2011**

  The National congress of workplace Health promotion 2011 will present practical advice to identify and avoid causes of stress. The Congress will be held on 7 September 2001 at the University of St Gallen.

  For more information, click Here

**The Netherlands – RIVM**

- **Dutch study confirms need to focus on health of people living in deprived neighbourhoods**

  A study by researchers from RIVM and the Academic Medical Centre at the University of Amsterdam, the Netherlands, has emphasized the importance for action on health in Dutch deprived urban communities. Pro-active measures to improve education, employment, housing and community safety conditions are currently undertaken in several urban neighbourhoods and this may positively impact on the health of people living in these deprived communities.

  The research group compared the health of people living in 30 deprived neighbourhoods to that of people living in non-deprived areas in the same cities. Residents from disadvantaged neighbourhoods perceived their health as worse, and are more often obese, asthmatic, and/or diabetic than residents from non-deprived neighbourhoods. They also smoke more often and are less engaged in physical activity. No differences were found as regards dietary behaviour. Excessive drinking occurs slightly less among those living in the deprived neighbourhoods, where more people were also found to not drink any alcohol at all. Differences in health and lifestyle could partly be explained by population differences in education and ethnic backgrounds.

  The URBAN40 research therefore aims to evaluate the health effects of the Dutch neighbourhood approach. URBAN40 is a joint initiative of the RIVM, AMC/UvA and Maastricht University. First results of URBAN40 will be presented shortly.

  The results were recently published in the Tijdschrift voor Sociale Gezondheidszorg (TSG). Full text (in Dutch, with abstract in English) is available here.

  For further information, please contact Annemarie Ruijsbroek.

  For further information URBAN40, please contact Mariel Droomers.

- **Health promotion and prevention at school**
RIVM released a manual aiming at working for health promotion and prevention according to healthy Schools - aanpak. Concrete healthy activities several appliances and tips help schools on gone. Moreover an overview of effective interventions appears at the manual.

For more information, click here.

**UK - Scientists say text messages can help smokers quit**

An international team of researchers led by the London School of Hygiene & Tropical Medicine (LSHTM) in the United Kingdom has discovered that mobile phones can help smokers give up their biggest vice. Supportive and encouraging messages sent via mobile phone texts have succeeded in helping twice the number of smokers quit the habit at six months, as compared to the control group in the trial. Presented in The Lancet journal, the findings of TXT2STOP show how text messaging is an innovative and effective approach to help smokers. Professionals who help smokers quit as well as smokers themselves contributed to the development of messages that encouraged the subjects to persevere and to focus on their success to date. Subjects in the control group received text messages every 14 days thanking them for participating in the trial. The findings indicate that continuous abstinence (corroborated by chemical tests) at 6 months was significantly increased in the TXT2STOP group — 10.7 % success compared with 4.9 % success of the control group. The researchers say the trial worked well for all ages and across all social groups. 'Mobile-phone text-messaging smoking-cessation support doubles quit rates at six months,' the authors write.

For more information, click here.

**UK – Office of National Statistics – Health in social trends report**

Social Trends draws together social and economic data from a wide range of government departments and other organisations to provide a comprehensive guide to UK society today, and how it has been changing. Data is presented clearly in a combination of tables, figures and text providing the ideal tool for researching life and lifestyles in the UK. From 2010 Social Trends moved exclusively online allowing it to reach a wider audience and bring many new opportunities to develop and enhance the presentation of statistics while retaining quality and value. Social Trends covers a range of subjects including:
- Health
- Education
- Population
- Lifestyles and social participation.

For more information, click here.

**Other international news**

**WHO - Ottawa Charter for Health Promotion – 25th anniversary commemoration**

The Ottawa Charter for Health Promotion is an international agreement signed at the First International Conference on Health Promotion, organized by the WHO in November 1986. It launched a series of actions among international organizations, national governments and local communities to achieve the goal of "Health For All" by the year 2000 and beyond through better health promotion. Five action areas for health promotion were identified in the charter:
- Building healthy public policy
- Create supportive environments
- Strengthening community action
- Developing personal skills
- Re-orientating health care services toward prevention of illness and promotion of health

With the birth of the Ottawa Charter 25 years ago, a milestone was reached in the history of public health which provided a breakthrough for the way we deal with health issues today. The upcoming Regional Committee in Baku will commemorate the 25th birthday of the Ottawa Charter for Health Promotion.

For more information, click here.

**UNAIDS - First meeting of BRICS health ministers brings new leadership to global health**
Universal access to medicines was a key topic of discussion at a meeting of health ministers from Brazil, Russia, India, China and South Africa (BRICS) in Beijing, China. The meeting, hosted by the Government of China, aimed to identify opportunities for BRICS countries to promote wider access to affordable, quality-assured medicines, with a view to reaching the Millennium Development Goals and other public health challenges. For more information, click here.

**Economic and Social Research Council - Resilience amongst the long term ill**

People who have a long term debilitating physical illness demonstrate mental resilience according to Understanding Society, the world’s largest longitudinal household study. The first findings reveal that people diagnosed with cancer, diabetes, respiratory or cardiovascular disease report similar mental health scores to those without physical illness. The survey’s findings suggest that those people who may not be able to function well physically because of an illness do not necessarily suffer problems with their mental health - for example with their concentration, confidence and feelings of strain.

For more information, click here.

**Life expectancy study - American men will die on average a year before counterparts in other Western nations**

American men are dying earlier than in other Western nations. Deaths come almost 30 years earlier than the international average in a fifth of counties across the U.S. The average age to which an American male can expect to live is just over 75 and a half years, but that is younger than their Japanese counterparts who can hope to make it to 79. And the difference between women is even greater with American women looking at living nearly 81 years compared to just over 86 years for a woman from Japan. Life expectancy is improving in the U.S., but not at the same rate as other Western countries meaning that the gap is getting wider and it is 38th in the world for life expectancy. Comparisons with similar countries such as Great Britain, Australia and even Canada are less than favourable. The university study into average ages said: ‘Large disparities in health outcomes have been documented in the U.S. in relation to race, community of residence, and individual and community socio-economic factors.

For more information, click here.

**US - Income inequality may affect lifespan**

U.S. income and healthcare inequality contributes to Americans not keeping up with other countries worldwide in life expectancy, British researchers say. Danny Dorling, a professor of human geography at the University of Sheffield in England, said a more even distribution of wealth -- even if the national average were lower -- could mean longer lives for everyone in the United States or other countries, the BBC reported. Dorling was commenting on a U.S. study that found from 2000 to 2007, life expectancies in more than 80 percent of U.S. counties fell against the average of the 10 best nations in the world. The study author, Dr. Ali Mokdad of the University of Washington in Seattle, said the United States has high rates of poverty and high rates of uninsured lacking access to healthcare, fewer primary care physicians and fewer physicians per person than most developed countries. However, while poor Americans may lose out from inequality, Dorling argues the rich suffer too. Growing income inequality in Britain, since the 1970s, has helped it lag behind other European nations’ life expectancy rankings, Dorling said.

For more information, click here.

**Avoidable Mortality: What it Means and How it is Measured**

A research paper studied the concept of avoidable mortality and how the way it is measured has evolved over time. The most recent empirical literature shows that the notion of avoidable mortality continues to be used to establish the extent to which people are dying from amenable conditions within and/or across countries and over time, and whether socio-economic status and ethnicity are related to mortality from amenable conditions. Most studies use data taken from national death registries, with only two which link the concept of avoidable mortality to routinely collected administrative data of healthcare provision, such as hospitals. A number of criticisms are raised, with probably the most remarkable being the lack of association found between avoidable mortality and healthcare inputs.

To access the study, click here.
Mental Health Europe - Priorities for the Polish Presidency

Mental Health Europe, an EPHA member, has released its call for action to the Polish presidency of the EU, which chairs the Council of Ministers until December 2011. Mental Health Europe urges the Polish presidency to take into consideration the impact of the crisis on the most vulnerable and to use their leadership to strengthen the social dimension of the Europe 2020 strategy. They therefore call on the Polish Presidency to:

- Work towards the implementation of the European Pact for Mental Health and Well-being as an integral part of the European Platform Against Poverty and Social Exclusion.
- Take action in the field of social determinants of (mental) health.
- Fight against poverty and social exclusion.
- Develop Structural Funds regulations for the next programming period that do not allow Member States to refurbish or maintain institutions for disabled people, but to support governments in developing community-based services.
- Develop a strategy for the employment of people with disabilities and mental health problems. Providing efficient training and support schemes should be promoted at EU level.
- Strengthen the Open Method of Coordination (OMC).
- Promote equal rights for all, including people with mental health problems, while fighting against all forms of discrimination.
- Recognize gender issues as key to the EU 2020 strategy.

Mental Health Europe Recommendations for the Polish Presidency are available here. Mental Health Europe press release is available here.

Protecting the unborn baby from alcohol

On 7th September, an event - jointly organized by European Alcohol Policy Alliance (Eurocare) and the Polish State Agency for State Agency for Prevention of Alcohol-Related Problems (PARPA) - will aim to mark International Foetal Alcohol Spectrum Disorders (FASD) Day. Drinking alcohol during pregnancy is the leading known cause of birth defects and developmental disorders in the EU. Unfortunately, many women are not aware that throughout pregnancy, even at low levels of exposure, alcohol interferes with the normal development and can seriously damage the unborn child. Case studies across Europe show there are a substantial number of women who continue to drink during pregnancy, it ranges from 25% in Spain to 35%-50% in the Netherlands and even higher rates in the UK or Ireland (79%). The umbrella term, Foetal Alcohol Spectrum Disorders (FASD), describes the range of effects that can occur in an individual whose mother drank alcohol during pregnancy. These can include physical, mental, behavioural and or learning disabilities with possible lifelong implications. This meeting will be an opportunity to discuss different policy options to protect the unborn babies from the negative effects of alcohol at EU level as well as share experiences and good practices.

The event is hosted by MEP Elzbieta Lukacijewska (EPP, Poland). Commissioner Dalli will be present as a Key note speaker.

For more information please contact Aleksandra Kaczmarek. Click here to register.

International Association of Public Transport (UITP) - Public Transport becomes a real mobility provider

The International Association of Public Transport (UITP) recently reached a new official position on "Combined Mobility". The document shows how traditional public transport can overcome some of its shortcomings and offer high flexibility and convenience for to meet mobility demand of modern fellow citizens: by building up the so-called “sustainable mobility alliance” with car-sharing, cycling and taxis, public transport is able to offer a full mobility portfolio and compete with the private car in terms of convenience and cost-structure. The increasing urban sprawl, congestion and lack of space are leading our cities to a decline in quality of life while mobility demand rises. Hence, the primary objective of cities in terms of mobility and space allocation is to reduce car use and encourage the use of public transport and other emerging or well-established alternative modes. To this purpose, the Combined Mobility Platform of UITP has put forward some recommendations for a successful collaboration between public transport and so-called Combined Mobility services – car-sharing, car-pooling, bike-sharing, shared taxis, car-
pooling etc – in its focus paper “Becoming a real mobility provider”. The document illustrates the economical and ecological benefits of the different combined mobility services when they are in synergy with an efficient public transport system – the backbone of every mobility policy. Our societies can take advantages of such benefits only if:

- public transport plays its active role in developing partnerships with combined mobility services or even take the lead on them.
- public authorities collaborate within an adequate policy framework and together build up a mobility policy aiming at offering citizens the possibility to live their city without owning a car.

The full document is available here.

The UITP conference, “Urban Governance: Getting people on board” on 5-7 October 2011 in Gothenburg, Sweden, will offer further elements to understand how our cities are developing innovative strategies to achieve a more sustainable mobility.

Using Health Highlights

EuroHealthNet seeks to practice sustainable approaches – please do not waste resources by printing this unnecessarily, but do forward electronically to colleagues in your organisation, agency or institution.

Would you like to inform other members about new publications or events in your organisation or country?
Please send contributions to a.moret@eurohealthnet.eu

EU Health Highlights is produced for the internal use of organisations, institutions, authorities and departments in health promotion, disease prevention and public health in the EU. If any reader knows of people or bodies who might be useful to receive Health Highlights, please do not copy it externally beyond your agency without our authorisation.

send details to us at: a.moret@eurohealthnet.eu

We will be pleased to make contact and offer our services, including a free trial period. Your comments and suggestions also be welcome. Thank you for your help.

If you wish to unsubscribe from our Health Highlights, please send an email to a.moret@eurohealthnet.eu with “Unsubscribe HH” in the subject line.