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PARTNERS

1. Institute of Health Carlos III, ISCIII, Coordinator, Spain
2. Spanish Foundation for International Cooperation, Health and Social Policy, FCSAI, Spain
3. EuroHealthNet, EHNet, Belgium
4. European Health Management Association, EHMA, Ireland
5. Institute for Health Sciences in Aragon, IACS, Spain
6. Federal Centre for Health Education, BZgA, Germany
7. Italian Medicines Agency, AIFA, Italy
8. National Institute of Health, ISS, Italy
9. Dresden University of Technology, TUD, Germany
10. Vilnius University Hospital, Santariskiu Klinikos, VUJUSK, Lithuania
11. National Institute of Public Health, NIJZ, Slovenia
12. National Center of Public Health and Analyses, NCPHA, Bulgaria
13. National Institute for Health and Welfare, THL, Finland
14. Heinrich Heine University, Düsseldorf, HHU, Germany
15. Ministry of Health, MINSAL, Italy
16. 1st Regional Health Authority of Attica, YPE, Greece
17. Health Service Executive, HSE, Ireland
18. Institute of Public Health, IPH, Ireland
19. Netherlands Institute for Health Services Research, NIVEL, Netherlands
20. Ministry of Health and Care Services, HOD, Norway
21. Directorate-General of Health, DGS, Portugal
22. National Health Institute Doutor Ricardo Jorge, IP, INSA, Portugal
23. European Patients Forum, EPF, Belgium
24. National Institute for Health Development, NIHD, Estonia
25. Health Education and Diseases Prevention Centre, SMLPC, Lithuania
26. Directorate of Health, DOHI, Iceland
27. European Institute of Women's Health, EIW, Ireland
28. National Institute for Public Health and the Environment, RIVM, Netherlands
29. European Regional and Local Health Authorities, EUREGHA, Belgium
30. Spanish Ministry of Health, Social Services and Equality, MSSSI, Spain
31. Andalusian Regional Ministry of Health, CSBSJA, Spain
32. Progress and Health Foundation, FPS, Spain
33. Basque Foundation for Health Innovation and Research, BIOEF, Spain
34. Galician Health Service, SERGAS, Spain
35. Foundation for Education and Health Research of Murcia, FEIS, Spain
36. Aragon Foundation for Research and Development, ARALD, Spain
37. University of Zaragoza, UNIZAR, Spain
38. Agency for Health Quality and Assessment for Catalonia, AQUAS, Spain
39. Portuguese Diabetes Association, APDP, Portugal

In addition to the associated partners, there are 31 collaborating partners involved in JA-CHRODIS. Other interested parties support JA-CHRODIS through regular Fora of Stakeholders.



This leaflet originates from the Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS) which has received funding from the European Union, in the framework of the Health Programme (2008-2013).

COORDINATION

LEADER: ISCIII, CO-LEADER: MSSSI



Responsible for overall and day-to-day management and implementation of JA-CHRODIS and the coordination of the Advisory Board as well as the Governing Board.

COMMUNICATION

LEADER: EUROHEALTHNET



Responsible for the successful dissemination of target audiences and stakeholders aware of and engaged in the Joint Action.

EVALUATION

LEADER: AQUAS, CO-LEADER: APDP



Responsible for the evaluation of the work of JA-CHRODIS to ensure it is achieving its objectives and assuring the quality of the results as well as its impact

WHY DO WE NEED JA-CHRODIS?

Chronic diseases, like diabetes, cardiovascular diseases and stroke, affect 8 out of 10 people aged over 65 in Europe. Approximately 70% to 80% of health care budgets across the EU are spent on the treatment of chronic diseases. There is a wealth of knowledge within Europe on effective and efficient ways to prevent and manage chronic conditions.

The EU and ministries of health of European countries are working together and collectively financing this **Joint Action (2014-2017) on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)**, which aims to capture the best of this knowledge and make it accessible across Europe.

WHAT DO WE WANT TO ACHIEVE?

The general objective is to promote and facilitate the **exchange and transfer of good practices** on chronic diseases between European countries and regions. These good practices address chronic conditions, with a specific focus on health promotion and primary prevention of chronic conditions, multimorbidity and type 2 diabetes.

The Joint Action CHRODIS will lead to recommendations based on the best available evidence across Europe on how to effectively prevent, manage and treat chronic diseases across the life cycle. This information will be available to policy makers, healthcare professionals and managers, the general public and other interested stakeholders.

JA-CHRODIS aims to make a strong contribution to reduce the burden of chronic diseases and to promote healthy living and active ageing in Europe. It collaborates closely with the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA) as well as others active in this field. The Platform for Knowledge Exchange (PKE) will be a sustainable tool for those that want to identify and exchange the best ways to achieve these aims. The JA-CHRODIS Governing Board, comprised of nominated representatives of health ministries of European countries, strives to keep chronic diseases at the forefront of the political agenda even beyond the three years of EU co-funding.



PLATFORM FOR KNOWLEDGE EXCHANGE

LEADER: IACS

JA-CHRODIS is building a Platform for Knowledge Exchange (PKE) to enable decision-makers, caregivers, patients, and researchers, to identify and exchange the best knowledge on chronic diseases and healthy ageing. The platform will be comprised of:

- A **clearinghouse** compiling excellent practices and policies across Europe;
- An **online tool** to allow users to assess practices, interventions and policies;
- An **online helpdesk** with expert consultants to advise users on the development, implementation and evaluation of practices and policies.

Partners in this work are leading the process of identifying good practice assessment criteria by using a modified Delphi methodology involving key experts in the following fields: health promotion and primary prevention, organisational interventions with emphasis on multimorbid patients, patient empowerment interventions and type 2 diabetes.

AREAS OF WORK

HEALTH PROMOTION

LEADER: BZGA, CO-LEADER: EUROHEALTHNET

JA-CHRODIS partners have produced 14 country reports outlining the general health promotion and primary prevention landscape and gaps and needs in this area. They have applied good practice criteria to identify highly promising and cost-effective policies and interventions to promote healthy ageing and prevent the onset of cardiovascular diseases, stroke and type 2 diabetes. Selected good practices will be the topic of study visits for further exchange in the final year of the Joint Action.



MULTIMORBIDITY

LEADER: AIFA, CO-LEADER: VULSK

This area of work has completed a review of existing approaches to care for patients experiencing multimorbidity with high care demands in Europe, and a review of the evidence of such programmes' effectiveness. JA-CHRODIS partners are selecting components of good clinical care practices in order to define a set of interventions that target multimorbidity which can be applied by European countries. They will also define training programmes for healthcare professionals.



TYPE 2 DIABETES

LEADER: ISS, CO-LEADER: NIJZ

JA-CHRODIS partners have collected data on national diabetes plans and on strategies and interventions to prevent and manage type 2 diabetes in 19 European countries, in order to establish the strongest elements within them that can be shared across Europe. They are also identifying quality criteria to find good practices with the overall aim of improving coordination and cooperation amongst countries, to act on and exchange good practice in this area.

