

Joining forces across Europe to strengthen policies and approaches to prevent chronic disease: JA-CHRODIS

Caroline Costongs, EuroHealthNet (authors: C. Costongs, T. Kunkel, T. Chavarría Giménez)

Introduction

Chronic diseases affect 8 out of 10 people aged over 65 in Europe.

80%

- Approx. 70% to 80% of health care budgets across the EU are spent on treating chronic diseases.
- Many chronic diseases are preventable, or their onset can be delayed.
- Only 2-3% of health costs in EU Member States are invested in prevention measures.

3%

The EU Joint Action on Chronic Diseases and Promoting Healthy Ageing Across the Life Cycle (JA-CHRODIS)

= The European Commission (DG SANTE), Health Ministries and other organisations from 24 European countries are

joining forces to identify and share the best approaches to reduce the burden of chronic disease in the EU.

(10 Million Euro collective investment)

To establish the groundwork, country reviews were developed:

- Outlining the health promotion and primary prevention 'landscape' in 14 countries
- Outlining the gaps and needs; and much more.

Results

- Significant differences in systems and structures across partner countries

BUT

- Many commonalities in the key themes emerging from the gaps and needs.

Most frequently identified gaps and needs:

- **Leadership / strategy**
- **HiAP**
- **Evaluation, monitoring and research**
- **Capacity and capacity development**

All reports made reference to

- **Lack of consistent funding**

in order to deal with these gaps and needs.

Contact:
Thomas.Kunkel@bzga.de

Lessons

The gaps and needs identified offer a basis for reorientation, improvement, innovation and capacity development in health promotion and prevention:

- within their respective countries
- as a shared venture.

Mechanisms should include:

- Development of agreed terminology and frameworks
- Scaling-up and transferability of promising practices
- Innovative thinking incl. emerging opportunities for health promotion e.g. mhealth, eHealth, PPPs
- Ethical dimension.

Conclusions

1) There remains **a strong need to invest more and more consistently** in health promotion and primary prevention as an approach to making health systems more sustainable.



2) EU Member States can support one another by developing a common framework to share successful approaches and good practice. This is being done as part of the work of JA-CHRODIS (Knowledge platform; good practices; and more).



Co-funded by
the Health Programme
of the European Union

Sole responsibility lies with the authors; the Consumers, Health, Agriculture and Food Executive Agency is not responsible for any use that may be made of the information contained.



<http://www.chrodis.eu>