



Harmonization and
inter...
in...
the
region
of
**WHO needs
the European Health
Information Initiative?**

**Busting
the myths!**



**World Health
Organization**

REGIONAL OFFICE FOR
Europe



**Organisation
mondiale de la Santé**

BUREAU RÉGIONAL DE L'
Europe



Weltgesundheitsorganisation

REGIONALBÜRO FÜR
Europa



**Всемирная организация
здравоохранения**

Европейское региональное бюро

Dr Claudia Stein

Director

**Division of Information, Evidence, Research and Innovation
WHO Regional Office for Europe**

The myths....

1. Europe is fairly small, is very rich and has few health problems.
2. Health information in Europe is complete, very harmonized and always complies with international standards;
3. Europe has a lot of very well coordinated networks and initiatives in health information;
4. All European countries base their policies on evidence.

The myths....

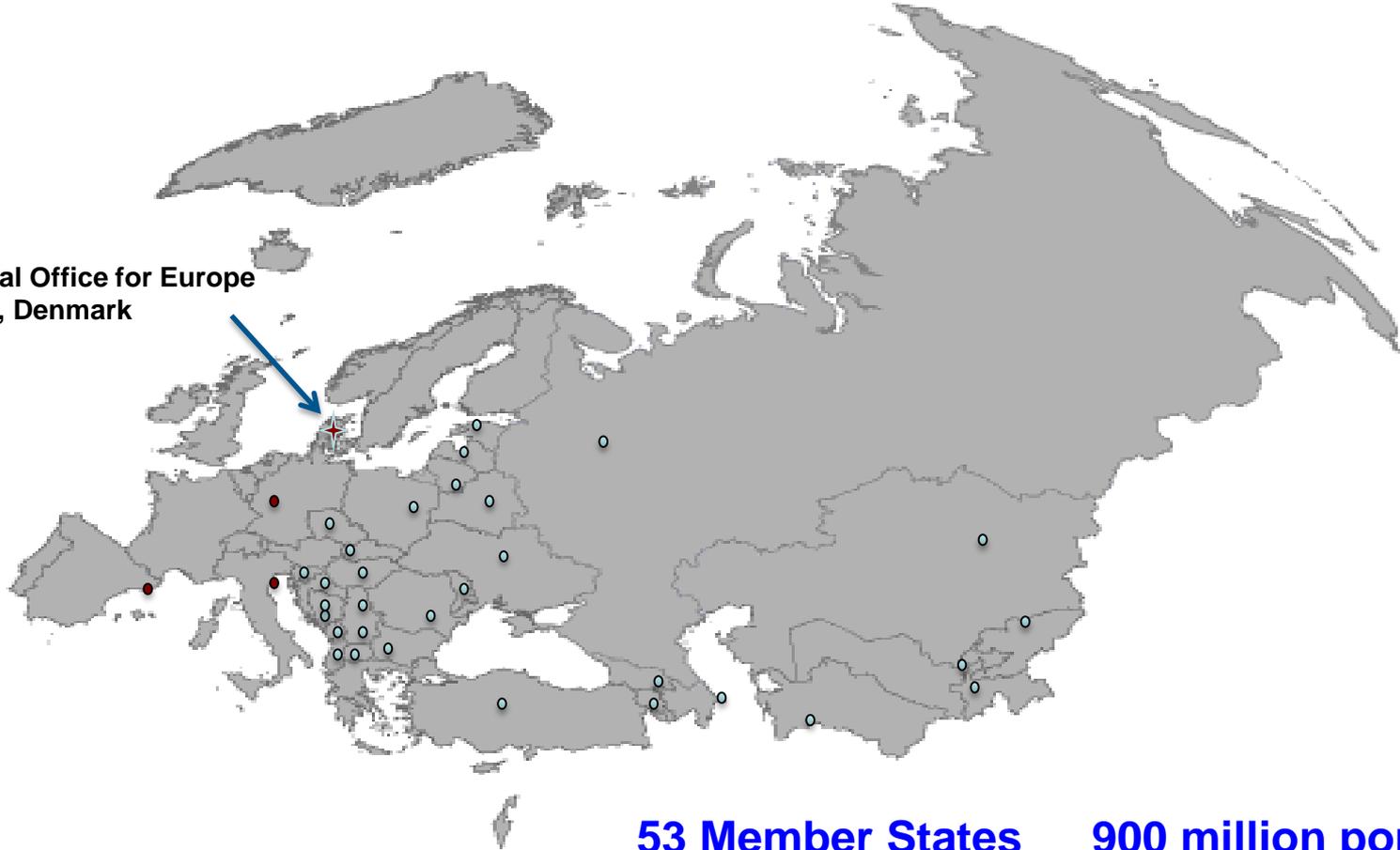
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Oh, no.....!

The WHO European Region

WHO Regional Office for Europe
Copenhagen, Denmark



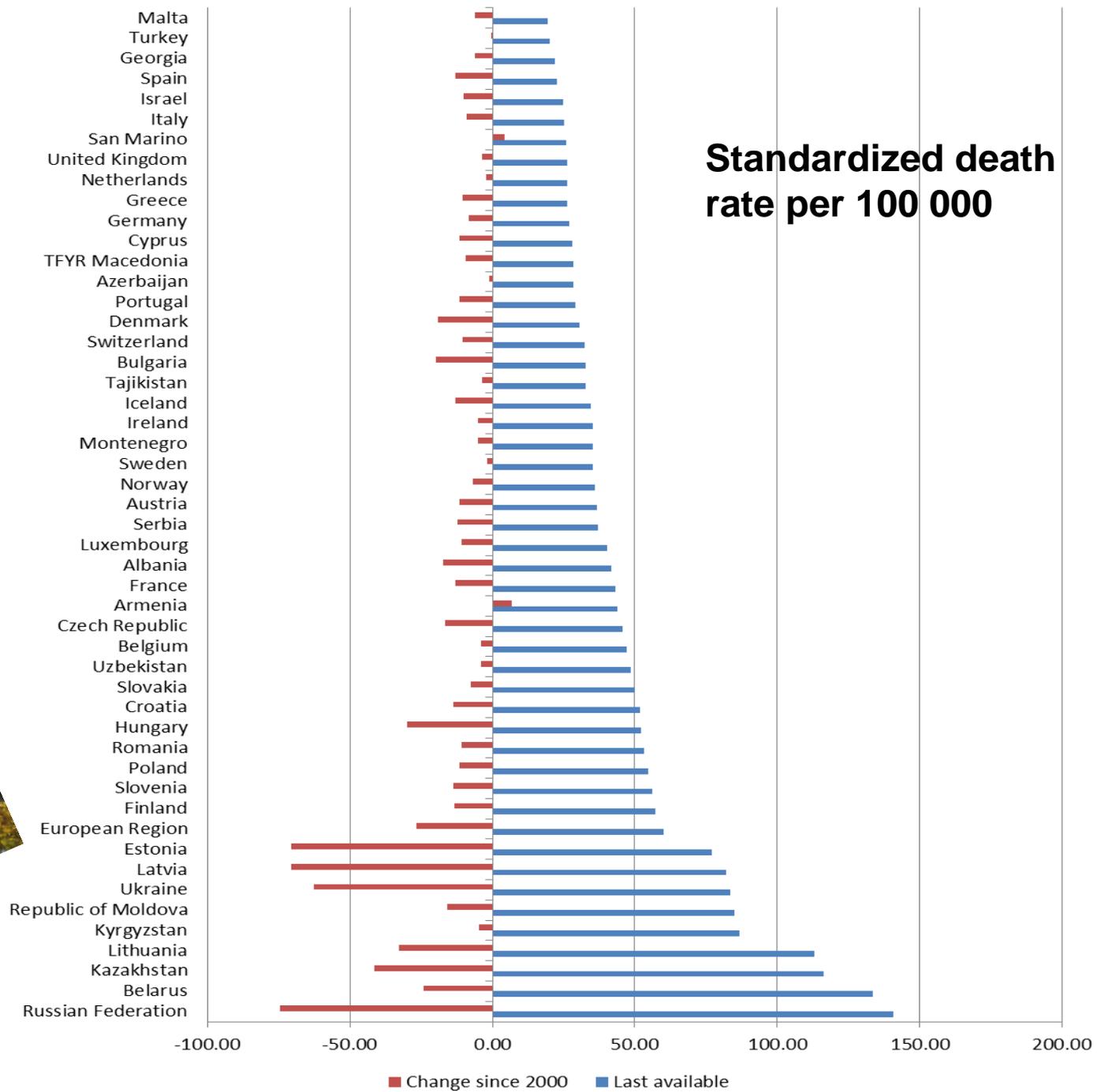
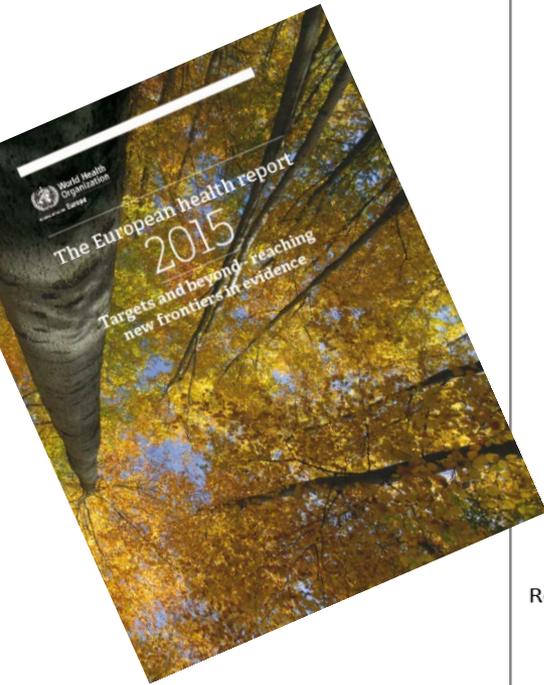
53 Member States **900 million population**

The truth about Europe

Europeans live longer than people in any other region of the world and mortality is declining everywhere – but:

- Women in Spain live on average 22 years longer than men in the Russian Federation;
- The difference in cardio-vascular mortality between the lowest and highest country is 10-fold....

Mortality from external causes



Inequalities in European countries - Norway

Tables

Help



Last updated
June 2014

Standardized death rate **males** - 0-64 years >> 33 Diseases of the circulatory system (I00-I99) >> 2010 >> Filter: Country >> NO

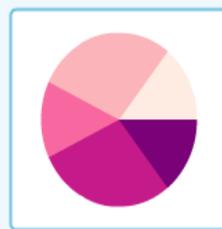
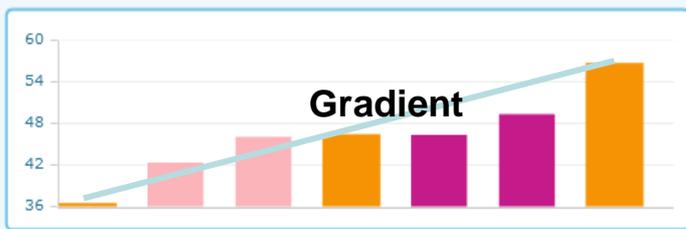
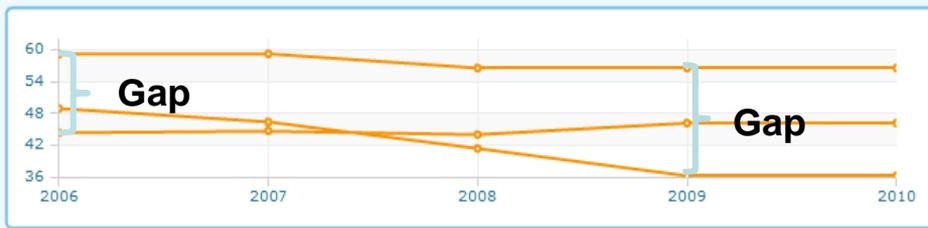
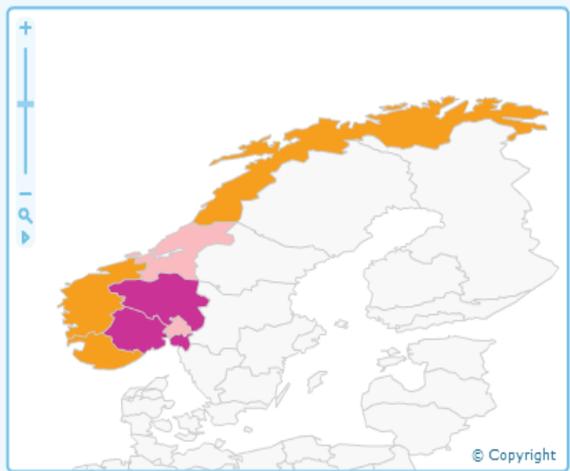
Data Filter

Regions

- 36.3 - 39.9
- 40.0 - 46.0
- 46.1 - 46.3
- 46.4 - 52.2
- 52.3 - 56.5

Countries

Rectangle



Standardized death rate **females** - 0-64 years >> 33 Diseases of the circulatory system (I00-I99) >> 2010 >> Filter: Country >> NO

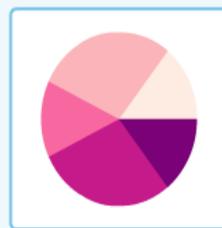
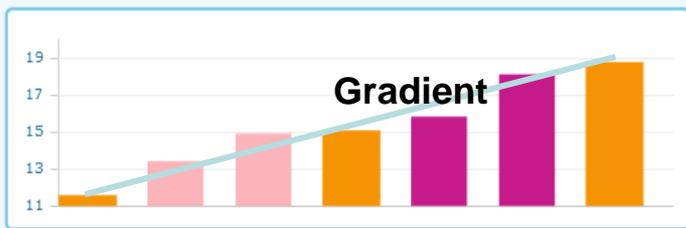
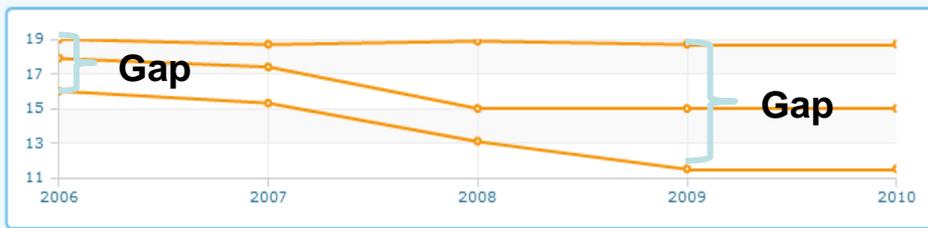
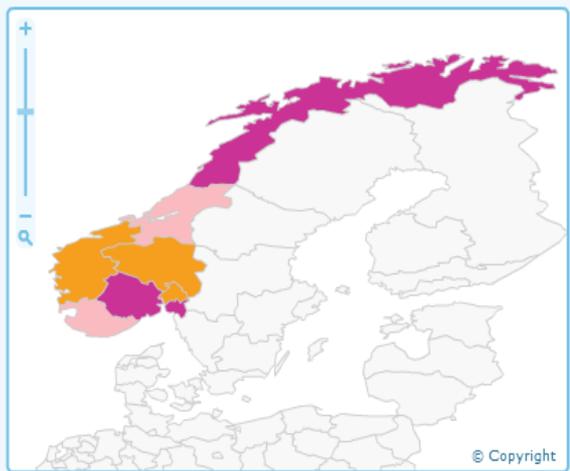
Data Filter

Regions

- 11.5 - 12.6
- 12.7 - 14.9
- 15.0 - 15.6
- 15.7 - 18.3
- 18.4 - 18.7

Countries

Rectangle



”

To address inequalities in health in Europe, our first step must be to address the inequalities in health information. All too commonly where health is poorest, health information tends to be poorest. Health information is absent or incomplete just where we need it most. Health information is crucial in all countries, rich or poor.

Sir Michael Marmot

Inequalities between countries in Europe are **shrinking** – within countries **increasing**

The myths....

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3. Europe has a lot of very well coordinated networks and initiatives in health information;
4. All European countries base their policies on evidence.



Oh, no.....!

Health information and coordination - lessons learned from an outbreak

- Health services not coping with collecting, managing and rapidly sharing information on cases and laboratory results;
- Health authorities responsible not giving coordinated messages;
- Research structures not crisis-ready.



Food safety on  [NBCNEWS.com](https://www.nbcnews.com)

Germany: Sprouts did cause deadly E. coli outbreak

Investigation tracked bacteria to farm even though tests were negative for deadly strain

European Health Information Initiative



Measurement



Access



Capacity Building



Networks



Strategy



Communication



The European Health Information Initiative is committed to improving the evidence on which policy is based



Why do we need this initiative?

- Reporting burden of Member States in Europe is high – streamlining is warranted;
- Health information in Europe is fragmented and expertise scattered;
- Member States' information often incomplete, not harmonized with international standards and not always reported;
- Networks are often ad-hoc and based on personal relationships;
- We are aiming to align and integrate health information in Europe.

European Health Information Initiative

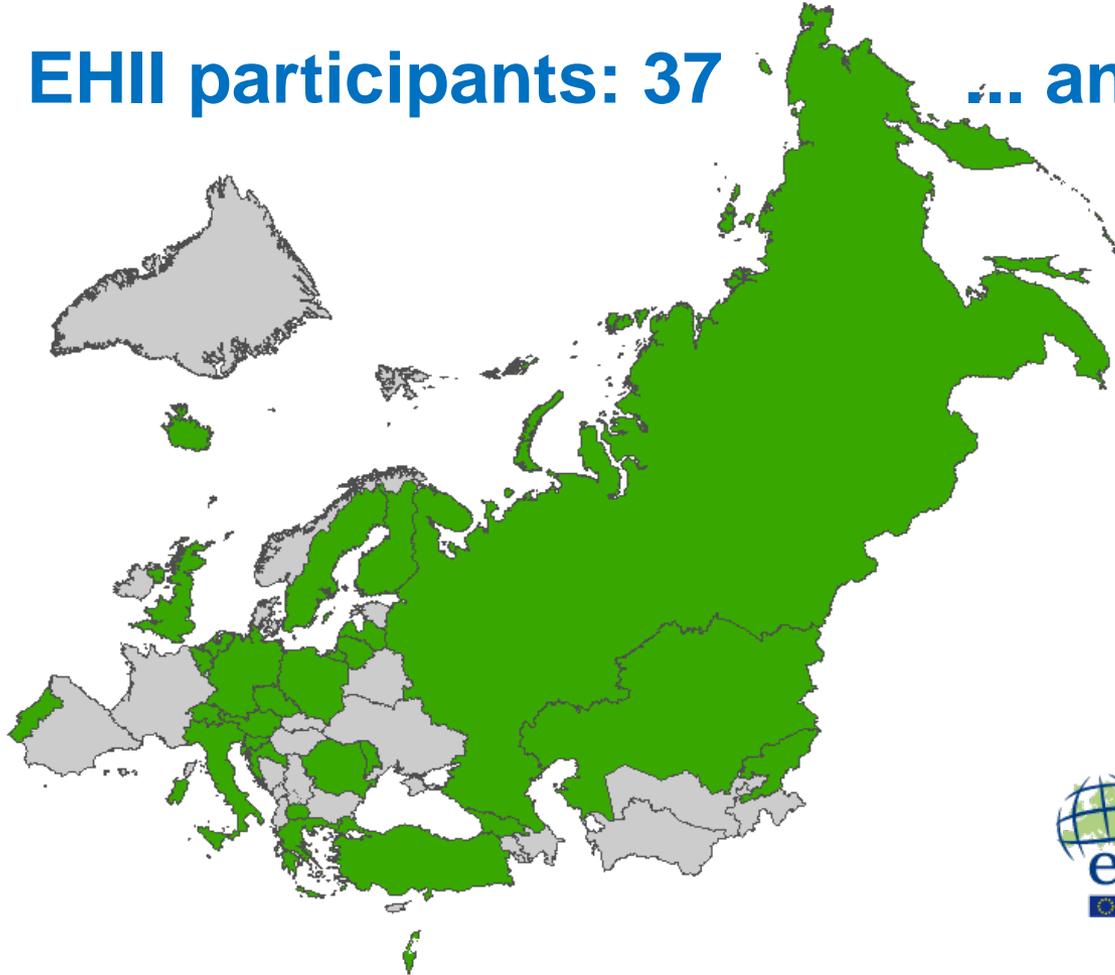


- Provides overarching coordination & guidance for health information activities WHO Europe;
- Multi-partner network;
- 9 Steering Group meetings held to date.



EHI participants: 37

... and growing



- Austria
- Belgium
- Croatia
- Czechia
- Finland
- Georgia
- Germany
- Greece
- Iceland
- Israel
- Italy
- Kazakhstan
- Kyrgyzstan
- Latvia
- Lithuania
- Malta
- Netherlands
- Poland
- Portugal
- Republic of Moldova
- Romania
- Russian Federation
- Slovenia
- Sweden
- Switzerland
- TfYR Macedonia
- Turkey
- United Kingdom



European Commission



Wellcome Trust



European Public Health Association

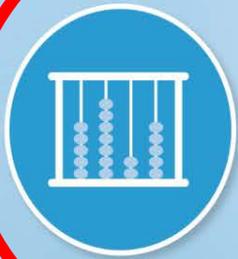


Institute for Health Metrics and Evaluation



The Commonwealth

European Health Information Initiative



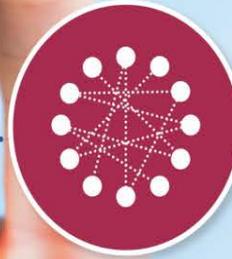
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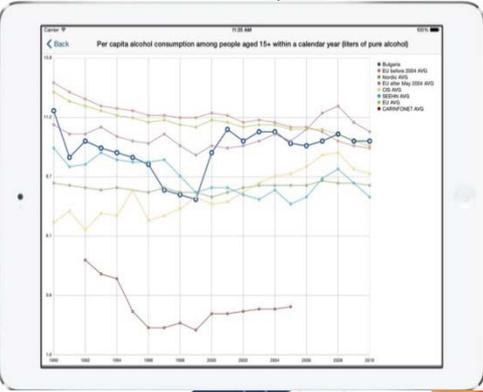
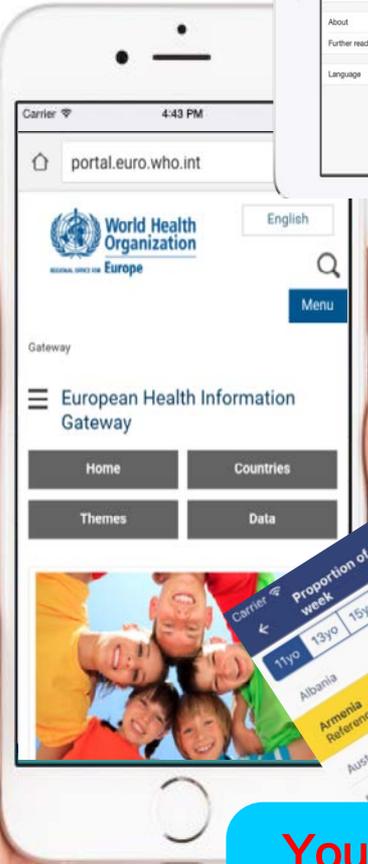
European Health Information Gateway



Theme in focus: Health 2020

Health 2020 is the flagship health policy framework for the WHO European Region which aims to support action across society and governments for health and well-being. The evidence-based and peer-reviewed policy has been embraced by all 53 Member States in the WHO European Region and is vital as Europe is faced with many different challenges that impact our health and demand different ways of thinking and behaving.

The M&E framework details the way that good health contributes across society and provides policy-makers a vision, a strategic path, a set of priorities and a range of suggestions about what works to improve health and address health inequalities. This will ensure the health of future generations for everyone in the European Region.



Your work to be included on Gateway

gateway.euro.who.int

World Health Organization REGIONAL OFFICE FOR Europe

Health for All explorer

European health information at your fingertips



Slovenia
Profile of Health
and Well-being



Greece
Profile of Health
and Well-being

Published
to date:

Greece
Slovenia
Moldova
Georgia
Bulgaria

To be launched soon:

Malta
Russian Federation
Turkey

Disseminating research & health information: EURO public health journal

- Aimed at dissemination of good practices and successful implementation of evidence-informed policies;
- Bi-lingual (English/Russian);
- Quarterly publication;
- Theme-based;
- Peer reviewed.



Stepping up the evidence synthesis report series

- Summarizes the **best available evidence** for decision-making;
- Peer-reviewed, professionally written responses that are **relevant, ready-to-use and evidence-informed**;
- An official WHO source for evidence – **now listed in PubMed**;
- **75 reports published to date** – more to come;
- Received '*highly commended*' in **BMA Book Awards 2017**.



Public Health

BMA



11 September 2017



The reporting challenge for countries:

**HEALTH
2020**



THE GLOBAL GOALS
For Sustainable Development



GLOBAL ACTION PLAN
FOR THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES
2013-2020

17 goals

6 targets

169 targets

9 targets

37 indicators

300 indicators
(26 indicators under SDG3)

25 indicators

19 core

18 additional

UNECE: even most developed countries

- Can only report on **50%** of SDG indicators;
- Can only cover **76** out of 169 targets.

Alignment of indicators across 3 frameworks

H2020

H2020 and SDGs alone
Indicator-level: 13
Thematic: 15
No alignment: 9

H2020 and NCD alone
Indicator-level: 8
Thematic: 4
No alignment: 25

10 indicators
overlap
thematically
across 3
frameworks

SDG

NCDs and SDGs alone
Indicator-level: 6
Thematic: 8
No alignment: 11

NCD

Develop a joint monitoring
framework which includes all three
major frameworks

Meeting of the JMF expert group

- **Member States** represented:
 - Austria;
 - Finland;
 - Germany;
 - Iceland (SCRC member);
 - Kazakhstan;
 - Malta (Chair).
 - Netherlands;
 - Russian Federation;
 - Turkey;
- **European Commission, OECD** and all **WHO Europe technical divisions** represented at the meeting;
- Meeting opened by **Austrian Minister of Health and Women's Affairs**, Professor Pamela Rendi-Wagner expressing strong support for EHII and JMF work.

Hosted by
the
Ministry of
Health and
Women,
Austria

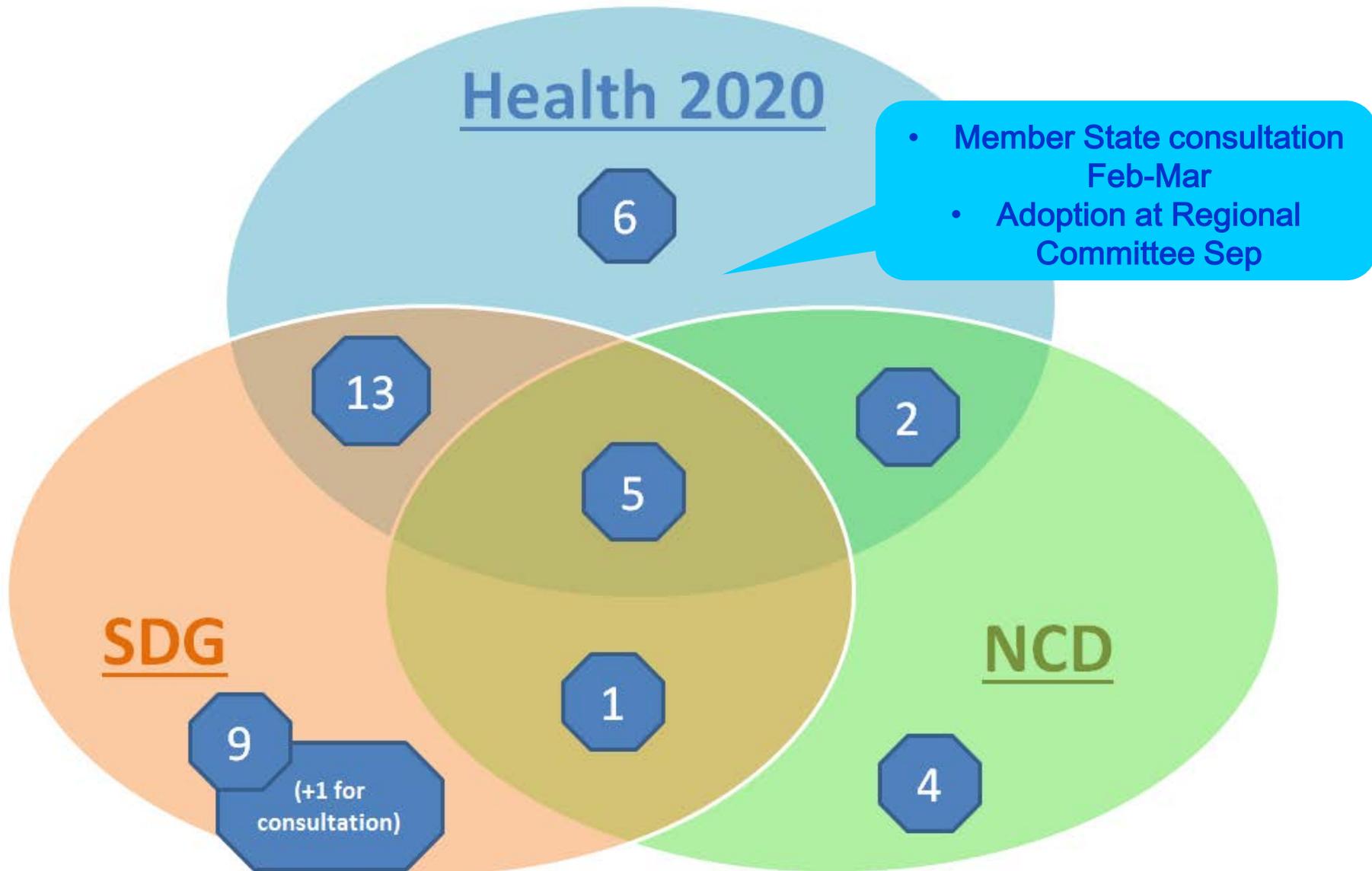


JMF expert group - recommendations

- Proposed 40 indicators for inclusion in JMF;
- Good coverage of all areas of public health;
- In addition a number of questions will be asked in MS consultation.

Framework	Recommendation	
	Include	Do not include
H2020	19	2
NCD	5	13
SDG	11	13
Present in all 3	3	
Present in H2020 & SDG	1	
Present in H2020 & NCD	1	
Total	40	28

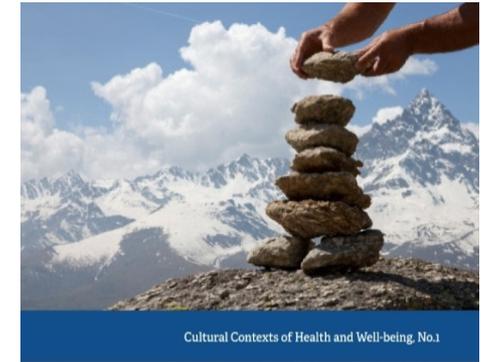
JMF – total of 40 indicators proposed



Cultural contexts of health & well-being

WHO Expert Group on Cultural Contexts of Health and Well-being

- Explore different types of qualitative evidence more fully;
- Commission further work in the area of culture and health, including policy briefs and tool kit for policy makers;
- Investigate cultural contexts of health more systematically;
- Use a multisectoral and multidisciplinary integrated research approach;
- **Three** meetings held to date, third one jointly with UNESCO.



First meeting of
the expert group
Copenhagen, Denmark,
15-16 January 2015

Beyond bias:
exploring the cultural
contexts of health
and well-being
measurement



New concepts not previously measured



- transparency
- community resilience
- supportive environments
- enabling environments
- sense of belonging
- sense of control
- whole-of-society approach
- participatory governance
- responsible governance
- accountability
- life-course approach
- empowerment
- people-centred health systems
- fit-for-purpose health systems
- adaptive policies.

Medical humanities'
evidence as key source



European Health Information Initiative



Measurement



Access



Capacity Building



Networks



Strategy



Communication

Capacity building: Autumn school of health information and evidence for policy making



Focus: Health 2020 monitoring (country case studies, inequalities, reporting, evidence for policy)

Since 2013 annually: Turkey, Poland, Russian Federation, Romania

Home

Health topics

Evidence

Media centre > Translating evidence into effective public health

'Advanced course' follows every Autumn School (June)

Copenhagen

WHO/Europe health information questions. The Policy-making Institute for F Netherlands. Alongside it, Informed Policy Director for E Turkey, Dr M

Newsletters
Features
Social media
Contact us

2017 Autumn School in Georgia



Advanced Course in Slovenia

28th May – 1st June 2018



European Health Information Initiative



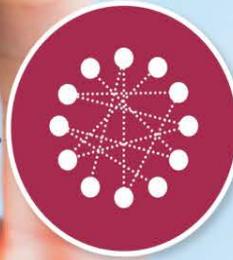
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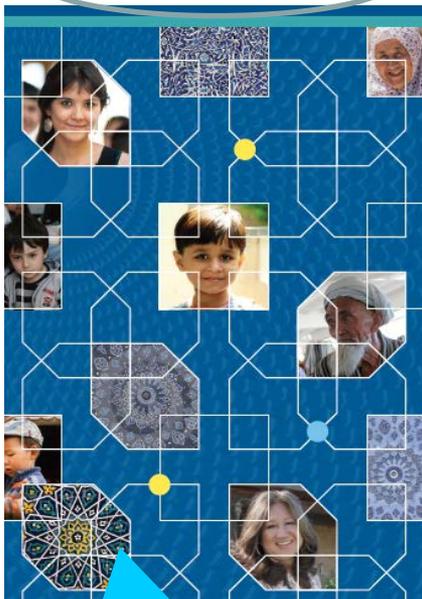
Oh, no.....!

Health Information Networks in Europe:



CARINFONET

The Central Asian Republics Information network



- **Central Asian Republics Information Network**
- Provides platform for joint reporting of health statistics;
- **Development of joint indicator list (29 core indicators);**

Kazakhstan,
Kyrgyzstan,
Tajikistan,
Turkmenistan,
Uzbekistan



Small Countries' Health Information Network

- Initiative of the Minister of Health, Malta; currently **chaired by Malta**;
- Third meeting held in **Malta on 27th June 2017**;
- Agreement on reporting of 'rolling average' of selected indicators;
- Developing joint indicator list for reporting on HSPA and Health 2020.



European Burden of Disease Network

- Chaired by Public Health England (Prof John Newton);
co-chaired by The Netherlands;
- Two meetings held with 12 countries in London and Oslo.
- Hosted jointly with the [Institute of Health Metrics & Evaluation \(IHME\)](#);
- Editorial in European Journal of Public Health;
mapping of BoD studies
submitted to EJPH.
- **National burden of
disease manual**
nearing finalization;



European Health Research Network

Brand-new!

- Multi-country meeting convened in Sofia, Bulgaria to promote strengthening of national health research systems & development of national health research strategies;
- High-level commitment from Deputy Minister of Health, Bulgaria;
- Organized across 3 levels of WHO: HQ, EURO and WHO Country Office;
- Countries received training on mapping and strategy tools;
- Countries agreed on joint statement (*Sofia Declaration*) and action plan.



European network for the measurement of health literacy

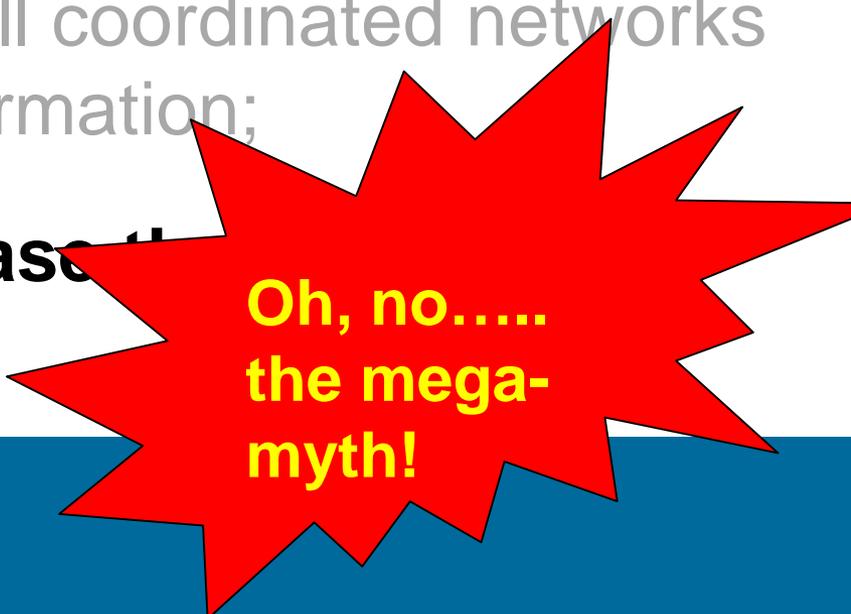
Super brand-new – starting tomorrow!

- Under the leadership of MOH Austria and umbrella of EHII;
- 14 Member States getting together to:
 - Agree on methodology to measure health literacy in countries;
 - Conduct pilot studies in several Member States in 2019;
 - Encourage roll-out of studies in all Member States.
- Strong support of 5 German speaking countries;
- First meeting 22-23 February 2018 in Vienna;
- Reporting accountability is to the EHII.



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Oh, no.....
the mega-
myth!

Evidence is only one factor influencing policy-making



Whether the policy maker knows a researcher & his/her findings personally...

The different language of research and policy



Yes, how did you know?

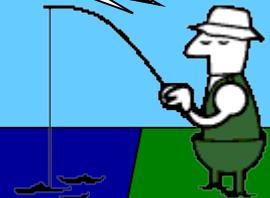
what us is

You

completely correct but not useful to us!

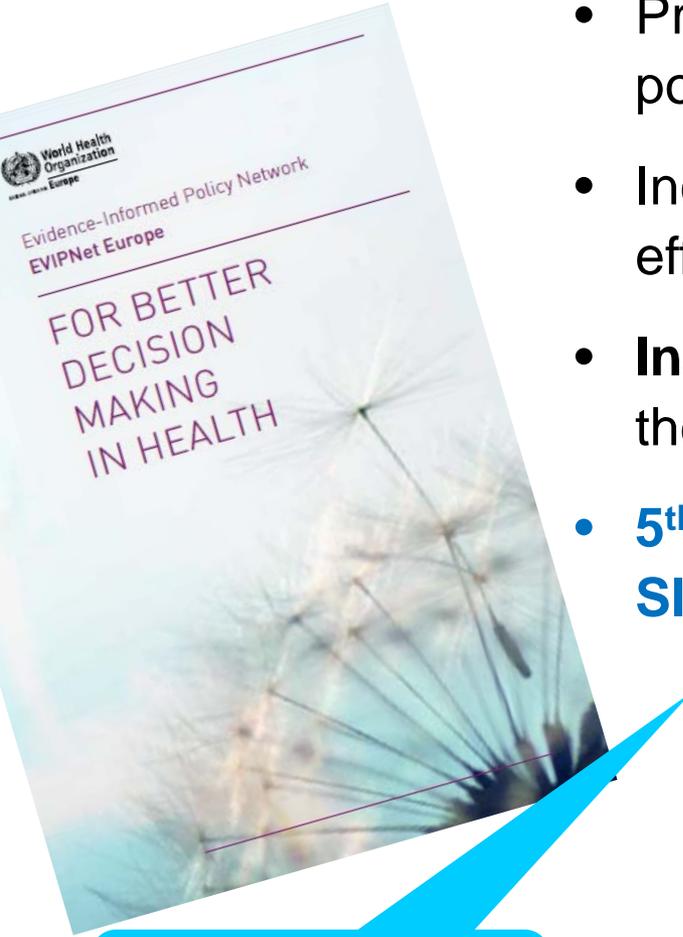
Because you are not sure where you are, you are not sure where you're going, but you don't like accurate information!

0
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EVIPNet Europe: growing rapidly

- Promotes systematic use of research evidence in policy-making;
- Increases country capacity in developing sound and effective health policies;
- **Institutionalizes** knowledge translation (KT) through the establishment of KT country teams;
- **5th multi-country meeting held in Bratislava, Slovakia.**



Concrete results
coming in



'Live' in 21 countries in the European Region

Estonia

News

Events

Areas of work

Data and statistics

► Publications

WHO Country Office

Links

Contact us

Parliament in Estonia approves legislation taxing soft drinks

23-06-2017

The Estonian Parliament has approved legislation taxing soft drinks to reduce sugar consumption, improve health and raise revenue. This initiative is based on the strong and growing international evidence that this measure is effective in settings where soft drink consumption is a significant contributor to sugar and energy intake. The decision was also informed by the joint work of WHO/Europe and the Ministry of Social Affairs to review the evidence and model policy options within the Estonian context.

In 2016–2017, the Ministry of Social Affairs and WHO/Europe collaborated on several projects, notably a modelling exercise exploring several possible tax scenarios. Cancer Council Australia conducted the work with support from WHO/Europe. It showed that the tax would have the desired impact on purchasing and consumption, contribute to a reduction in obesity, and deliver health gains via reductions in cases of type 2 diabetes, ischaemic heart disease and stroke.

WHO/Europe supported a further review as part of the Evidence Informed Policy Network that examined the available evidence on policies to reduce sugar consumption.



WHO /Christopher Black

Existing health information networks – what are the benefits?

- Strong platforms for **exchange and peer support** of countries with common systems, history and epidemiology;
- Ability to identify **joint priorities** in region;
- Provides platform for **harmonization** of information and **joint reporting** of health statistics and research;
- **Joint capacity building** in and improvement in health statistics in terms of quality, timeliness and completeness;
- Enables closer **alignment with international standards** and better **coordination with international partners** (sharing of experience with other countries);
- Constitutes a **larger force** to bring sub-regional issues to wider audience and form larger alliances.



CARINFONET
The central Asian republics information network



Chairs of all networks are members of EHII Steering Group

European Health Information Initiative



Measurement



Access



Capacity Building



Networks



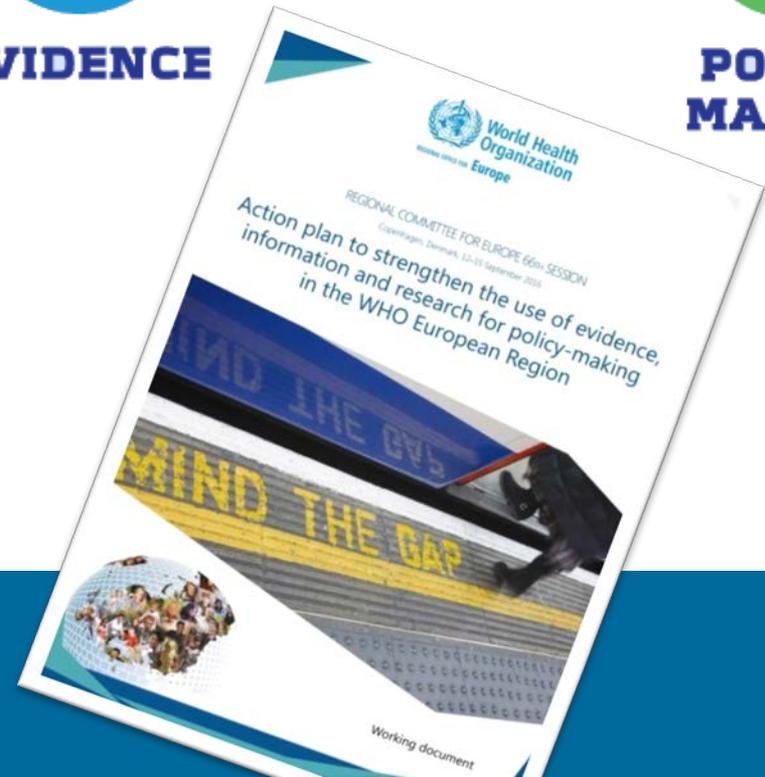
Strategy



Communication

53 WHO Member States calling for enhanced action to use evidence for policy: Regional Committee 2016

Adoption of Action Plan and Resolution on evidence-informed policy making





**World Health
Organization**

REGIONAL OFFICE FOR **Europe**

European Health
Information Initiative



Regional Committee for Europe

66th session

Copenhagen, Denmark, 12–15 September 2016

Provisional agenda item 5(j)

- 1. Strengthening health information systems**, harmonizing health indicators and establishing an integrated health information system for the European Region;
- 2. Establishing and promoting health research systems** to support the setting of public health priorities;
- 3. Increasing country capacities** for the development of evidence-informed policies (**knowledge translation**);
- 4. Mainstreaming the use of evidence, information and research** in the implementation of Health 2020 and other major regional policy frameworks.

Adopted by 53
Member States
through **resolution**

Concrete actions for
Member States and
WHO



REGIONAL O

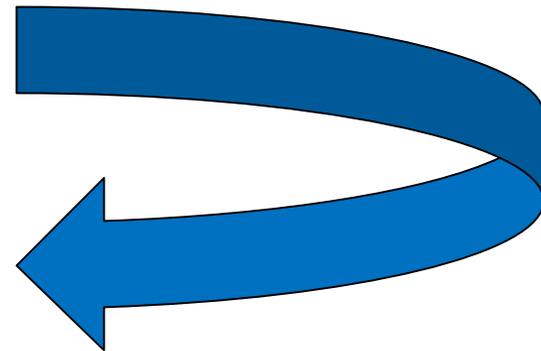
REGIONAL COMMITTEE FOR EUROPE 66th SESSION
Copenhagen, Denmark, 12–15 September 2016

Action plan to strengthen the use of evidence, information and research for policy-making in the WHO European Region



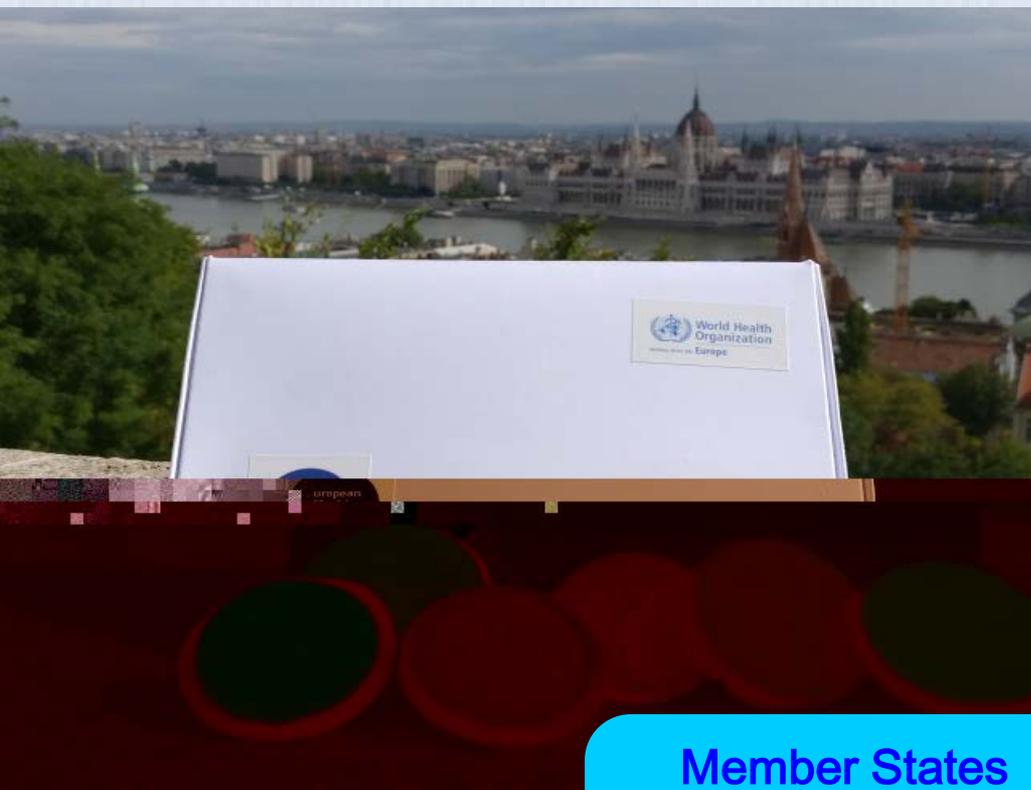
Working document

European Health Information Initiative



67th session of the WHO Regional Committee for Europe

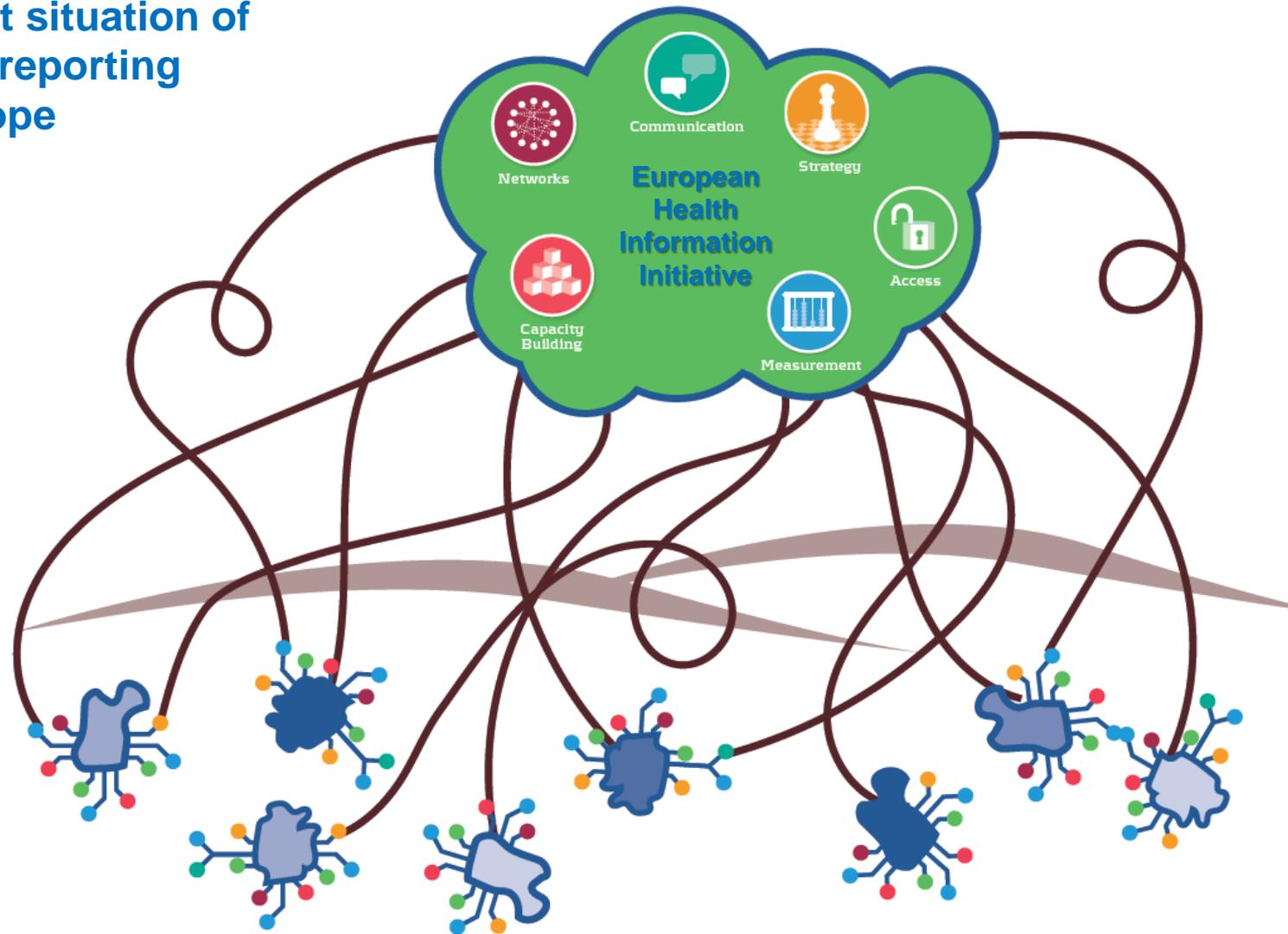
Budapest, Hungary, 11–14 September 2017



Member States
called on DG to
establish HII at
global level

Member States
called on DG to
develop global
action plan for EIP

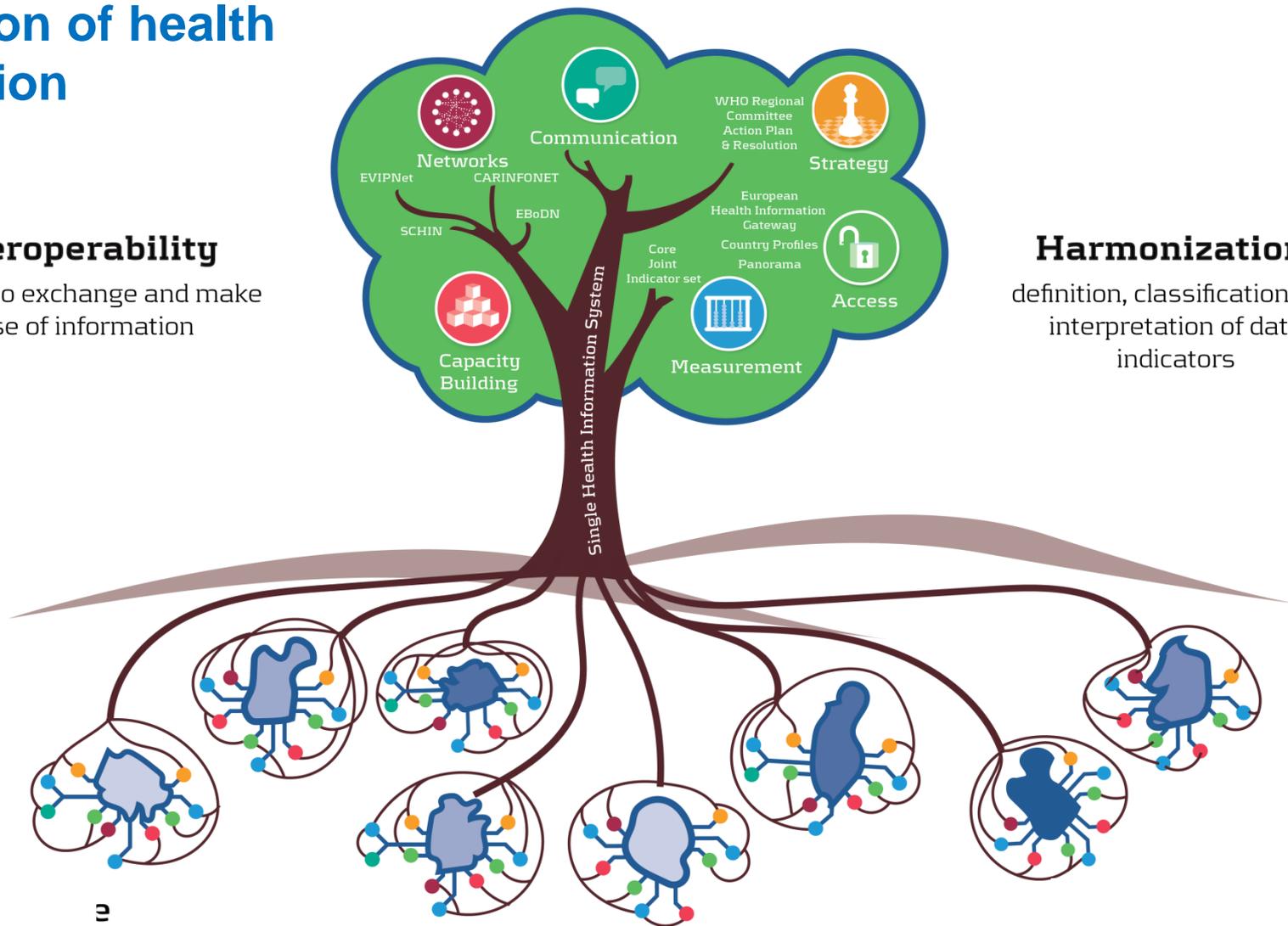
Current situation of health reporting in Europe



The future: Integration of health information

Interoperability

Ability to exchange and make
use of information



Harmonization

definition, classification and
interpretation of data
indicators

Oops, No
I meant
the First

You'll have to
go round again

(M32, M4)

(M32)



Take the
second exit

Look I said
I was Sorry

THE MAGIC ROUNDABOUT

Ring road





*information, &
evidence*

“Without data
you’re just
another person
with an opinion.”

Thank you
Спасибо
Merci
Danke

- W. Edwards Deming,
Data Scientist

”

To address inequalities in health in Europe, our first step must be to address the inequalities in health information. All too commonly where health is poorest, health information tends to be poorest. Health information is absent or incomplete just where we need it most. Health information is crucial in all countries, rich or poor.

Sir Michael Marmot

Health information strategies

Support tool

to enhance national health information systems and develop national health information strategies

- Member States requested practical support tool
- Tool developed by Working Group (17 countries), co-chaired by Netherlands and Russian Federation
- Based on WHO HMN tools and materials, adapted to European context
- Available in English & Russian
- Piloted in three countries and revision under-way.



Cultural Contexts of Health (CCH) - update



- **Publications**

- 2nd CCH expert group meeting report: a focus on culture
- HEN report: narrative research in the health sector

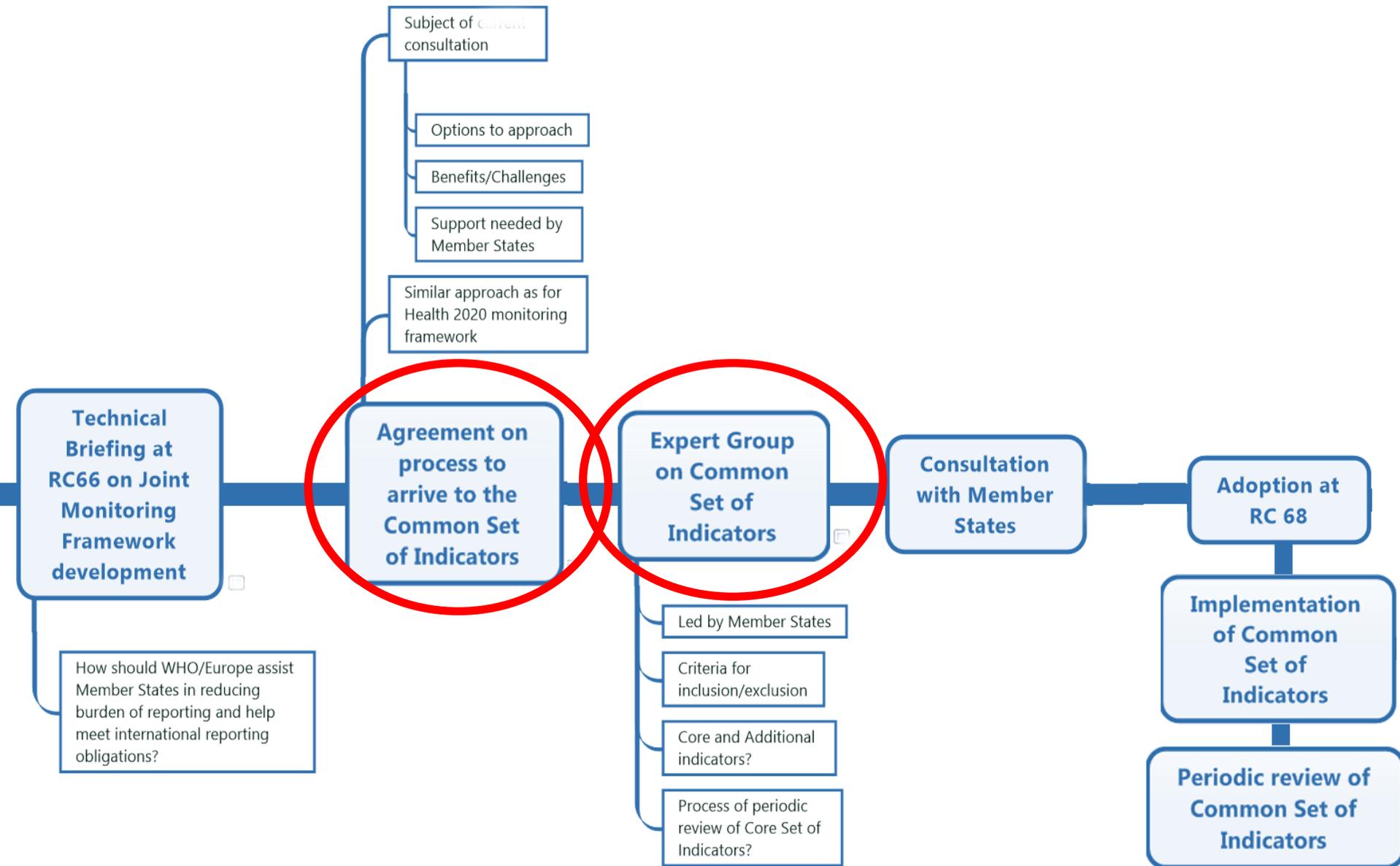
- **Advocacy**

- Technical briefing at 66th Regional Committee
- European Health Forum Gastein

- **Capacity building**

- Robert Wood Johnson Foundation **grant awarded**
- Exeter University designated WHO CC on culture and health





European Advisory Committee on Health Research (EACHR)

Continues to meet annually and advise the Regional Director on research matters:

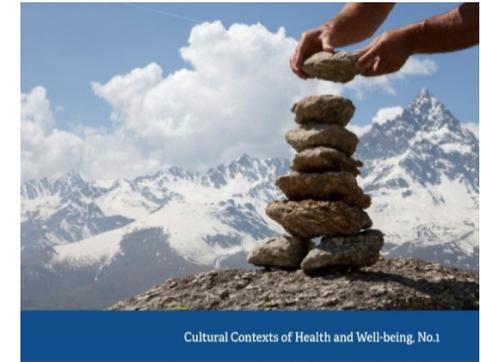
- Reviewed evidence for subjects to be presented at RC;
- Advised on research use of Big Data (also at RC);
- Established special working group on 'implementation research'.



Cultural contexts of health & well-being

WHO Expert Group on Cultural Contexts of Health and Well-being

- Explore different types of qualitative evidence more fully;
- Commission further work in the area of culture and health, including policy briefs and tool kit for policy makers;
- Investigate cultural contexts of health more systematically;
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- **Three** meetings held to date, third one jointly with UNESCO.



First meeting of
the expert group
Copenhagen, Denmark,
15-16 January 2015

Beyond bias:
exploring the cultural
contexts of health
and well-being
measurement



Tasks of the JMF expert group

- Proposed criteria for the selection of indicators, using the criteria for development of the Health 2020 monitoring framework as a basis;
- Reviewed the alignment of indicators in the three monitoring frameworks (Health 2020, SDGs and NCDs);
- Recommended inclusion of indicators into the common set of indicators based on:
 - Indicators fully aligned among the three frameworks
 - Indicators aligned thematically among the three frameworks
 - Indicators aligned in two of the three frameworks



Criteria for selection of indicators

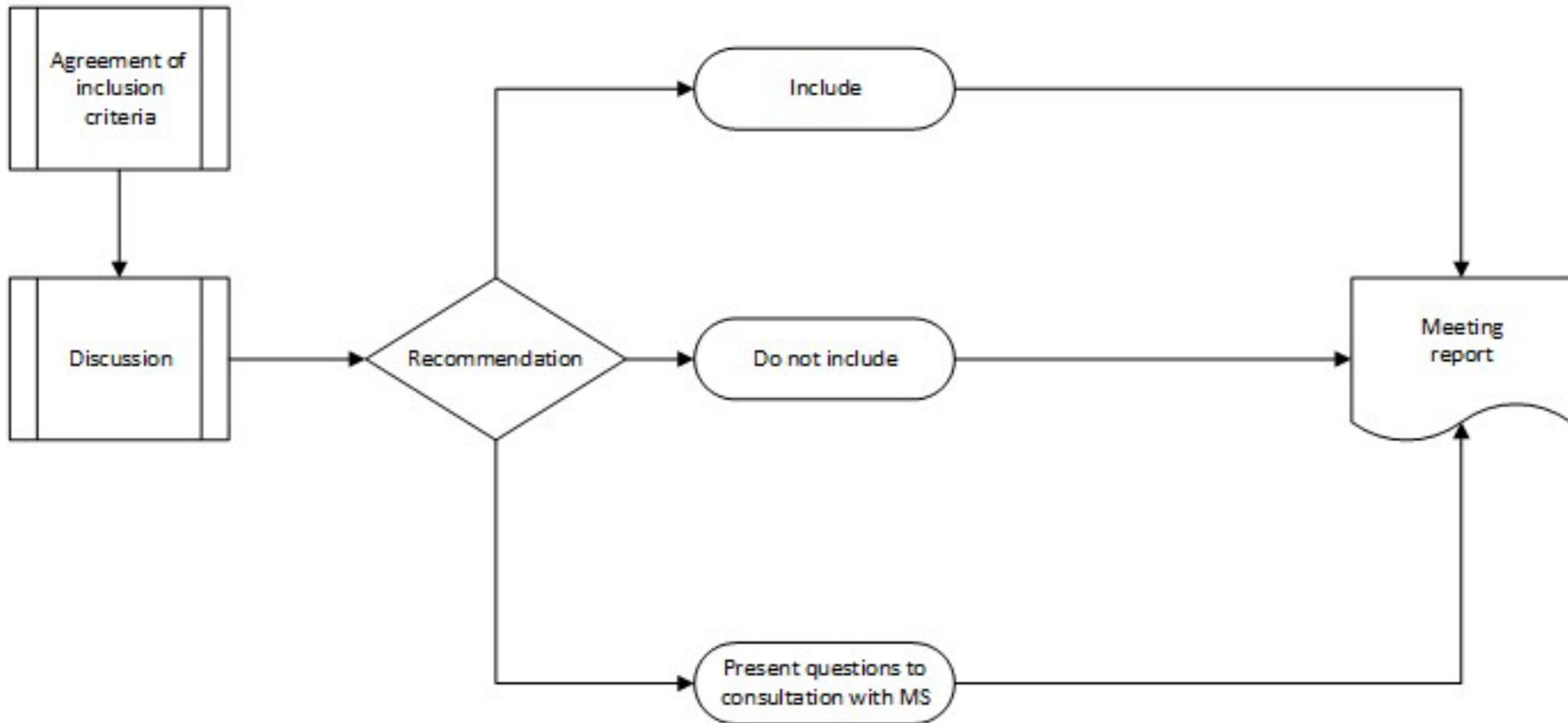


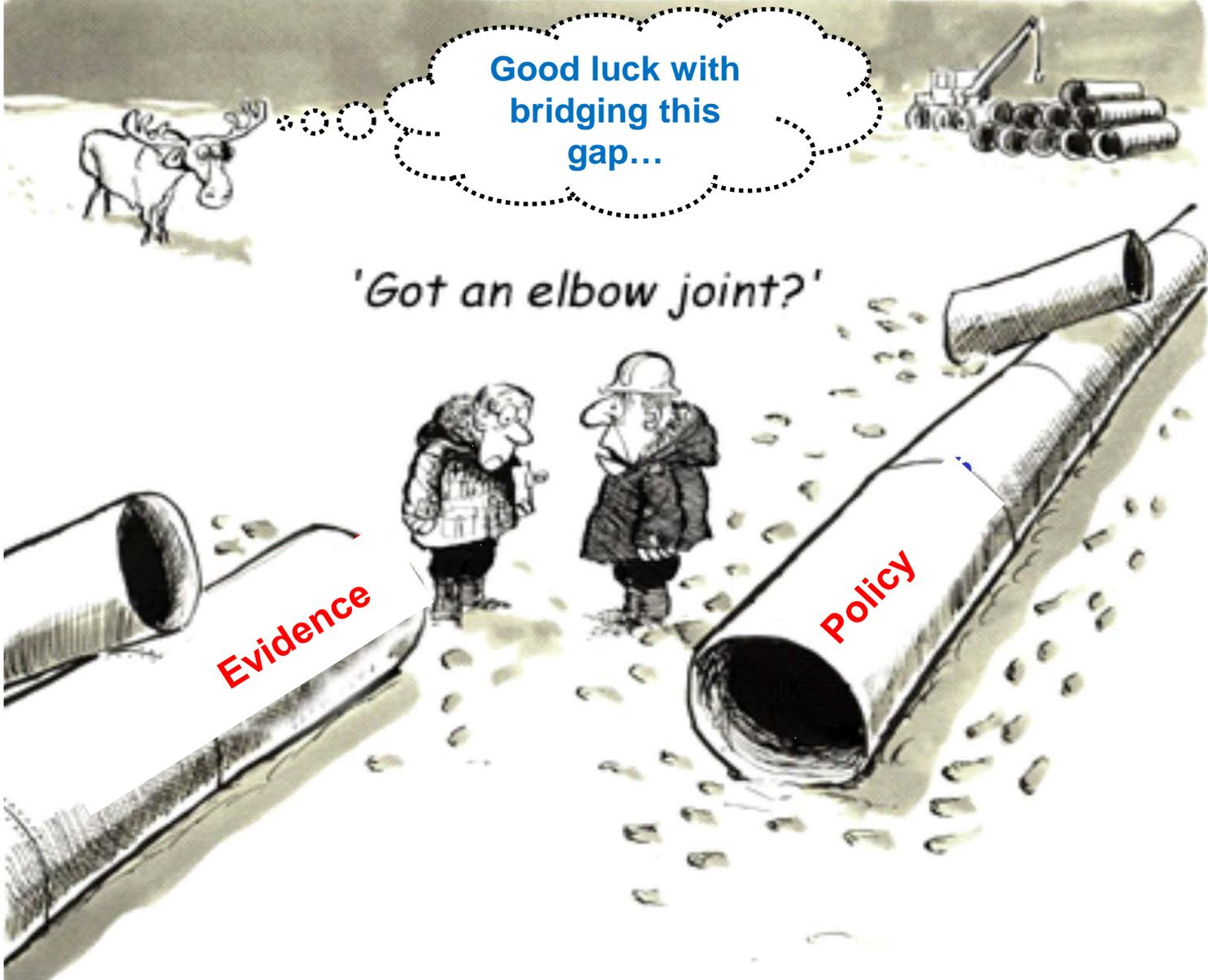
- Available for majority of countries (35/53, 66%);
- Ideally should be routinely reported;
- Estimates should be avoided where possible;
- Minimal doubts about validity and reliability;
- Data accompanied by meta-data;
- Present in at least 2 of the 3 frameworks, with few exceptions;
- All rates age-specific;
- Indicator data reported disaggregated, i.e. by age, gender, ethnicity, socio-economic strata, vulnerable groups, sub-national;
- Comparable across the region;
- Should be relevant for policy action.

Tasks of the JMF expert group

- Proposed criteria for the selection of indicators, using the criteria for development of the Health 2020 monitoring framework as a basis;
- Reviewed the alignment of indicators in the three monitoring frameworks (Health 2020, SDGs and NCDs);
- Recommended inclusion of indicators into the common set of indicators based on:
 - Indicators fully aligned among the three frameworks;
 - Indicators aligned thematically among the three frameworks;
 - Indicators aligned in two of the three frameworks.

JMF expert group – process for recommendations





Inequalities in European countries - Sweden

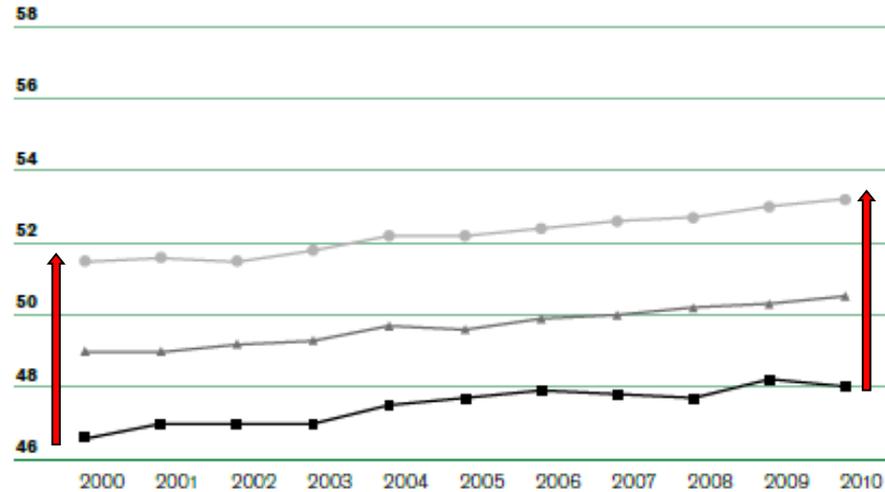
Life expectancy trends in Sweden 2000–2010 by education level, men and women

Source: Statistics Sweden (4).

Men

- Post-secondary
- ▲ Upper-secondary
- Compulsory

Life expectancy at age 30



Women

- Post-secondary
- ▲ Upper-secondary
- Compulsory

Life expectancy at age 30

