

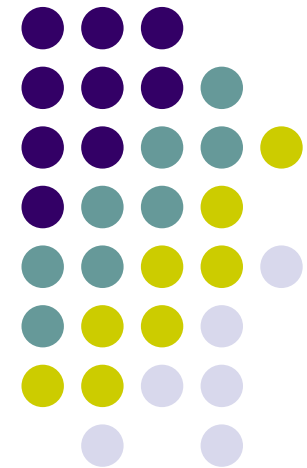


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Progress on Health Equity work in Spain

Meeting of the EU Expert Group on SDH and HI
29-30 October 2013, Luxembourg



Begoña Merino and Pilar Campos
Health Promotion Area.
DG Public Health, Quality and Innovation.
Ministry of Health Social Services and Equality. Spain



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1. **Spanish framework: National Strategy on Health Equity**
2. **Overview of the Health Equity review training process**
3. **National Strategy on Health Promotion and Disease Prevention**
4. **Health Equity and the Roma community**



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National Strategy on HE Background



Commission HI
Nov 2008



Report presentation
April 2009



EU presidency
Jan-Jun 2010



Commission report
May 2010



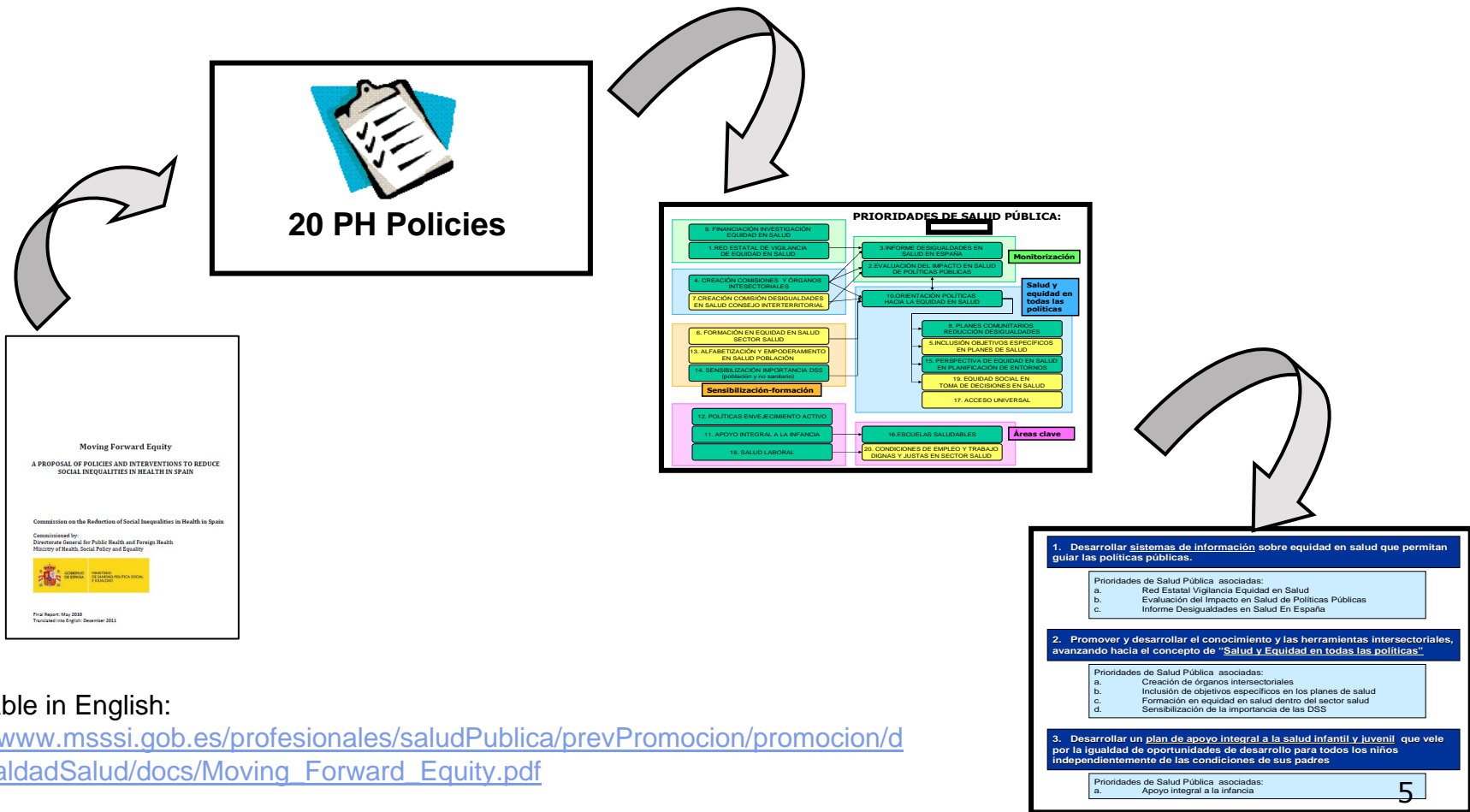
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National Strategy on Health Equity

PH Prioritization and Strategy Design process



Available in English:

http://www.msssi.gob.es/profesionales/saludPublica/prevPromocion/promocion/desigualdadSalud/docs/Moving_Forward_Equity.pdf



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National Strategy on Health Equity: MHSSE priorities



A. To develop Health Equity information systems to guide public policies

Public Health priorities related:

1. Health Equity National Monitoring Network
2. Health Impact Assessment in Public Policies
3. Report on Health Inequalities in Spain

B. To promote and develop knowledge and tools for intersectoral work: Moving forward to the concept of “Health and Equity in All Policies”

Public Health priorities related:

4. Creation of intersectoral bodies
5. Inclusion of specific objectives in health plans
- 6. Training in Health Equity for professionals of Health sector**
7. Actions to raise awareness of the importance of health inequalities

C. To develop a Global Plan for Childhood and Youth Health, which protects equal opportunities for all children’s development, regardless of their parents’ conditions

Public Health priorities related:

8. Global Support to Childhood

D. To develop a plan for political visibility of the National Strategy on Health Equity and Social Determinants of Health



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Spanish Training Process I

Health Equity Training Process in Spain:

Integration of a focus on Social Determinants of Health and Equity into health strategies, programmes and activities (SPAs) at national and regional level

- **General objective:** analysis and redesign of health SPAs from the perspective of Health Equity and Social Determinants
- Conducted from **Nov 2010 to Sept 2011**
- **Participant profiles:** Public Health professionals from the MoH, Regions and other key administration levels (60)
- **Teachers:** Dr J. Vega, Dr O. Solar
- **Methodology:** workshops (64 h)+ online platform(126 h). Working teams
- **WHO/PAHO support**

Spanish Training Process II

Health Equity Training Process in Spain:

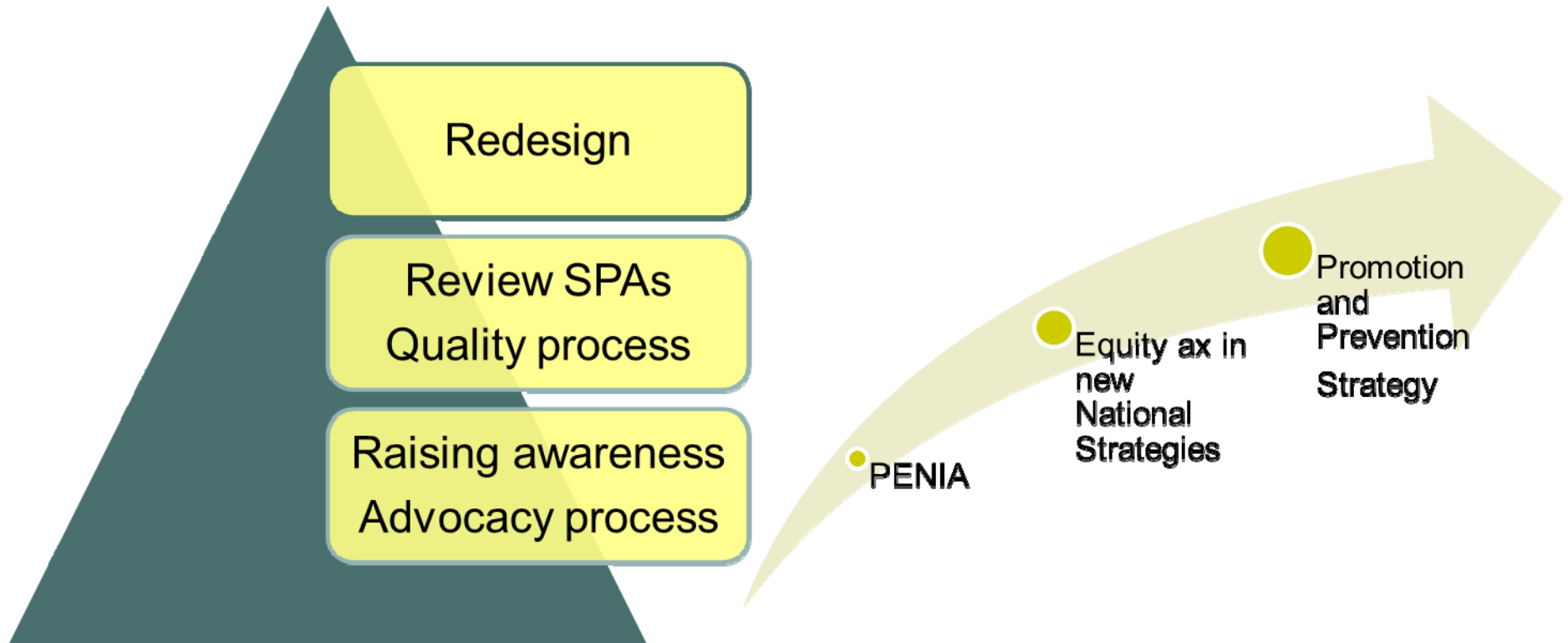
Integration of a focus on Social Determinants of Health and Equity into health strategies, programmes and activities (SPAs) at national and regional level

- Main **results**:
 - Advocacy and raising awareness
 - Increased capacity of participants
 - Results for each working team and SPA
- **Methodological Guide** version 1
- **Innovative** experience
- **Transferable** process
- Systematic process of review, useful as a **cycle of improvement and assessment**

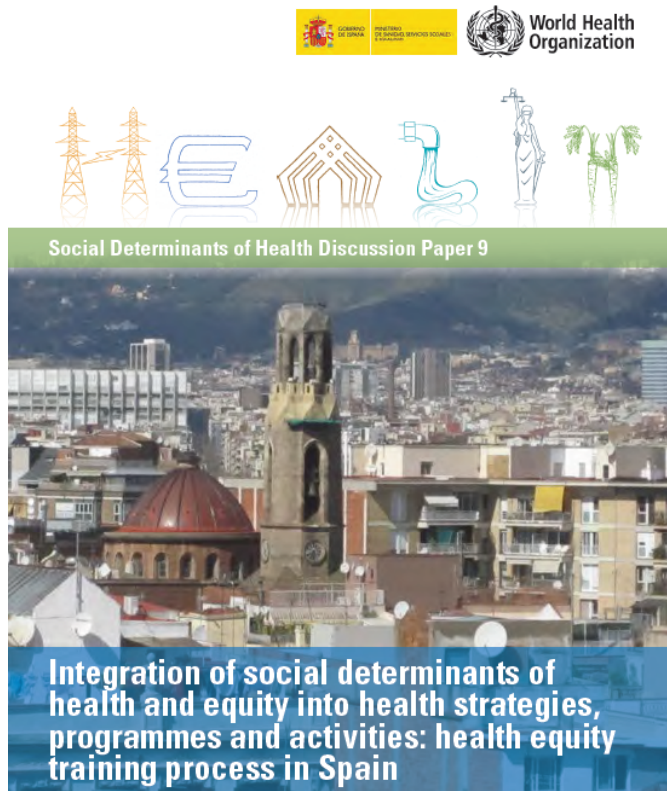
Methodological Guide to
integrate Equity into Health
Strategies, Programmes and
Activities



Spanish Training process: Overarching results



WHO Discussion Paper series on Social Determinants of Health:



DEBATES, POLICY & PRACTICE, **CASE STUDIES**

WHO Social Determinants of Health Discussion Paper 9:

http://www.who.int/social_determinants/action/Social_Determinants_of_Health_Discussion_Paper_9/en/index.html

**Integration of
SDH and Equity
into health SPAs:
Health equity
training process
in Spain**

WHO Multicountry training process: Overview

Multicountry training:

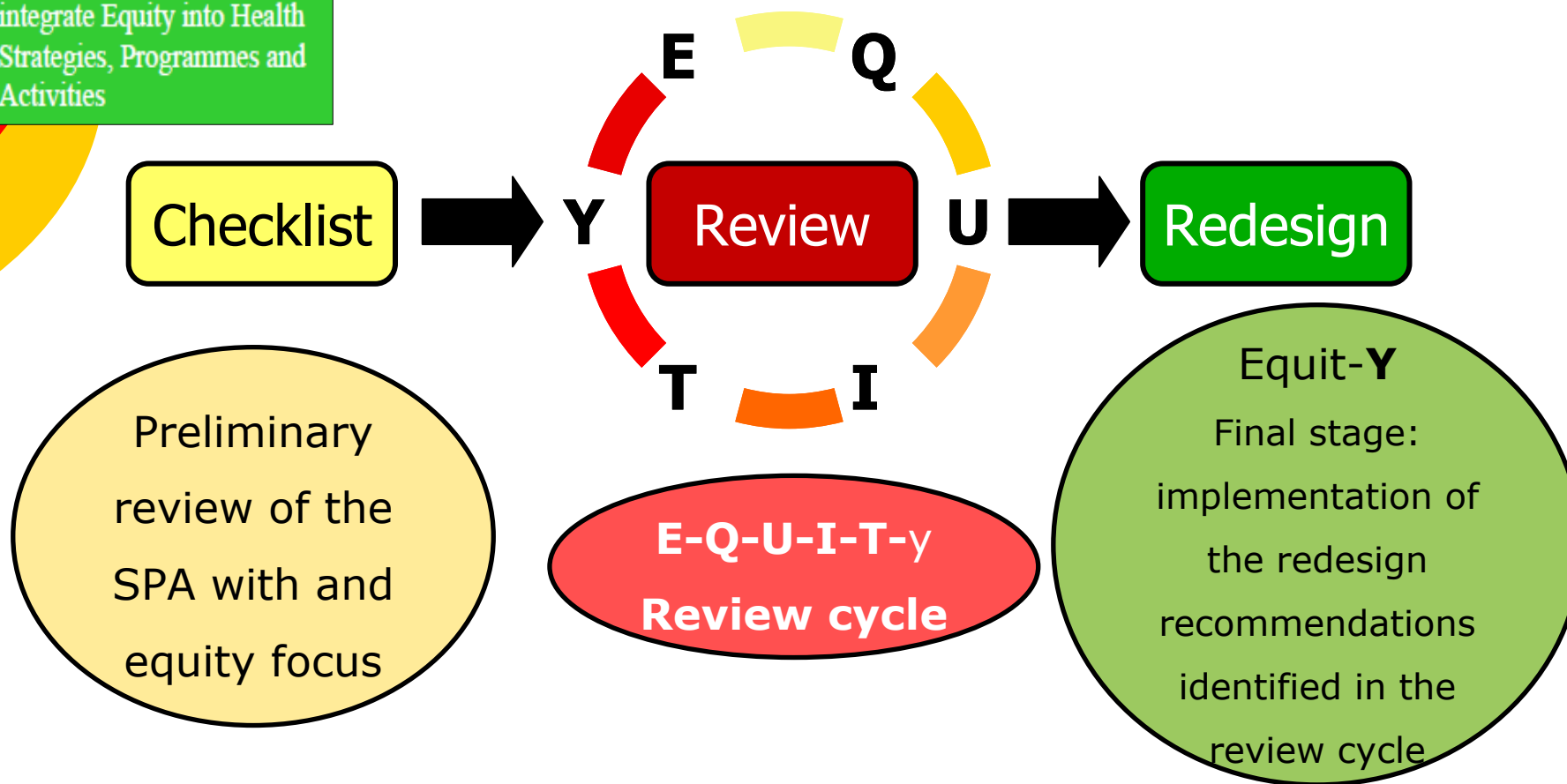
Reorienting SPAs on MDG 4 and 5 towards greater health equity with an explicit but not exclusive focus on the Roma population

- **Objective:** training on how to reorient SPAs related to MDG 4 and 5 towards greater health equity with an explicit but not exclusive focus on Roma
- Conducted from **Nov 2012 to Oct 2013**
- **Four countries:** Bulgaria, Montenegro, Serbia and The former Yugoslav Republic of Macedonia
- **Participants:** representatives of pilot countries
- **Coordinated by:** EURO-WHO, Spanish MoH, and the WHO Collaborating Centre on Social Inclusion and Health
- **Methodology:** 2 workshops (18 h+35 h)+ in-country work + online feedback. Working teams by country

WHO Multicountry training process: Methodology

Process to integrate Equity into Health SPAs

Methodological Guide to
integrate Equity into Health
Strategies, Programmes and
Activities





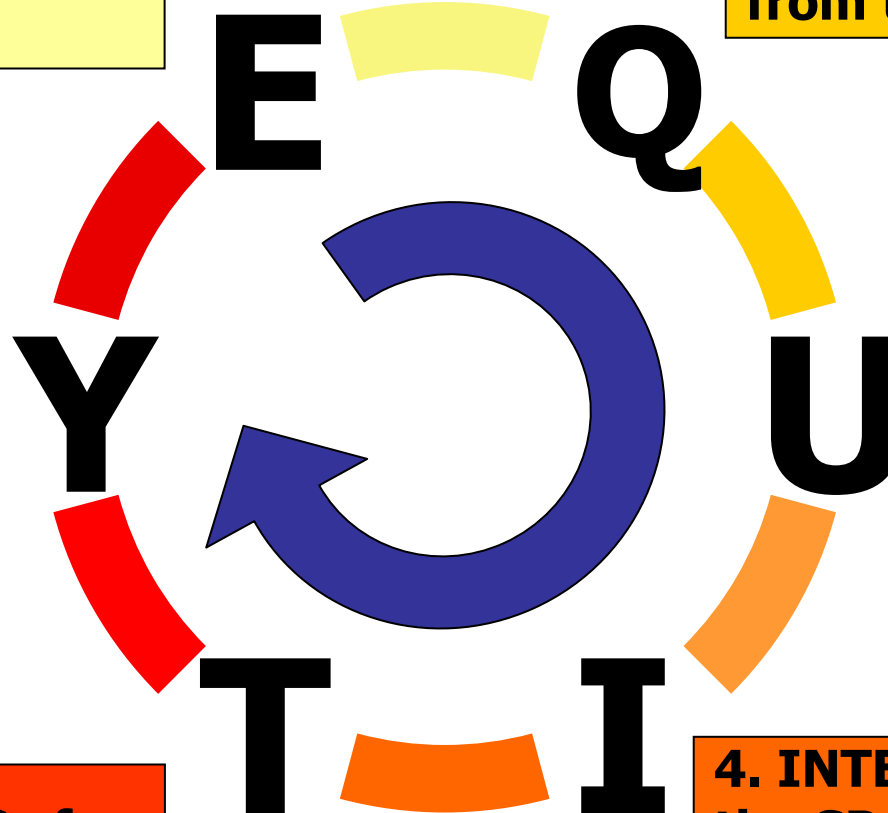
1. EXAMINE the SPA



2. QUESTIONING who accesses and benefits from the SPA



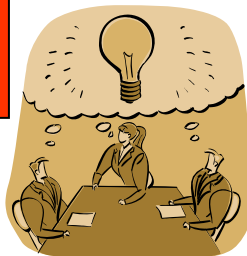

YOUR time to redesign



3. UNDERSTANDING the barriers and facilitating factors



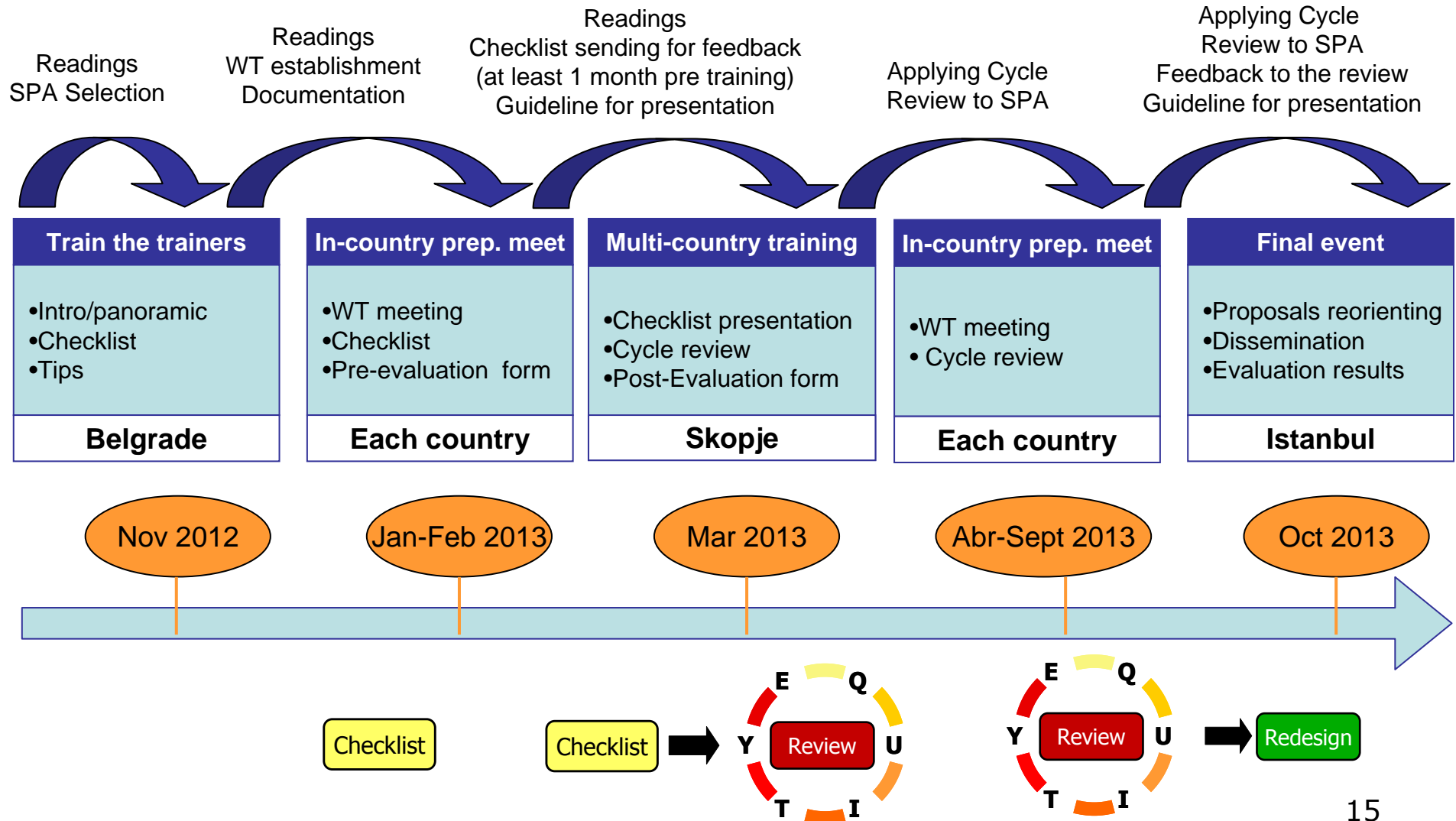
5. THINKING of the redesign plan



4. INTERRELATING the SPA with the SDH



WHO Multicountry training process: Work Plan





WHO Multicountry training process: Summary of contents analysed

ANALYSIS OF THE SPA

- Objectives
- Context
- Activities and interventions
- Organization

ANALYSIS OF EQUITY

- How is equity integrated
- Identification and prioritisation of population/s groups who do not access and benefit from the SPA
- Social Participation
- Intersectoral Action

REDESIGN OF THE SPA

- What it is necessary to do for the inclusion of equity in the SPA
- Plan for the implementation of the redesign



WHO Multicountry training process: Preliminary conclusions (Istanbul)

- The training process and methodology is transferable, but adaptation to each context is needed
- This process has been conducted with a focus on Roma population, but it was designed to identify any group population not acceding properly to an SPA
- Results of this process can go beyond the specific SPA that is analysed
- Intersectoral action and social participation are key aspects for the integration of equity into health SPAs



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National Strategy on Health Promotion and Disease Prevention

General aims:

1. To **promote** health and prevent disease throughout the **life cycle**, intervening steadily in **living environments** through the **coordination and integration** of the **resources** and policies of the health sector and **other sectors** with impact on health
2. To **reduce the prevalence of the major determinants of health**, which cause the greatest burden of disease and disability



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Main components



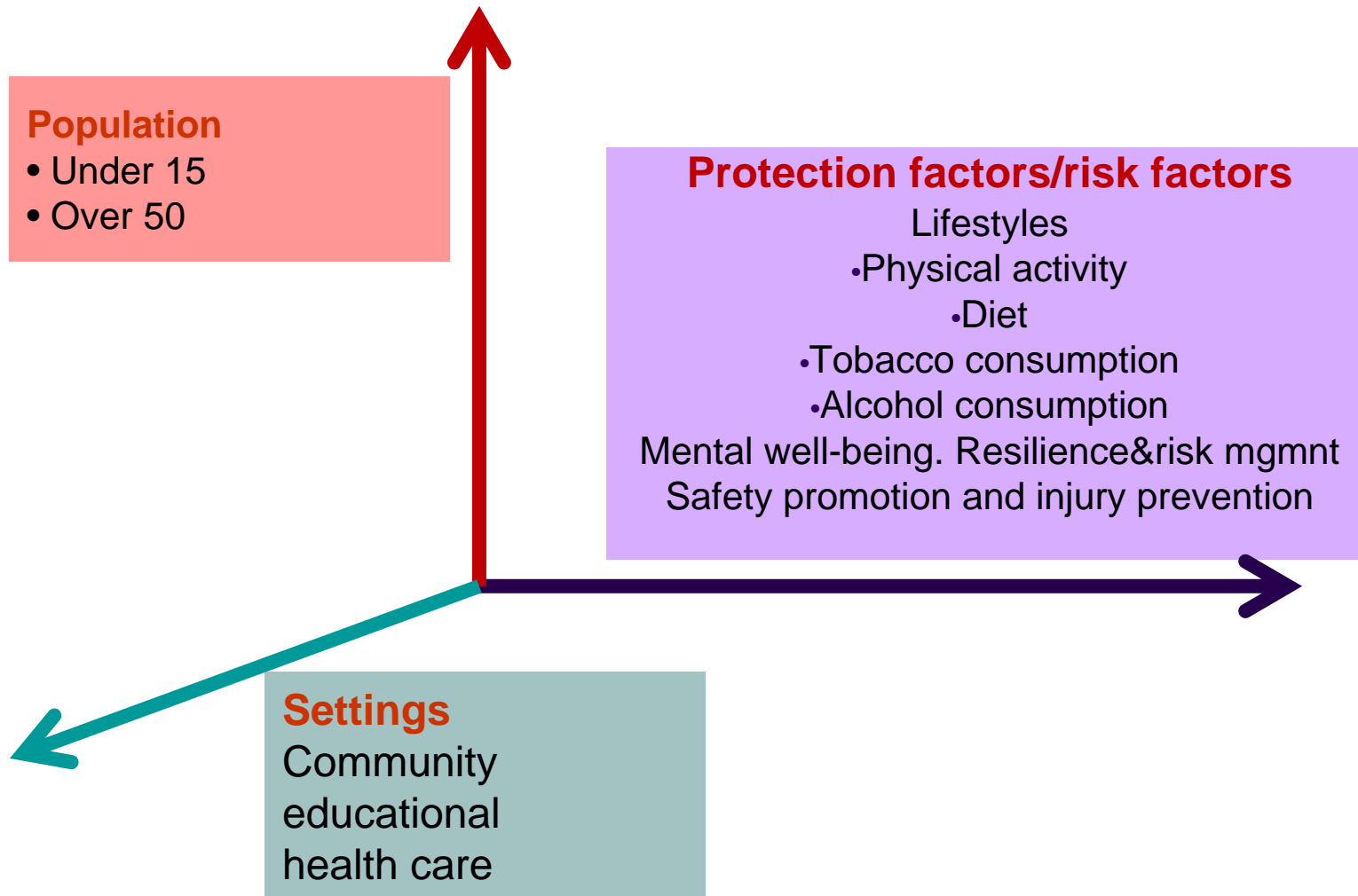


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Strategic Framework





Working phases

1. Review of the scientific evidence, and situation analysis
2. Establishment of 3 committees (institutional, scientific, intersectoral)
3. Identification, selection and prioritization of interventions
4. Working paper elaboration: main lines for action
5. Consultation with other scientific societies
6. External review
7. Public consultation
8. Implementation
9. Monitoring and evaluation



Prioritization and selection of interventions

- Collection of interventions that **are being developed at regional level** (Autonomous Communities)
- **Criteria for prioritization** of interventions :
 - Efficacy- Effectiveness
 - Efficiency (economic evaluation)
 - Relevance and suitability to the needs
 - Feasibility and availability of resources for implementation. Transferability
 - Strategic alignment with national and supranational strategies
- + evidence based interventions
- Selection of interventions as a result of the process of analyses, synthesis, prioritization and **consensus** in committees (institutional, intersectoral and scientific)

Quantitative
+Qualitative



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Working on Health Equity for the Roma community. Background

- Spanish Constitution of 1978
- Act 14/1986, April 25th 1986, the General Health Act
- Universal access to the NHS
- Act 16/2003, May 28th 2003, on the Cohesion and Quality of the National Health System
- **Working on Health Equity for the Roma population since 2003**
- **National Action Plan for Roma Development 2010-2012**
- **National Strategy for the social inclusion of Roma , 2012-2020**



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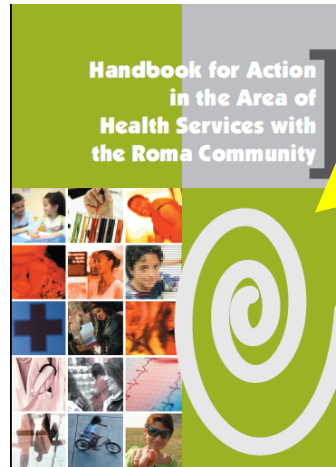
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Health Equity for the Roma Population: Publications



2003



2006



2010



2008



www.mspsi.es



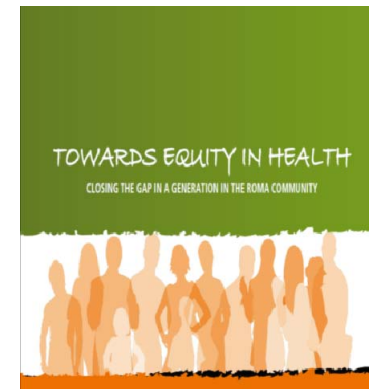
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National Action Plan for Roma Development 2010-2012 National Strategy for the Social Inclusion of Roma 2012-2020

- **Social Determinants of Health** approach
- **Based on data:** National Health Survey to the Roma community of Spain, 2006
- **Participation:** prioritization and recommendations developed with the consensus of the Health Working Group of the State Council for the Roma population





Work on Health Equity for the Roma through the National Strategy framework

- Working **with and** for Roma Community
- **Training** for social and health professionals
- Refocusing policies to the **difference**
- **Intercultural mediation**, when it is needed
- Roma community **capacity-building** in the area of health
- **Health intervention programmes** for the Roma community
- **Studies and research** focusing on health and the Roma community.
- To **involve all the actors**
- To **involve all the levels** through:
 - Health Promotion Group
 - Public Health Committee
- **New NHS on Roma population 2013-2014**



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5. **Work on health equity JA and synergies with national work**



MSSSI Priorities

National Strategy on Health Equity



A. To develop Health Equity information systems to guide public policies

- Public Health priorities related:
1. Health Equity National Monitoring Network
 2. Health Impact Assessment in Public Policies
 3. Report on Health Inequalities in Spain

- HIA Training and recommendations
- Diffusion at national level

WP4

B. To promote and develop knowledge and tools for intersectoral work: Moving forward to the concept of "Health and Equity in all policies"

- Public Health priorities related:
4. Creation of intersectoral bodies
 5. Inclusion of specific objectives in health plans
 6. Training in Health Equity for professionals of Health
 7. Actions to raise awareness of the importance of health

-Improvement of intersectoral action processes
-Moving forward to Equity and health in all policies
-Reinforcement of health equity from the start Area

C. To develop a Global Plan for Childhood and Youth Health that protects equal opportunities for all children's development regardless of their parents' conditions

- Public Health priorities related:
8. Global Support to Childhood

WP7

9. To develop a plan for political visibility of the National Strategy on Health Equity and Social Determinants of Health



*Caminante, no hay camino,
se hace camino al andar.*

*Wanderer, there is no road,
the road is made by walking.*

Antonio Machado

Thank you for your attention

This paper was produced for a meeting organized by Health & Consumers DG and represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumers DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.