

## **The future of public health in Europe: should EUPHA expand its activities even more?**

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### **Introduction**

The European Public Health Association – EUPHA – is an umbrella organisation for public health associations in Europe. It was founded by 15 members (12 countries) in 1992 and now has 48 members from 38 countries<sup>1</sup>. EUPHA started as a research-based association, but has since been focussing on practice and policy too. In 2002, a new mission of EUPHA was formulated<sup>2</sup>:

“The future mission of EUPHA is to be the proactive platform for public health professionals in research and practice and be a bridge between these professionals and policymakers. EUPHA should expand its tools and activities to achieve this new mission and become a more visible partner for public health in Europe.”

The role of EUPHA was clearly formulated in the EUPHA report 2004-1 entitled “Ten statements on the future of public health in Europe”<sup>3</sup>. In this document, the boundary spanner and bridge function between research and policy/practice was yet again emphasized. In this chapter, I am comparing the mission of EUPHA and the tools we are using to achieve this mission with those of the following other public health associations<sup>4</sup>:

- American Public Health Association (APHA)
- Canadian Public Health Association (CPHA)
- French Society of Public Health (SFSP)
- Netherlands Public Health Federation (NPHF)
- Slovak Association of Public Health (SAVEZ)
- Spanish Society of Public Health (SESPAS)
- Swiss Society of Social Medicine (SGPG)
- UK Society of Social Medicine (UKSSM)
- World Federation of Public Health Associations (WFPHA)

By comparing, I hope to formulate some points of discussion on whether EUPHA should expand its tools. These points can be used as a guideline for our future president, Professor Horst Noack.

### **The Mission of EUPHA**

As stated above, the mission of EUPHA is to become the proactive platform of information exchange and a bridge between research – policy – practice. The importance of interaction between researchers, policymakers and practitioners was emphasised in the EUPHA 2004-1 report. In comparison to other associations, the EUPHA mission is a nice compromise between international and national associations. It goes further than simple collaboration (WFPHA: “joining efforts to strengthen the public health profession and to improve community health worldwide”). But not as far as the mission of the CPHA: “a special national resource in Canada that advocates for the improvement and maintenance of personal and community health according to the public health principles of disease prevention, health promotion and protection and healthy public policy”. Several national associations (NPHF, SAVEZ) also include the bridge function between the public health profession and the general population, something which is lacking in EUPHA.

### **The EUPHA tools**

In order to achieve its mission, EUPHA is using a number of tools. Several of these (journal, conference, sections) have been in place since the start of EUPHA, others (website, newsletter) have

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<sup>1</sup> These are: Albania, Austria, Belgium, Bosnia-Herzegovina, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Israel, Italy, Kazakhstan, Latvia, Lithuania, Macedonia, Malta, Moldova, Netherlands, Norway, Poland, Portugal, Romania, Russia, Serbia and Montenegro, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom

<sup>2</sup> Future mission of EUPHA 2003-2010. Internal document accepted by the EUPHA Governing Council on 28 November 2002.

<sup>3</sup> EUPHA report 2004-1. Ten statements on the future of public health in Europe. EUPHA, 2005.

<sup>4</sup> Information on their activities were found on the following websites: [www.apha.org](http://www.apha.org), [www.cpha.ca](http://www.cpha.ca), [www.sfsp.fr](http://www.sfsp.fr), [www.nphf.nl](http://www.nphf.nl), [www.savez.sk](http://www.savez.sk), [www.sespas.es](http://www.sespas.es), [www.public-health.ch](http://www.public-health.ch), [www.socsocmed.org.uk](http://www.socsocmed.org.uk), [www.wfpha.org](http://www.wfpha.org)

been put in place at a later stage. Comparing to the other associations, most use the same tools, which can be divided in three groups:

1. Information exchange tools
2. Collaboration tools
3. Advocacy tools.

### **1. Information exchange tools:**

- Scientific Journal

A scientific journal is used by the bigger associations (APHA, CPHA, SFSP, NPHF). EUPHA also publishes a refereed scientific journal which is now published 6 times a year.

- Annual scientific conferences

Most associations organise an annual meeting where current research and practice can be presented. EUPHA's annual conference have around 450 presentations (both oral and poster) and more than 600 participants.

- Newsletter

Several associations publish a newsletter next to a scientific journal (UKSSM, SFSP). A newsletter contains more practical information and is less scientific. EUPHA publishes an electronic newsletter on a monthly basis.

- Website

In this era of internet, all associations have a website (e.g. SESPAS, SAVEZ). The EUPHA website is an all-inclusive, regularly updated website ([www.eupha.org](http://www.eupha.org)) with an average of 83'000 hits per month.

- Publication of reports or books.

Some associations publish annual public health reports (SESPAS), others publish reports on specific subjects (CPHA, SFSP). EUPHA has been using this tool only for a couple of years. It has published two books<sup>5</sup> following the 2002 and 2004 conferences.

### **2. Collaboration tools:**

- Theme-specific sections

A number of associations have created discipline-based or theme-specific sections, where public health experts in the same field can come together (e.g. APHA, SGPG). EUPHA also has created sections with the objective to further the exchange of information and organise annual workshops and meetings. At the moment, EUPHA has 10 discipline-based sections<sup>6</sup>.

- Projects

A number of associations actively set up projects (e.g. SAVEZ, SFSP). Others set up supportive projects (e.g. WFPHA). EUPHA is and has been a partner in a number of European projects<sup>7</sup>, but has rarely initiated projects.

- Database of public health experts

Like some national associations (e.g. UKSSM), EUPHA has developed a database of its members and other public health experts. At the moment, the database contains more than 10'000 public health experts, including their fields of expertise and activities within EUPHA. Since May 2005, the input of information is available through the EUPHA website.

### **3. Advocacy tools:**

- Raising awareness among the general population

Some associations clearly defined a role to raise public health awareness among the general population. The CPHA organises an annual "Canada Health Day", the NPHF organises an annual "Health Week" and one of SAVEZ's objectives is "to develop links between public health professionals and the general population".

- Raising awareness among politicians

Several associations have clear links to policy. The tools range from regular talks with politicians (e.g. NPHF); setting up position papers and resolutions (CPHA, SFSP) to advisory functions on policy or legislation (e.g. SAVEZ). EUPHA has just started activities in this field. It has representatives in two advisory boards to the European Commission (ECDC advisory board and European Public Health Forum).

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<sup>5</sup> Public Health in Europe: 10 years EUPHA. W. Kirch, editor. Springer Verlag, 2002; and Urbanization and health: New challenges to health promotion and prevention. G. Tellnes, editor (in print).

<sup>6</sup> Current EUPHA sections are: health promotion, health services research, social security and health, food and nutrition, child and adolescent public health, migrant health, public health epidemiology, infectious diseases control, utilisation of medicines, and public health practice & policy.

<sup>7</sup> One recent example is being the partner in the SPHERE project (Strengthening of Public Health Research in the European Region) initiated by the Faculty of Public Health of the Royal Colleges of Physicians, UK.

- Education and further training

A number of associations are very active in the education and further training of public health experts (e.g. APHA, SGPG). EUPHA has organised some educational efforts (e.g. skills building workshops at EUPHA conferences, pre conference seminars linked to EUPHA conferences) and is working closely together with ASPHER, the Association of Schools of Public Health in the European Region.

- Evaluation of existing programmes and projects

By evaluating existing programmes and projects, associations have a tool of influencing policy and practice. SESPAS is one of the few associations who use this tool.

## Discussion

Concerning the information exchange tools, EUPHA is at the forefront: the new EJPH with proactive editorials, viewpoints and policy statements is one good example, the successful annual conferences another. The newsletter is promising, but still in an early stage of development. If developed further, it will become a perfect addition to the scientific journal. What could be developed further is the publication of reports or books. Here EUPHA should examine whether this particular tool is worth the extra time and resources to reach its mission (boundary spanner); one of the points that came forward in the setting up of the EUPHA report 2004-1 was that detailed scientific publications are not necessarily used by policymakers.

Concerning the collaboration tools, EUPHA should further develop the existing tools. The EUPHA sections are well set up and members have increased. However, the current sections only have limited activities (email exchange and annual workshops for most of them) at the moment. Furthermore, the idea of more sections should be discussed. With regard to projects, EUPHA has seen an increase in requests for collaboration, but is still quite reactive in setting up its own projects. Finally the EUPHA database: an excellent tool for collaboration, but not yet used to its fullest.

Concerning the advocacy tools, EUPHA is not there yet. As an international umbrella organisation, I do not see a role for EUPHA with regard to the general population. But as a boundary spanner, EUPHA most certainly has a role in raising the awareness of politicians, both internationally (European Commission, WHO/EURO) and nationally (support for national associations). EUPHA has taken some first steps in this field by being on advisory boards or organising public health policy tracks at conferences (2005 Conference in Graz, Austria), but other steps may be necessary here; steps that are more proactive and more aimed at reaching the policymakers. One option here is to more actively work with ministries.

Coming back to the question in the title: should EUPHA expand its activities even more?

It is clear that EUPHA is slowly growing to its full potential to be the platform for information exchange in public health in Europe and the bridge between research and policy and practice. The current tools are slowly being expanded and EUPHA is moving forward. EUPHA has the knowledge, experts, and some of the tools, but more can and should be done. The enthusiasm and support from its members to expand activities is there, but resources are still insufficient. If you take into account the small budget and resources EUPHA has, it is amazing what was achieved so far.

If EUPHA is serious about its mission and at being the bridge between research and policy/practice, EUPHA should work more with policymakers. This means that EUPHA needs to refine the existing tools and develop more proactive tools aimed at policymakers. EUPHA should become more visible and let its voice be heard. This should not be so difficult: after all, EUPHA – through its members – is representing 10'000 public health experts in Europe.

*Note: please note that the views reflected in this paper do not necessarily reflect the views of EUPHA.*