The European Public Health Association, or EUPHA in short, is an umbrella organisation for public health associations in Europe. EUPHA was founded in 1992. EUPHA is an international, multidisciplinary, scientific organisation, bringing together around 15’000 public health professionals for information exchange and collaboration throughout Europe. We encourage a multidisciplinary approach to public health. Our mission is to be the proactive platform for public health professionals in research and practice and be a bridge between these professionals and policymakers.

This document summarizes the activities of the European Public Health Association in 2013. We hope that this annual report provides you with more insight on our activities. Should you have any comments or questions, please do not hesitate to contact our EUPHA office.

Walter Ricciardi, EUPHA president
Dineke Zeegers Paget, EUPHA executive director
At the end of December 2013, we have 71 members from 39 countries:
- 40 national associations of public health from 35 countries
- 4 individual members from 4 countries
- 17 institutional members from 14 countries
- 9 international members

This is a slight decrease from last year. The following changes in members occurred in 2013:
- New members:
  - FISPeOS – The Italian Federation of Public Health Associations (full member)
  - The Irish Health Research Board (institutional member)
  - Euronet – MRPH (international member)
- Notice of termination by member:
  - German Association for Social Medicine and Prevention, Germany (full member)
  - RUBSI, University of Nicosia, Cyprus (institutional member)
- Notice of termination by EUPHA:
  - Bulgarian Association of Epidemiology and Public Health, Bulgaria (full member)
  - Hungarian Public Health Association, Hungary (full member)
  - Institute of Public Health Genomics, The Netherlands (institutional member)

Overview members 2001-2013

In our database, we have 14'524 entries of which 4906 (34%) are EUPHA members. We have seen a decrease in EUPHA members, mainly due to the withdrawal of one of our German members. We currently have 4132 full members (decrease of 12% from last year).

Global membership
In November 2013, the EUPHA Governing Board accepted a slight change in the bylaws to create an extra category of associate members: Global membership, to offer support to national public health associations and institutes outside of the WHO Europe Region. This global membership is reserved for organisations that endorse the principles of EUPHA and desire to collaborate with EUPHA’s objectives.
Agreement with the World Federation of Public Health Associations (WFPHA)

In November 2013, the EUPHA Governing Board approved the agreement with the WFPHA that would organise joint membership for all full EUPHA members. “All current and future national public health associations that are or will become members of EUPHA will become automatically members of WFPHA. The costs for WFPHA membership will be taken over by EUPHA, thereby alleviating members that are already WFPHA members.

EUPHA benefits:

- All EUPHA members can participate in all activities of EUPHA;
- All full members have direct access to the electronic version of the European Journal of Public Health;
- All full members are part of the EUPHA book club where you can buy books published by our partner – Oxford University Press – at 20% discount;
- All EUPHA members have the possibility to share their experiences by uploading these on EUPHApedia, our online search engine; and
- All EUPHA members can participate in the annual scientific European Public Health Conference with a membership reduction of € 75.

Country website

All our member associations are listed in the country specific webpages in our European map (http://www.eupha.org/site/european_map.php). These country pages are also linked to country-related articles in EUPHApedia.

Activities in 2013:

The aim of EUPHA remains to:

1. **Assist and support our members in their activities**
   Every year, we aim to visit 2-3 annual conferences of our members to increase and further develop the collaboration. For instance, this year, in May 2013, both the president and executive director visited the 1st V4 countries conference (Slovakia, Poland, Hungary and the Czech Republic).

2. **Represent the public health community at European level**
   We continue to be very present at the European public health level. We have seen an increase in invitations to consultations from the European Commission, high-level meetings organised by WHO Europe and invitations to join European projects (as stakeholder, partner, observer). Please consult the EUPHA advocacy and networking reports for 2013.

3. **Provide evidence-base information to European, national and international policymakers**
   In 2013, we have produced on EUPHActs on Injury prevention’s need for data, contacted the European Commissioner on health information systems in Europe and provided input in several consultations launched by the European Commission (see also EUPHA networking and advocacy).
With the further development of EUPHA, the visibility as a solid partner with a research background has been well established in Europe. This allows us to increase our advocacy tools to make sure the evidence-base is well represented in European public health policy.

Most activities in advocacy were aimed at the European Commission and WHO Europe. This includes:

**European Commision - DG Sanco**
- We are very pleased to have two representatives in the Expert panel on effective ways of investing in health.
- In December 2012, a letter to EU Commissioner Borg on problems related to sustainability of European Health information services was sent by EUPHA.
- In April, we reacted to a survey on the EU funded research project CriCoRM: crisis communication in the area of risk management.

**European Commission - DG Research**
- In January 2013, EUPHA was represented by our research pillar lead at the Consultation on the future of European public health research, a workshop organised by DG research.
- In March, we joined efforts with EHMA, HSR Europe and the European Observatory on Health Systems and Policies to publish a reflection on Horizon 2020, the new research programme of DG research in the Lancet.
- In September, we co-organised a joint statement with IEA, ISEE and EPHA on the work programme of Horizon 2020. This was combined with a press release and a letter to EU Commissioner Quinn.

> "This programme turns its back to research designed to mitigate the public health impacts of the economic crisis and underestimates the significance of health systems. All in all, this proposal does very little to address the health problems that keep people living in Europe awake at night" said Walter Ricciardi, President of the European Public Health Association (EUPHA).

**European Commission - other DG’s**
- We have provided input in the consultation from DG Environment on the sustainability of food systems.
- We have provided input in the consultation from DG Employment on the new EU occupational safety and health policy framework
- At the Brussels 2013 European Public Health conference, we have seen an increase in DG’s participating (DG Enlargement, DG Education).
WHO Europe
- EUPHA is represented in the European Advisory Committee for Health Research (EACHR) of WHO Europe.
- EUPHA has observer status in the annual Regional Committee Meeting, this year organised in Turkey (September).
- EUPHA was an active participant in two meetings on food and nutrition (Israel and Austria).
- EUPHA has organised representatives in all 10 Essential Public Health Operations working groups of the WHO European Action Plan.

EUPHA sections
We are very pleased to have 19 theme-specific sections that can support our advocacy efforts by providing input in and taking initiative to develop specific health themes. This year, this includes:
- The EUPHA Section on Health Services Research and HSR Europe produced a report on ‘Strengthening the European dimension of Health Services Research’ (September 2013).
- The EUPHA Section on Food and Nutrition produced a discussion document linked to the pre-conference organised in Brussels: ‘Is an integrated food policy for Europe a real possibility? Some relevant issues’ (October 2013).
- The EUPHA Section on Public Health Monitoring and Reporting organised the EUPHA letter to EU Commissioner Borg on problems related to sustainability of European health information services. A reply from the EU Commissioner was received in February 2013, stating that he appreciated our concerns. This section has also initiated a draft EUPHAacts on health information.
- The EUPHA Section on Chronic Diseases provided active input in the report on chronic diseases and economic activity of the National Institute for Public Health and the Environment (RIVM) in The Netherlands.

Other
- EUPHA supports All trials (www.alltrials.eu) that all trials should be registered and results reported.
- EUPHA co-organised a one day workshop ‘Recipes for Sustainable Health Care’ together with AbbVie and Philips on 28 May in Brussels.
In 2013, EUPHA again significantly increased its networking at European and global level. A large number of invitations to attend meetings, participate in expert groups were followed up. The list below is not exhaustive, but highlights the most important:

**European Commission**
- DG Sanco continues to publish in the European public health news of the EJPH.
- EUPHA is an active member of the European Health Policy Forum (EHPF), which meets twice a year in Brussels and is the forum where EU meets NGO.
- At the 2013 European Public Health conference, the European Commission organised one plenary and two workshops and had an exhibition stand at the conference.
- With the help of EuroHealthNet, the 2013 European Public Health conference organised a Welcome Reception at the European Parliament.
- EUPHAanxt organised several activities at the 2013 European Public Health conference, including a pre-conference visit to the Europarlamentarium.

**European Centre for Disease Prevention and Control - ECDC**
- Aura Timen, president of our section on infectious diseases control, has taken up her function as EUPHA representative in the Advisory Forum to ECDC.
- ECDC was actively involved in the 2013 European Public Health conference, including a pre-conference and a stand at the Brussels 2013 conference.

**WHO – Regional office for Europe**
- The collaboration with WHO Europe has again intensified. EUPHA is proud to be an active partner in the development of Health 2020 and the linked European Action Plan.
- WHO’s regional director continues to publish in the European public health news of the EJPH.
- WHO Europe had a plenary speaker and a stand at the Brussels 2013 conference and actively participated in a number of workshops.
- EUPHA has been invited and attended a large number of meetings organised by WHO Europe, including:
  - 5 Years Tallinn Charter meeting in Estonia;
  - WHO Europe Regional Committee Meeting in Turkey;
  - Vienna Ministerial Conference on Nutrition and Noncommunicable diseases in Austria;
  - WHO/FAO meeting on Food and Nutrition in Israel.
EUPHA sections
Several of our sections are active in co-organising events, projects in Europe. This includes:
- The EUPHA Section on Urban Public Health is co-organising the 2014 International Conference on Urban Health in Manchester, UK. EUPHA is an official partner here.
- The EUPHA Section on Migrant and Ethnic Minority Health is co-organising the 2014 Migrant Health Conference in Granada, Spain. EUPHA is an official partner here.
- The EUPHA Section on Health Impact Assessment participated in the HIA 2013 conference.
- The EUPHA Section on Injury Prevention and Safety Promotion has been invited to be on the stakeholder support group for ProFouND (prevention falls among older people).
- The EUPHA Section on Public Mental Health will represent EUPHA in the Stakeholder advisory board of the ROAMER project.

Collaboration with our partners
- EUPHA signed a Memorandum of Understanding with the World Federation of Public Health Associations (WFPHA) on joint membership.
- EUPHA has started collaborating with the African Federation of Public Health Associations.
- Within the Agency of Public health accreditation in Europe (APHEA), the collaboration with ASPHER, EPHA, EHMA and EuroHealthNet, and the European Observatory is continued.
- For the Brussels 2013 European Public Health conference, the collaboration with our partners has intensified.
- The EUPHA office attended the ASPHER deans and directors meeting in the Netherlands in May 2013.

Section collaboration with partners
The EUPHA sections are also actively collaborating with partners within their field of expertise. This includes:
- The EUPHA Section on Chronic Diseases is collaborating with EPPOSI (Partnering for health care policy).
- The EUPHA Section on Health Services Research continues to collaborate with HSR-Europe and the Netherlands Institute of Health Services Research (NIVEL).
- The EUPHA Section on Injury Prevention and Safety Promotion has intensified collaboration with EuroSafe.
- The EUPHA Section on Health Promotion collaborates with the International Union of Health Promotion and Education (IUHPE).
At the end of 2013, we have 19 active sections. The EUPHA sections continue to grow in size and in activities. The average growth in members in 2013 is 134 (16%).

### Number of members/section (27 October 2013)

<table>
<thead>
<tr>
<th>EUPHA section</th>
<th>Members (October 2011)</th>
<th>Members (8/10/12)</th>
<th>Members (Oct 2013)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child and adolescent public health</td>
<td>709</td>
<td>966</td>
<td>1120</td>
</tr>
<tr>
<td>Chronic diseases</td>
<td>590</td>
<td>840</td>
<td>992</td>
</tr>
<tr>
<td>Environment related disease</td>
<td>399</td>
<td>533</td>
<td>637</td>
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<tr>
<td>Ethics in public health</td>
<td>528</td>
<td>709</td>
<td>792</td>
</tr>
<tr>
<td>Food and nutrition</td>
<td>494</td>
<td>677</td>
<td>783</td>
</tr>
<tr>
<td>Health Impact Assessment</td>
<td>76</td>
<td>310</td>
<td>459</td>
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<tr>
<td>Health promotion</td>
<td>1054</td>
<td>1433</td>
<td>1669</td>
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<tr>
<td>Health services research</td>
<td>1003</td>
<td>1264</td>
<td>1526</td>
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<tr>
<td>Infectious diseases control</td>
<td>421</td>
<td>598</td>
<td>683</td>
</tr>
<tr>
<td>Injury prevention and safety promotion</td>
<td>254</td>
<td>345</td>
<td>391</td>
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<tr>
<td>Migrant and ethnic minority health</td>
<td>444</td>
<td>610</td>
<td>697</td>
</tr>
<tr>
<td>Public health economics</td>
<td>508</td>
<td>709</td>
<td>851</td>
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<tr>
<td>Public health epidemiology</td>
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<td>1744</td>
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<td>Public health genomics</td>
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<td>222</td>
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<tr>
<td>Public Health Monitoring and Reporting</td>
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<td>411</td>
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<tr>
<td>Public health practice and policy</td>
<td>1107</td>
<td>1380</td>
<td>1617</td>
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<tr>
<td>Public mental health</td>
<td>492</td>
<td>685</td>
<td>783</td>
</tr>
<tr>
<td>Social security and health</td>
<td>421</td>
<td>577</td>
<td>681</td>
</tr>
<tr>
<td>Urban public health</td>
<td>472</td>
<td>618</td>
<td>709</td>
</tr>
</tbody>
</table>

### Initiative for a section 2013

The initiative to set up a section on Health Technology Assessment is continuing with a website and – until October 2013 – 74 public health professionals interested in joining. The initiative organised an annual meeting at the Brussels 2013 conference. This initiative was upgraded to ‘proposed section’ at the November meeting.
Furthermore
- The Sections are represented in the EUPHA Executive Council by Kristina Alexanderson.
- The Sections are represented in the International Scientific Committee by Jutta Lindert.
- The Sections are represented in the Good EUPHA Practice Committee by Els Maeckelberghe.

EUPHA sections at Brussels 2013
This year, we have seen an important increase in collaboration between sections. Several pre-conferences were organised by two or more sections.

At the conference, the EUPHA sections are organising:
- 8 pre conferences (9 sections involved);
- 15 workshops from 16 sections;
- 2 lunch meetings from 2 sections; and
- All sections organise their annual meeting during the conference.

In Brussels, we also organised a Meet and greet @ the EUPHA stand with all sections involved.

Top 25 of countries active in EUPHA sections
At the end of October 2013, we have just over 17’000 public health professionals from 121 countries involved in our sections’ networks.

<table>
<thead>
<tr>
<th>Rank 2013</th>
<th>Country (2012 rank)</th>
<th>%</th>
<th>Rank 2013</th>
<th>Country (2012 rank)</th>
<th>%</th>
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<tr>
<td>1</td>
<td>United Kingdom (1)</td>
<td>11,00</td>
<td>14</td>
<td>Romania (13)</td>
<td>2,30</td>
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<tr>
<td>2</td>
<td>Netherlands (2)</td>
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<td>Norway (15)</td>
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<td>16</td>
<td>Lithuania (17)</td>
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<td>6,78</td>
<td>17</td>
<td>Bulgaria (18)</td>
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<tr>
<td>5</td>
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<td>4,49</td>
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<td>Canada (23)</td>
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<td>6</td>
<td>Belgium (10)</td>
<td>4,19</td>
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<td>7</td>
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<td>Germany (7)</td>
<td>3,78</td>
<td>21</td>
<td>United States (21)</td>
<td>1,18</td>
</tr>
<tr>
<td>9</td>
<td>France (8)</td>
<td>3,67</td>
<td>22</td>
<td>Turkey (19)</td>
<td>1,15</td>
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<tr>
<td>10</td>
<td>Spain (6)</td>
<td>3,63</td>
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<td>Greece (22)</td>
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<tr>
<td>11</td>
<td>Finland (11)</td>
<td>2,95</td>
<td>24</td>
<td>India (24)</td>
<td>0,98</td>
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<td>12</td>
<td>Austria (14)</td>
<td>2,52</td>
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<td>Ireland (new)</td>
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<td>13</td>
<td>Switzerland (12)</td>
<td>2,50</td>
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</table>
The European Journal of Public Health (EJPH) is a multidisciplinary journal in the field of public health, publishing contributions from social medicine, epidemiology, health services research, management, ethics and law, health economics, social sciences and environmental health. The EJPH is published bimonthly. The EJPH is owned by EUPHA.

**Impact factor**

![Impact factor chart]

**Original manuscripts submitted and published during 2006-2013:**

<table>
<thead>
<tr>
<th>Year</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013 (30 Sep)</th>
</tr>
</thead>
<tbody>
<tr>
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<td>503</td>
<td>490</td>
<td>656</td>
<td>719</td>
<td>782</td>
<td>861</td>
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<tr>
<td>% accepted</td>
<td>16%</td>
<td>19%</td>
<td>21%</td>
<td>29%</td>
<td>20%</td>
<td>21%</td>
<td>19%</td>
<td>18%</td>
</tr>
<tr>
<td>Manuscripts published</td>
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<td>92</td>
<td>84</td>
<td>104</td>
<td>89</td>
<td>125</td>
<td>176</td>
<td>188</td>
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</tbody>
</table>

**Brief statistics on manuscripts**

During the past year, manuscripts have been submitted from 59 countries from all continents. The highest number of submissions was received from Spain (80), United Kingdom (78), The Netherlands (66), Italy (65), and from Sweden (37) and Germany (37).

The highest number of accepted papers originated from The Netherlands (25), the United Kingdom (22), Belgium (11), Sweden (11), Finland (10), and Spain (10).
In addition to original manuscripts, 12 editorials and 9 Viewpoint articles have been published from December 2012 – October 2013. Each of the six issues also had a section with European public health news from EUPHA and partner organizations.

**Reviewers**

During the past years, 474 persons from 42 different countries have been helpful in reviewing manuscripts. Most reviewers originated from the United Kingdom (65), followed by the Netherlands (58), Sweden (41), the United States (36), Italy (31), Denmark (24) and Spain (24).

**EUPHA markets the journal by**

- Allowing access for all our full members (4132) to the electronic version of the EJPH via the EUPHA database;
- Sending hard copies of the EJPH to 190 addresses throughout Europe, including our national and institutional members, European Parliament, European Commission, WHO/EURO and Council of Europe;
- Linking the EJPH to EUPHApedia (external search);
- Tweeting interesting articles with a link to the website; and
- Displaying the EJPH at conferences we organise, co-organise or attend.

**Partners**

Our partners in the organisation of the EJPH are:
- Oxford University Press, the official publisher of the journal; and
- Karolinska Institute in Stockholm, where our editorial office is based.
- Swedish Research Council, offering a grant to host the editorial office in Sweden.

**The EJPH Editorial board**

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
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<tbody>
<tr>
<td>Peter Allebeck</td>
<td>Editor-in-chief</td>
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<tr>
<td>Colin Mathers</td>
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<tr>
<td>Diana Delnoij</td>
<td>Editor</td>
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<tr>
<td>Johan Mackenbach</td>
<td></td>
</tr>
<tr>
<td>Alastair Leyland</td>
<td>Editor</td>
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<tr>
<td>Mark McCarthy</td>
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</tr>
<tr>
<td>Walter Ricciardi</td>
<td>Editor</td>
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<tr>
<td>Martin McKee</td>
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<tr>
<td>Edison Manrique</td>
<td>Managing editor</td>
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<tr>
<td>Tony McMichael</td>
<td></td>
</tr>
<tr>
<td>Anna-Karin Eriksson</td>
<td>Managing editor</td>
</tr>
<tr>
<td>Natasha Muscat</td>
<td></td>
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<tr>
<td>Farhad Khan</td>
<td>Managing editor</td>
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<tr>
<td>Thomas Novotny</td>
<td></td>
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<tr>
<td>Tit Albreht</td>
<td></td>
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<tr>
<td>Fred Paccaud</td>
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<tr>
<td>Lisa Berkman</td>
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<td>Stefania Boccia</td>
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<td>Helmut Brand</td>
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<td>Pekka Puska</td>
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<td>Aileen Clarke</td>
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<td>Sijmen Reijneveld</td>
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<td>Eero Lahelma</td>
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<td>Vasily Vlassov</td>
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<td>Thierry Lang</td>
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<td>Witold Zatonski</td>
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<td>Reiner Leidl</td>
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<tr>
<td>Marina Pollán</td>
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<tr>
<td>James Chauvin</td>
<td></td>
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<tr>
<td>Ádány Róza</td>
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</tbody>
</table>

For more information: [www.eupha.org](http://www.eupha.org)
The EUPHA electronic newsletter was created in March 2006. The newsletter is an open tool of EUPHA with 2 key objectives:
- To build the knowledge of public health professionals worldwide; and
- To increase the visibility of EUPHA as an association that builds capacity, knowledge and policy in the field of public health, with an emphasis on Europe.

Since March 2007, the electronic newsletter is sent on a monthly basis to public health professionals in our database who are interested in receiving the newsletter. EUPHA membership is not a prerequisite to subscribe to the newsletter.

On 31 December 2013, we had 12'274 subscribers to the newsletter from 145 countries.

**Distribution December 2012 – October 2013**

![Bar chart showing subscribers by month]

**Usual table of content**
1. Information on the upcoming European Public Health Conference
2. EUPHA update
3. Call for proposals, papers and job opportunities
4. Interesting news
5. EUPHA members update
6. Upcoming courses and conferences
7. Interesting publications
8. European Commission news
9. European Centre for Diseases Control news
10. WHO publications
Distribution data by Region (October 2013)

<table>
<thead>
<tr>
<th>Region</th>
<th>No. of countries</th>
<th>No. of subscribers</th>
</tr>
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<tbody>
<tr>
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<tr>
<td>Americas</td>
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<td>Africa</td>
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<tr>
<td>Asia/South Pacific</td>
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<td>32</td>
</tr>
<tr>
<td>Total (October 2013)</td>
<td>139</td>
<td>145</td>
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</tbody>
</table>

Top 5 ranking countries subscribed to the newsletter by region:

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<thead>
<tr>
<th></th>
<th>Europe</th>
<th>Americas</th>
<th>Africa</th>
<th>Asia/South Pacific</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>3</td>
<td>Germany (878)</td>
<td>Italy (902)</td>
<td>Brazil (14)</td>
<td>Brazil (22)</td>
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<tr>
<td>4</td>
<td>Netherlands (841)</td>
<td>Netherlands (898)</td>
<td>Peru (10)</td>
<td>Peru (10)</td>
</tr>
<tr>
<td>5</td>
<td>United Kingdom (737)</td>
<td>United Kingdom (858)</td>
<td>Argentina (5)</td>
<td>Argentina (50)</td>
</tr>
</tbody>
</table>

Further distribution

EUPHA actively invites our members and our partners to further distribute the newsletter, announce its publication in their tools as well as invite them to make the EUPHA newsletter available on their website. Our members from Portugal, France, Belgium, Slovenia and Italy are including the newsletter on their website. Sweden links directly to our website and the Netherlands includes our newsletter in their newsletter.

In 2013, we have seen an increase in requests to include information in the newsletter.
The EUPHA website is a very visible and extensively used marketing tool. It includes information on who we are, our activities, our members and hosts the website of the European public health conference. The average hits/months over the year 2013 is 481807 (in 2012: 310422).

The website also hosts the EUPHA membership database, the EPH Conference abstract handling and conference registration. Through the database, a link has been set up to the electronic access of the European Journal of Public Health for all full EUPHA members.

Website hits/month in 2012-2013 (until 1 November 2013):
Since January 2012, we also follow the number of pageviews for some of our activities to obtain a more accurate estimate of readers. Until 1 October 2013, we had 72'564 pageviews for 5 activities (an increase of 51% from 2012, where we had 35'232 pageviews for 5 activities).

EUPHA and Social networks

**Twitter:**
Since 2011, we are working with the EUPHActs twitter account. The EUPHActs twitter has now been linked to the opening page of the EUPHA website, which has led to a significant increase in the number of followers (in 2013: 384).

We have sent out 175 tweets in total (73 in 2013).

**Facebook:**
This page was created in 2011 with the aim of reaching the younger generation of public health professionals. Our EUPHActs twitter account is linked to this facebook page.
Building knowledge and capacity together

EUPHApedia is a search engine for all public health issues. It was created at the end of 2010 and launched on 9 February 2011. EUPHApedia has both an internal search engine (uploaded documents) and an external search engine (link to other websites) where documents can be found by relevance or by most recent and by keyword or phrase.

EUPHApedia did not aim to compete with existing tools, but aimed to offer practical experiences and grey literature to a large public health audience. The system invited our members to upload their experiences (practice, policy, training and education) so they can be shared with other members. EUPHApedia falls under all three building activities of EUPHA (knowledge, capacity and policy).

Included documents and views (October 2013)

In 2013, we again cleaned up the content of EUPHApedia and organised marketing for the use of EUPHApedia. At the end of October 2013, nearly all documents were still only being uploaded by EUPHA office. At the November meeting, it was decided to reformulate the goals and objectives of EUPHApedia and to reorganise EUPHApedia accordingly in 2014.
EUPHAnxt is a free and open initiative, launched in June 2011 by EUPHA. With this new initiative, that aims to collect the contribution of students, young researchers and practitioners interested in European Public Health issues, in order to sensitize and involve them into the multidisciplinary public health network and encourage information exchange and collaboration throughout Europe since the early stage of their career.

EUPHAnxt is continuously growing, in October 2013, we have 556 subscribers.

**EUPHAnxt Benefits**

EUPHAnxt means actively entering the Public Health community. The subscribers benefits are:
- Subscription to the free monthly electronic newsletter of EUPHA;
- Open invitation to join any of our 19 sections.

**EUPHAnxt 2013 Activities**

- EUPHAnxt continues to work with student organisations at European and global level.
- EUPHAnxt has successfully facilitated the first student exchange by using the EUPHA network.
EUPHAnxt organised a large number of events during the Brussels 2013 European Public Health conference.

- EUPHAnxt subscribers were provided with special badge during the Annual event to promote networking and encourage communication between the members of the “young community”, sharing common goals.
- EUPHAnxt was a partner in the Pre-conference: Public Health - the next step on Thursday 14 November.
- EUPHAnxt organized a visit to the Europarlamentarium on Thursday 14 November.
- EUPHAnxt participated in the Meet and greet @ the EUPHA stand on Thursday 14 November.
- EUPHAnxt organized its annual meeting on Friday 15 November.
- EUPHAnxt, together with Euronet-MRPH organized a workshop on Public Health competencies for young professionals on Saturday 16 November.

In 2013, EUPHAnxt was run by:
- Arjan van der Star (The Netherlands)
- Fabrizio Bert (Italy)
PHIRE (Public Health Innovation and Research in Europe) was a collaboration between seven partners, co-funded by the European Union and drawing on the expertise of members of the European Public Health Association (EUPHA).

Expert reports were made on the national impacts of eight innovation projects of the European Union’s first Public Health Programme 2003-2005. More than 100 country informants described the relevance, dissemination and uptake of the innovations. Impacts were stronger when there was national policy readiness and trans-national advocacy. Eleven national reports described impacts positively, and 10 without impact. All the projects continue as European collaborations.

PHIRE identified 75 public health research programmes and calls across 24 countries that opened in 2010. They were usually listed within broader medical research fields, and health promotion, environmental, health determinants and organisational research were also evident. Levels of funding, and use of the Structural Funds for public health research, were unclear.

PHIRE organised national stakeholder workshops and meetings – for researchers, research funders, ministries of health and civil society in 15 European countries. Research could be more clearly focused towards national health strategies, and translated as public health innovations across Europe.

Ministries of health, working with research councils, independent funders and the health services, can promote public health research to meet current health challenges. National public health associations can support development of research capacities and translation into practice.

The EU’s coming research programme, Horizon 2020, can strengthen national public health research systems through coordination, and support advances in public health policy and practice across Europe.

Recommendations from PHIRE

1. **Support national public health research**
Health policies and innovations must be evidence-based. Funds should be allocated to gain knowledge from policies and practice – including learning what is not effective. National research strategies must include public health objectives. There is much variation between countries in levels of public health research, and across different research fields and topics.

   *European countries should identify public health research within national health research systems, clarify and improve levels of funding, and align research calls and programmes with national health plans.*

2. **Support public health innovation**
Knowledge from research contributes to public health innovation. There should be research within public health interventions, policies and practice. Independent civil society organisations, including national public health associations, are important contributors in uptake and implementation of public health and social innovations.
European countries should promote innovation and research through health and civil society organisations working in the public interest and taking the place of commercial organisations elsewhere in the economy.

3. Support European priority and coordination of public health research
Only a very small proportion of current EU funding is directed towards public health research. The coming Horizon 2020 programme will have a wide range of mechanisms to support research in member states.

European countries, within Horizon 2020, should prioritize health care and health determinants research, and coordination mechanisms for public health research – including through the European Research Council, Research Infrastructures, ERA-Nets, Joint Programming and national Structural Funds.

4. EUPHA member contributions
Individual members of EUPHA Sections and the national public health associations contributed to PHIRE. Coordinated collection through EUPHA could build a European database of public health research strategies, structures, programmes, results and innovations.

EUPHA should activate its network of members and its network of sections to gather and summarize the real and urgent issues in public health and health services.

PHIRE Reports
PHIRE produced a large number of reports which are all available on the PHIRE pages of EUPHA’s website. There are reports providing comparative analysis on the uptake of innovations and research calls programmes in Europe and specific reports for each European country. In addition, reports are available on the platform meetings held in Copenhagen and Malta. Final results have been published in a Supplement to the European Journal of Public Health.

PHIRE Partners
PHIRE brought together seven partner organisations. Individuals within these organisations gave their ideas and energy to the project:

- EUPHA took responsibility for coordination, management and reporting
- The UK Faculty of Public Health developed the technical coordination, analysis and dissemination
- The French School of Public Health (EHESP) led on the profiles and programmes
- The Karolinska Institutet (KI) led the work on uptake of innovation projects.

Coordination of national data and workshops was organised through four regional leads – EHESP, Institute of Hygiene, Lithuania (LIH); Slovak Public Health Association (SAVEZ); and Ministry of Health, the Elderly and Community Care, Malta (MHEC). Evaluation was undertaken by the Netherlands Institute for Health Services Research (NIVEL). Management meetings were held in the Netherlands, at the EUPHA office at Utrecht, and also structured around the EPH Conferences held in Amsterdam (2010), Copenhagen (2011) and Malta (2012).

EJPH Supplement: Public health innovation and research in Europe
In October 2013, the project results were presented in a supplement to the European Journal of Public Health and made freely available (open access) through the EJPH website.
Review Public Health Capacity in the EU

The Review Public Health Capacity project, commissioned by the EC, was finally authorized to publish its findings and recommendations in 2013. The review was conducted by a consortium of Maastricht University, EuroHealthNet, ASPHER, EHMA, EUPHA, IUHPE and the European Observatory on Health Systems and Policies. In addition, national experts from the Member States were involved in all steps of the analysis and provided valuable contributions.

This project provided an overview of capacity for public health in EU Member States, to identify areas of action to be taken at national and EU level. The review included literature research, a quantitative and qualitative assessment at country level by national public health experts, policy dialogues and interviews with national stakeholders. The following domains were assessed: (1) Leadership and Governance, (2) Organisational Structures, (3) Workforce, (4) Financial Resources, (5) Partnerships and (6) Knowledge Development.

The results indicate great diversity in the ways that the public health function is organised and delivered in the EU. Most Member States have formal legislation and policy frameworks in place, with relatively clearly established responsibilities and accountabilities for communicable disease control, hygiene and immunisation. Responsibilities for ‘broader public health issues such as action on behavioural and social determinants of health and health inequalities were often less clearly defined.

The review found shortages of financial and human resources in many Member States. The review showed that many national experts are experiencing, and anticipated further, downsizing of public health infrastructures and services due to the impacts of the economic crisis and reforms.

Partnerships for public health were seen as important to identify, generate and exploit additional resources and to back up advocacy and leadership efforts. In many countries, they were considered underdeveloped and legal and other mechanisms to support and motivate partnership building efforts were often reported not to exist.

Research capacity in the Member States was considered as relatively well established. However, the effective facilitation of research capacity in support of policy development and programmes was often considered insufficient.

For many areas, data on the level of capacities was difficult to obtain. In particular, there was a general sense of uncertainty regarding the capacity of the workforce and the financial resources for public health. There are different understandings among European countries on the tasks and limits of public health services and there are wide differences in the extent to which this issue is pursued on national agendas.

To further strengthen and support Member States in building additional capacity for public health, the EU should ensure further sustainability and effectiveness:
1. Further support dialogue and information exchange between Member States and public health stakeholders
2. Strengthen EU support for public health and health promotion across all socio-economic groups
3. Address knowledge gaps and support knowledge creation
4. Facilitate the use of EU funding for strengthening public health capacity in areas of the EU with the highest needs
5. Support work to define, assess and strengthen the public health workforce
6. Build partnerships for Health in All Policies to address better the socio-economic determinants of health inequities.

The full report and country reports is available on the EUPHA website.

**Open Society Institute 2013**

For 2013 we have received an increased grant from the Open Society Foundations (OSF) which allowed more than 60 public health professionals from Central and Eastern European countries to participate in the Brussels 2013 European Public Health conference.

**Glasgow 2014 – 7th European Public Health Conference**

The application for the conference in Glasgow, November 2014, has been evaluated positively by the European Commission and we have been offered a substantial grant to cover expenses for the conference.
Reorganisation of the European Public Health Conferences

Since 2008, the EUPHA conferences have been joint with the ASPHER annual conferences. Since 2009, the conference was renamed European Public Health Conference to reflect that two partners are organizing the conference.

In 2011, it was decided to start a reorganization of the organization of the conferences. This was done for several reasons:

- In the current system, the local organisers had the end responsibility for finances and organization. This very often was a too heavy burden for our members.
- There often was a 'reinventing of the wheel' with regard to the organization of the conferences (e.g. visa letters, invitational letters) and centralizing the organization meant that a lot of the work could be streamlined.
- The current situation (our Governing Board electing the location of the conference) did no longer reflect the situation of working with a partner.

The reorganization was set in motion early 2012 and – with the help and flexibility of the Maltese Association of Public Health Medicine, our local partner for 2012 – a lot of the changes could already be put in place in 2012. For Brussels 2013, the reorganization of financial and organizational responsibility was completed. A clear memorandum of understanding with the Belgian Association of Public Health (BAPH) led to several tasks being delegated to the BAPH, but overall responsibility and contract negotiations were left to the EPH Conference office, which is based at EUPHA office.

In March 2013, it was decided to set up a separate foundation for the organization of the European Public Health Conferences. The reasons were three-fold:

1. With a separate Foundation, it is easier for partners to become full partners of the conference.
2. The separation of conference and EUPHA business would create financial transparency.
3. The Foundation will have its own office, based at EUPHA office, so there is transparency in working hours for the conference or EUPHA-related activities.

In 2012-2013, we have produced a specific Country manual for the conference and an EPH Conference Office manual.
The 5th European Public Health Conference took place from 7 to 10 November 2012 at the Hilton conference centre in Portomaso, St. Julian’s, Malta.

The organisation of Malta 2012 was a joint effort between the conference secretariat, based at EUPHA office, and the Local organising Committee (LOC), based at the Maltese Association of Public Health Medicine (MAPHM) and responsibilities were shared between the two offices.

Participants
Malta 2012 had 1,102 participants from 59 countries actually attended the conference. Of these, 52% also attended one or more of the 14 pre-conference activities. As in previous years, special emphasis was put on students and young researchers and on participants from central and Eastern European countries.

Programme overview
The programme was set up in 20 conference tracks. The plenary programme had 7 sessions, with 18 excellent speakers on a variety of topics. The parallel programme was set up from a selection of the 802 submitted abstracts and 73 submitted workshops and consisted of 182 oral presentations in 31 parallel sessions, 35 workshops and 441 posters presented in 59 moderated poster sessions. Presenters came from 49 countries.

Continuing the tradition built up in past years, Malta 2012 organised lunch meetings on Friday and Saturday. A total of ten lunch meetings were organised in Malta 2012.

Abstract prize winners
Every year, the conference organisers award abstract prizes in three different categories. All prizes consist of a certificate and a waiver of conference fees for the year after.
The prize for the highest scoring single topic abstract was awarded to:

*Anxiety and depression in women and men from early pregnancy to 3-months postpartum*

Barbara Figueiredo, Portugal

The Ferenc Bojan Young Investigators Award, which is awarded to the best presentation by a young public health professional, was awarded to:

*The impact of fiscal decentralization on health outcomes: empirical evidence from Italy*

Ferruccio Pelone, Italy

All conference participants received a poster voting form in their conference bags, where they could select a maximum of three posters as 'best poster'. The prize for the highest scoring poster presentation was awarded to:

*Unpleasant and stinking hosts*

Gabriele Messina, Italy

**Main results of the evaluation of Malta 2012**

30% of all participants filled out the online evaluation form.

**Overall outcome:**

72.7% of the participants were very satisfied/satisfied with the Malta 2012 conference

**Networking:**

75.8% of the participants were very satisfied/satisfied with the networking possibilities offered at Malta 2012

**Exhibition area:**

81.5% of all respondents visited the exhibition area. 59.4% of the participants were very satisfied/satisfied with the exhibition area at Malta 2012

**Plenary programme:**

72.3% of the participants were very satisfied/satisfied with the plenary programme at Malta 2012.

**Parallel programme:**

76.9% of the participants were very satisfied/satisfied with the parallel programme at Malta 2012.

**Moderated posters programme:**

75.1% of participants participated in the moderated posters programme. 58.0% were very satisfied/satisfied with the moderated posters programme at Malta 2012.

**Pre conferences:**

32.5% of participants attended one or more pre-conferences; 89.8% were very satisfied/satisfied with the pre conferences at Malta 2012.

**Conference venue:**

83.7% of the participants were very satisfied/satisfied with the conference venue at Malta 2012.

**Catering:**

74.2% of the participants were very satisfied/satisfied with the catering and the social programme at Malta 2012.

**Abstract submission:**

88.2% of the respondents were very satisfied/satisfied with the abstract handling system at Malta 2012.

Health in Europe: are we there yet?  
*Learning from the past, building the future*

The 6th European Public Health Conference is organised in The Square, Brussels, from 13 – 16 November 2013. The organization of Brussels 2013 was in the hands of EUPHA assisted by the International Conference Council (ICC) for organizational aspects and the International Scientific Committee for the conference programme. Daily affairs were handled by the EPH Conference Office (part of EUPHA office). Partners for Brussels 2013 were:
- ASPHER; the Belgian Association of Public Health, the Scientific Institute of Public Health and EuroHealthNet.

Brussels 2013 received support from:
- European Commission
- Visit Brussels
- Open Society Foundations

And was organised in collaboration with:
- ECDC; EHMA; European Observatory on Health Systems and Policies; EPHA; RIVM; NIVEL; Vaccines Europe; and WHO Regional Office for Europe

Participants and programme
A total of 1321 public health professionals from 60 countries attended the conference. The programme included 8 plenary sessions, 31 parallel sessions, 37 workshops, 30 moderated poster sessions and 10 poster walks.

Abstract prize winners 2013
Every year, the conference organisers award abstract prizes in three different categories. All prizes consist of a certificate and a waiver of conference fees for the year after.

The prize for the highest scoring single topic abstract was awarded to:
Traffic-related air pollution as a risk factor for the development of childhood allergic diseases: the “Traffic, Asthma and Genetics” project
Elaine Fuertes, Canada

The Ferenc Bojan Young Investigators Award, which is awarded to the best presentation by a young public health professional, was awarded to:
   Austerity’s health effects: a comparative analysis of European budgetary changes
   Aaron Reeves, United Kingdom

All conference participants received a poster voting form in their conference bags, where they could select a maximum of three posters as ‘best poster’. The prize for the highest scoring poster presentation was awarded to:
   Ab actu ad posse valet illatio? Epidemiological inferences from ex-voto
   Elena Azzolini, Italy

**Main results of the evaluation of Brussels 2013**

34% of all participants filled out the online evaluation form.

**Overall outcome:**
81.0% of the participants were very satisfied/satisfied with the Brussels 2013 conference

**Networking:**
72.2% of the participants were very satisfied/satisfied with the networking possibilities offered at Brussels 2013.

**Exhibition area:**
89.8% of the participants visited the exhibition at least once.
55.6% of the participants were very satisfied/satisfied with the exhibition area at Brussels 2013.

**Plenary programme:**
69.9% of the participants were very satisfied/satisfied with the plenary programme at Brussels 2013.

**Parallel programme:**
84.2% of the participants were very satisfied/satisfied with the parallel programme at Brussels 2013.

**Moderated posters programme:**
66.7% of participants participated in the moderated posters programme. 73.8% were very satisfied/satisfied with the moderated posters programme at Brussels 2013.

**Poster walks:**
41.5% of participants participated in at least one poster walk. 76.7% were very satisfied/satisfied with the poster walks at Brussels 2013.

**Pre conferences:**
38.5% of participants attended one or more pre-conferences; 80.4% were very satisfied/satisfied with the pre conferences at Brussels 2013.

**Registration:**
88.2% of the participants were very satisfied/satisfied with the registration at Brussels 2013.

**Conference venue:**
68.8% of the participants were very satisfied/satisfied with the conference venue at Brussels 2013.

**Catering:**
42.2% of the participants were very satisfied/satisfied with the catering and the social programme at Brussels 2013.

**Abstract submission:**
92.0% of the respondents were very satisfied/satisfied with the abstract handling system at Brussels 2013.
The theme for the 7th EPH Conference is *Mind the gap: reducing inequalities in health and health care*. This theme was chosen to encourage discussion on how European countries cannot just promote the health of the public but also reduce inequalities in health and health care. Understanding the causes underlying inequities in health and discovering which interventions or policies may reduce inequalities, and under what circumstances, are critical for the promotion of population health in all countries. The current economic circumstances in many countries mean that it is more important than ever for researchers and policy makers to learn from the experiences of each other rather than constantly ‘reinventing the wheel’. The focus on inequalities in health, and the desire to move research beyond traditional academic boundaries and into education, policy and practice as recommended in the Rio Declaration on Social Determinants of Health, is clearly reflected in the proposed themes of the conference.

**Plenary sessions**
The plenary sessions are organized on the following themes:
- Inequalities in the population: large scale interventions
- Equity across the European region: the European Action Plan for strengthening Public Health Services and Capacity
- Communicable and non-communicable diseases: old challenges, novel solutions
- Marginalised groups: migrant and ethnic minority health
- Looking to the future: translating evidence into policy
Confirmed keynote presenters
- Zsuzsanna Jakab, WHO Regional Director for Europe
- Margaret McCartney, General Practitioner, Scotland
- Sally Macintyre, University of Glasgow, Scotland
- Marc Sprenger, Director of ECDC, Sweden
- Raj Bhopal, University of Edinburgh, Scotland

Organisation
The organization of the conference is in the hands of the EPH Conference Foundation, EUPHA and the UK Society for Social Medicine are the partners in this event. The chair of the conference is Prof. Alastair Leyland, University of Glasgow.

The organization is assisted by:
- The International Conference Council (ICC), headed by Prof. Walter Ricciardi, consisting of representatives from a wide array of international organisations, will advise on the plenary programme and invitational workshops.
- The International Scientific Committee, headed by Prof. Martin McKee, will advise on the parallel programme as well as judge all abstracts and workshops submitted for the conference.
- The Local organizing Committee, headed by Prof. Alastair Leyland, will be responsible for local organization, local sponsors and local participation.
- Daily affairs are handled by the EPH Conference Office, headed by Dr Dineke Zeegers Paget.

The welcome reception is offered by the City of Glasgow and will be hosted by the Lord Provost at the Kelvingrove Art Gallery and Museum. The conference dinner is organised at the Glasgow Science Museum.

The first Announcement and the Partners and Exhibitors Opportunities have been finalised and distributed to delegates at the Brussels 2013 Conference.

Glasgow 2014 has received a positive evaluation from the European Commission and we are in the process of negotiation of the grant agreement.
Milan 2015 – 8th European Public Health Conference

PUBLIC HEALTH IN EUROPE
From global to local principles, methods and practices

The 8th European Public Health Conference will be held in the new MiCo – Milano Congressi – a modern and large conference centre with all facilities under one roof. The conference will be organised from 14-17 October 2015, earlier than normal EPH Conferences.

The EPH Conference coincides with the Milan International EXPO 2015 which offers a great opportunity for delegates to visit this important exhibition. The theme of EXPO 2015 Feeding the planet, energy for life is closely related to public health.
The 8th EPH Conference intends to play a crucial role in calling upon the European governments to place a higher priority on the global threats to the future health of citizens and to invest in the global public goods for health that will enable us to respond effectively to them.

Organisation

The organization of the conference is in the hands of the EPH Conference Foundation. EUPHA and the Italian Society of Hygiene, Preventive Medicine and Public Health are the partners in this event. The chair of the conference is Prof. Carlo Signorelli, University of Parma.

The organization is assisted by:
- The International Conference Council (ICC), headed by Prof. Martin McKee, consisting of representatives from a wide array of international organisations, will advise on the plenary programme and invitational workshops.
- The International Scientific Committee, headed by Prof. Walter Ricciardi, will advise on the parallel programme as well as judge all abstracts and workshops submitted for the conference.
- The Local organizing Committee, headed by Prof. Carlo Signorelli, will be responsible for local organization, local sponsors and local participation and consists of:
  o F. Auxilia
  o S. Brusaferro
  o M. Conversano
  o S. Capolongo
  o P. Crovari
  o G.M. Fara
  o R. Gasparini
  o G. La Torre
  o N. Nante
  o R. Siliquini
  o P. Villari
  o A. Zanetti
- Daily affairs are handled by the EPH Conference Office, headed by Dr Dineke Zeegers Paget.