

5.F. Skills building seminar: Comprehensive strategies to tackle diabetes and chronic diseases: The Joint Action CHRODIS

Organised by: JA-CHRODIS consortium and EUPHA section on Chronic diseases

Contact: marina.maggini@iss.it

Chairperson(s): Jelka Zaletel - Slovenia, Iveta Nagyova - Slovakia

Diabetes is a common and serious disease associated with a high individual, social and economic burden. In 2015 there were 415 million adults (aged 20-79 years) with diabetes worldwide, according to the most recent estimates of the International Diabetes Federation. This represents about 9% of the population of this age group. If left unchecked, some 642 million people are expected to have diabetes by 2040. In the European Union, the frequency of diabetes vary from around 4.0 to 4.5% in Lithuania, Estonia and Ireland to just under 10% in Cyprus, Malta and Portugal.

The launch, in 2014, of the European Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS) is a response to the European Commission's encouragement to join forces towards prevention and care of major chronic diseases. Diabetes was selected as a case study to strengthen health care for people with chronic diseases.

A mapping of national diabetes plans (NDPs) in Europe was undertaken as part of JA-CHRODIS, and formed the basis for a policy brief aimed at the identification of factors that can facilitate development, implementation, and sustainability of national diabetes plans. The policy brief identified a range of factors that appear to facilitate the development, implementation and sustainability of national diabetes plans. These include national (or regional) leadership, multiple stakeholder involvement, patient representation in plan development and implementation, and dedicated resources. The identified key

challenges include the need for countries to move towards a more comprehensive, inter-sectoral approach, to put in place effective mechanisms for research and the implementation, monitoring and evaluation of NDPs.

Moreover, a Strengths-Weaknesses-Threats-Opportunities (SWOT) analysis was conducted across Europe, to give a qualitative overview of the current policies and programs on diabetes prevention and care.

The aim of this workshop is to share with the audience, in a participatory way, the main messages from the policy brief on NDPs and from the SWOT analysis. The lessons learnt from these experiences may support countries' efforts to build a successful and comprehensive strategy for the prevention and care of diabetes and, more broadly, chronic diseases.

The workshop will include two short presentations of the principal results of the mapping of NDPs, and of the SWOT analysis (approximately 30 minutes for presentations and discussion), followed by a seminar (approximately 60 minutes) around the theme: What lessons are there for the prevention and control of chronic disease in Europe? The seminar will be led for participants in pairs or in small groups (depending on the number of participants) aiming to create an inspired meeting and to kindle energies to establish a marketplace of inquiries and reflections.

The seminar will be led by Milivoj Piletic, National Institute of Public Health, Ljubljana, Slovenia, mpmilpil2@gmail.com.

Key messages:

- Although countries in Europe have made progress towards developing a systematic policy response to diabetes burden, overall investment in and implementation of comprehensive strategies has varied
- A better understanding of the key enablers and barriers is of utmost importance to support countries' efforts to build a successful response to diabetes, and chronic diseases at the national level

National diabetes plans in Europe

Jelka Zaletel

J. Zaletel, on behalf of the Joint Action on Chronic Diseases and Promoting Healthy Ageing Across the Life Cycle (JA-CHRODIS)

National Institute of Public Health, Ljubljana, Slovenia

Contact: jelka.zaletel@kclj.si

Many countries in Europe have introduced national plans addressing diabetes specifically (national diabetes plans, NDPs)

or as part of broader non-communicable disease (NCD) strategies. Data on national diabetes plans in 22 European countries was collected as part of JA-CHRODIS. National diabetes plans typically take a broad approach, capturing prevention and treatment and seeking to place the patient at the centre. Most of the NDPs focused on diabetes broadly, covering type 1 and 2 diabetes, along with gestational diabetes. Most countries with a dedicated NDP in place target the whole population. NDPs typically include prevention, early diagnosis, routine care and services, and patient education in all countries although respondents in some countries noted that specific aspects might be covered under other national-level plans or strategies.

Making diabetes or NCDs more broadly a political priority was critical to the development and implementation of NDPs, and learning from experience through monitoring and evaluation as well as transnational learning was found to help inform NDP development and implementation.

SWOT analysis of policies and programs on prevention and management of diabetes across Europe

Angela Giusti

A Giusti, M Maggini, on behalf of the Joint Action on Chronic Diseases and Promoting Healthy Ageing Across the Life Cycle (JA-CHRODIS)

National Institute of Health, Rome, Italy

Contact: angela.giusti@iss.it

SWOT analysis is a strategic planning tool used to analyse a policy, program, project or intervention. The aim, in the frame of JA-CHRODIS was to offer insights on what makes a policy/program applicable, sustainable, and effective from a public health and from the stakeholders' perspectives. A total of 53 stakeholders in 12 countries contributed to the analysis of 39 policies/programs. In order to be a success, a policy or a program need to be built on a bottom up approach and the process should be flexible and dynamic, being adapted on a regular basis, with the constant input and feedback by the stakeholders and involved organizations. An intersectoral approach, enhances the networking and the concerted action, supports shared commitment and ownership, reducing the solo-thinking that is distinctive of the mono-sectoral approach. A binding transectoral approach (e.g. transport, urban planning, agriculture, marketing and trade) is however necessary to battle the underlying risk factors of poverty, lack of education and unhealthy environmental conditions.