



Health Collaboration Awards 2016

The Event

EFPIA's 2016 Health Collaboration Summit, taking place on 9-10 November, will focus on health outcomes and sustainability of health systems.

The Purpose of the Award

To share best practice on multi-stakeholder collaborations that benefit patients and healthcare systems.

The Eligibility Criteria

Entrance for the Awards is open to multi-stakeholder collaborative projects on national and EU level that include patient organisations and industry partners.

The Categories

Prevention & Awareness
Service Delivery

The Judging Criteria

Patient benefits from the project (and how it was measured) – health & other

prevalence

Patient engagement

Innovative nature of the project

The number of patients that benefit
(taking in to account disease

Evidence of collaboration, transparency and best practice

Health System Benefits

The Health Collaboration Guide

All applicants of the Health Collaboration Awards will be featured in the Health Collaboration Guide that showcases the projects summarising their activities and achievements.

Application Process

1.

Complete the form below respecting the word limitations of each section and send it back to us in Word format. The text you provide will be the basis of your application and of your project page in the Health Collaboration Guide. Please make sure you provide text for each section.

2.

Further to the text, we would also like to request high-resolution logos of the project (if available), of all project partners and at least two images or photos connected/relevant to the project. Please see Annex I. about the specifications.

You can have a look at the project pages of the 2015 Health Collaboration Guide, in order to get an idea of how the content will be organised.

3.

We would like to request a version of the application form that contains the signature of each partner organisation / project partner, which means that in addition to the Word version, we would like to ask you to send us a signed version as a scanned pdf. file.

4.

Applications and accompanying documentation (see more in detail below) should be submitted through a [Dropbox folder](#) shared with zsofia.bakonyi@efpia.eu by **Monday, 3 October 2016**.

The folder name should contain of the full name_of the project.

5.

You should expect a confirmation of receipt within 2 days of submitting your application.

In case you have any questions or you do not receive our confirmation, please email zsofia.bakonyi@efpia.eu.

Supporting Documents

When assessing projects against the criteria, in addition to the applications form, the panel will accept:

- Surveys
- Projects evaluation reports
- Statements of reference from project partners and stakeholders
- References from patients

Assessment

Applications will be assessed by a multi-stakeholder panel comprising of a patient organisation representative, a healthcare system representative, an industry association representative and a think tank / healthcare media representative.

The panel will review all the applications and supporting documents and make it's recommendations for the 6 short-listed projects following an application assessment meeting to be held on **26 October**.

The partners of short-listed projects will be invited to send at least one representative to the awards ceremony at the Health Collaboration Summit on 9 November in Brussels at 17:00.

The Awards

We will give four awards in total at the Health Collaboration Summit:

Prevention and Awareness
Service delivery
Innovation Awards*
Health Collaboration Awards*

*For these two awards, winners will be chosen from the two above-mentioned categories.

Submission Form

Project Name:	Together for Better Health, for us-by us
Contact person:	Paul van Hoof
Email Address:	Paul.I.van-hoof@gsk.com
Project Partners:	the National Network of Health Mediators Bulgaria, Partners Hungary Foundation Hungary, OvidiuRo Romania, The Association for Culture, Education and Communication Slovakia
Award Category: Prevention & awareness OR Service delivery	Prevention & awareness AND Service delivery

1. Please summarise your project detailing the aims, objectives, partners and outcomes

In 2012 GSK and four distinct NGOs from Bulgaria, Hungary, Romania and Slovakia, started a partnership to improve the health of those living in socially excluded and isolated Roma communities in Europe. “Together for Better Health” is supported by the GSK community Partnership program and the European Public Health Alliance. In September 2016 UNICEF (UK&Serbia) joined the project.

Key to this program are ‘health or cultural mediators’, individuals from Roma communities who receive training in basic preventative and curative health care, and act as a link between the communities and the (primary) health system.

One of the key success factors for Health Mediators’ is the fact that they belong to the community they work for. They literally connect people living in secluded communities with doctors, help people to overcome prejudices (for example on vaccination), provide clarity, and contribute to community development. The other key component of the project is (Health&Hygiene) education of Roma children and communities.

Specific program objectives are to:

- Support and embed the role of Health and Cultural Mediators to improve the health of Roma, especially children, through education and medical interventions within Roma communities;
- Ensure that Health and Cultural Mediators are acknowledged and embedded in the national legal frameworks;
- Speed up sustainable access to available national and European funds.

These NGO partners all have experience in working with Roma communities across health and education. Leveraging their expertise and joint advocacy has positively impacted health of over 400.000 Roma people. Local solutions have been developed from within the community, with health and cultural mediators, healthcare professionals and education of children playing a pivotal role in linking the community with the public health system and improving their health.

2. Describe the need your project addressed

The Roma are the largest minority in Europe. In some countries Roma people make up a considerable part of the population (up to 10%). This percentage is increasing, contributing to further social, economic and health inequalities. Roughly half of the Roma people live in settlements; these are often geographically isolated and characterized by a lack of infrastructure (illegal dwellings, often limited access to water and no sewage systems), hygienic amenities, and very limited access to social and health services. Due to these and other factors, employment rates, educational attainment, and health literacy are especially low in Roma settlements.

People are extremely poor. We have personally seen little children barely dressed and even barefoot, dwelling in the mud at temperatures nearing 0°C.

This leads to outbreaks of dangerous infectious diseases like hepatitis, tuberculosis, measles; these diseases can be perfectly preventable given the right aid is available. Together with the detrimental impact of late diagnosis and suboptimal- or even lack of treatment of chronic diseases, Roma people in settlements simply have lower life expectancies. Last but not least, Roma communities have a higher infant and childhood mortality rate when compared to the rest of the population.

Many local, regional and national governments as well as the European institutions are experiencing difficulties to provide support that really reaches the communities.

Help and change should therefore come from within the communities, supported and guided by passionate NGOs. The role of education and trained Roma Health Mediators, accepted people from within the community is critical for success. This, together with the development of pragmatic and supportive policies and funding, both on European and national level, will make a sustainable difference; *to improve access to (health) education and healthcare for Roma people living in secluded communities and as such to improve their lives.*

3. Please outline the patient benefits and how they were measured:

- The project has improved health of more than 400.000 Roma in secluded communities by improving access to basic healthcare and education. More concretely; From vaccination, to learning to wash hands, & brush teeth, provision of glasses, going to school, and getting fruit and vitamins, getting treated for scabies/Lice/HIV/Measles etc, building toilets together and complete checkups of communities resulting in important referrals to GP's and hospitals.
- Activities and outcomes are measured by the (health) mediators on a daily base and by the NGO's involved. Joint measurements are now being developed to better inform National and EU policies.
- Inspired or supported by our partnership many more people were reached:
 - The Healthy Communities Program with the Slovak Government was established, increasing the number of u health mediators from 50 to over 300.
 - The Health caravans in Romania was set up, doctors and medical students traveling to secluded communities providing checkups and referrals.
 - The number of Health Mediators in Bulgaria increased, as well as their positive social impact in Bulgaria (in crises situations like flooding and social unrest).
 - The set up of mediating programs in Hungary; communities deciding upon and implementing health and hygiene programs.

4. How many patients benefitted from the project?

More than 400.000 Roma people have been reached so far with direct support in bringing them to doctors/hospitals, screening, (health) education, prevention, disease awareness, hygiene programs and cultural integration.

5. Describe the innovative elements of the project:

The project is truly innovative as it leverages the experiences, skills and pragmatic insights of NGOs from different countries supported by EU NGOs and by companies to make a direct impact on the lives of Roma people living in secluded communities.

Most specifically through empowering and employing people from those communities and supporting (health & Hygiene) education of children and adults.

Our insights and experiences are used to directly improve the way we provide support, as well as developing and providing materials to teachers, mediators and communities. Moreover we use our combined insights "from the field" to inform national policy development and funding to create sustainable networks of Health mediators and (health and hygiene) education. The shared insights amongst the partners have already made a significant impact on national policies (recognition, funding, selection, education of health mediators) and legislation. We

provided input to Commission surveys and were participating in international conferences and platforms, to help bridge policy and funding to the real needs of the secluded communities.

6. Please highlight the collaborative elements of your project:

The experienced NGO's from different countries share and leverage their direct experience in helping Roma patients in secluded Communities through health mediators and education as well as finding ways to inform national policies and attract national and EU funding. Examples are: shared educational and hygiene materials, ways of working and training of health mediators, inspiration and advice on strategies how to involve authorities and how to achieve funding.

These NGO's are supported in EU outreach and policy development by EPHA.

GSK provides structure, funding and national support, both managerial as well as in communication. Besides that, the program is supported by GSK Pulse Volunteers, dedicating 3-6 months full time to support the project.

7. Outline how you managed the collaborative nature of your project, in particular detailing any transparency, governance or best practice elements.

Management/Governance: The program is, in rotation, chaired by one of the NGO's for a period of nine months and supported by GSK. We meet once a year face to face in one of the participating countries, to learn in practice by visiting secluded communities as well as often having events with national stakeholders to share and inform pragmatic policy development.

We have 3 virtual meetings per year through videoconferencing from GSK national offices.

The meetings have recurring elements: share activities best practices over the last 3 months, share plans forward, highlight specific concerns/ issues that need support. Relevant EU events, policy development and funding opportunities are presented and discussed at each meeting.

We have now embarked on common programs that are implemented simultaneously in all participating countries, inspired by the GSK PHASE project, developed to improve hygiene in underserved communities around the world.

Transparency: The NGO's develop 3 year plans and provide quarterly reports on the progress they make.

8. Has there been any evaluation of whether your project is sustainable and replicable in other healthcare settings?

Yes: The critical role of Roma health mediators and (health & Hygiene) education is widely recognized in policy and academic studies. Our partnership provides pragmatic insights and combined advice how to "make this work in practice". Learning's can be extended to other hard to reach communities.

Best practices from our projects are being implemented in the participating countries and we are now developing materials and putting into place hygiene programs inspired by countries outside of Europe. These programs and materials already attracted interest from other stakeholders and authorities for wider implementation.

Funding of individual NGOs remains a challenge and achieving sustainable funding is therefore one of the core aims of our collaboration.

The network Together for Better Health is firmly established and expanding to other countries, like Serbia and hopefully Macedonia, as well as involving other stakeholders.

9. Please list any supporting document to your application

There are many articles. Please browse the TG4BH website or a selection of clips below:

[Together for better health](#)

[EU event-the case of connecting roma people to basic healthcare september-2015](#)

[EPHA position on roma health in europe](#)

[health caravan Romania](#)

[conference on improvement of health in disadvantaged communities Slovakia](#)

[Council: good practice improving health status roma communities central and eastern europe](#)
[vaccines today:reaching roma vaccinating under served minorities Bulgaria/ECDC](#)
[vaccinestoday: case-study-reaching-roma-communities](#)
[vaccinestoday: reaching-roma-vaccinating-under-served-minorities](#)
[European Roma Spirit Awards](#)
[NNHM-BG](#)
[Partnershungary Foundation-HU](#)
[OviduRo-RO](#)
[ACEC-SK](#)
[GSK](#)

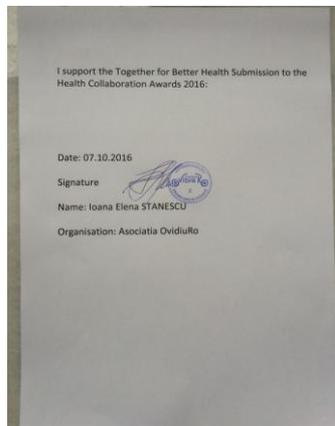
Check list of Obligatory Documentation for the Health Collaboration Awards Submission:

1. Application form in Word format
2. Application form in PDF format with signatures of the project partners
3. High-resolution logos of all project partners
4. High-resolution logo of the project (if available)
5. Two high-resolution jpeg images connected / relevant to the project

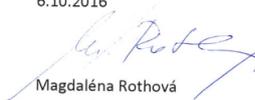
I support the Together for Better Health Submission to the Health Collaboration Awards 2016:

Date: 07/10/2016
 Signature: 
 Name: Eva Deak Executive Director
 Organisation: Partners Hungary Foundation

Partners Hungary Alapítvány
 1072 Budapest Rákosci út 22. 4/24,
 Adószám: 18068038-3-42
 CIB Bank: 10701004-22492102-51100005

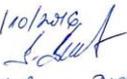


I support the Together for Better Health Submission to the Health Collaboration Awards 2016:

Date: 6.10.2016
 Signature: 
 Name: Magdaléna Rothová
 Organisation: Association for Culture, Education and Communication (ACEC)

acec Association for Culture, Education and Communication
 Safárikovo námestie 2
 pri 02 Bratislava
 Slovak Republic
 IČO: 31797580
 DIČ: 2021697337
 www.acec.sk

I support the Together for Better Health Submission to the Health Collaboration Awards 2016:

Date: 04/10/2016
 Signature: 
 Name: Dilyana Dikova
 Organisation: National Network of Health Mediators - Bulgaria



October 10th 2016

Paul van Hoof

ANNEX

1. Logos



GSK_LOS_2D_PMS_1505.eps.zip



Together4BH.eps



new OvR logo.eps



logo_zmediatori.eps



logo acec final.pdf



PG_HUN_logo_eng.e
ps

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2. Images





