



Lithuanian Presidency
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„Sustainable Health Systems for Inclusive Growth in Europe“

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THE VILNIUS DECLARATION AND CONFERENCE REPORT

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Vilnius Declaration

Call for Action

Sustainable Health Systems for Inclusive Growth

We call on European governments and the European Union to take immediate action:

1) To increase investment in health promotion and disease prevention;

- Healthcare costs can be significantly reduced through investment in community-based prevention and health promotion programmes.
- The introduction of fiscal measures for health promotion such as improving the affordability and accessibility of fruit, vegetables and whole grains whilst taxing foods high in salt, sugar and fat, alcohol and tobacco.
- Investment in cost-effective preventative measures – such as smoking bans, vaccination, screening for cancer, increasing physical activity and tackling problem drinking - would significantly reduce the burden of mortality and non-communicable diseases in Europe, acknowledging that not all diseases are preventable.
- We need to invest more in primary, secondary and tertiary prevention as well as health literacy.
- A holistic approach to health, healthcare and public health is necessary as many drivers of good - and ill – health lie beyond the healthcare system.
- Poverty and social exclusion, as well as the health in all policies approach must be addressed and the importance of a well-funded and accessible welfare state is paramount particularly in times of crisis.

2) To ensure universal access to high quality people-centred health services;

- European health systems must deliver high quality and safe healthcare and public health services, accessible to all including equal access – within and between Member States - to modern and cost-effective medicines.
- Continuity of care including access for excluded, vulnerable and minority groups, is essential.
- A partnership approach between all stakeholders in the health sector at national and European levels should be promoted to identify effective solutions to improve equity of access to healthcare.
- To ensure patients and the public are empowered and supported in the management of their own health, and that their representative organisations are adequately involved in the development of policies and programmes through a whole-of-society approach.
- To ensure that the health service is a responsible employer, implementing effective recruitment and retention strategies, including continual professional development and an adequate skills mix.



3) To ensure that health system reforms including workforce planning are evidence-based and focus on cost-effectiveness, sustainability and good governance;

- Investment in health systems should ensure that funding for health is secure, solid and based on principles of solidarity as well as sustainability.
- Ensuring that principles of accountability, transparency and good governance are applied throughout the policies and processes surrounding health, health systems and public health is essential in order to ensure resilience of our health systems and promote confidence amongst European populations.
- Member States and the European Union should ensure that the effects of austerity do not adversely undermine health, access to healthcare or the quality of health services.
- Investment in prevention and promotion, transformation of health systems aligning financing and service delivery reforms towards continuum of services around primary health and community care and the health workforce, including through European Structural and Investment Funds, the use of the European Semester and other appropriate mechanisms, would greatly improve health and social outcomes.
- Cost effective investments in healthcare innovations, including innovation in systems and practices as well as social innovation and public health innovations - accessible to all citizens - will benefit research, knowledge and employment whilst improving health and the productivity of health systems and reducing disease.
- Implement effective, cost-effective and equitable pricing and reimbursement systems and improved co-operation between regulatory agencies on pharmaceuticals and other essential goods.

We call for European leaders to work with us to help ensure that European health systems are people-centred, sustainable and inclusive, and deliver good health for all.

We call on Member States, European institutions and the World Health Organisation to work together to achieve these goals and offer our support as European civil society in their delivery.

Vilnius, 20 November 2013



Background

Our call for action

Health has a significant role to play in Europe's success and economic future. We believe that EU 2020 headline targets and objectives will not be achieved without healthier Europeans, which requires improved health outcomes and reductions in health inequalities. We are ready to play our part, as one of Europe's largest sectors. But to do that we call on European leaders to work with us to help ensure health systems are sustainable, inclusive and fit for purpose for all of us living in Europe.

Why we make this call:

- Given the **impact of the economic crisis on Europe**, the health of its people and the organisation and sustainability of its health systems;
- Given the recent figures released by the OECD which show an alarming reduction in the levels of investment in health promotion and disease prevention.
- Given that **Article 168 of the Treaty of the European Union** requires "a high level of human health protection" to be ensured in the definition and implementation of all EU policies and activities and provides for EU level coordinating action to complement national policies to improve public health;
- Given that the implementation of the strategy to achieve **Europe 2020 objectives of smart, sustainable and inclusive growth**, the yearly cycle of economic policy coordination entitled the 'European Semester', is impacting on the traditional national competences of financial and organisations of healthcare through an increase of health governance at European level;
- Following the work of the Finnish Presidency of the Council in 2006 in the development of the '**Health in all Policies**' approach.
- Following the adoption of **2011 Council Conclusions on "modern, responsive and sustainable health systems"**, which invited Member States and the Commission to identify effective ways of investing in health to ensure modern, responsive and sustainable health systems;
- Following the adoption of the **WHO European Health Policy Health 2020** and the **WHO European Action Plan to Strengthen Public Health** at the Regional Committee in 2012 in Malta
- Following the discussions during the High Level Meeting on the Impact of the Economic Crisis on Health and Health Systems in **Oslo, 2013**, held under the auspices of the World Health Organisation European Region (WHO Europe);
- Following the adoption of **2013 Council Conclusions on "Towards social investment for growth and cohesion"**; and the recognition of the importance of a healthy population, supporting health determinants and health care as well as the adoption of the **Staff Working Document on Investing in Health (SWD 2013 43)**.
- Following the adoption of the **2008 Tallinn Charter "Health Systems for Health and Wealth"** and the follow up meeting in October 2013 addressing the Tallinn Charter in the context of the **WHO Europe Health 2020 policy framework**.



- In the context of the 35 year anniversary of the **Declaration of Alma-Ata**, calling for urgent action by all governments to protect and promote the health of all people, addressing the status and the Way Forward of primary care
- In the context of the **Reflection process on modern, responsive and sustainable health systems**.

We remind European political leaders and policymakers that:

- Health spending is an investment, increases productivity and supports sustainable growth and investing in health should be acknowledged as a contribution to economic growth and social cohesion;
- Policymaking and decisions regarding investment in health and reform must be evidence based and undertaken with a strategic approach;
- Health is one of the priorities for Europeans and people living in Europe, and through addressing the challenges, hopes and expectations of Europe's population it strengthens trust and commitment in the European project and democratic processes;
- Europe is facing a number of challenges, including the aging population, an increase in chronic disease, new technology development and reduced financial and human resources, that are relevant for all Member States that if addressed appropriately are opportunities to reform and redress investments for a sustainable future;
- The growing inequalities in life expectancy and outcomes between and within European Member States in the recent decade.
- Increasingly clear evidence that access to modern services, technology and medicine is worse in Europe's poorer Member States, which also exhibit worse health outcomes.
- New economic governance at European level is impacting on health governance, and it is essential for Member States to ensure adequate coordination including co-ordination, monitoring and reporting at EU level;
- Health promotion and disease prevention are essential for the long-term sustainability of health systems and a productive population able to meet economic and social objectives;

The participants of the 2013 Vilnius Conference note the importance of each of these developments for the future of health development in and beyond the EU. We recognise our responsibilities to act, particularly in times of economic and social crisis. In turn we emphasise the important role of stakeholders and citizens in addition to Member States and EU Institutions, and call on Europe's leaders to ensure the vital role and needs of citizens' health are properly incorporated in a strong vision for Europe.



Adoption of the Vilnius Declaration – *Vytenis Povilas Andriukaitis, the Minister of Health of the Republic of Lithuania, Clemens Martin Auer, Director General of Federal Ministry of Health of Austria, Peggy Maguire, President of the European Public Health Alliance, Hans Kluge, Director, Division of Health Systems and Public Health, WHO Regional Office for Europe, Anders Olauson, President, European Patients' Forum*



Tonio Borg, EU Commissioner for Health and Prof. Vilius Grabauskas, President of the Lithuanian Health Forum



Sustainable Health Systems for Inclusive Growth in Europe

Conference Report

Austerity cuts have put Europe's health systems under severe pressure, increasing health inequalities and threatening sustainability in the future. Now, European governments and the European Union (EU) need to take immediate action to prevent further damage.

The inspiration for the Vilnius Declaration, agreed at the final health event of the Lithuanian Presidency of the Council of the EU 2013, is to ensure European health systems are people-centred, sustainable and inclusive – and that they deliver good health for all. To achieve this it is necessary to:

1. Increase investment in health promotion and disease prevention;
2. Ensure universal access to high-quality, people-centred health services;
3. Ensure that health system reforms – including workforce planning – are evidence-based and focus on cost-effectiveness, sustainability and good governance.

The Vilnius Declaration is “a crowning document” of all the work done by the Lithuanian Presidency to put the focus on the issue of ensuring health systems are sustainable for the future, said Tonio Borg, EU Commissioner for Health, responding as the Declaration was released.

Commissioner Borg told delegates, “Health is a value in itself, even if it didn't have positive economic consequences.” Are health systems sustainable? Commissioner Borg believes the answer is yes. “The Commission is committed to doing all it can to foster higher quality healthcare, available to all, on a long-term, sustainable basis,” Commissioner Borg said.



Tonio Borg, EU Commissioner for Health

The Vilnius Declaration is the distillation from a number of events and discussions on how to make health systems resilient for the future that have taken place during the Lithuanian Presidency. The document was finalised during the conference in Vilnius, which was organized by the Lithuanian Health Forum in partnership with the Ministry of Foreign Affairs, Ministry of Health, Ministry of Education and Science, the European Public Health Alliance, the European Patients' Forum, and the European Federation of Pharmaceutical Industries and Associations.

Crucially, health sustainability must be predicated on the principles of solidarity and universal access. This view was echoed by Algirdas Butkevičius, Prime Minister of the Republic of Lithuania, who said healthcare represents a “prudent investment” in the economy if made in the context of “a policy based on solidarity, universal access and the reduction of health disparities”.



Algirdas Butkevicius, Prime Minister of the Republic of Lithuania

The conference provided the opportunity to hear leading experts describe and debate the foundations and evidence on which the Vilnius Declaration was based and to outline concrete measures that are needed to make health systems sustainable. It was emphasised that change and reform has to happen on the basis of a stated commitments to reduce social inequalities in health, to improve public health and disease prevention, and by putting patients at the centre of healthcare.

Attaining sustainability also entails taking a different view of healthcare, whereby rather than it being seen as an overhead it is considered an investment in health, job creation, industrial development and economic growth.

“Health is created, maintained and supported when everyone contributes,” said Professor Vilius Grabauskas, President of the Lithuanian Health Forum. “Especially in the context of austerity, it is important countries learn from one another,” he included.

Health spending is an investment

Convincing ministers of finance that health spending is an investment, and using innovation

to increase efficiency is not easy. “This is the fundamental conundrum of the conference,” said Dr Josep Figueras, Director of the European Observatory on Health Systems and Policies.

Martin Seychell, Deputy Director General of the Directorate General for Health and Consumers of the European Commission, said that while health is a national competence, it is important not to overlook the many areas where it makes sense for Member States to work together. The challenges of the ageing population, chronic disease and the pressure from innovation are the same in all Member States. “Public budgets will be constrained for years to come,” said Mr Seychell. “The key challenge is to prevent the economic crisis becoming a health crisis.”

An opportunity to strengthen health systems

Zsuzsanna Jakab, Regional Director of the World Health Organization (WHO) Regional Office for Europe, echoed this. The financial crisis has presented health systems in Europe with a challenge “you could even say a threat,” said Ms Jakab. But she added, “It is also an opportunity to strengthen health systems.”



Professor Vilius Grabauskas, President of the Lithuanian Health Forum



“One impact of budget cuts has been to increase health inequalities, both between and within countries, and as the Vilnius Declaration states, action is needed to reduce the overall disease burden, address the social determinants of health and strengthen health systems to respond to this,” Ms Jakab said.

Need for evidence-based policy and improved governance

“Europe’s governments need to work with patients, payers and providers to make sure healthcare is sustainable,” said Monika Kosinska, Secretary General of the European Public Health Alliance. Critically, governments need to increase investment in health promotion and disease prevention, through measures such as taxes on sugar, reinforcing smoking bans, strengthening vaccination programmes, improving health literacy and looking to the drivers of good health that lie outside the health system.

“The time for talking is over: we know what to do,” said Ms Kosinska, summarising the main points of the Vilnius Declaration.

Education, training, science and innovation are policy areas that lie at the core of sustainability in healthcare said Professor Dainius Pavalkis, Minister of Education and Science of the Republic of Lithuania. To take one example, changing the skills mix is central to reforms to improve efficiency that involve tasks to be shifted from doctors to nurses.

The skills mix refers not only to medically-trained staff, but also to ICT and a range of other technical specialties. “On a ministerial level, it is important to measure the outcome of education and demonstrate the impact,” Professor Pavalkis said.

There has always been economic governance at an EU level, but the messages were not targeting specific member states. “It was saying, for example, strengthen healthcare to prepare for

ageing”, said Rita Baeten, Senior Researcher for the European Social Observatory. “Now, there is detailed guidance for reform.”

Value added innovation

In the view of Christopher Viehbacher, President of the European Federation of Pharmaceutical Industries and Associations, there are three routes to making health systems sustainable – reducing the resources burden; reducing demand; and increasing economic growth. Innovation lies at the heart of each approach.


Innovation is central in underpinning a shift to community-based care, helping patients to self-manage chronic conditions, and so reduce the disease burden. Innovation also lies at the heart of reducing demand through prevention of the chronic diseases that currently take up 75 per cent of healthcare budgets. “Europe is not low-cost; we need the skills and industries that value-add,” said Mr Viehbacher.

The financial crisis may be unprecedented in our lifetime, but health systems have weathered severe disruption in the past, most notably following the fall of the Iron Curtain. This experience provides the tools for dealing with the current crisis, said Professor Helmut Brand, President of the International Forum Gastein. “We know how to increase efficiency, we know how to select the right innovation, and understand the need to combine social and technological innovation,” he said.

“Now, there is a communication task to promote public understanding that healthcare is not a cost and a need for clear leadership to highlight that health is a value,” Professor Brand said.

Social determinants of health

At the same time it is important to acknowledge that sustainable healthcare cannot be delivered solely through efficiency improvements, said Sian Jones, Policy Coordinator at the European



Anti-Poverty Network. “There is a need to tackle the social determinants of health.”

The Europe 2020 policy has the stated aim of taking 20 million people out of poverty. However, the austerity-era cuts have forced 8 million people into poverty. “The result is a health loss and an increase in costs,” Ms Jones noted.

Sustainable economic growth through better health

The financial crisis and subsequent cuts to public spending have allowed the rhetoric that healthcare is an expensive strain on resources to obscure the view of healthcare as investment that delivers a double dividend, in terms of a healthy, active population, and as a source of economic growth.

Professor Klaus-Dirk Henke of the School of Economics and Management at the Technical University of Berlin, is cooperating with the Federal Statistical Office in Germany to map the economic footprint of healthcare and how spending on health promotes growth and productivity. His analyses show healthcare is more productive than Germany’s world-leading automobile sector, generating 11 per cent of gross national product, 7 per cent of exports and 15 per cent of total employment. “The same analyses could be done for the EU as a whole,” Professor Henke said.

Why health is wealth

While the observation that health is wealth is not novel, there needs to be an empirical basis to demonstrate the precise nature of the relationship between the two, said Professor Bengt Jönsson, of Stockholm School of Economics. “It goes in both directions; health produces wealth and vice versa.”

The sustainability of health systems depends on transferring resources into outcomes that

promote health, but it also requires other policies to be in line. For example, the health status of 54-74-year olds is rising, but unless the retirement age also increases, the benefits of this rise in human capital do not translate through to economic growth.

Sustaining the EU welfare model

The structures of Europe’s health and pensions systems were put in place before the destabilising influence of changing demographics came into play. Trying to make these venerable structures fit in the context of the ageing population and sustain the European welfare model is a big problem, said Professor Fabio Pammolli of the IMT Institute for Advanced Studies, in Lucca.

A debate must be opened on the imbalance between the number of young people entering the labour market and the higher number who are retiring. While current health policy is focused on dealing with financial policy, it is necessary to focus in the longer term. “We can’t approach reforms in healthcare as if they are removed from labour productivity,” Professor Pammolli said.

There is an economic dividend from healthcare expenditure and this should be factored into economic policy.

Taking stock of health and healthcare inequalities in Europe

National income is part of the reason for health disparities between countries. However, some countries have similar national incomes but different life expectancies, indicating healthcare expenditure does not provide a full explanation, said Professor Johan Mackenbach, Chair of the Department of Public Health at the University Medical Centre in Rotterdam.

Professor Mackenbach has recently completed a study of the impact of policy interventions on population health in Europe, in which he has



reviewed eleven areas of health policy including tobacco and alcohol controls, child health, food and nutrition, infectious diseases control and road safety, to find out which are the most effective in protecting health, and which countries have implemented each policy most successfully.

This analysis indicated that countries across Europe could reduce years of life lost by 30–50 per cent if they adopted and implemented each of the eleven health policies to the same standard as the country with the best practice. “This would be a huge gain,” Professor Mackenbach said.

Health and healthcare inequalities within countries

While life expectancy by country is frequently discussed, there is less examination of the variation within countries by social and economic class. “Some of the best data highlighting how large these variations can be come from the UK, showing that the top two social classes in England and Wales have a higher life expectancy than in Sweden, which is the top EU country in terms of average life expectancy,” said Professor Reinhard Busse, Head of the Department of Healthcare Management at the Technical University of Berlin.

“You would hope medical care is where the needs are, not where the money is,” Professor Busse said. However, this is not the case in Germany, for example, where – despite capacity planning measures – richer areas have more general practitioners than poor ones.

When there are equal opportunities for access, for example, being invited for free cancer screening, socioeconomic deprivation is a predictor of participation, with the lowest group being two times more likely to decline. “The introduction of an effective screening programme may result in increasing inequalities in cancer outcomes,” Busse said.

Overall, income is the best proxy for inequalities in healthcare within countries. In terms of tackling inequalities this means focussing health policies on the disadvantaged.

Improving health system productivity

“It is a daunting and difficult task, but measuring the productivity of health systems is critical to dispelling perceptions that money is badly spent and to improving efficiency,” said Professor Peter C. Smith, Co-director of the Centre for Health Policy at the Institute for Global Health Innovation, Imperial College London.

Professor Smith focussed on the need for performance information to secure productivity improvements, noting that in striving to improve productivity, it is important to distinguish between efficiency and expenditure control. The prime role of performance information in increasing efficiency, is in improving accountability. The government is in the centre as the steward, but there are many other relationships, for example between clinician, patient and provider.

“Each of these relationships needs good information to function well,” Professor Smith said. Performance information enables the various actors to make better decisions.

How innovation can transform health systems

“Research can make an important contribution to improving the productivity of health systems.” said Dr Barbara Kerstiens, Head of Sector Public Health, Directorate General for Research and Innovation of the European Commission. There is a need for a transformation that focusses on health promotion and disease prevention; cost-effective technologies and treatments; and patient-centred systems that provide safe, high-quality healthcare.

“Many of the ingredients to achieve this are in place, and there will be opportunities within the next EU R&D programme, Horizon 2020, to carry out the research needed to push through these transformations, promoting health and active ageing, improving health outcomes, reducing inequalities and supporting a competitive health sector,” Dr Kerstiēns said.

Process improvements for better capacity of health systems

Health systems currently are wasting “a huge amount of resources,” delivering at around 70 per cent of their true capacity, according to Gary Howe, a Global Head of Health at the Ernst & Young Health Care Group.

Mr Howe stressed the importance of information in identifying waste. The service level of the outpatients department of an Oslo hospital was doubled by good governance and performance reviews; in a radiology department in Canada throughput was increased at no extra cost by altering the way in which patients are processed when they arrive for an X-ray.

There is widespread potential for such process improvements that require very little investment and do not need new policies or innovation to deliver. “Organisations can do this for themselves,” Mr Howe said.

Sustainable health systems for the future

Health has been in the spotlight throughout the Lithuanian Presidency of the Council of the European Union 2013, as Vytenis Povilas Andriukaitis, Minister of Health of the Republic of Lithuania described. While there has been progress, more work is needed to promote the uptake of modern health technologies in an appropriate and cost-effective way; develop integrated healthcare models; promote patient



Vytenis Povilas Andriukaitis, Minister of Health of the Republic of Lithuania

involvement; address the issue of chronic disease and to institute health-in-all-policies at the EU level.

For Dr Hans Kluge, Director, Division of Health Systems and Public Health, WHO Regional Office for Europe, the messages from the main international health conferences of the past year are converging. The result is, “the powerful Vilnius Declaration”. The signs are that some countries are getting out of crisis mode, and it will be possible to make progress in the next five years. “It’s about making it happen: this is starting already in some countries,” Kluge said. “It is possible to run the system and simultaneously go for reforms.”

Anders Olason, President of the European Patients’ Forum, said he would leave Vilnius with a sense that, “everything is in place, including willingness. We are ready to support as patients’ groups. The Declaration is a strong document,” he said.



Sustainable Health Systems: Visions and Strategies – Zsuzsanna Jakab, Regional Director, WHO Regional Office for Europe, Vytenis Povilas Andriukaitis, the Minister of Health of the Republic of Lithuania, Martin Seychell, Deputy Director General of the Directorate-General for Health and Consumers of the European Commission, Christopher Viehbacher, President, European Federation of Pharmaceutical Industries and Associations; CEO, Sanofi



Official launch of the publications by the European Observatory on Health Systems and Policies and WHO

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