SOCIAL ENGAGEMENT FRAMEWORK FOR ADDRESSING THE CHRONIC DISEASE CHALLENGE



RELIEVING CHRONIC DISEASES FOCUS ON THE SEFAC APP FOR SENIORS

NEWSLETTER 3

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ENJOY THE READ!

1. EDITORIAL: WHERE WE ARE IN THE PROJECT?

By project coordinator Erasmus Medical Centre Rotterdam, Prof. Hein Raat, MD, PhD, MBA and Mrs. Siok Swan Tan, PhD Department of Public Health



After all our hard work in preparing the SEFAC intervention including all its features (mindfulness, social engagement, app), the most exciting part of the SEFAC project is finally about to start: we are providing the SEFAC intervention to citizens! Even though a healthy lifestyle is a popular topic, many people are struggling with much information and advice and find making consistent change difficult. We hope to show the participants in the SEFAC intervention how to reduce modifiable health risk factors and improve health protective factors to enhance wellbeing and resilience through mindfulness, coaching and personalized approaches, self-motivation and empowerment of personal resources. In the next newsletter, we will update you on the first experiences in each of the pilot cities.

2. AIMS AND LOGIC FOR CREATING A SEFAC APP

By Anastasios Rentoumis MSc, DCP, Project Manager, SEFAC project, VIDAVO

The SEFAC app assesses the stage of change of a senior person and offers mindfulness practices, lessons, inspirational tips so that the person becomes more self-aware in relation to his lifestyle choices. In addition it helps the senior to set out an action plan in order to acquire better lifestyle behaviors and in relation to social relationships, nutrition, health and physical activity. Through the plan the person can measure self – efficacy, receive tips in order to step out of the comfort zone in any or all of the aforementioned lifestyle categories of the app, set goals in any or all of the lifestyle categories, even supported to change habits related to these categories. The persons have also the possibility to learn from their activities by publishing in an online journal and they can get reminders related to their action plan.

The app is also helping researchers to monitor the mood of the seniors, and by using Ecological momentary assessment (EMA) to assess the end user's current experiences, behaviors and moods as they occur in real time and in their real-world settings.

A senior person going through a face to face mindfulness intervention program and at the same time supported by a life-changing app as in SEFAC is hypothesized to sustain the changes in lifestyle brought about by this combination and hence enjoy a better life, that has more meaning and at the same time a life with better health.

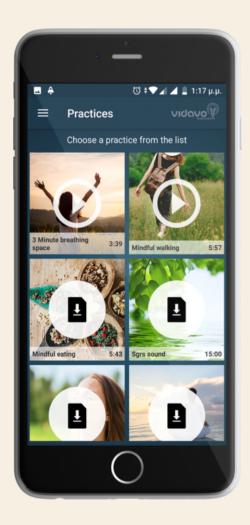
We at VIDAVO believe that a lifestyle changing program starts from each one of us. That is why the philosophy of the app focuses on those little steps and changes in everyday life we need to take in order to improve our health and most importantly, when we make these steps, not to step back but to sustain a better way of life.

It is no wonder developing a mobile app for supporting active and healthy ageing for seniors with and without chronic diseases based on mindfulness, positive psychology, behavioral change, coaching, person centred care theories, methodologies and tools was a challenge for us.

Our role in the SEFAC project, perfectly aligns with our vision and mission. We focus on prevention and we cherish health for all, everywhere, anytime!

VIDAVO has more than 18 years of experience and over the years has shown steady progress in terms of revenues, clients, projects and development and performance KPI's.

VIDAVO is an innovative e and m - health innovation SME working on developing beyond state of the art solutions to support social innovation in the fields of active and healthy ageing, the silver economy, wellness, integrated care and disease management. VIDAVO's Solutions focus on delivering positive patient outcomes instead of rewarding stakeholders for simply providing care are core to the future health landscape, and value would be placed on products, services or business models that incrementally benefit consumers and reduce costs, due to prevention.





3. TRAINING ON THE SEFAC APP: THE EXPERIENCES OF THE ISRAA TEAM

Hello, I am Stefania Macchione from ISRAA, Treviso, Italy.

The online training for users of the SEFAC App, held on December the 6th, 2018, was very clear, concise and helpful for the ISRAA team. During the training session that lasted 1 hour, the trainer from VIDAVO, Mrs. Vivi Katsouli, explained to the ISRAA team the steps for using the app as well as the reasoning behind these steps in a simple and interactive manner. The quality of the connection was very good and the Webex platform used was very professional, this allowing for an excellent and interactive session. We believe that the app is very suitable and intuitive for the aims of the project; its simplicity and usability is appropriate for the target groups of seniors in Italy. We hope that because of these characteristics, it will be easier for trainers to train the seniors, also those who are digitally inexperienced. All in all, we see a great coherence in the logic of the app; from the "URICA test" until "setting goals and habits", the app becomes a real and valuable virtual motivational coach for seniors to change their habits and step out of their comfort zone.



3. TRAINING ON THE SEFAC APP: THE EXPERIENCES OF THE MEDRI TEAM

Hi, I am Maša Knežević from the Medical School of the University of Rijeka in Croatia. On December the 18th, 2018, VIDAVO held an online training session for the MEDRI Team of SEFAC on the use of the SEFAC App. Our experiences from the training sessions were very positive. The VIDAVO trainer explained the usage, functions, tasks and activities of the application in a clear and simple manner. Connectivity was great using the Webex platform even for those team members connecting from different mobile devices. A particularly helpful tem of the training session was that VIDAVO share their screen so we could follow the voice and content on the screen at the same time. They explained all the ambiguities and we together found creative solutions to all the questions MEDRI trainers had. Our view is that the application is user friendly and easily guides the user through different contents. Users can first fill out the questionnaire and based on the current health status they get a video lesson or tip. This application helps the users to achieve and live a healthy lifestyle, change a bad habit or just get inspired through videos and mindfulness practices. This innovative approach contributes to better quality of life and better self-management of health, illness and stress.



4.OVERVIEW ON POLICY INTERVENTION OF CHRONIC DISEASES IN SHANGHAI WITH SEFAC ADVISORY BOARD REPRESENTATIVE.

By Shanlian Hu. MD. MSc. Professor School of Public Health, Fudan University

Shanghai has being facing demographic and epidemiological transition. Presently 33.2% (4.83 million) households register members of over 60 years old and 16.7% of them are over 80 years old. The three-year action plan for strengthening public health system in Shanghai (2015–2017) has been successfully completed. In 2018, "the medium-term and long-term plan for the prevention and treatment of chronic diseases in Shanghai (2018–2030)" was formulated and issued by the municipal government. The prevention and control of chronic diseases has thus been strengthened.

1. Burden of Chronic Diseases in Shanghai

The proportion of deaths caused by cancer, stroke, heart disease, chronic lower respiratory diseases, diabetes mellitus and injury poisoning in Shanghai has increased from 81.9% in 1990 to 86.7% in 2018.

According to the study of relationship between chronic diseases and economy, National Institution of Health Development Research Center reported in 2014, that 65.6% health expenditure (3.3% GDP) were used for Chronic diseases in China, among them, 77.5% health expenditure were used in treatment, only 3.2% input used in prevention.

The proportion of deaths caused by chronic diseases is as high as 86.7% of the total deaths. The burden of diseases caused by chronic diseases has accounted for more than 70% of the total burden of diseases. It has become a major public health problem affecting the economic and social development of the country.

2. Health Policies for Chronic Diseases

The General Office of the State Council has issued a medium and long-term plan for the prevention and control of chronic diseases in China (2017–2025). It is a programmatic document for the next 5-10 years to do a good job in the prevention and control of chronic diseases, improve the healthy life expectancy at birth of residents and promote the construction of a healthy China.

The "Healthy China 2030" plan outlines put forward all task requirements of "implementing the comprehensive prevention and control strategy of chronic diseases", and clearly defined the development goal of "reducing premature mortality of major chronic diseases". This is consistent with the World Health Organization's Global Plan of Action for the Prevention and Control of Non-communicable Diseases in 2013–2020 and the development goals of the United Nations sustainable development agenda, 2030. Sixteen main quantitative indicators were set up to specify the target tasks.

3. Establishment of a comprehensive prevention and treatment system for chronic diseases

Continuous improvement of the comprehensive prevention and control system of chronic diseases is essential, it will improve the health monitoring and evaluation system, risk assessment system, and establish a quality and safety monitoring network for environmental and agricultural products.

In addition, it needs to establish a comprehensive monitoring system for the prevention and control of chronic diseases that covers the whole life cycle. To promote the integration and utilization of information, such as clinical diagnosis and treatment, health examination, national physical fitness monitoring and health literacy monitoring, the local government will improve the comprehensive evaluation index system for the prevention and treatment of chronic diseases. From the organization point of view, it will optimize the whole integrative service system of medical treatment and prevention.

The policy of "four in one" means deepening and consolidating the coordinative service mode of chronic disease prevention and control among prevention institutions, hospitals, community health centers and the citizens. Disease prevention and control institutions are responsible for monitoring and epidemiological investigation of chronic diseases and their risk factors. *Medical institutions* undertake standardized diagnosis and treatment of chronic diseases and carry out clinical prevention and health education; *community health centers* play the role of "gatekeeper", rely on the family doctor contracting system and dual referral system of chronic diseases; *the citizen* plays a role as the first responsible for its own health. *All health institutions* in different levels share information at "Shanghai Health Management Cloud" platform, and carry out their independent health management work.

Shanghai established long-term care insurance system in 2018 as one of 15 pilot cities. It improves the rehabilitation and care service system, promotes the close integration of the whole process service management of chronic diseases with home-based care, community-based care and institutional care. The LTC insurance provides residents with health and oldage services, such as life care, health management, medical rehabilitation, health care and palliative care. At the meantime, health authorities encourage private sector to organize health care service institutions. Focusing on cardiovascular and cerebrovascular diseases, cancer, chronic obstructive pulmonary disease, diabetes mellitus and bone and joint diseases, it will promote the orderly convergence the rehabilitation care jointly at home, community and institutions.

4. Specific preventive and health measures

Shanghai has established eight national demonstration districts for comprehensive prevention and control of chronic diseases, including promoting the integration of medical treatment and prevention of diabetes prevention and stroke.

Fragility can lead to falls, disabilities and other diseases, which seriously threaten to the health of elderly. The incidence of fragility in Chinese communities is 11.1%. It needs to have a continuous nursing service based on the "hospital-community-family" trinity model, which has been listed as the key work of Shanghai in 2019.

5. COLLABORATION WITH SIMILAR PROJECTS



For more information: www.effichronic.eu

The project **EFFICHRONIC** aims to provide evidence on the positive return of investment and cost-efficency of the application of the Chronic Disease Self-Management Programme (CDSMP) in 5 different European countries (France, Italy, The Netherlands, Spain and UK), with a particular focus on the health, medical, social, cultural and economic factors linked with a higher burden of chronic disorders in Europe. Agreement has been made with the SEFAC consortium to have regular exchanges on the best practices collected and common webinars.



For more information: www.chrodis.eu



For more information: www.app-care.org

CHRODIS PLUS is a high level response by the Eu to support member states by stepping up together and sharing best practices to alleviate the burden of chronic diseases. This three-year initiative (2017–2020) under the third health programme (2014–2020). It is funded by the European Commission and the participating partner organization.

The **APPCARE** project involves Italy, Spain and The Netherlands, and seeks to analyse the ways to reduce hospital admissions, in particular the recurring ones. This can be done through a process of selection of the patients the very moment they enter the emergency room and through adequate local interventions, which could allow to face many health problems without hospitalizing, that always represents a stressful and risky situation for the elderly. One of the innovative aspects of the project is the analysis of the efficacy of the insertion of a Brief Intensive Observation in the services network, working as a filter for the hospital admission and as a link with the territory. In addition the final dissemination meeting is scheduled in Brussels in May 2019 in connection with the FILO project consortium meeting.

6. RELATED PARTNERS AND EU NEWS

ELISAN General Assembly - Marseille 14th November 2018

The General Assembly of the European Local Inclusion and social Action Network (ELISAN) of elected representatives and with participative status at the Council of Europe took place in Marseille on 14th November 2018 jointly with the FILO "Fighting against Loneliness" international consortium meeting. The practices collected by the FILO partners had been illustrated by the project coordinator and the politicians were able to debate about how loneliness is approached in their Regions and countries. It was also the occasion to present the SEFAC approach.



The SEFAC project high on the agenda of the ENSA General Assembly 2018 - "Eu Pillar on Social Rights: delivering at local level", Vänersborg, Sweden 5/6/7 December

With a joint collaboration between ENSA, the Veneto Region, the European Youth Care Platform and the Vänersborg Municipality, the objective of the ENSA general Assembly 2018 has been to focus on the implementation of the European Pillar of Social Rights at local level. The areas addressed have been elderly, disability, youth family and child issues. Policies, projects and practices had been collected with the purpose to include them in the civic dialogue between the European Institutions and both public and private stakeholders. The following principles were enhanced: active support to employment; Education, Training and life-long learning; Equal opportunities; Childcare and support to children; Inclusion of people with disabilities; Long-term care.



The topic of addressing the chronic disease challenge has been high on the agenda and the SEFAC engagement framework was discussed in the thematic working groups with contributions from Kerstin Seipel (Nacka municipality) and Anthony Polychronakis (city of Rotterdam). In addition the project has been included in the Brochure for the implementation of the European Pillar on Social Rights. The Representative of the EU Commission in Sweden Mr. Magnus Astberg actively contributed to the debate with a presentation of the Pillar.

Mindful workshops for health and wellbeing – 13th February 2019, Pilot site Rijeka – University of Rijeka, Faculty of Medicine (MEDRI) and the Croatian Team

On 13th February 2019 the MEDRI team from the University of Rijeka, Faculty of Medicine has started citizen's training through workshops based on mindfulness program with the main task of making participants learn how to be aware of their "own thoughts, emotions, physical sensations and actions in the present moment – without judging or criticizing yourself or your experience." (McKay, Wood & Brantley, 2007).

Four interventions groups (people over 50 at risk or having type 2 diabetes or cardiovascular diseases) were led by professional experts and volunteers. They were engaged to develop skills in citizens and to teach them how to reduce the modifiable health risk factors, improve the protective health factors and to enhance well-being and resilience through Mindfulness program which aims at improving general wellbeing, treating a number of problems, such as stress, recurrent depression, anxiety disorders, addictive behavior and chronic pain and learning how to enjoy every moment of the life.

Each MEDRI group will attend six or seven sessions during two months. MEDRI participants have just started to find ways to shift their old mental patterns and change their habits, so we wish them a lot of patience and perseverance and their story will be continued...







29th INTERNATIONAL SYMPOSIUM OF THE CROATIAN ACADEMY OF SCIENCES AND ARTS, 7th March 2019 - Presentation of the SEFAC project by MEDRI Team

As a part of the dissemination activities, MEDRI Team presented SEFAC project on March 7th, 2019 at the 29th International Symposium under the title: Hypertension highlights in 2019.

The International Symposium was organized by the Department of Biomedical sciences of the Croatian Academy of Sciences and arts and was held at the University Campus in Rijeka.

Co-organizers were: Croatian Society of Hypertension, Working group for Hypertension, Croatian Cardiac Society, University of Rijeka-Faculty of Medicine, Society for Nephrology Development and the Croatian Medical association-Branch office Rijeka.

MEDRI team presented SEFAC project to numerous participants through leaflet distribution and banner. Professor Tomislav Rukavina had an Introduction speech, Lovorka Bilajac and Vanja Vasiljev Marchesi were chairmen. In addition, Vanja Vasiljev Marchesi was an Invited speaker with the presentation: physical activity as a cornerstone of blood pressure control and health improvement. Within her power point presentation she presented SEFAC PROJECT activities to International and Croatian Health scientific audience, High education, researchers, clinicians, health professionals, public health specialists, regional and national stakeholders, members of local and regional government.





More info:

http://info.hazu.hr/upload/File/2019/U-HAZU_Symposium-on-Hypertension-Highlights_07.03_poziv.pdf https://www.facebook.com/SEFAC-MEDRI

7th International Symposium "Health for all?! "Social engagement and self- management of chronic diseases" and SEFAC Consortium Meeting - Rijeka, May 9th-10th, 2019, Faculty of Medicine, University of Rijeka

The 4th consortium meeting of the SEFAC project will be held jointly with the 7th International Symposium "Health for all?! "Social engagement and self- management of chronic diseases".

In addition, the synergies with other similar projects will be highlighted more specifically thanks to the development of the themes of EFFICHRONIC, urban health 2.0 and APPCARE health funded project. During the symposium, the topics of self-management of health, self-management of chronic diseases, volunteers in health and disease, digital health for self-management will be showcased. Furthermore, workshops on the mindfulness approach and on the engagement of volunteers to help promoting good habits and health will be organized. The four regional pilot sites Rijeka (Croatia), Treviso (Italy), Rotterdam (Netherlands) and Cornwall (UK), addressing the training of mind and body for health and wellbeing, healthy habits and a healthy mindset will be presented.



Annual Convention for Inclusive Growth 2019, "Inclusive growth post–2020: looking to the future of Social Europe – Brussels, Belgium (20/05/2019)

https://ec.europa.eu/social/main.jsp?

langId=en&catId=88&eventsId=1394&furtherEvents=yes&preview=cHJldkVtcGxQb3J0YWwhMjAxMjAyMTVwcmV2aWV3

The road to accessible health information interoperability https://www.healtheuropa.eu/health-information-interoperability/90239/

MCSS: the digital transformation of medication handling https://www.healtheuropa.eu/medication-handling/90186/

Challenges and opportunities for brain health https://www.healtheuropa.eu/brain-health/90190/

Commission makes it easier for citizens to access health data securely across borders http://europa.eu/rapid/press-release_IP-19-842_en.htm

Falsified medicines: new rules to enhance patients' safety http://europa.eu/rapid/press-release_IP-19-872_en.htm

Assessing the impact of digital transformation of health services - Report of the Expert Panel on effective ways of investing in Health (EXPH)

https://ec.europa.eu/health/expert_panel/sites/expertpanel/files/docsdir/022_digitaltran sformation_en.pdf

Register for EURORDIS Multi-Stakeholder Symposium on Improving Patients' Access to Medicine

https://www.eurordis.org/content/register-eurordis-multi-stakeholder-symposium-improving-patients-access-medicines



The SEFAC project has received funding from the European Union's Health Programme (2014–2020).