## EUROPE’S HEALTH SYSTEMS MUST BE MADE CRISIS-PROOF

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*The economic crisis and austerity programmes have had a serious impact on health budgets and on general standards of health. How can Europe’s health systems be made more resilient in the face of such crises? This question is the focus of discussions at the 16th European Health Forum Gastein (EHFG), which opened today in Bad Hofgastein. Social development and prosperity will be put at risk if austerity programmes begin to pose a danger to health systems, warned Professor Helmut Brand, President of the EHFG. For this reason, health policy must be geared towards promoting resilience and innovation.*

**Bad Hofgastein, 2 October 2013** – The impact of the economic crisis and austerity policies on European health systems and people’s health, as well as the urgent need to promote a robust, innovation-friendly health policy framework are the two central topics dominating the agenda at the European Health Forum Gastein (EHFG), which opened today in Bad Hofgastein.

„Resilient and Innovative Health Systems for Europe” is the slogan for this year's EHFG. More than 550 participants from some 45 countries are attending Europe's most important health policy conference in Bad Hofgastein to exchange views on key issues affecting European health systems.

“We have to ask ourselves where the tipping point is – the point where austerity programmes begin to present a danger to health provision and to the social safety net. The consequences of the increasing scarcity of resources on healthcare and the ways that structural reforms and innovation could be used to combat this challenge will be a defining theme of the 16th EHFG,” said EHFG President Professor Helmut Brand.

Structural social problems such as unemployment, barriers to job market entry and the resulting frustration of a jobless generation, loss of income at a time of rising living costs, and cuts in education and social services budgets all have a negative effect on health among the population, explained Professor Brand. “In countries that have been particularly hard hit by the crisis, the correlation between swingeing austerity programmes and a general decline in health – as well as a growing prevalence of mental health problems and rising cases of infectious diseases such as HIV – is especially pronounced,” he noted.

Health systems need leaner, more efficient structures in order to make best use of the more limited resources available to respond to people’s needs and support wellbeing, the EHFG President believes. “This calls for innovative approaches. Reductions in hospital funding without building up sufficient outpatient capacity, drastic cuts to medical staff and new or higher patient surcharges result directly in barriers to access and reduce efficiency, productivity and quality.”

In Catalonia in Spain the number of operations performed fell by 6 % in the first half of 2011, and waiting lists grew by 23 % in the same period, with some 17,000 people affected. And in Ireland, immediately after the onset of the financial crisis the number of patients on waiting lists jumped by 9%.

**Counterproductive staff cost savings**

Kneejerk cost cutting damages the healthcare sector and results in higher, not lower costs over the long term – as demonstrated by the consequences of cuts made to workforce costs. “In Romania, salaries were slashed by 25 % in 2010, resulting in an exodus of around 2,500 doctors from the system. 1,200 nurses are emigrating from Bulgaria each year following salary cuts of between 10 and 15 %,” said Professor Brand.  
  
**Making Europe’s health systems crisis-proof**

The EFHG President believes that health systems urgently need to be made crisis-proof, so that they can continue to meet the demands placed on them even when budgets are being tightened. “In times of economic crisis, poverty and widespread mental health problems, there is urgent need to free up the space and financial resources required for innovation. By investing in health, we also invest in general wellbeing, prosperity and economic growth. There is no other area where citizens benefit more directly from innovation,” he commented.

More than 550 conference delegates will discuss three main questions relating to this central issue over the three days of the EHFG, Professor Brand explained: “What makes health systems resilient and at the same time innovative? What are the key innovations that support resilience and performance in health systems? And how can political decision-makers best implement these innovations?”

Ensuring that health systems are suitably equipped and agile enough to respond to economic crisis is part of the 2008 Tallinn Charter adopted by the member states of the World Health Organisation (WHO) Europe Region. “This means that health policy should be based on our shared values of inclusion, solidarity and equality of opportunity; it needs to promote investment, as well as transparency and accountability for the performance of health systems. We also need to involve key stakeholders in formulating and implementing health policy,” Professor Brand stated.

Besides prioritising innovation and resilience, health policy also needs to take account of demographic and epidemiological changes, structural changes in the labour market and the growing demand for long-term care. “A social system that works effectively can cushion the negative impact of the economic and financial crisis on healthcare. All areas of policy need to take implications for health issues into account,” said the EHFG President.

In addition to tackling the issues of resilient health systems, and funding and implementing innovations, plenary sessions at the EHFG will focus on the need for targeted investment, the role played by mental health in driving productivity and economic growth, the innovative field of mHealth, and non-communicable diseases.

**EHFG Press Office**Dr Birgit Kofler  
B&K Kommunikationsberatung GmbH  
Phone during the conference: +43 6432 85105  
Mobile: +43 676 636 89 30  
Phone: Vienna Office: +43 1 319 43 78 13  
E-mail: http://www.ehfg.org/typo3conf/ext/ml_links/Resources/Public/Icons/mailto.gif [press(at)ehfg.org](javascript:linkTo_UnCryptMailto('nbjmup+qsfttAfigh/psh');)