DRIVERS, TRENDS AND SCENARIOS FOR THE FUTURE OF HEALTH IN EUROPE.
IMPRESSIONS FROM THE FRESHER PROJECT

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FORESIGHT AND MODELLING FOR EUROPEAN HEALTH POLICY AND REGULATION
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**AIT Austrian Institute of Technology**

Seibersdorf Labor GmbH

Nuclear Engineering Seibersdorf GmbH
1. Changing Health Policy & the Fresher Project
2. Scenario Building
3. Scenario Work & Policy
CHAPTER 1.

A LOOK AT THE EXISTING POLICIES

FOR THE RISK FACTORS

AND FOR THE MOST COMMON NCDs
The changing health landscape

- Scarcity of resources
- Chronic diseases, multimorbidity
- Growing expectations of patients/citizens
- Very expensive breakthrough medicines and biomedical devices
- Demographic change, population ageing

Health Systems
The FRESHER project objective is the representation of alternative futures where the detection of emerging health scenarios will be used to test future research policies to effectively tackle the NCD's burden.
Foresight

- Forward looking methods and techniques to capture interdependencies of structural long term trends (technological, economic, environmental, societal incl. demography and gender relations)
- Opening up space for dialogue, new innovative policy approaches, tool for improved decision making against the background of future environments

Microsimulation

- Projects incidence and prevalence of behavioural, biological and environmental risk factors for the development of NCDs, the burden of NCDs and the health and economic consequences
- Quantifies impacts of developed scenarios and tests policy options
TRENDS/DRIVERS

- Food labelling
- Taxation
- Innovation in medicine
- Gender medicine
- Personalized health
- Built environment
- Social networks
- Participatory health research
- Agriculture
- Pollution
- Nutrition
- Inequality/Inequity
- Education

DETERMINANTS

- Smoking
- Diet
- Physical activity
- Alcohol abuse

HEALTH INDICATION (NCD)

- Cardiovascular Diseases
- Hypertension
- Diabetes
- Obesity
- Cancer
- Depression
- Chronic lung disease
- Liver diseases
- Musculoskeletal diseases
- Chronic neurologic disorders
- Metabolic syndrome
CAUSE-EFFECT-RELATIONSHIPS - EXAMPLE

DRIVERS
New mobility
Urban planning
Exercise encouraged
Health education

Determinants
Inequity
Built environment
Safety
Workplace
Education (kids)

NCDs
(Lack of) Physical activity
heart disease
stroke
colon cancer
diabetes
breast cancer
Chronic neurologic disorders
obesity
depression

Lower risk for NCDs

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COGNITIVE FUNCTION, COGNITIVE DECLINE & DEMENTIA

Role of socioeconomic factors
• Height
• Education
• Occupation

PUBLIC HEALTH POLICY HERE

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CHAPTER 2.

A LOOK BEYOND THE EXISTING POLICIES INTO THE FUTURE –

SZENARIO BUILDING
HORIZON SCANNING –
WORKSHOPS AND LITERATURE REVIEW

From drivers to trends

Marketing and advertising
Changes in gender roles
Physical activity
Equality
Education
Demographic change
Urban development

Industrialization of food production
Nutrition

Agriculture
• Organic farming
• Chemistry and pesticides

Environment

Innovation in medicine

Social networks

Mental well-being
Depression, unemployment and stress

Social innovation

Industrialization of food production

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DEFINING THE SCENARIO SPACE

On the basis of the survey’s comments and the discussion within the consortium, the project team further reviewed the key trends to create the backbone of the FRESHER Scenarios. It was decided to:

- **Rank the most important and uncertain drivers** (“critical uncertainties”) that influence the dynamics of health and well-being, and list wild cards and seeds that could play a key role in the future of health policy. **Recognise the overarching importance of the trends related to equity and low carbon economy** due to their capacity to influence the other trends;
- **Include a driver related to economic patterns** to include dynamics that influence the future of employment and working conditions;
- **Merge the key trends related to “integration of health and agriculture policies”** and “integration of health and food trade policies” as the development of these two trends was considered strictly related.
- **Develop consistent and coherent descriptions of alternative futures** influencing the burden of key chronic diseases that reflects different perspectives on past, present, and future developments, and which can serve as a basis for policy action.
Healthy Together

Today’s priority is to promote health and well-being for all.

Governments, the private sector and citizens’ networks collaborate closely to develop solutions to promote quality of life, healthy opportunities and efficient care.

When governments take the lead, citizen participation is ensured throughout the policy making process and policy-makers, to promote equity, sustainability and human health in all policies.

- High value to leisure, sense of community and nature
- Fair incomes level up living conditions
- Recycling and sharing lowers the focus on productivity and the pressure on the environment

- A new socio-economic pattern provides for the means to take better care of one’s own health but also to care about others through informal networks and community engagement.
The Rich Get Healthier

Freedom and meritocracy are the pillars of societal structure

Market forces are dominant and a ‘light government’ guarantees their functioning. European states have privatised the health-care sector to reduce the debt and have deregulated labour to revitalise the economy. Health is now just like many other services: potentially available but expensive.

• Human health and lifestyle are left to individuals’ choices and capacities
• The more you can afford it, the better treatment you will receive, thanks to expansive medical innovations including new-generation biomedical devices
• Global protection of the environment by pricing it

❖ A socio-economic system where most of the economies are now decarbonised and climate change is under control. However, global governance focuses on achieving results, without considering level of inclusion of the solutions pursued. The demolition of welfare states has created new challenges: the growing tensions among citizens make security rise in the political agenda and the number of citizens marginalised increase
CHAPTER 3.

ZENARIOS AND POLICY MAKING
WP 5 Modelling and policy simulation

WP 3
- Scanning of drivers, trends
- Connecting, clustering drivers
- Ranking of drivers

1 High policy workshop (WP4/WP6) meeting with SAB & SC

WP 4
- Consolidation of critical trends & drivers (impact/probability)
- Development of scenarios space and stories

WP 6
- Mapping good practices
- Designing strategic options
- Building future European health

1 «Good practice workshop»
1 High level workshop (WP4/WP6)

WP 7 Dissemination and stakeholders involvement
- Developing policy making and stakeholders involvement strategy
- Mapping key policy making and stakeholders
- Definition and implementation of communication and dissemination strategy and tools
LIST OF POLICY OPTIONS FROM WORKSHOP EXAMPLE: URBANIZATION TRENDS

- Electric transport - air pollution in cities
- Increasing physical activity in workplace setting
- Access to good quality health services for urban and rural populations
- Inter-sectoral policies – ensure coherence among all urban decisions
- Equitable urban planning – green spaces and promotion of physical activity for all – address social, environmental determinants of health inequities in urban areas
- New regulations for buildings to increase opportunities for physical activity
- Cities / urban development with living areas for all ages
- Policies for community development & neighborhood development
LIST OF POLICY OPTIONS FROM WORKSHOP
EXAMPLE 2: EQUITY

✓ Inequality reduction-focus in all policies
✓ Universal basic income
✓ Decreasing prices on healthy food
✓ Accessible primary health care – reduce access barrier, ensure primary care is accessible for everyone
✓ Social welfare programs: public health on single-parent households and children; financial support for parenthood; specific approaches for subgroups in populations
✓ Education: Policy on education to increase health literacy and capability; different approaches for people with different level of literacy; from primary school onwards
✓ Financial policies for low “wellbeing index” classes
✓ Reduce out of pocket expenditure
✓ Recognition of subgroups in populations with different approaches - recognize differences in approaches, have to accept them and work with them
✓ Migrant friendly policy with focus on integration (work & welfare)
CONCLUSION

- Scenario work and microsimulation for targeting health issues of the future
- Universal approach to health
- Social determinants
- Further policy options are developed in the course of the project

FOR FURTHER INFORMATION

visit

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