
Policies for Enhancing Access to Health Services in Deprived Areas

The Healthy Municipality

MIS: 5011021

Deliverable 5.1.3

Planning and implementation of communication actions for the implementation of the prevention plan in the Municipalities of Arriani and Iasmos

Table of Contents

Prologue	3
Introduction.....	5
1. Why communication intervention in the prevention plan	7
2. The pilot prevention plan in the two Municipalities	9
3. Purpose and objectives of communication intervention	11
4. The instruments envisaged.....	12
5. The Target Groups.....	15
6. The timetable for communication intervention	16
7. Monitoring and evaluation of communication intervention	18
7.1 The objectives	18

Prologue

This "Communication Guide" was prepared in the framework of action 5.1.3 - Designing and applying communication actions for applying common plan in project areas - the project "Policies for Enhancing Access to Health Services in Deprived Areas" (Policies for the Promotion of Access to Health Services in Remote Areas) with the acronym "A Healthy Municipality" and code number MIS 5011021. This project is implemented under the Interreg V A Greece – Bulgaria 2014 – 2020 program, which is co-financed by European Union funds and 15% of the resources of the governments of the participating states (Greece and Bulgaria).

Partners involved in the project "The Healthy Municipality" are:

1. The Regional Development Agency of Rodopi S.A. (GR), as lead partner
2. The Aristotle University of Thessaloniki – Department of Economics (GR)
3. The Municipality of Arrianon, P.E. Rodopis (GR)
4. The Municipality of Iasmos, P.E. Rodopis (GR)
5. The Transnational Education and Development Company – TRANSCOOP AMPE (GR)
6. The Haskovo Regional Health Directorate (BG)
7. The Association of Municipalities of Rhodope (BG)
8. The Municipality of Krumovgrad (BG) and
9. The Municipality of Momchilgrad (BG).

The drafting of the Guide was made by InfoDim EE on the basis of the relevant contract of 22 April 2019, which was signed following a tender procedure; carried out by the Regional Development Agency of Rodopi, lead partner of the project "The Healthy Municipality".

This Guide attempts to centralize and clarify the communication actions that are planned to be implemented during the implementation of the pilot intervention (Deliverable 5.4 - Pilot application in each area) of the "Healthy Municipality", in order to make their coordination easier and their impact more effective.

The Guide avoids mentioning the general regulatory framework governing project communication actions implemented under co-funded EU programs, as this has already

been covered by the text "Communication Policy" (Deliverable 2.1.1) and which determines the form and content of all communication actions of the project.

On the contrary, this text focuses on the communication intervention of the pilot action (Deliverable 5.4) exclusively, as the success of this action depends directly on the participation of both local health actors in the two municipalities of the project and, above all, on the active participation of the local population in it.

This text refers only to the actions of the Greek side of the "Healthy Municipality", while a similar Guide is to be prepared by the Bulgarian side of the border, in order to cover the specific peculiarities of the region there and the specific needs of its companies.

Introduction

The project "The Healthy Municipality" aims to improve the access of residents of remote areas to Primary Health Care Services (PHCS), with the aim of preventing emergencies and limiting these effects on patients and their social environment, but also on the health system itself.

In particular, considering the difficulty of accessing remote areas to adequate health services, and therefore a high risk of ineffective emergency response, develops the project's methodology of a prevention system for those areas with a view to improving the PHCS provided and reducing emergencies. In this logic the benefits for patients and their family environment, the inhabitants of these areas and the health system the same is obvious.

In this context, the project describes the current situation in the 4 Municipalities (Arrianon Iasmos in the Regional Unit of Rhodope of the Region of Eastern Macedonia and Thrace in Greece, and Momchilgrad and Krumovgrad in the Kadjali region in Bulgaria) which constitute the area of application of the "Healthy Municipality", both in terms of socio-economic terms and in terms of infrastructure and services of PHCS. It then proceeds to conduct research with questionnaires as well as several medical diagnostic tests, in order to record the diseases profile of the specific areas.

By entering the data from the previous, research, phase of the project into digital maps and posting them on an online platform on the internet the project creates an infrastructure for the design of health policies for these areas and enables the programming structures to plan interventions to upgrade the services offered.

The development of a digital health card, on the other hand, for the inhabitants of the areas of the four Municipalities and its posting on a digital platform with the possibility of connecting health service providers to it (Health Centers, Doctors, Hospitals, etc.) improves the movement of information in this area, saves resources and time from the resumption of medical examinations and multiple history reception, while accelerating the provision of medical assistance to patients, significantly upgrading the functioning of the health system in the areas of the project. In addition, the integration of an early warning mechanism into patients' digital cards to encourage them to perform the appropriate tests based on their health profile and the needs of the patients, drastically reduces the occurrence of emergencies, while dramatically upgrading the provision of PHCS to the residents of the areas of the project.

The composition of all the above, diseases profiles of areas, malfunctions in the provision of PHCS and proposals for their improvement, in combination with the above digital tools, formulates a policy proposal for the upgrade of health services in the areas of the project "The Healthy Municipality".

The above policy proposal, specializing in the specificities of each area of the project, comes to test and evaluate the pilot phase of the project.

Within the framework of the pilot application, the participants of "The Healthy Municipality" are invited to operate this PHCS system, offering a range of prevention services to the residents of the areas and putting into operation the digital tools that have been developed. The evaluation of this period, the pilot operation of the PHCS system in each region, will highlight the flaws and vulnerabilities of the system developed and allow corrective interventions in it with a view to better adapting it to the needs of residents, local administration and local health structures.

The importance of the pilot phase of the project is therefore evident.

In order to make it possible, however, to make the effective exploitation of the pilot phase of the project and to deliver the desired results, it is necessary to involve the local stakeholders in the field of PHCS in each area as well as mobilization and active participation of the residents.

Taking into account the uniqueness of the objective areas of the project - remote areas, low level of development, populations with cultural uniqueness etc. - a special effort is needed in the field of communication in order to inform all local actors of the importance, benefits and functioning of the proposed policy, but also in the importance and content of the pilot phase.

This need, of intervention at the level of communication, is envisaged by this action, 5.3 Designing and applying communication actions for applying a common plan in project areas.

1. Reasons to have a communication intervention in the prevention plan

A key feature of the project "The Healthy Municipality" is that it is addressed primarily to the entirety of the local population of its application areas. Although the recipients of the project's products and results are in principle the authorities that design and implement local health policies, if the results of the project are not adopted by the relevant target groups, i.e. the results of the project. the local population, and more specifically its vulnerable groups, the benefit from the implementation of the project and hence its impact will be small.

In this sense, an important priority for the project is the presentation and explanation of its benefits and results to end-users, to the local population.

However, moreover, even before one reaches the final results and products of the "The Healthy Municipality", their pilot application is inserted, prevention policies at local level in the four areas of the project, in order to assess their positive and weak points, make the necessary adjustments and shape its final products. This stage of the project, since it has not yet been proposed as a final methodological tool to local health authorities, and is therefore under the responsibility of the project team, faces significant implementation difficulties, as this project team is called upon to implement a broad social policy without having this competence and hence the corresponding recognition as such a body. Moreover, bearing in mind that the relevant intervention, a pilot implementation, will be carried out for the first time, and therefore the target group is not familiar with it, a special effort is required to communicate and explain the intervention to the local population in order to understand the usefulness of it, but also of the project as a whole, and to participate actively in the actions of the pilot action.

Moreover, another problem that makes the need to implement a specialized communication policy imperative are the special characteristics of the municipalities in which the "The Healthy Municipality" is implemented.

The study of the recording of the areas of the project (deliverable 3.1 Population socioeconomic characteristics and operating health infra structure (desktop analysis in each area) describes the geomorphological and socio-economic characteristics of the two Municipalities on the Greek side of the cross-border region, Municipalities of Arriana and Iasmos. It can be seen there that the two municipalities, which are prominent in the Municipality of Ariana, although with a relatively small population, have a significant dispersion of their inhabitants in a significant number of settlements. In accessible areas,

which makes access and communication of their inhabitants with the municipality's center difficult.

Moreover, the socio-economic analysis of the two municipalities showed that these municipalities, which belong to the least developed regions of the country, have a high rate of illiteracy and a low level of education of the inhabitants. Moreover, a difficulty arises regarding the transfer of the project's messages to the inhabitants of its application areas, which also dictates the use of other means of communication than the usual (printed material, internet, etc.) used in the implementation of communication interventions in the framework of co-financed programmes.

Another special, social, characteristic of the population of the project implementation areas is its composition. Having recorded large percentages of muslim and pomak population in the two Municipalities (Deliverable Study 3.1) which to a significant extent, as shown by the home survey with interviews conducted by the project (Deliverable 3.2 - Research (questionnaire): Access to and degree of needs' coverage of health services in partners' areas), it is easy to understand that the use of printed communication and information material with texts (brochures) , forwards, etc.) may not have the effectiveness in informing that usually such means have.

In the same context, account should also be taken of the cultural specificities which characterize these population groups. The limited extroversion, especially of the female population, and respectively its contact with health service providers, despite the fact that the female population is a particularly important part of the target group, makes it complex to communicate with them and thus their mobilization for participation in the pilot action of the project.

Not far from the previous ones is also the element of age targeting of the project. As the most health-vulnerable social groups are older people, taking into account all the previous data (geographical isolation, cultural and social specificities, etc.) it is understood that their communication approach to the project is quite difficult.

It is thus understood from the above that the pilot implementation of the project faces significant challenges which, in order to be overcome, require specific planning in terms of communication approach, in order to address the specificities of the target areas and groups thereof and to actively participate the population in the pilot applications of the "The Healthy Municipality".

2. The pilot prevention plan in the two Municipalities

The pilot interventions in the two Municipalities, as dictated by the actions of the project that have preceded it (socio-economic registration and health research), concern the provision of services for the timely treatment of the most common diseases that occur in the target areas, so that these do not lead to an emergency with any consequences for the sufferer and his social environment, as well as the local health system. At the same time, in the trial operation of the tools – infrastructures developed by the project and in their evaluation, in order to follow corrective interventions and to develop a local prevention system under which municipalities and local health structures can prevent the occurrence of emergencies, thus substantially improving the provision of primary health care services to the residents of these , remote areas.

The most common diseases identified by the recording of socio-economic status, and to a large extent confirmed and specialized by the field survey with questionnaires to residents, concern diseases of the circulatory system, diseases of endocrinology - metabolism, mental illnesses and musculoskeletal diseases.

The operational objectives of the pilot phase concern:

- Diagnosis of diseases in vulnerable groups of the population through medical examinations and counselling
- Target group support in group sessions in order to diagnose symptoms early and adopt healthy lifestyles and
- Use of the digital tools and digital infrastructure of the project to design local prevention policies and to effectively support the population in primary health care.

In the above framework, the pilot actions of the municipality are specified in a series of interventions as follows:

- Medical examinations for 600 people in each municipality
- 2 group sessions per Municipal Unit on circulatory diseases and healthy living (diseases, disease symptoms, diagnosis tests, unhealthy habits, appropriate diet, physical activity, etc.)
- 2 group sessions per Municipal Unit on endocrinology - metabolism and healthy living diseases (diseases, disease symptoms, diagnostic tests, unhealthy habits, appropriate diet, physical activity, etc.)
- 2 group exercises per Municipal Unit for appropriate physical exercise (gymnastics, walks, etc.) of the population.

The above group sessions are mainly related to the Municipality of Ariana, while they are partially differentiated for the Municipality of Iasmos, as there are three municipal units and not four.

As far as the spatial dimension of the interventions is concerned, and as is clear from the above description of the actions, these are not implemented in one place, but are distributed in all the Municipal Units of the Municipalities. This has to do with the aim of the project to improve the services of PHCS throughout the municipality and mainly in its remote areas. Therefore, the planned actions are distributed to the entire municipality.

As regards the period of implementation of the pilot phase, this is set towards the end of the project with provision for enough time to draw conclusions, their composition at cross-border level and the formulation of a single common prevention policy methodology. Considering the project schedule and estimating the required duration of implementation of this phase in about three months, it is set to start at the beginning of December 2019 and end at the end of February 2020.

3. Purpose and objectives of communication intervention

As has already been mentioned in the introductory terms, the purpose of the communication intervention within the framework of Deliverable 5.1.3 is to support the implementation of the pilot implementation of the "The Healthy Municipality" in each area of its implementation on the Greek side of the border, in order to draw the most reliable conclusions about the usefulness of the results and products of the project and their appropriate way of operation, and then to make the necessary corrective adjustments to them.

Having thus described in the previous chapter the content of the pilot actions, communication intervention should set the following **objectives**:

- a. Broad information of the population around the project, its purpose, its objectives and its benefits to the local population
- b. Widespread information to the public on the actions of the project and for those of the pilot phase
- c. Informing the medical staff and local administration/local government of the region about the project and the digital tools it has developed
- d. Information of the individual groups the objective of each action of the pilot phase for the actions envisaged and their program of conduct.

As can be seen from the above, the communication objectives a) and (b) are horizontal in nature, as they concern the population as a whole. This objective is also aimed at the medical staff, so that it can use the entire digital infrastructure of the project, on the other hand, to act as a multiplier by promoting the use of the digital health card in the population. On the other hand, objective d) serves practical purposes of the pilot implementation, as it seeks to clearly inform the target groups about the implementation of the planned actions (what action, where, when, etc.).

4. The instruments envisaged

The means that can be used specifically for the implementation of the communication intervention on the Greek side of the "The Healthy Municipality" are specified in the relevant field in the approval application of the project (Deliverables 5.1.3, 5.3.3 and 5.4.3). In addition to this, however, it is appropriate to use other communication interventions in the context of other actions of the project in order to support multiple achievement of the communication objectives of action 5.3. Moreover, it is assumed that interventions under Deliverable 5.3, despite being allocated to more project partners, should be implemented in the two Municipalities of Greece, as well as the Bulgarian side, in a coordinated manner, in order to achieve the maximum possible benefit from their implementation (maximum publicity in The Rhodope P.E., concentration of communication power in a specific period of time, etc.).

The instruments available within the framework of 5.3, in addition to the present communication intervention plan, concern actions implemented, as far as the Greek side is concerned, partner 1, Regional Development Agency of Rodopi, and actions implemented by the two Municipalities. It is obvious that the actions of the Development Rhodope have a more global role, aiming at informing and guiding the two municipalities and the officials there, while the municipalities have a more operational character, supporting specifically the implementation of the individual actions of the pilot phase, as described in the previous chapter.

The means/actions envisaged, thus, per partner on the Greek side of the project, are as follows:

I Actions of Regional Development Agency of Rodopi S.A.

1. Preparation of this communication guide
2. Organization of an information event and
3. Publication of two press releases.

II Actions, corresponding for each of the two Municipalities

1. Create a TV spot
2. 75 poster printing
3. Publication of 2 press releases
4. Posting 3 announcements – publications on online media
5. Print 1200 forms
6. Organization of an event.

Based on the communication objectives, as set out in the previous chapter, of communication intervention, communication actions may be assigned to target them according to the table below:

A/A	Objective Action	Update for				Beneficiary
		The project in general	The actions of the pilot phase	Infrastructure and tools	The program of pilot actions	
		(a)	(b)	(c)	(d)	
1	Communication Guide					ANRO
2	Event					ANRO
3	Press Releases (I,3)					ANRO
4	Tv. Spots					Municipality
5	75 Posters					Municipality
6	2 Press releases (II,3)					Municipality
7	3 Internet posts					Municipality
8	1200 brochures					Municipality
9	Event					Municipality

Additional communication actions other than those of deliverable 5. 3 which can be used to support communication intervention are also as follows:

- For **general information – awareness** of the target groups:
 - The project website (2.1.2)
 - Brochures of publicity material (2.1.3)
 - The local information seminar (2.1.5)
 - The questionnaire survey (3.1.2) (already carried out)
 - Medical examinations under action 3.1.3
- For **special information**
 - The project website (2.1.2)
 - Networking with health service providers (4.1.5).

In addition to the above and bearing in mind the specificities of the target group, as mentioned in a previous section, considerable importance should be given to the official as well as informal channels for informing and mobilizing the local population outside the project structure.

As such are certainly the mechanisms of the Municipalities, with their official channels of communication with the local population, but also with the municipal councilors, who communicate directly with the residents. Also, other multipliers, such as sports clubs, Cultural associations, structures and spaces of social and religious aggregation (mosques, churches, cafes, etc.) can be particularly useful in the dissemination of the project and the pilot phase.

5. The Target Groups

Taking into account that the actions of the pilot intervention of the project concern both the provision and evaluation of the services in the logic of the "The Healthy Municipality" but also the evaluation of the operation of the tools and structures created by the project and aspire to be elements of a health prevention policy, as target groups for the implementation of the pilot intervention could be defined as follows. :

1. The municipalities of the area of application, with the competent deputy mayors and municipal - community councillors
 - 1) 4th DYPE
 - 2) The Region of Eastern Macedonia - Thrace
 - 3) The staff of the PHCS structures in the municipalities
 - 4) The medical and nursing staff of the Hospitals of Komotini and Alexandroupoli
 - 5) EOPYY staff in these areas, as well as private doctors
 - 6) Executives of mass organizations in the region (Associations, Organizations, etc.)
 - 7) The local population and especially the health-vulnerable groups.

The following is the correlation of communication actions with the target groups and reference is made to the implementing body of the communication action

Communication Actions and Groups Match with Action Promoter

A/A	Action	TARGET GROUP								Beneficiary
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
1	Communication Guide									ANRO
2	Event									ANRO
3	Press Releases (I,3)									ANRO
4	Tv. Spots									Municipality
5	75 Posters									Municipality
6	2 Press releases (II,3)									Municipality
7	3 posts online									Municipality
8	1200 brochures									Municipality
9	Event									Municipality

6. The timetable for communication intervention

A/A	COMMUNICATION INTERVENTION	MONTH				
		Oct 19	Nov 19	Dec 19	Jan 20	Feb 20
Within the framework of Action 5.3						
1	Communication Guide					
2	Event ANRO					
3	Press Releases (I,3) ANRO					
4	Tv. Spots					
5	75 Αφίσες					
6	2 Press releases (II,3)					
7	3 Internet posts					
8	1200 brochures					
9	Municipality Event					

A/A	COMMUNICATION INTERVENTION	MONTH				
		Oct 19	Nov 19	Dec 19	Jan 20	Feb 20
In the context of the General Publicity Actions (Work Package 2)						
For general information – awareness of the target groups:						
1	The project website (2.1.2)					
2	Brochures of publicity material (2.1.3)					
3	The local information seminar (2.1.5)					
4	The questionnaire survey (3.1.2)					
5	Medical examinations under action 3.1.3					
For special information						
6	The project website (2.1.2)					
7	Networking with health service providers (4.5)					

7. Monitoring and evaluation of communication intervention

7.1 The objectives

The monitoring and evaluation of the communication plan shall aim at ensuring the effective implementation of communication intervention.

Two aspects are considered in this context:

- the proper implementation of the communication plan
- the achievement of communication objectives.

Since the evidence of the success of a project cannot be submitted before the implementation of the project and the measurement of its results is completed, it is necessary to ensure at all stages of the project that progress, the proper implementation of the project according to its forecasts and that it works to achieve the desired results.

This logic needs to identify discrepancies through evaluation, and this leads to adjustments to the communication plan.

In particular, monitoring and evaluation are intended to enable project pilot coordinators to monitor the products and results of communication interventions in order to ensure their maximum effectiveness.

In this context, the objectives set for the monitoring/ evaluation procedures for communication actions are as follows:

1. Improve the effectiveness of the communication plan
1. To increase the ability of those involved in the pilot phase to take correction measures leading to the revision of the Communication Plan in cases where activities and results deviate from the specified objectives.

The following table shows the actions of communication intervention by the means they use, the target groups to which they are addressed and the desired results of each action, in order to make it easy to monitor their achievement.

A/A	COMMUNICATION INTERVENTION	MEDIA	PRODUCT	TARGET GROUP	EXPECTED RESULTS
1	Communication Guide	Guide	1 Issue	Pilot Action Partners (1, 3,4)	Understanding the importance of communication intervention and its actions
2	Event ANRO	Event	1 Seminar on pilot action	Municipalities, Health District Administrations, Region, Local RHA, Medical/nursing area staff, Local collectives, Local population	Information on the pilot action, awareness for active participation 50 participants
3	Press Releases (I.3) ANRO	Press Publications	2 Press releases	Local RHA, Medical/nursing area staff, Local collectives, Local population	Information on the pilot action, awareness for active participation 2000 readers
4	Tv. Spots	Advertising on TV	1 Spot, 50 views	Local RHA, Medical/nursing area staff, Local collectives, Local population	Awareness of the pilot action 5000 Viewers
5	75 Posters	Printed material	75 Posters	Local RHA, Medical/nursing area staff, Local collectives, Local population	Information on the pilot action and the action program 3500 readers
6	2 Press releases (II,3)	Press Publications	2 Press releases	Local RHA, Medical/nursing area staff, Local collectives, Local population	Information on the pilot action and the action program 2000 readers
7	3 Internet posts	Publications on the Internet	3 Posts online	Local RHA, Medical/nursing area staff, Local collectives, Local population	Information on the pilot action and the action program 1000 readers
8	1200 brochures	Printed material	1200 brochures	Local RHA, Medical/nursing area staff, Local collectives, Local population	Information on the pilot action and the action program 3000 readers
9	Event Municipality	Event	1 Seminar on the purpose and content of the pilot action	Local collectives, Local population	Information on the pilot action and the action program 50 participants