
“Policies for Enhancing Access to Health Services in Deprived Areas”

The Healthy Municipality

MIS Code: 5011021

Deliverable 3.1
Population Socioeconomic Characteristics and
Operating Health Infra structure

Specifications

Introductory Note – The position of the study in the overall project entitled "The Healthy Municipality"

The study **"Population Socioeconomic Characteristics and Operating Health Infra structure"** is foreseen in the context of the project **«Policies for Enhancing Access to Health Services in Deprived Areas – The Healthy Municipality»**, implemented as one of the approved projects of the Interreg V-A "Greece - Bulgaria 2014 - 2020" Cooperation Programme. The specific project -"The Healthy Municipality"- aims at developing a **prevention policy** in the health sector for the municipalities (local government of first-degree) with a focus on the remote areas, due to the particular conditions prevailing there, as a result of the difficulties of the local population to accessing the health care services.

The project encompasses pilot applications of preventive policies in the Municipalities of Arriana and Iasmos in Greece and the Municipalities of Krumovgrad and Momchilgrad in Bulgaria. The synthesis of the conclusions of these pilot applications is intended to contribute to developing a common methodology on a prevention policy for the local authorities of the Greece - Bulgaria Cross - Border Area, and beyond.

The partners of the project are the following:

- Regional Development Agency of Rodopi S.A. (GR), as coordinator
- Aristotle University of Thessaloniki - Department of Economics (GR)
- Municipality of Arriana (GR)
- Municipality of Iasmos (GR)
- Agency for Transnational Training and Development – TRANSCOOP (GR)
- Regional Health Inspectorate – Hascovo (BG)
- Association of Rhodope Municipalities (BG)
- Municipality of Krumovgrad (BG)
- Municipality of Momchilgrad (BG)

The project includes an extensive recording of the epidemiological characteristics of the project areas through the processing of secondary data and the application of field researches as well as through basic medical examinations at a sample of the population, so as to identify the diseases that the local population suffers from and to clarify their causes.

A comparison of the available health infrastructures in the project areas along with the accessibility to them with those at country and regional level, aims at highlighting the disadvantages and particularities of the remote areas, where the project is being implemented. Besides, conclusions on the conditions of the health systems at the various spatial levels of the countries involved in the Cross Border Program will be drawn. The same rationale applies also to the examination of the cultural or any other characteristics of the population of the project areas. In this way, it is being pursued a more complete description of the prevailing conditions in the project areas on the one hand, while on the other, the

need for prevention through customized, upon the local needs, policies as the more effective way to ensure the health of the local population is being raised.

In addition, and deepening further in the planned analysis, the study also envisages to investigate the link between the social factors - education, living standards, etc. – and the mortality - morbidity of the project area, attempting this way an integrated approach to the thematic of the population health.

This way a twofold strategy is being pursued. The extraction of the health profile of the project areas on the one hand and the design of the appropriate policies for applying targeted interventions addressing the “pathology” of the areas and the improvement of the prevention level for their populations on the other.

As obvious from the above approach, the present study captures a special position. It sets both framework and bases for analyzing the project area in terms of determining the health level of the local population. Besides it identifies the factors that affect it, whether they originate from external causes (environmental factors, morbid activities, etc.), or from the socio-economic conditions, the objective conditions (deficiencies in infrastructure, distance from health services, etc.) or from natural/ physical causes (aging, etc.).

Since the basic methodological principle of the project is the parallel, under common specifications, implementation of the interventions in the pilot areas, subject of the present text is the definition of the specifications of the study - deliverable 3.1 - so as for the involved partners to follow a common methodology and for the conclusions of the local studies to be comparable to each other.

With regard to the specific study and considering that it has to be conducted for all four pilot areas of the project, it actually refers to four different local studies, each one reflecting the conditions in each of the pilot areas.

The partners who will carry out the studies are the Department of Economics of the Aristotle University of Thessaloniki and the Agency for Transnational Training and Development – TRANSCOOP for the Greek areas, and the Regional Health Directorate of Haskovo, which will conduct the studies for the Bulgarian areas.

The present specifications have been prepared by the Agency for Transnational Training and Development – TRANSCOOP.

The Methodology of the Study

General

The social and economic factors (income, education, social environment, work environment, unemployment, poverty, social exclusion) have a particular effect on the behavior of the population in the subject of health, thus causing significant differences in both the adoption of healthy living standards and the use of the health services. Also, the environment, the quality of the infrastructure, the working – agricultural - practices etc. significantly contribute to the health status of the inhabitants of an area. And of course, the availability of infrastructure and health services is another very important chapter for effectively supporting the citizens in health issues.

The objectives of this study refer to the following:

- outlining the socio-economic profile of each project area
- examining and evaluating population health indicators
- identifying potential public health problems in each area
- recording and evaluating the available health services in the area and
- respectively defining the needs - problems that arise.

The study, as mentioned above, concerns the four pilot areas of the project “the Healthy Municipality”, thus consequently there will be prepared four different studies, one for each area.

The studies for Greece, for the Municipalities of Arriana and Iasmos shall be prepared by the Aristotle University of Thessaloniki and the Agency for Transnational Training and Development – TRANSCOOP - (partners PB2 and PB6 respectively in the project), the studies for Bulgaria, for the Municipalities of Krumovgrad and Momchilgrad, shall be prepared by the Regional Health Inspectorate of Haskovo.

The content of the study

The study is articulated in six chapters and the corresponding annexes as presented in the following structure.

Chapter 1: General Characteristics of the area

- 1.1 Geographical – geomorphological characteristics**
- 1.2 The Administrative structure (Municipalities, Communities), Principal settlements**
- 1.3 Climate Data**
- 1.4 The Road and transportation infrastructure and the transport connections**
- 1.5 Problems identified**
- 1.6 Synthesis of Chapter 1**

Chapter 2: The Socio-Economic Characteristics of the area

2.1 Demographic and Social Characteristics

- 2.1.1 Population (per Municipality, Municipal Unit, Municipal Community, evolution 2001-2011)
- 2.1.2 Age synthesis, by Municipality, Municipal Unit, Municipal Community by 2011
- 2.1.3 Aging index, dependency index (children 0-14 years old, over 65 years old)
- 2.1.4 Population by gender (by Municipality, Municipal Unit, Municipal Community) by 2011
- 2.1.5 Evolution of Births, per Municipality
- 2.1.6 Education Level , evolution, per Municipality, Municipal Unit
- 2.1.7 Economically active population, evolution (by Municipality, Municipal Unit, Municipal Community if available)
- 2.1.8 Unemployment, evolution per Municipality, Municipal Unit, Municipal Community if available
- 2.1.9 Housing characteristics per Municipality 2011 (in-room toilet, kitchen, heating, internet access)
- 2.1.10 Population below poverty line
- 2.1.11 School drop outs

2.2 Economic data

- 2.2.1 GDP per capita, evolution, in the Prefecture and the Region
- 2.2.2 GVA by sector, evolution, in the Prefecture and the Region
- 2.2.3 Economic Activities (descriptive)
- 2.2.4 Employment, evolution, by branch of economic activity, per Municipality
- 2.2.5 Main features of rural activity
- 2.2.6 Main features of the secondary sector
- 2.2.7 Main features of the tertiary sector

2.3 Particular Characteristics of the area

- 2.3.1 Special population groups
- 2.3.2 Cultural - social particularities
- 2.3.3 Other

2.4 Problems identified

2.5 Synthesis of Chapter 2

Chapter 3: Population Health Characteristics

3.1 Mortality rate, deaths by place of residence, evolution, in the Region, Prefecture, per Municipality if available

3.2 Infant mortality rate, evolution, in the Region, Prefecture, per Municipality (if data are available)

3.3 Percentage of perinatal mortality, evolution, in the Region, Prefecture, by Municipality (if data are available)

3.4 Percentage of mortality by main causes (number of deaths, evolution, Key causes of death (Circulatory Diseases, Respiratory Diseases, Malignant Neoplasms, etc.) and evolution, in the Region, Prefecture, per Municipality (if data are available)

3.5 Life expectancy at birth, by sex, evolution, in the Region, Prefecture, per Municipality (if data are available)

3.6 Life expectancy at the age of 65, by sex, evolution, in the Region, in Prefecture, per Municipality (if data are available)

3.7 Patients discharged by category of disease and area (, in the Region, Prefecture, by Municipality if available) over the last three years (data from research at the resp. hospital)

3.8 Main diagnosis by area (local community) over the last three years (data from research at the Health Centers and the Regional or Rural Medical Offices)

3.9 Problems identified

3.10 Synthesis of Chapter 3

Chapter 4: Health and Welfare Services in the Area

4.1 The Infrastructure - Health Services (Health Care Provision)

4.1.1 Structure of the Health System

A) in the Country

B) in the Area

4.1.2 Hospitals in the area - Subjects that they cover- Medical staff- Equipment - Needs, etc.

4.1.3 Health Centers in the Area - Subjects that they cover- Medical Staff - Equipment - Needs, etc.

4.1.4 Regional - Rural Medical Centers in the area - Subjects that they cover - Medical Staff - Equipment - Needs, etc.

4.1.5 Private clinics

4.1.6 Private Doctors

4.1.7 Distances of settlements from the health services in the area

4.1.8 The services foreseen by the new Law (Law 4486/17) (for Greece) on primary health care and the coverage of the area

4.2 Health Service Provision - Indicators

4.2.1 Physicians per 1000 inhabitants (in the Prefecture, per Municipality, if data are available)

4.2.2 Nurses per 1000 inhabitants (in the Prefecture, per Municipality, if data are available)

4.2.3 Hospital beds per 1000 inhabitants (in the Prefecture, per Municipality, if data are available)

4.2.4 Number of people using health services / 1000 residents (in the Prefecture, per Municipality, if data are available)

4.2.5 Number of persons hospitalized / 1000 inhabitants (in the Prefecture, per Municipality, if data are available)

4.3 Health Programs in the Area by other Institutions

4.3.1 Health programs by the Municipality (vaccinations, information events, programs for the elderly, etc.)

4.3.2 Health Programs by Other Organizations

4.3.3 Prevention policies in the area

4.4 Infrastructure - Welfare Services in the Area

4.4.1 Kindergartens

4.4.2 Children's Creative Centers

4.4.3 Elderly Care Units

4.4.4 Welfare Programs by the Municipality ("Help at Home program" etc.)

4.5 Other Infrastructures - Services related to Health in the Area

4.5.1 Sport facilities

4.5.2 Cultural sites

4.6 Problems identified

4.7 Synthesis of Chapter 4

Chapter 5: The Public Health in the Area

5.1 Status of Water Supply Infrastructure (Safe Drinking Water), Sewage system

5.2 Status of Environmental Infrastructure - Environmental Risks

5.3 Insecticide (mosquitoes etc.)

5.4 Agricultural practices, irrigation methods

5.5 Livestock farming, carcasses, waste pollution causes

5.6 Living conditions

5.7 Industries causing problems

5.8 Management of solid and liquid waste

5.9 Other

5.10 Problems identified

5.11 Synthesis of Chapter 5

Chapter 6: Conclusions on the Area

Annexes

The Data and the Sources

Potential sources for the data needed for the study could be:

- The National Statistic Authorities, the EUROSTAT,
- The Operational Programs of the Municipalities,
- The Operational Programs of the Regions,
- The Medical Associations, the Municipalities,
- Studies conducted for the area,
- Surveys conducted by the Health Services,
- Interviews with local actors.

The data should show both the evolution of the different characteristic data – indicators on the one hand and on the other they should allow comparisons with the wider area so that conclusions can be drawn for the application areas.

Appropriate tables and diagrams should facilitate the comparisons and the opinion building.

The Text Format

The studies will be written in Greek / Bulgarian respectively. The conclusions of each chapter in each study will be also translated in English, so as to enable the synthesis of the results at project level.

Where needed, the bibliography sources will be listed at the bottom of the page in the form of notes.

Tables and figures shall support the study, while the main text should be simple and substantial.

The studies will be written in a font character Calibri, size 11 with a line space 17

Paragraphs will be separated from each other by a space 6.

The text will be justified to the page margins.

The texts will bear the title of the study as a header and the title of the project as a footer.

The logo of the Program and the name of the Beneficiary will be placed on front page.