

**YOUNG 50**

**YOUNG 50 #Stay Healthy – Cardiovascular Risk Prevention**

**Grant Agreement number: 847130**

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# Layman version of the executive summary final report

## Beneficiaries

Country	Name	Acronym
Italy	Azienda ULSS 6 Euganea	ULSS6 Euganea
Italy	Azienda ULSS 4 Veneto Orientale	ULSS4 V. Orient - ProMIS
Luxembourg	Ministère de la Santé	MOHLUX
Luxembourg	Luxembourg Institute of Health	LIH
Lithuania	Viesoji Istaiga Centro Poliklinika	Centro Poliklinika
Romania	Asociata Aer Pur Romania	AER PUR ROMANIA
Spain	Asociacion Instituto de Investigacion en Servicios de Salud Kronikgune	KRONIKGUNE

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<b>Author(s)</b>	ProMIS
<b>Deliverable lead partner</b>	ProMIS
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# YOUNG50

**#Stay Healthy - Cardiovascular  
Risk Prevention**

Layman's report

## From CARDIO50 to YOUNG50

In 2013 an organized Cardiovascular risk screening program designed for active prevention in fifty-year-olds (**CARDIO50**) was launched in **Italy**. The entire eligible target population of the participating Local Health Authorities from Veneto region was invited to participate in the screening and prevention program.

The CARDIO50 good practice is an intervention focused on changing unhealthy lifestyles and increasing knowledge and perceptions of the risks of CVD by estimating cardiovascular risk among the 50-year-old population.

CARDIO 50 is focused on active cardiovascular prevention and risk factor identification, such as smoking, hypertension, hyperglycaemia, high cholesterol, abdominal obesity.

Building awareness of the protective effects of eating fruit, vegetables and fish, regular physical activity, moderate alcohol consumption and smoking cessation is a key result of this practice.

Starting from the CARDIO50 experience, in 2019 the aim of the YOUNG50 project was to transfer this Italian best practice to **Lithuania, Romania, and Luxembourg** among 50-year-olds.

Its objectives were:

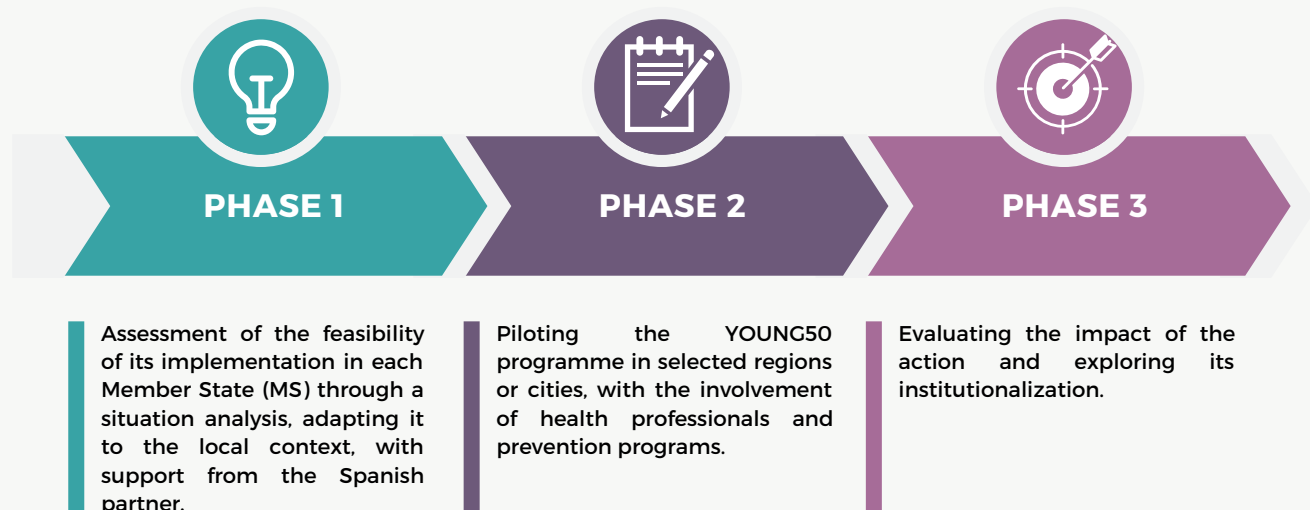
- adapt and export the CARDIO50 screening model to the above Member States (MS);
- affect the risk factors of cardiovascular, behavioural and medical diseases;
- refine their screening models, through comparisons among the MS participating in the project, with a view to obtaining maximum performance, sustainability and dissemination.

The outcomes deriving from attainment of these objectives were expected, on the one hand, to enhance the tools used in CVD prevention in participating MS, and on the other hand, to directly improve the health of the screened population.

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## YOUNG50 IMPLEMENTATION 3 PHASES



# YOUNG50 partnership

## Azienda ULSS6 Euganea - Veneto Region (ITA)

ULSS6 Euganea is a Local Health Authority and part of the Regional and National Health System that provides health and social services to its territory which covers the whole province of Padua comprising 101 municipalities and a population of approximately 945,000 inhabitants. It was appointed by the Veneto Region to act as coordinator of this project for the region.

## ProMIS - Programma Mattone Internazionale Salute (ITA)

ProMIS is an institutionalized Italian Network led by Veneto Region, involving 20 Italian Regions, as well as the Ministry of Health. ProMIS' mission is to strengthen the internationalisation of the Italian Healthcare System, promoting and supporting the "Health in all policies" approach.

## Ministry of Health in Luxembourg (LUX)

The institution is in charge of promoting and protecting the health of people living and working in Luxembourg. Therefore, the Ministry is competent and has experience in almost every domain linked to health issues. On the theme of cardiovascular diseases, the Ministry coordinates various actions designed to improve the quality of care delivered.

## Luxembourg Institute of Health (LUX)

The institution is a public biomedical research organisation focused on precision health and invested in becoming a leading reference centre in Europe for the translation of scientific

excellence into meaningful benefits for patients. LIH places the patient at the heart of all its activities, driven by a collective obligation towards society to use knowledge and technology.

## Centro poliklinika (LIT)

The organisation provides integrated primary care services to patients. CP provides services for almost 135 000 patients. Each year more than 1 million patients from all over Lithuania visit it. CP covers almost 6 percent of the whole state population. The delivery of these services is based on a variety of multidisciplinary specialists.

## Asociatia Aer Pur Romania (ROM)

Non-governmental and non-profit organization involved in the field of tobacco control and health promotion. It is actively involved in activities of advocacy, capacity building and training of health professionals in the field of tobacco control, development, implementation and evaluation of projects for smoking prevention and cessation and prevention of chronic diseases.

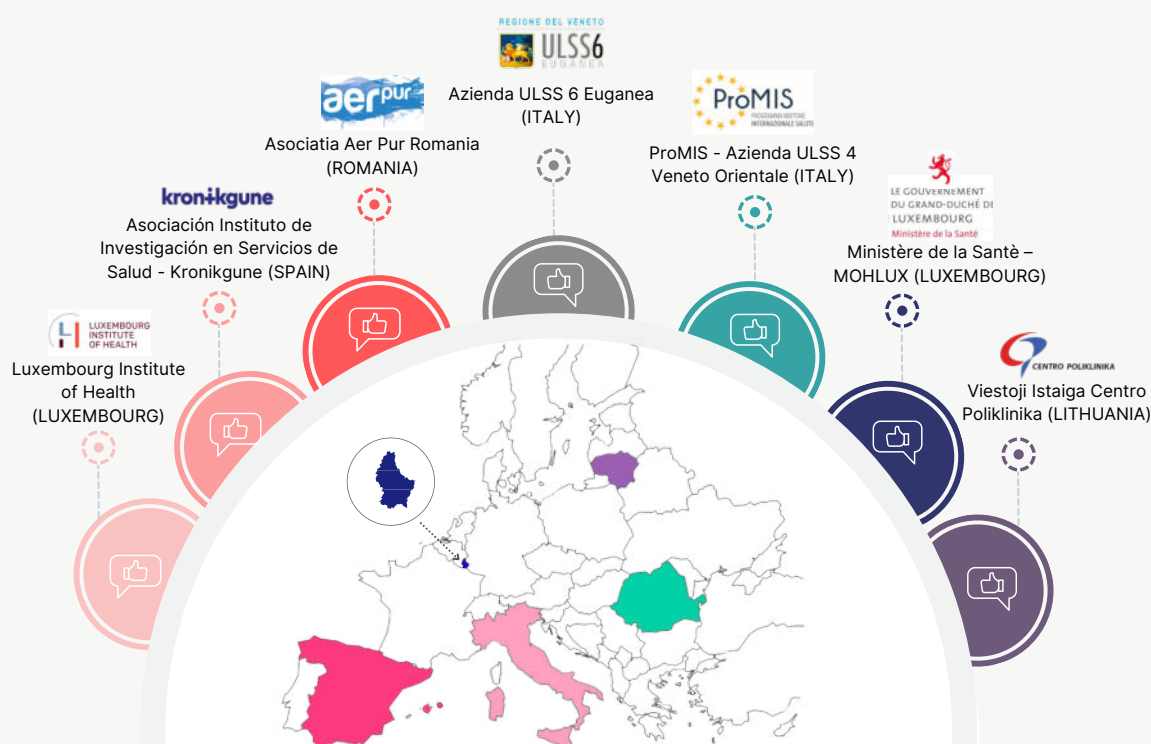
## Kronikgune (SPA)

The research centre on chronicity enables innovative practices and the structured generation of scientific evidence regarding chronicity and health services sustainability. It analyses strategies for health promotion; studies stratification models and their usefulness to predict needs and adequacy of resources for chronic patient.

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## QUALITY OF PARTNERSHIP



Co-funded by the Health Programme of the European Union

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<https://www.young50.eu/>

## Adoption of CARDIO50 in Romania, Lithuania and Luxembourg

### ROMANIA

In Romania, one of the key actions for the success of the project has been the close cooperation between non-governmental organizations, academia and GPs. Patients have been contacted through their GP with the aim of establishing a trusting relationship from the beginning of the project. In order to perform their clinical practice GPs have provided a space for the screening, enabling the project to be conducted more efficiently. The screening was performed by medical doctors from NGO Aer Pur Romania and Iuliu Hatieganu University of Medicine and Pharmacy. Since participants could not be redirected to other educational programmes/activities offered for free for healthy lifestyle promotion, the MDs from NGO Aer Pur Romania developed educational tools/materials.

### LITHUANIA

Lithuania owns a national cardiovascular programme which is currently active nationwide. Young50 has been identified as a complementary project that could coexist with the current national programme, adding new activities and therefore strengthening the results. Young50 has been implemented in Lithuania by the healthcare professionals belonging to the hospital. In terms of medical staff, nurses were in charge of programme development. Dissemination activities have played a relevant role in facilitating the knowledge of the programme among the involved stakeholders. Ad-hoc training was needed to ensure the quality of the results in Young50 and it is believed that training should follow the national training system to guarantee quality in the future.

### LUXEMBOURG

In Luxembourg, experienced GPs, who were directly contacted by the Directorate of Health of the Ministry of Health, have been the healthcare professionals working in the project. Furthermore, specific roles were developed to create a safe environment for the GP. Due to language diversity in Luxembourg, all the materials have been translated into French, English, German and Portuguese by the project team with the aim of reaching the highest number of citizens. As the patients were directly contacted by the GPs, the ones joining the programme were highly motivated and involved in the participation. The programme has been successful in Luxembourg and reported to be very pertinent by the GPs.

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## MEMBER STATES INVOLVED



## YOUNG50 objectives



**3 pilot sites** achieved the main goal of transferring CARDIO50



**1,000** individuals invited



**1400** leaflets



**54%** persons agreed



**270** among webinars and workshops



**45.93%** of the invited people attended in total



**250** stakeholders were engaged in project activities



**7** steering committee meetings



**40** coordination meetings



**Short and mid-term analysis** performed



**Policy guidelines** prepared to foster sustainability



**YOUNG50 APP** deployment

## YOUNG50 lessons learnt

In the 4 countries involved there has been a common acknowledgment that YOUNG50 has increased the awareness of the risk of cardiovascular disease, through information activities, education and counselling to promote a healthy lifestyle.

All the countries have highlighted that the **good collaboration between partners** has been a fundamental aspect, as well as the flexibility in the implementation, considering the presence of different national contexts.

Working with other organizations and building a network has been an added value that allowed Young50 partners to give specific assistance to participants (e.g., smoking support programs).

Based on the Young50 journey it is worth making some essential recommendations to help guide future implementers or efforts to scale up the program.

**Build trust** with the people involved in the implementation.

**Involve actively the health authorities** from the beginning in order to be aligned with country level policies and priorities.

**Sound networks** help to share successes and solutions and catalyze scaling-up of the program.

**Effective strategies for engagement of key stakeholders** are crucial to the success and sustainability of any project.

**Understand what matters** to communities, what are the social challenges they face and how these are ultimately reflected in health and access to healthcare.

**Build on existing projects** and seek to exploit synergies on prior initiatives.

**Use a concrete methodology for implementation** to facilitate the transfer of the intervention and provide robustness and rigour to the process.

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## YOUNG50 TEAM





# Sustainability of Young50 in the project countries

Project partner countries (Italy, Romania, Lithuania and Luxembourg) can make significant progress in reducing the burden of cardiovascular diseases and improving the cardiovascular health of their populations. These efforts require a multi-sectoral approach, strong collaborations, and sustained commitment from governments, healthcare providers, and communities.

## ITALY (Veneto Region)

- LHA ULSS 6 Euganea should foster stronger partnerships with key organizations such as the University of Padua, other local health authorities, the European Society of Cardiology (ESC).
- Align with National Prevention Plans: Leverage the National Prevention Plan (PNP) 2020-2025 to align the objectives and strategies of the Young50 project with the national policy framework. Collaborate with the Ministry of Health.
- Capitalize on existing programmes: Integrate the Young50 project with existing screening and health prevention programmes at the regional and national levels.
- Promote transferability and scalability: Plan for the long-term growth and sustainability of the Young50 programme beyond its project lifespan.
- Integrate prevention initiatives for cardiovascular diseases with the on-going investments of Mission 6 of the Recovery and Resilience Facility.

## ROMANIA

- Strengthening Policy Integration: Based on the experience and the developed tools, Young50 qualifies for the integration into existing national health policies and strategies.
- Primary Healthcare Providers: The active engagement of primary healthcare providers, such as family doctors, was crucial for the successful implementation of the Young50 project in Romania and could play an important role for its continuation.
- Strengthening Screening Programmes: The Ministry of Health / National Institute of Public Health should develop & implement long term strategies for comprehensive screening programmes to identify individuals at high risk of developing CVDs.
- Mobilizing Community Engagement: Cooperation between Ministry of Health/National Institute of Public Health, academic institutions, non-governmental organizations should be encouraged to assure the scientific/educational/ financial and logistic support to actively involve communities in the implementation of educational programs for CVD prevention.
- Implementing School-Based Interventions: Aer Pur Romania, academia, governmental organizations and schools should continue promoting health activities, by including school based educational programs for chronic diseases prevention.

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## LITHUANIA

- Enhancing Public Awareness and Education: To ensure the successful implementation of the Young50 project in Lithuania, it is crucial to prioritize public awareness and education. Centro Poliklinika should develop comprehensive awareness campaigns targeting both the general population and high-risk groups, emphasizing the importance of early detection and prevention of CVDs.
- Collaboration with Primary Healthcare Providers: Centro Poliklinika should establish strong collaborations with primary healthcare providers, such as family doctors and GPs, to facilitate the integration of the Young50 project into routine healthcare practices.
- Strengthening Data Collection and Analysis: A robust data collection and analysis system should be developed and implemented to monitor the outcomes and impact of the Young50 project in Lithuania.
- Leveraging Technology and Digital Solutions: Lithuania should leverage technology and digital solutions to enhance the reach and efficiency of the Young50 project.
- Building Partnerships and Securing Funding: Centro Poliklinika should actively seek partnerships with relevant stakeholders, including government agencies, non-governmental organizations, and private sector entities, to ensure the sustainable implementation of Young50.

## LUXEMBOURG

- Integration and Synergy with Existing Programs: it is recommended that Luxembourg strategically integrate the Young50 project into existing national prevention programs. By integrating the Young50 project within the broader healthcare landscape, Luxembourg can optimize the impact of preventive initiatives.
- Strengthening the Legal Framework: Luxembourg has a strong legal framework in place, as evidenced by the existing legal documents related to health, preventive medicine, and patient rights. It is recommended that Luxembourg periodically review and update these legal documents.
- Enhancing Collaboration with General Practitioners (GPs): GPs play a vital role in healthcare delivery and preventive interventions. It is recommended that Luxembourg further strengthen collaboration with GPs to support the integration of the Young50 project.
- Ensuring Financial and Institutional Sustainability: To ensure the long-term financial and institutional sustainability of the Young50 project, it is essential for Luxembourg to maintain political willpower and investment in the programme. Luxembourg should continue to prioritize the project's financial sustainability, exploring additional funding opportunities from both public and private sources.



# How to transfer YOUNG50 in the European Union

In order to guarantee the long-term sustainability of YOUNG50 through the integration of screening and prevention interventions into Member States' regional and national policy planning, YOUNG50 has produced guidelines providing recommendations for reinforcing the resilience of MS healthcare systems. **Leveraging the transferability of the Young50 programme, MS could reinforce the resilience of healthcare systems**, equipping them with the capability to effectively address the burden posed by preventable cardiovascular conditions.

## 1. Synergistic Approach and Policy Coherence

The transferability of the Young50 cardiovascular prevention program at the EU level is ensured by the adoption of a person-centered and integrated approach, which encompasses synergistic collaboration, policy coherence, intersectoral action, and comprehensive services. This approach guarantees the empowerment of individuals as partners in decision-making.

## 2. Strengthening the Relationship with General Practitioners

To enhance the effectiveness of screening programs, it is crucial to motivate and engage medical doctors at primary care facilities to take a leading role in supporting the implementation and enhancement of the screening program.

## 3. Long-Term Perspective

Achievement of substantial progress in areas such as CVD control through regulation of tobacco, alcohol, and consumption of sugar, salt, and processed food etc. requires a sustained effort over extended periods. Short-sightedness should be avoided, ensuring that projects and initiatives are developed with a long-term perspective in mind.

## 4. Predictive Strategies

A shift from a reactive approach to a predictive one is required. Investment in research and analysis is needed to identify emerging challenges and trends in CVD prevention and risk factor control in order to allow proactive measures to be taken (e.g. regulations and policies to address new products and industry tactics).

## 5. Evidence-Based Screening Programs and Basic Care

The implementation of evidence-based population-based screening programs is vital in maximizing the transferability of the Young50 program for early recognition and prevention of cardiovascular diseases. By enhancing the coverage and equity in basic care, individuals could be provided with the necessary resources for effective prevention and treatment of cardiovascular diseases.

## 6. Coordinated Care and Access Improvement

A coordinated, multidisciplinary approach is essential in the assessment, management, and early rehabilitation of cardiovascular conditions. Implementing such an approach ensures that individuals receive comprehensive and timely care early, leading to better health outcomes.

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## 7. Comprehensive Approach for Effective Transferability and Knowledge Sharing

Sharing initiatives and practices across countries and networks is crucial for promoting transferability in order to promote successful services and avoid replicating mistakes. A dedicated platform should be created to facilitate the spread and application of results across countries. The adoption of intersectoral and intrasectoral collaborations ensure effective and sound approaches.

## 8. Surveillance and Monitoring

It is important to establish surveillance and monitoring systems at national level in order to strengthen the collection and analysis of data on non-communicable diseases. It is crucial to harmonize indicators and case definitions to facilitate meaningful comparisons and highlight evolving trends and inequalities. Gender norms, values and biases in healthcare systems should be examined to ensure equitable outcomes.

## 9. Strengthening Public Health Capacity and Consistent Financing

Strengthening public health capacity and services is paramount in addressing non-communicable diseases in general and maximizing the transferability of the Young50 program in particular. This requires investment in adequately trained personnel who specialize in prevention.

New approaches to training, deployment, and management of healthcare personnel should be explored to optimize their effectiveness. Furthermore, consistent and specific financing (both national and international) is necessary to support health promotion and primary prevention initiatives.

## 10. Political Leadership and Partnership Approach

Political leaders must provide clear and unwavering support for health promotion initiatives. They should prioritise prevention and early intervention in healthcare, recognizing their importance in reducing the burden of cardiovascular diseases. Collaboration and partnerships with other projects, networks, and patient organizations are vital to understand different contexts and share experiences. The partnership with organizations dealing with key stakeholders is crucial for effective screening. Moreover, partnerships with regional / local health authorities and networks is essential to ensure that awareness-raising information campaigns reach a wide population to ensure the program's reach and encourage active participation from individuals and communities.

## 11. Fostering Equity

Communications must be carefully tailored to the target audience. The approach may need to be further personalised to reach upper versus lower socioeconomic and educational subgroups.

