Evaluation of Border Regions in the European Union (EUREGIO)

Grant Agreement Nº 2003104

First Interim Report

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July 2005

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Content

1. Introduction: Objectives and Concept of the "EUREGIO" Project ............... 1
   1.1 Objectives ........................................................................................................... 1
   1.2 Concept ............................................................................................................... 2
2. Project Group and Meetings of Project Group ............................................. 3
3. Public Presentation of the "EUREGIO" Project .............................................. 4
   4.1 Survey Conducted among Cross-Border Structures and Interreg-Secretariats .... 5
      - Method
      - Response Rate
      - First Results
   4.2 Survey on cross-border health-related projects ............................................ 8
      - Method
      - Response Rate
      - First Results
5. Working Steps of Next Project Phase ............................................................ 9
   5.1 Workshop ......................................................................................................... 9
   5.2 Interviews ....................................................................................................... 9
   5.3 Presentations .................................................................................................. 10
6. Summary ......................................................................................................... 10
7. Enclosures ....................................................................................................... 11
1. Introduction: Objectives and Concept of the "EUREGIO" Project

European border regions have already carried out quite a number of cross-border health care projects. These projects are among other things aimed at reducing obstacles to cross-border health care provision and at improving the situation of life of the people living in the border regions. In addition to projects focussed on health care provision, projects on other health-relevant issues such as for example in the field of addiction and AIDS prevention have been and are being carried out. The health issue is however not given the same importance in all border regions. There are even border regions in which health is no issue at all. The reasons for this are manifold in nature. Representatives of the "Euregio" EU project group suppose that due to its complex nature the health issue is only being dealt with by the more experienced Euregios.

In addition to projects, a number of further health-relevant activities are being carried out in the health sector by the border regions. These include conferences, workshops and other events, the conclusion of cross-border agreements as well as the setting up of subject-specific working groups.

1.1 Objectives

New political, economic and social developments leading to an enlarged EU call for a review and adaptation of present activities which could find a starting point particularly in cross-border cooperation between directly neighbouring border regions.

Objectives of the "EUREGIO" Project:
- To provide an overview of existing cross-border health-related activities in Europe
- To evaluate existing cross-border projects
- To identify "models of good practice"
- To support cooperation between existing and future projects through the dissemination of information, experiences and models of good practice
- To generate hypotheses on supporting and hindering factors

The "EUREGIO" Project is aimed at gathering experiences made in numerous cross-border health-relevant initiatives and projects in Europe and at presenting them in the form of a clearly structured model. For this purpose, above all surveys conducted in writing as well as supplementary internet and literature reviews are being carried out. The recorded projects and activities are being evaluated in a common effort together with the project partners in order to identify best practice models. Moreover, hypotheses on supporting and hindering factors of cross-border cooperation are being developed.
The information and results gained under this project can be used by other Euregios and thus lead to synergy effects. The implemented models, their procedures and results will provide a contribution to strengthening the network established among all those involved in the health care sector since the acquisition of information (e.g. contact partners) will become much easier.

It is expected that as a result of the project the Euregios will show more interest in health projects and positive, successful examples of other Euregios will lead to more competition. Moreover, collecting the results of the model projects can support the reflection process of the EU on patient mobility and the future provision of health care services in the EU.

1.2 Concept

To reach these objectives, questionnaires were sent to the Interreg IIIA-Secretariats, Euregios/Euroregions and to project bodies responsible for cross-border health care projects (see enclosures 2, 3 and 4). Based on this information, a number of criteria will be used to select 40 projects (see enclosure 5) whose representatives will be invited to a workshop to present their projects. In the further course of the project, the ten most interesting activities will be selected from these 40 projects and interviews for a reality check be conducted with their representatives. Finally, a Euregio Conference is planned at the beginning of the year 2007, at which the three "best" projects will among other things be presented. Picture 1 gives an overview of the conceptual model of the Project.

<table>
<thead>
<tr>
<th>Picture 1: Conceptual Model of the Project</th>
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<tbody>
<tr>
<td><strong>Dispatching of Questionnaires to Interreg-Secretariats, Euregios/Euroregions and Health-Related Cross-Border Projects</strong></td>
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<tr>
<td><strong>Criteria for Evaluation</strong></td>
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<td><strong>Sampling, Analyses and Evaluation</strong></td>
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<td><strong>Hypotheses: Promoting and Hindering Factors</strong></td>
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<td><strong>Models of Good Practice</strong></td>
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</tbody>
</table>
2. Project Group and Meetings of Project Group

The project group of the "EUREGIO" Project comprises representatives from nine institutions. Already at the beginning of the project, the German-Polish Health Academy dealing with German-Polish Cooperation in the field of health care was included in the project group, in addition to the project partners mentioned in the project application. The members of the project group are listed in table 1.

Table 1: Members of the "EUREGIO" Project Group

<table>
<thead>
<tr>
<th>Institute of Public Health NRW (lög)</th>
<th>Ministry of Labour, Health and Social Affairs of North Rhine-Westphalia (MAGS)¹</th>
</tr>
</thead>
</table>
| Dr. Helmut Brand (Projectleader), Ulrike Wolf (Project Coordinator) | Dr. Birgit Weihrauch
| Westerfeldstr. 35/37 | Fürstenwall 25
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<table>
<thead>
<tr>
<th>AOK Rheinland</th>
<th>Municipal Health Service County of Heinsberg</th>
</tr>
</thead>
</table>
| Hans-Willi Schemken | Dr. Karl-Heinz Feldhoff
| Kasernenstraße 61, D-40213 Düsseldorf | Valkenburger Str. 45
| Deutschland | 52525 Heinsberg
| Deutschland | Deutschland |

<table>
<thead>
<tr>
<th>University of Applied Sciences</th>
<th>Association of European Border Regions (AEBR)</th>
</tr>
</thead>
</table>
| Prof. Dr. Angela Brand | Jens Gabbe, Secretary General
| Kurt-Schumacher-Str. 6 | Enscheder Str. 362
| 33615 Bielefeld | 48599 Gronau
| Deutschland | Deutschland |

<table>
<thead>
<tr>
<th>Standing Committee of the Hospitals of the European Union (HOPE)</th>
<th>European Public Health Centre (EPHC)</th>
</tr>
</thead>
</table>
| Pascal Garel, Secretary General | Dr. Wolfgang Klitzsch, Chairman
| Bd. A. Reyers 207-209, b7 | Postfach 201012,
| 1030 Brussels | 33548 Bielefeld
| Belgien² | Deutschland |

| German-Polish Health Academy | |
|-----------------------------||
| Detlef Lischka, President | |
| C.-A.-Groesche-Str.9 | |
| 03149 Forst | |
| Deutschland | |

Among other things, the project group has the task of accompanying the project as an adviser, of preparing and actively taking part in events such as the January 2006 workshop and the January 2007 final workshop, of actively supporting the selection of projects and activities as well as contributing to the development of hypotheses on supporting and hindering factors of cross-border cooperation. Conferences and meetings as well as an

¹ After the election in North Rhine-Westphalia in 2005 the name of the Ministry for Health, Social Affairs, Women and Family of North Rhine Westphalia (MGSFF) was changed to Ministry of Labour, Health and Social Affairs of North Rhine-Westphalia (MAGS)

² Member of the Steering Group, Working for HOPE: Prof. Dr. Jaques Scheres
exchange of views with and among the partners will be arranged on a regular basis as the project progresses. These meetings will promote the project and lead through a permanent exchange of experiences, to a project monitoring process and initiate activities among the project members.

The project group met twice in the first year of the project. The first meeting was held on July 13th, 2004 in the Ministry of Labour, Health and Social Affairs of North Rhine-Westphalia (MAGS). On this occasion mainly the tasks, contents and schedule of the project as well as the first draft of a questionnaire were presented and discussed. The second meeting was held on May 10th, 2005 in Düsseldorf. This meeting was used to present first results of the surveys carried out in the Euregios and Interreg-Secretariats, to give a short overview of the development of the project surveys and to discuss steps for selecting projects and the intended workshop. The next meeting is scheduled for August 23rd, 2005 in Düsseldorf.

Moreover, members of the project group met
(a) to prepare the surveys (July 27th, 2004, Working Society of European Border Regions, Enschede; January 31st, 2005, AOK Rheinland, Düsseldorf) as well as
(b) to select projects and thus to prepare the workshop planned in January 2006 (July 1st and 28th 2005, AOK Rheinland, Düsseldorf and Grevenbroich).

3. Public Presentation of the "EUREGIO" Project

Table 2: Events at which the project was presented

<table>
<thead>
<tr>
<th>Date</th>
<th>Venue</th>
<th>Presenter/Topic</th>
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<tbody>
<tr>
<td>Sept. 22 – 24, 2004</td>
<td>Annual Conference of the German Society of Social Medicine and Prevention (DGSMP), Magdeburg</td>
<td>Ulrike Wolf: &quot;Evaluation of cross-border activities in health&quot;</td>
</tr>
<tr>
<td>Sept. 29, 2004</td>
<td>Public &quot;lögd training seminars&quot; of the Institute of Public Health NRW</td>
<td>Ulrike Wolf: &quot;Evaluation of cross-border activities in the health care sector of the EU&quot;</td>
</tr>
<tr>
<td>Oct. 7 – 9, 2004</td>
<td>Annual EUPHA Conference, Oslo</td>
<td>Helmut Brand (Presenter): „Evaluation of cross border activities in health (EUREGIO)“</td>
</tr>
<tr>
<td>April 25, 2005</td>
<td>Meeting of the EPHC Board, Düsseldorf</td>
<td>Alfons Hollederer: &quot;EU Project &quot;Evaluation of cross-border activities (EUREGIO)&quot;</td>
</tr>
<tr>
<td>April 26, 2005</td>
<td>Preparatory Committee of the NRW State Health Conference, Düsseldorf</td>
<td>Alfons Hollederer: &quot;EU Project &quot;Evaluation of cross-border activities (EUREGIO)“</td>
</tr>
<tr>
<td>June 1 – 4, 2005</td>
<td>6th IUPHE Conference, Stockholm</td>
<td>Alfons Hollederer: &quot;An overview of cross-border activities in health (&quot;EUREGIO&quot; Projects)“</td>
</tr>
</tbody>
</table>
A project flyer with information on the contents, objectives, partners and contact persons of the project was produced. Moreover, a website (www.euregio.nrw.de) informing about the project was developed and will be extended in the further course of the project.

Moreover, the project was presented at various events (see table 2). Further oral and poster presentations are presently being developed (see section 5.3).


4.1 Surveys conducted among cross-border structures and Interreg-Secretariats

In November 2004, questionnaire surveys on “Cross-border health-related activities in Europe” were carried out both in the Euregios/Euroregions and other cross-border structures as well as in the joint Technical Secretariats of the Interreg IIIA-Programmes. The objective of the survey was to give an overview of the scope and type of cross-border health activities and projects in the cross-border structures and to identify contact persons of cross-border projects.

Together with the project group and other experts two questionnaires were developed for the survey: one so-called “Euregio-Questionnaire” and an “Interreg-Questionnaire” (enclosures 2 and 3). The questionnaires were intended to collect more specific information on health-related projects such as project term, costs and contact partners, in addition to more general information such as for example size of the region. Moreover, both questionnaires contained questions on promoting and hindering factors. The so-called “Euregio-Questionnaire” moreover included further questions on various cross-border health activities. These included questions on cooperation agreements in the health care sector, on health-relevant structures such as working groups, questions on events as well as questions on explicit health targets.

Along the internal and external borders of the “old” EU Member States, a total of 67 cross-border structures was interviewed. These included 34 structures along the internal borders of the “old” EU Member States, 8 structures in which Switzerland was involved as well as 26 structures along the external borders of the “old” EU Member States. In 16 of the 67 interviewed structures, three or more countries were involved (see enclosure 1).

In addition, a survey was carried out in the Joint Technical Secretariats or institutions charged with this function under the up to now 53 Interreg-III A Programmes.
Method

The “Interreg Questionnaire” as well as the “Euregio Questionnaire” contained questions concerning:
- variables on the context such as size of area, unemployment rate
- general project data (project title, project term, responsible body of project)
- Promoting and hindering factors

Additionally the “Euregio Questionnaire” contained questions concerning further cross-border health-related activities (e.g. working groups, events and cross-border cooperation agreements) as well as questions concerning their tasks in the Interreg IIIA-programme.

Both questionnaires were sent out by normal mail at the beginning of November 2004, together with a covering letter. To increase the response rate, the recipients of the questionnaire were reminded again of the survey by e-mail one week after the deadline had expired and in a second wave once again contacted by telephone. Interviewees who had failed to return their questionnaire by February 2005 were again contacted several times until March 2005 and asked to send us their questionnaire.

Response Rate:

Of the total number of 67 contacted cross-border structures, 48 (respectively 49) sent back a completed questionnaire (72% or 73% respectively) of which one was however very incomplete. Moreover, nine cross-border structures have contacted us, among other things to inform us that there are no cross-border health-related activities/projects in the border region, sent us information about activities in health or referred to their answers in the “Interreg Questionnaire”. The questionnaire was not filled in by these structures. The total response rate of the “Euregio Questionnaire” was thus 85% (or 87% respectively).

The following cross-border structures did not react to the “Euregio-Questionnaire“ (i.e. did not fill out the questionnaire or send us other information like for example „negative Reports“): Skärgarden, Irish Central Bordre Area Network (ICBAN), Euregio Benelux Middengebied (BENEGO), Regio Sempione, Euregio Tirol-Südtirol/Alto Adige Trentino, Communaute de Travail de Pyrénées, Communidade de Trabalho Algarve Andalucia, Euroregion Delta-Rhodopi, Euroregion Evros-Meric-Matisa.

Out of the total number of 53 interviewed Interreg IIIA-Secretariats, a total of 31 returned a questionnaire of which one was however very incomplete. Moreover, five Interreg IIIA-Secretariats have contacted us, among other things to inform us that there are no cross-border health-related activities/projects in the border region or sent us addresses of con-

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3 Two structures (Castilla y León – Região Norte and Castilla y León – Região Centro) filled out one questionnaire for both cross-border regions.
tact partners of health projects. The questionnaire was not filled in by these structures. The total response rate of the "Interreg Questionnaire" was thus 68%.

The following Interreg IIIA-Secretariats did not react to the „Interreg-Questionnaire“ (i.e. did not fill out the questionnaire or send us other information like for example „negative Reports“ or addresses of contact partners of health projects): Skärgarden, Sonderjylland/Shleswigh, Sachsen/Polska, Sachsen/ Ceska Republica, Ireland/Northern Ireland, Grensregio Vlaanderen-Nederland, Bayern/Österreich, España/Portugal, España/Maroc Gibraltar/Maroc, Italia/Albania, Ellada/Italia, Ellada/Albania, Ellada/PJRM, Ellada/ Bulgarija, Ellada/Kypros.

When asked by phone about the reasons for not returning the questionnaire, the answers given were among other things too much work, dissolution of the structure or staff changes.

Survey results at a first glance are presented in the following. A more detailed presentation of the results will be given in the final report.

First Results

All 31 Interreg-Secretariats which had returned a completed questionnaire reported at least one health-relevant project. Of the offices of the Euregios, Euroregions and other interviewed cross-border regions, nearly two third in the questionnaire reported that health-relevant projects were being carried out in their border regions. Since cross-border structures are located in the geographical areas of the Interreg Programmes and/or are partly even identical with these areas (e.g. Euregio Meuse-Rhine), in some cases the same projects were reported by different sources. At the end of the survey, we had received addresses of 333 projects. These projects were mostly Interreg IIIA Projects. Projects not sponsored by the EU Interreg Initiative were hardly reported.

The "Euregio Questionnaire" contained further questions on various cross-border health activities which were not included in the "Interreg Questionnaire". It was revealed that

- in about two thirds of the border regions (N=31) which had returned a completed questionnaire health-related working groups or similar committees have been set up
- in about two thirds of the border regions (N=30) health-related events have been carried out over the last five years and that
- in almost 50% of the border regions (N=22) cross-border cooperation agreements in health care have been concluded.\(^5\)

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\(^4\) Two structures contacted had passed the questionnaire on to a third cross-border organisation which had not been contacted and which comprises the areas of both structures. This organisation sent us a completed questionnaire.

\(^5\) Here the high figure of 28% of missings (no answer or answer "do not know") was striking
Both questionnaires moreover contained questions on promoting and hindering factors. Factors which are most promoting are the personal commitment of the health care actors, political support at the regional level as well as the experience of the partners in cross-border cooperation. Financial problems, administrative efforts which have to be put into the progressing of the project as well as interest conflicts between the project partners were on the other hand mentioned as most hindering factors. Further results will also be delivered by the survey to be carried out among the responsible bodies of cross-border projects which will be explained in the following section.

4.2. Survey on cross-border health-related projects

The cross-border health-related projects reported back to us by the cross-border structures and Interreg-Secretariats were subjected to a second survey. Moreover, projects were included which had additionally been reported to us by the responsible bodies of projects contacted in a first move. The objective of this survey is to collect detailed information on the individual projects. In the further course of the project, this information shall be used to identify 40 particularly interesting projects whose representatives shall be invited to a workshop in January 2006 to present their work.

Method

The draft of the project questionnaire was drawn up by the Institute of Public Health NRW (lög), commented on by members of the project group and other experts and several times revised in the further course of the project. The questionnaire was finalised by end of March 2005.

The “Project Questionnaire” content a total number of 67 questions, concerning general information on the project (e.g. project title, state of project development, duration of the project), target groups, project description (e.g. main subjects, starting situation or problem background, main objectives, process and content of the project), project partners, project conditions, public relation/interest of the public, project evaluation, continuation of project activities, promoting and hindering factors, project financing and health targets (see enclosure 4).

Together with a covering letter the questionnaire (German and English) was subsequently sent to the projects by normal mail. Alternatively, the questionnaire was also accessible online. After the first deadline had expired, a reminding letter was sent to all those who had not yet answered the questionnaire. The survey was completed at the end of June.


Response rate

All in all 147 of the 333 projects contacted have returned their completed questionnaire (44%). Moreover, 13 project bodies have contacted us, among other things to inform us that the project surveyed by us was not or hardly related to health, that contact persons were no longer available or that the concerning project was no cross-border project. The questionnaire was not filled in by these project bodies. The total response rate was 48%.

Project selection

For selecting the projects, exclusion and selection criteria (see enclosure 5) as well as guidelines intended to support the selection of the projects were developed. These were presented to the project group on May 10, 2005 and adopted by it.

The project selection procedure started on July 1, 2005. The projects are being selected by a committee consisting of members of the project group. All those projects will be considered for selection which had returned a completed questionnaire by June 30, 2005 or promised to send it back within the following week. In a pre-selection process, the lögd had already reviewed all projects with regard to exclusion criteria. Projects meeting one or more exclusion criteria shall be excluded from further selection procedures – irrespective of the final vote of the selection committee.

5. Working steps of the next project phase

5.1 Workshop

The information collected with the help of the questionnaires completed by the project bodies will in the further course of the project be used to identify 40 particularly interesting projects. In January 2006, representatives of these projects will be invited to a workshop for a presentation of their projects. The objective of the workshop is among other things to promote the exchange of information and experiences and the networking between project actors and border regions and to win further information on the project and activities in the border regions. It is moreover intended to discuss promoting and hindering factors with the participants and to develop joint proposals for the strengthening or removal of these factors.

5.2 Interviews

In the further course of the project, 10 projects will be selected from the 40 projects which have taken part in the workshop. For this selection, the information given in the questionnaires as well as information obtained during the workshop will additionally be used. It is
intended to conduct interviews for reality checks with representatives of the selected 10 projects.

5.3 Presentations

Also in the further course of the project various European Conferences (table 3) will be used for presenting the project and its results. Corresponding presentations are intended for the 2nd European Health Care Congress in November 2005 as well as for the meeting of the "European Public Health Association (EUPHA)" in 2006. It is moreover planned to present the project at the congress on "Health without Borders: Cross-Border Cooperation in Health Care – Added Value for People, Industry and Regions in Europe" which is being organised by the RegioTriRhena and the Regio Basiliensis together with AEBR (Association of European Border Regions). Further presentations are intended.

Table 3: Intended Project Presentations

<table>
<thead>
<tr>
<th>Date</th>
<th>Venue</th>
</tr>
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<tbody>
<tr>
<td>Sept. 27, 2005</td>
<td>Health Forum: &quot;Health without Borders: Cross-Border Cooperation in Health Care – Added Value for People, Industry and Regions in Europe&quot;, Basel</td>
</tr>
<tr>
<td>Nov. 28 – 29, 2005</td>
<td>2nd EHCC European Health Care Congress 2005, Düsseldorf</td>
</tr>
<tr>
<td>Nov. 16-18, 2006</td>
<td>Annual EUPHA Conference, Montreaux</td>
</tr>
</tbody>
</table>

6. Summary

Today already, Europe's border regions provide the arena for many projects and other activities in the health sector. Surveys carried out in the first project year provide an extensive overview of these activities, give detailed information on individual projects and provide insights into promoting and hindering factors of cross-border cooperation. The further work phases of the project will provide more detailed information on selected projects and activities in the border regions, contribute to identifying best practice models and to generating hypotheses on promoting and hindering factors.
Enclosures

Enclosure 1: List of Interviewed Cross-Border Structures
Enclosure 2: "Euregio-Questionnaire"
Enclosure 3: "Interreg-Questionnaire"
Enclosure 4: "Project-Questionnaire"
Enclosure 5: Criteria for Project Selection
Enclosure 6: Minute of the Steering Group Meetings on 13 July 2004
Enclosure 7: Minute of the Steering Group Meetings on 10 May 2005
Enclosure 8: Interim financial statement
Enclosure 9: Interim financial statement calculations