Meuse-Rhine Euroregion

Old Bridge, Maastricht

General overview

The Meuse-Rhine Euroregion (EMR) is one of the oldest cross-border regions in the European Union; it was created in 1976 and achieved legal status in 1991. For the past 35 years, EMR has brought together five partner regions in three countries with different languages and cultures. Since 1976, the southern and central parts of the Dutch Province of Limburg, the German Zweckverband (specific administration union) of the Aachen Region, the German-speaking community of Belgium, and the Belgian provinces of Liège and Limburg have joined forces in tackling cross-border issues. The Euroregion covers a geographical area of approximately 11 000 km² around the city corridor of Aachen–Maastricht–Hasselt–Liège. This cross-border partnership creates new opportunities for the population, thus making an important contribution to the quality of life of the approximately four million inhabitants living in EMR.The seat of the Euroregion has been in Eupen, Belgium, since 1 January 2007 *(1)*.

EMR hosts around 150 municipalities, 49 of which have one or more borders with another country. It has more than 50 hospitals, 22 universities and higher educational colleges, and around 43 000 daily commuters *(1)*.
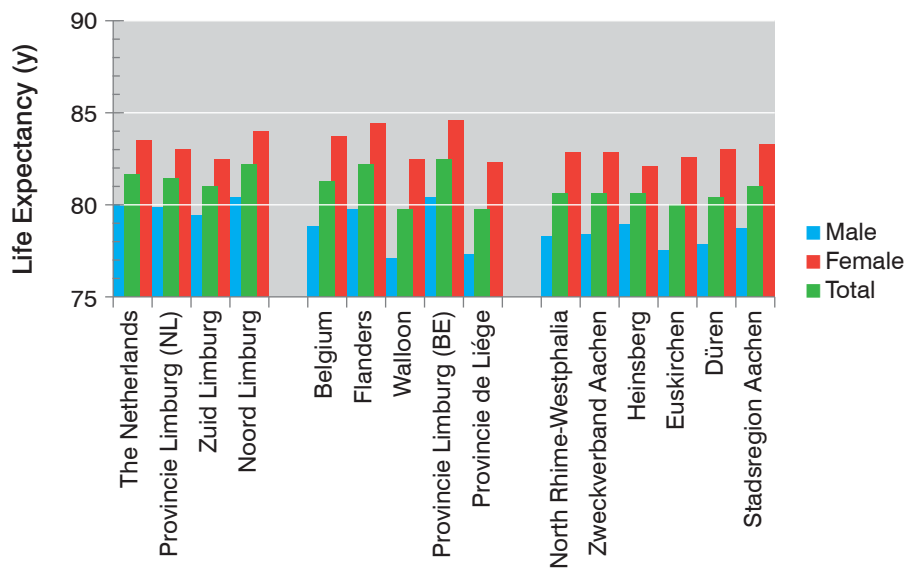
The regions in EMR share a partly common history (for example, in relation to mining) and their health statuses have many similarities. There are, however, wide differences between the regions' public health structures and health-care systems, not only across the different countries, but also within the countries. For example, the health-care systems of all of the regions involve insurance companies, although the conditions under which these companies function differ.

The health-care sector in EMR is changing rapidly: social trends are enforcing a fundamentally different approach to health-care activities, health-care professionals and patients. For example, population ageing, health inequalities, environmental challenges, increasingly sophisticated medical technology (health technology), the growing need for a comprehensive people-centered public health approach and greater patient autonomy means that the concept of health care has become much broader. There is a clear need and wish to focus more on public health. This is especially important in EMR, where not only the population, but also the (public) health-care professionals, organizations, etc., must deal with the above-mentioned changes relative to three different health-care systems.

Regarding the topic of health, EMR has delegated action to achieve its objectives in this area to the euPrevent | EMR Foundation *(2)*. EuPrevent initiates, supports, stimulates and facilitates cross-border cooperation between professionals and organizations working to promote and preserve the health of the population. It brings together partners from the different countries in EMR to work on these challenges and create opportunities for the population *(2)*. This is done through a collaboration programme, entitled "Crossing borders in health", which uses the approaches of two frameworks: Positive health *(3)* and Health in All Policies *(4,5)*. One of the aims of this programme is to collect and compare data at the euregional level for use by both health-care professionals and policy-makers. An example of this is the overview of life expectancy in EMR provided in Fig. 1 *(2)*.

Fig 1. Life expectancy in EMR, 2014

Source: euPrevent, 2018 *(2)*

Another result of EMR collaboration in public health, executed through euPrevent *(2)*, is a support system aimed at helping communities to become "senior friendly", that is, to focus on being care friendly, carer friendly and inclusion friendly, allowing senior citizens to continue to live normal lives from both an economic and a social perspective. The focus of the support system so far has been on dementia and depression in the elderly. One of its concrete results is the creation of online assessment tools that enable communities to examine their (euregional) collaboration on dementia or depression. These tools, which can be used by everyone free of charge, can be found on the euPrevent website *(2)*.

Strengths

EMR's strengths include:

- ✓ a wealth of experience in and knowledge about how to make best use of three different (public) health-care systems, including patient accessibility to all services in the Euroregion;
- ✓ a broad euregional network of health-care providers, health-care insurance companies, public health authorities, patient organizations, university departments related to health care, and governments, among others;
- ✓ the ability to transform abstract and more theoretical topics into practical implications for (public) health care in EMR.

Aspirations

EMR is aiming to:

- ✓ improve the quality of life of EMR citizens by ensuring (public) health care without borders;
- ✓ deal with practical problems related to the changing demography, technology, life patterns and health-care systems, as well as health inequality and patient autonomy;
- ✓ extend the extent of EMR's service as a test zone for a wide range of cross-border policies and activities related to public health care;
- ✓ direct more attention to (public) health-care economy in the broad sense, including innovations in the fields of technology and marketing.

Challenges

These are:

- ✓ differences in legislation, (public) health-care systems and structures across the Euroregion;
- ✓ differences in governmental responsibilities concerning (public) health care and topics related to health care;
- ✓ shortages of health-care professionals;
- ✓ low health status in some parts of EMR.

Potential areas of collaboration

The Euroregion is interested in working with other regions on topics related to:

- ✓ environmental health;
- ✓ Health in All Policies *(4,5)*;
- ✓ changing demography, technology, life patterns and public health-care systems, as well as health inequality and patient autonomy;
- ✓ cross-border cooperation related to public health;
- ✓ cross-border cooperation on citizen empowerment, health care and cultural innovation.

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Working groups

EMR is interested in participating in working groups on:

✓ the Sustainable Development Goals (SDGs) *(6)*/
equity;

✓ environment;

✓ participatory approaches/resilience;

✓ the all-of-government approach/intersectoral action.

People active in the Regions for Health Network (RHN)

Political focal point

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References

1. Euregio Maas-Rhein | Maas-Rijn | Meuse-Rhin [website]. Eupen: Euregio Maas-Rhein | Maas-Rijn | Meuse-Rhin; 2018 (http://euregio-mr.info/euregio-mr-de/wer-wir-sind/organisation/, accessed 26 April 2018).

2. euPrevent | EMR [website]. Heerlen: euPrevent | EMR; 2018 (www.euprevent.eu/tools/, accessed 26 April 2018).

3. Institute for Positive Health [website]. Utrecht: Institute for Positive Health; 2017 (https://iph.nl/, accessed 26 April 2018).

4. WHO, Ministry of Social Affairs and Health of Finland. The 8th Global Conference on Health Promotion, Helsinki, Finland, 10–14 June 2013. The Helsinki Statement on Health in All Policies. Copenhagen: WHO Regional Office for Europe; 2013 (http://www.who.int/healthpromotion/conferences/8gchp/en/, accessed 17 April 2018).

5. Leppo K, Ollila E, Peňa S, Wismar M, Cook S, editors. Health in All Policies. Seizing opportunities, implementing policies. Helsinki: Ministry of Social Affairs and Health; 2013 (http://www.euro.who.int/__data/assets/pdf_file/0007/188809/Health-in-All-Policies-final.pdf, accessed 17 April 2018).

6. Sustainable Development Goals. In: Sustainable Development Knowledge Platform [website]. New York: United Nations; 2018 (https://sustainabledevelopment.un.org/sdgs, accessed 21 February 2018).

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