Spatial planning and health systems: enhancing territorial governance in Alpine Space

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ABSTRACT:
Health systems in Europe are currently facing numerous critical challenges; demographic change is only one example. In order to successfully cope with these challenges on a long-term perspective, effective territorial governance can positively address upcoming issues in this context. Accordingly, the purpose of this research is to contribute to the enhancement of territorial governance in the Alpine Space (AS) with regard to spatial planning and health systems. The aim is to identify main achievements of previous AS projects funded by the European Union (EU) as well as lessons learned from their realization in order to derive valuable implications for amended health and spatial planning policy development. This includes issues such as transnational needs, potential synergies as well as institutional responsibilities and competences required. Besides the goals, approaches and outputs, also problems and difficulties experienced during the projects are analysed. The unit of analyses are 10 implemented projects of the current AS programming period which can provide achievements of valuable interest in this thematic field.

1 INITIAL SITUATION
Demographic change is only one of numerous critical challenges health systems in Europe are currently facing. In order to successfully cope with these challenges on a long-term perspective, changes in present health models and governance of health systems are required. Many highly relevant issues in this context such as the need to improve the quality of life and healthcare of elderly people as well as the provision of access to care for people in medically underserved areas are related to the subjects of ‘health systems’ and ‘spatial planning’. Accordingly, the focus of this research is on those two areas.

2 RESEARCH OBJECTIVE AND APPROACH
The purpose of this research is to contribute to the enhancement of territorial governance in the AS with regard to spatial planning and health systems. The research objective is to identify main achievements of previous AS projects as well as lessons learned from their realization. The aim is to derive relevant implications for amended policy development, including issues such as transnational needs, potential synergies as well as institutional responsibilities and competences required. To do so, besides the goals, approaches and outputs, also problems and difficulties experienced during the projects are analysed. Both topics, ‘health systems’ and ‘spatial planning’, as pillars of territorial governance, need to be addressed on a transnational level in order to generate practically relevant and valid results. Accordingly, the research question is: “What can be learned from EU-funded AS projects with regard to policy development?” The main achievements of these projects are identified in order to derive valuable lessons for future health and spatial planning policy development.

3 RESEARCH METHOD
To answer the research question, desk research and questionnaire inquiry was considered the most appropriate approach. Ten projects were selected amongst those promoted by the EU (funded by the “Alpine Space Programme 2007-13” and the “INTERREG IIB Programme 2000-2006”). These projects aim at improving inclusive growth in the Alpine Space under different dimensions through territorial governance. Based on literature review, a structured question-
naire-based tool was developed to systematically record all aspects under study across the various projects. To ensure the transnational perspective required, five partner countries (A, IT, FR, CH, SL) collaborated in this research project.

4 RESULTS AND IMPLICATIONS

4.1 Relevant topics identified

One of the results of this research is the identification of five main topics covered across all projects analysed. Table 1 provides an overview of the projects analysed (rows) and topics covered (columns).

Table 1. EU projects analysed and topics covered.

<table>
<thead>
<tr>
<th>ACCESS</th>
<th>ALIAS</th>
<th>CAPACITIES</th>
<th>DEMOCHANGE</th>
<th>INNOCITE</th>
<th>MORECO</th>
<th>NATHCARE</th>
<th>PUSEMOR</th>
<th>QUALIMA</th>
<th>RURBANCE</th>
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<tbody>
<tr>
<td>Accessibility of services of general interest. Organisational innovations in rural mountain areas</td>
<td>Alpine Hospitals networking for improved access to telemedicine services</td>
<td>Competitiveness actions and policies for alpine cities</td>
<td>Demographic change in the Alps: adaptation strategies to spatial planning and regional development</td>
<td>How to improve competitiveness of small-medium cities under the influence of alpine great urban centres</td>
<td>Mobility and residential costs</td>
<td>Networking alpine health for continuity of care</td>
<td>Public services in sparsely populated mountain areas</td>
<td>Improvement by supporting public and private services in the rural areas of the Alps</td>
<td>Rural-urban inclusive governance strategies and tools for the sustainable development of deeply transforming Alpine territories</td>
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4.2 Results and lessons for policy development

The following section summarizes concise information on how current problems were framed by the projects analysed. This includes main solutions and outputs delivered as well as the key lessons derived for policy development. The results of the analysis are presented by topic rather than project because this allows generalizing the insights gained with respect to general problems rather than emphasising project specifications.
4.2.1 Accessibility to Services of General Interest (SGI)
Within the analysed projects, the overall problem of SGI accessibility is framed as being a consequence of concentration of SGI in large urban areas and a reduction of SGI supply in more remote areas. This situation exerts negative consequences, such as reduced territorial functionality and competitiveness of remote, mountain areas as well as increased motorised mobility and environment pollution. Another problem within this area is amplification of age and social inequalities in SGI accessibility, as these are the most vulnerable groups in the society affected by financial constraints and limited mobility.

The main solutions delivered by the projects include besides organization of marketing and awareness campaigns on the topic of SGI in remote areas the following main points: (a) elaboration and implementation of ICT-based & demand-oriented SGI delivery systems, (b) organization of training opportunities for SGI operators in remote areas, and (c) an enforcement of services and social networks to reach more vulnerable groups, such as elderly people.

From the analysed projects, lessons for policy development are that ICT in general is a powerful tool to bridge physical gaps and that ICT-based solutions should be tailored to the needs of the elderly and other vulnerable groups.

4.2.2 Economic Potential of Small Alpine Towns
The analysed projects identify two main factors that hamper economic performance in alpine areas, which are critical economic and social factors, such as accessibility, decreasing population and workforce size, and suburbanization from larger peri-Alpine big cities.

Projects covering this topic mainly focused on the importance of defining innovative territorial growth strategy in a participatory way, including new “governance” solutions through the integration of policies across administrative borders and policy domains, alliances with the neighbouring “metropolitan growth areas” (e.g. in the fields of agriculture, commerce and tourism) as well as innovative urban policies.

Lessons for policy development are that future scenarios and long-term development strategies should be defined in a participatory way. Also, a new generation of integrated planning (local, regional levels and metropolitan areas) is needed and economic valorisation of local resources should be pursued.

4.2.3 Public Transport and Mobility
The projects addressed the issues of transport and mobility in rural areas, emphasizing that urban sprawl further increases public transport costs and private motorized transport causes environmental pollution, traffic congestion, health costs.

The projects’ output includes amongst others active support of a sustainable, resource-friendly settlement development to reduce mobility needs and costs. Furthermore, special transport solutions and services have been introduced for elderly residents, tourists and commuters and a unique mobility centre has been created.

In terms of lessons for policy development, the need for supporting efficiency of public transport by concentrating (future) settlement and promoting flexible and demand-oriented transport models was identified. In addition, minimum standards for public transports should be fixed and proposed actions should be integrated into existing policies.

4.2.4 Health Care Accessibility
Healthcare can be considered as a SGI that is affected by additional and note-worthy problems such as low availability and low quality of health-care services in mountain areas as well as the difficulty in serving new health demands (e.g. age-related ones) in remote areas, which gives rise to social inequality in health.

Solutions proposed and implemented by the ten projects targeted mainly on topics of innovation of healthcare supply and management including the creation of a virtual hospital (hospitals' network sharing data and clinical expertise), elaboration and implementation of eHealth services (“tele-consultation” and “second opinion”) as well as creation of new organizational models and data sharing for networks of volunteering associations.

Lessons for policy development focus for instance on implementation of eHealth solutions to reduce distance between patient and providers and to allow healthcare system to recognize needs and respond effectively. Besides that, the development of eHealth solutions together with healthcare professionals and relevant stakeholders is required in order to improve utilization and
quality of services. Moreover, training of health professionals and relevant stakeholders on the use of new technologies is needed and trust and confidence has to be built in telemedicine applications among users.

4.2.5 Ageing of the Population and new Health Challenges

While it is well known that population ageing is burdening consequences for health and social systems, there is less awareness on the fact that demographic change also represents a major issue for regional development and spatial planning. As a consequence spatial planning policies might serve as leverage for increasing wellbeing of the elderly in mountain areas.

The projects analysed aimed at raising awareness on the topic by mobilizing and activating different types of stakeholders at the local level. In addition, local Healthcare Communities were created to enforce the network of stakeholders that can support the elderly access to health care and specific initiatives were undertaken to improve elderly's tourism in the Alps (promotional initiatives, touristic tours, hiking paths, etc.).

Adaptation to demographic change should be seen as an obligatory target and a priority field of action in regional planning and development. Lessons for policy development are the need to improve utilization of current demographic monitoring tools and processes (e.g., Eurostat and national statistics offices), improve housing, mobility and independent living for elderly people as well as their social integration. In addition, touristic infrastructure and offer has to be adapted to the needs of elderly tourists.

4.3 Implications for Project Evaluation

An important lesson learned during this research project was that the documentation of the EU projects under study is complex and heterogeneous in structure; thus, it is quite challenging and resource-intense to extract all relevant information for evaluation and comparison of those projects. Consequently, standardisation in the sense of evaluable of future AS projects is required and the use of a uniform catalogue of criteria for improved AS project evaluation is recommended.

Projects and pilot actions reviewed showed that a sound and systematic evaluation of the interventions is missing. Such a deficiency is partly attributable to the nature of the projects that are too broad in scope and types of actions and therefore difficult to evaluate. During the implementation of our EU project, the partners derived possible ideas and recommendations to strengthen the role of evaluation in AS next programming period can be seen along three lines, which are explained in the following:

- Improving the evaluability of projects and pilot actions (Evaluability Assessment)
- Embedding evaluation in projects and pilot actions from the beginning (Prospective Evaluation)
- Exploiting the available databases that allow a systematic monitoring of relevant outcome indicators (Outcome Indicators)

Improving evaluability:

According to the OECD DAC definition evaluability of a project can be defined as the extent to which it can be evaluated in a reliable and credible fashion. [2] In the course of this research the use of a uniform catalogue of criteria for improved AS project evaluation is recommended. This catalogue should include the areas of project design, information availability and institutional context. Within those areas, issues such as consistence, complexity, validity and coordination requirements are addressed. [2] Some of these indications (i.e., those considered as most pertinent) might be taken as a reference by the Managing Authority of AS projects and inspire the writing of the calls for proposals in the next programming period. According to the mentioned stream of literature on evaluability assessment, the introduction of these criteria in the calls for proposals is likely to increase the design of better-evaluable projects in the future (evaluability assessment).
Table 2. Selection of criteria for evaluability assessment [2].

<table>
<thead>
<tr>
<th>PROJECT DESIGN</th>
<th>Clarity</th>
<th>Are the long-term impact and outcomes clearly identified and are the proposed steps towards achieving these clearly defined?</th>
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<tbody>
<tr>
<td>Relevance</td>
<td>Is the project objective clearly relevant to the needs of the target group? Is the intended beneficiary group clearly identified?</td>
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<tr>
<td>Plausibility</td>
<td>Is there a continuous causal chain, connecting the proposed intervention with the outcome of concern?</td>
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<tr>
<td>Validity and Reliability</td>
<td>Are there valid indicators for each expected event (output, outcome and impact levels)?</td>
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<tr>
<td>Testability</td>
<td>Is it possible to identify which linkages in the causal chain will be most critical to the success of the project, and thus should be the focus of evaluation questions?</td>
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<tr>
<td>Consistency</td>
<td>Is there consistency in the way the Theory of Change is described across various project multiple documents (design, work plans, progress reports, etc.)?</td>
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<table>
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<tr>
<th>INFORMATION AVAILABILITY</th>
<th>Do baseline measures exist? If baseline data is not yet available, are there specific plans for when baseline data would be collected and how feasible are these? Are time series data available, for pre-project years?</th>
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</thead>
<tbody>
<tr>
<td>Is there data on a control group? Is it clear how the control group compares to the intervention group? Is the raw data available or just summary statistics?</td>
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<tr>
<td>Is critical data available? Are the intended and actual beneficiaries identifiable? Is there a record of who was involved in what project activities and when?</td>
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Embedding evaluation:
In the course of this research, an impact evaluation of AS projects and pilot actions has not been feasible for several reasons (e.g., broad programs, non-material actions, lack of data, impossibility to identify a control group, etc.). An additional obstacle has been the fact that evaluation was not included in the project from the very beginning. Therefore, the second recommendation is to enforce an approach of prospective evaluation. Contrary to retrospective evaluation, prospective evaluation implies that evaluation activities begin during the design phase of the project and pilot actions. Accordingly, the project activities should be organised keeping in mind the evaluability of the project and a plan for the collection of the relevant data should be defined at the very beginning. In its essence, the general idea underlying this second recommendation is to design the project as a social experiment, embedding evaluation since the beginning of the project (prospective evaluation).

Exploiting databases:
Another recommendation is about exploiting available databases that allow monitoring of relevant aggregate indicators across time and geographical areas (regional/provincial levels) throughout the AS. These databases are increasingly growing richer and historical series are increasing as well. These data contain high informative potential that has not been fully exploited yet. Exploiting these data would allow increasing the knowledge on health and spatial planning issues in the AS.

Beyond descriptive purposes, these data could also be used to evaluate public policies, because they allow to compare outcomes variation across territories and over time and to exploit spatial-time discontinuities in health policies.

4.4 Trends and policy orientation
As part of this research project, a gap analysis was conducted comparing the outcomes of the projects analysed, the results of the analysis of the main trends, needs and challenges captured through the policies orientations at European, national and regional level as well as the inputs provided through the reflection promoted amongst relevant stakeholders in the course of thematic seminars. The aim of the gap analysis was to identify still uncovered fields of intervention
that could be explored for inspiring new project ideas bringing social innovation in the AS. The analysis showed that different territories have diverse policy directions and priorities for health and spatial planning; nevertheless, common trends that call for intervention can be identified and are summarized in the following.

Access to services of general interest, including health, should be widely facilitated in order to mitigate the risk of inequality, social exclusion and poverty in a changing and ageing society. Healthcare promotion and prevention, chronic disease and continuity of care, integrated care, patient empowerment and sustainability of healthcare systems should be continuously explored and further addressed as central themes of an effective health policy enabling to address inclusiveness and growth. In addition, ICT (eHealth, telemedicine) can play a fundamental role leveraging the provision of online services mainly to remote and underserved areas. Also it can contribute, together with tailored training and improved literacy for professionals, to boost the potential of innovation related to healthcare services, specifically for some segment of population, including elderly. Moreover, adoption of tools, and methods for clinical outcomes and quality of care assessment should be broadly promoted both for research and scientific goals and for improving the conditions for business and entrepreneurial environment. ICT Applications such as social collaborative games on mobile phones show promising impacts on behavioural change in patients suffering from chronic disease and social isolation. In addition, quantified self-use cases and novel wearable devices support self-disclosure of e.g., bad habits in order to increase health status. This should be further explored in the Alpine Space.

Urban and peripheral areas are more and more confronted with issues such as: (i) social disparity and inequality of population and shortage of environmental resources, (ii) intensification and increase in number of areas of demographic marginality, (iii) linked to the progressive ageing of the population and the depopulation of certain areas, (iv) as well as call for new and most adequate models enabling to tackle these challenges under a governance perspective.

The emergence of new forms of economic and social marginalization, linked to material poverty, is increasingly present in cities (“poverty urbanization”) with relevant impact on fragmentation and diversification of housing demand, as determined by the new emerging needs (elderly, young couples, etc.). The diversification of the demand for services (transportation, waste management, environmental and landscape protection and revitalization) has also consequences in lifestyle which should be further explored.

5 CONCLUSION
Territorial governance is one of the relevant policy strand addressed by the 2007–2013 programming period of the Alpine Space Programme. This priority line has explored concepts such as spatial planning, urban development, accessibility to services of general interest, actions for social inclusiveness and demographic change, models for an inclusive and sustainable growth. Related to this, this paper summarized the results of our analysis of ten research projects within the AS Programme and stated the main lessons learned. Important issues affect the two dimensions of spatial planning and health systems, including, for instance: the need to improve the quality of life and healthcare of elderly people and the access to care for the population living in remote and medically underserved areas; the need to face the urban decline, for small and big cities, in terms of actions against pollution, waste, traffic and poverty, necessary to guarantee an healthy population living in a sustainable city; the necessity of strengthen the inter-generational relationships, considering the aging trend and demographic challenges, for ensuring a “re-humanized” urban area.

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REFERENCES


