

## **Strategic Partnership „Health begins in the families-**

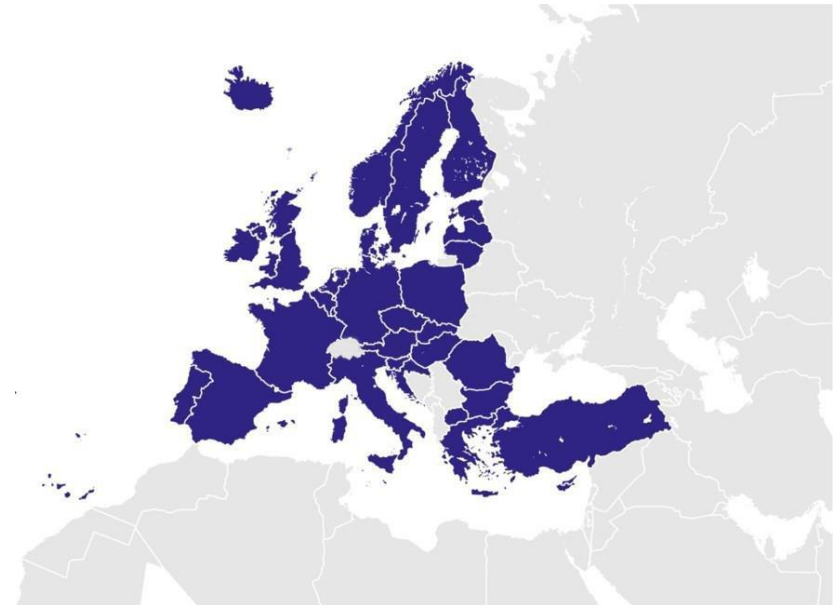
Prevention and health promotion for families in precarious circumstances  
in Europe

(November 1st, 2020 – August 31st, 2023)

**1st Workshop in Linz (Austria),  
June 27th – 29th, 2022**

***Erasmus+***  
***The EU Programme for***  
***Education, Training, Youth and***  
***Sport***  
***2014-2020***

- **Programme period:** 2014 - 2020
- **Total budget:** 14.8 billion euros
- **Programme countries:**
  - 28 Member States
  - Island, Liechtenstein, Norway
  - FYR Macedonia, Turkey
- **Partner countries (possible):**  
(not applicable for mobility projects  
in vocational or adult education)



## Structure of the Programme 2014-2020

4 sections:

Youth, Vocational Training (VET),  
Adult Education, Sport

<b>KA 1</b>	<b>KA 2</b>	<b>KA 3</b>
<b>Learning Mobility</b>	<b>Institutional co-operation</b>	<b>Policy support</b>
<b>63 %</b>	<b>28 %</b>	<b>4,2 %</b>



KA1

- Mobility for higher education students, vocational education and training students
- Staff mobility, in particular for teachers, lecturers, school leaders and youth workers
- Volunteering and youth exchanges

KA2

- **Strategic partnerships between education/training or youth organisations and other relevant actors**
- **Exchange of knowledge and good practice; developing innovative approaches and intellectual outputs**

KA3

- Policy dialogue with stakeholders, third countries and international organisations



Erasmus+

caritas

# Project overview

## Frame of our project

- Erasmus+ / Strategic partnership (exchange of good practice)
- Strand: Adult Education (2020: 86 projects selected in Germany)
- 7 partner organisations from 6 EU-Countries
- Coordinator: Caritas Association for the Archdiocese of Cologne
- Duration: November 1st, 2020 - August 31st, 2023  
(34 months; extension because of the Corona pandemic)
- Total Budget: 112.400 Euro
- Lump sums for travelling costs and administration

## Seven European Partners

- **Caritas Association for the Archdiocese of Cologne (DICV), Germany**  
(coordinator)
- **Caritas Upper Austria Linz, Austria**
- **Ministry of Employment, Health and Social Affairs NRW, Düsseldorf, Germany**
- **West Smethwick Enterprise (WSE), Smethwick, UK / PISCES, UK)**
- **Asociatia „ Caritas – Asistentă Socială“**  
**Filiala Organizației Caritas Alba Iulia, Targu Mures, Romania**
- **Fondazione Diocesana Caritas Trieste Onlus, Trieste, Italy**
- **Association of Lithuanian Children´s day care centres, Kaunas, Lithuania**
- **Sozialdienst Katholischer Frauen, Langenfeld, Germany, (associated)**



## Challenges

- Families who are socially disadvantaged and have multiple burdens to confront are also at a disadvantage in terms of health
- Studies have shown that poverty has an impact on the health of children and adolescents
- Raise health awareness, health behaviour and state of health of children and adolescents in their families
- Political level: Promote implementation of the European Pillar of Social Rights as a new and central strategic concept for the European Union - particularly with regard to Section 11 (Childcare and support to children) and Section 16 (Health care)

## Aims

- Main issue: Health prevention and health education for disadvantaged families
- Creating a common knowledge base
- Sharing of good practice
- Six 2.5-day Transnational Project Meetings (TPM)
- Around 20 specialists from amongst the project partners will participate in each meeting (120 mobilities)
- Developing of a training concept for experts on health prevention
- Testing the concept in a workshop on health issues with the project team

## Aims

- Workshops with experts in every partner organisation (Minimum one per year) – transfer of the concept into the partner organisation
- providing advice on health issues to a total of around 350 to 400 families (individual counselling or in groups/“family fora”) – with regard to a “setting approach”
- Develop local or regional networks to develop health education services
- Disseminate the project content, the progress and the results

## Administration

- Total Funding: 112.400 Euro
- Partners: 3.000 Euro as lumpsum for administration p.a.
- Travelling costs for staff of the organisation or member organisations or for volunteers
- Cooperation agreement (done)
- Intermediate report: until 30.11.2021 (done)
- Final report: until 31.10.2023

## Project budget (total 112.400 Euro)

	Admin	Travel	Mobilities
DiCV Köln	12.000	8.625	15
MAGS NRW	6.000	8.625	15
Caritas Trieste	6.000	8.625	15
Caritas Linz	6.000	8.625	15
Caritas Alba Iulia	6.000	8.625	15
Daycare centers Kaunas	6.000	6.900	12
WSE/ PISCES	6.000	8.625	15
<b>Total</b>	<b>48.000</b>	<b>64.400</b>	<b>102</b>

■ 100-1999 km: 575 € per person

■ > 2000 km: 760 € per person

## Transnational Meetings I

- TPM 1 (Linz, D – 6/2022, Kick-of Workshop)  
Thematic focus and input: Foundations of preventive health care and health promotion
- TPM 2 (Birmingham, UK –?)  
Thematic focus and input: Risk factors, vaccination, prevention of infectious diseases
- TPM 3 (Miercurea Ciuc, RO – ?)  
Thematic focus and input: Social inequality and health

## Transnational Meetings II

- TPM 4 (Kaunas, LIT – ?)  
Thematic focus and input: Health education
- TPM 5 (Trieste, I – ?)  
Thematic focus and input: Counselling interviews with parents on the topic of health
- TPM 6 (Cologne/ Brüssel, D – 8/2023, final workshop)  
Thematic focus and input: Health, exercise and sports

## Tasks and responsibilities of the coordinator

(see application)

- Communication with the German National Agency
- Reporting to the Erasmus+ Mobility Tool
- Cost management and budget control
- Planning of the transnational meetings (TPM) together with partner organisation
- Steering of communication and information flows between partners
- Coordination of the development of products (e. g. training concept)
- Coordination of the dissemination and information activities



## Tasks and responsibilities of the partners

(see application)

- Organisation of one transnational project meeting in the home country
- Participation in all transnational project meetings
- Elaboration of reports on local or national activities
- Contribution to the intermediate and final report
- Organisation of at least two training offers for experts
- Development of offerings for disadvantaged families

## Evaluation and Dissemination

- Questionnaires and interviews (University Linz or Cologne)
- EPALE (European platform of Adult Education)
- Project Website (Caritas Linz) and website of partners with link to project website
- Social Media (Facebook, Instagram e.g.)
- Local, regional, national, EU networks
- Press, Radio, TV

## Indicators of success

- number of transnational meetings and timely performance
- number of participants in transnational meetings
- level of satisfaction of transnational partners with project progress
- number of experts trained in the seminars on health issues
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- number of families affected by the project
- number of publications and media response

## Agenda (plan)

- November 2020: Meeting with Zoom every month (with external expert/s), as long as transnational meetings are not possible
- January 2020: start of project website
- January 2020: all partners inform about the new project/ partner websites
- January 2020: Cooperation agreement with DiCV Cologne
- Mai 2021: start to develop local networks with experts by the partners
- Oktober/ December 2021: 2 x 1/2 day workshop with project team

## Agenda (plan)

- Summer 2021: Start of individual advice / fora/ workshops with disadvantaged families
- September/ Oktober 2021: First workshop with colleagues/local experts
- 30. November 2021: intermediate report (done)
- Mai/ June 2022: Second workshop with colleagues/ local experts
- 31. Oktober 2023: final report



## **I. Working in groups ( by country) Health prevention and promotion (families)**

- What offerings did you initiate with regard to families?
- Are you planning to implement more offerings? What kind?
- Which internal, local, regional, national partners or experts have support you or will support you?
- What obstacles can occur?



## II. Working in groups (mixed groups)

### Health prevention and promotion (staff)

- Did you discuss the issue of health promotion with colleagues?
- What offerings did you initiate with regard to staff/ colleagues?
- Which partners have supported you or will support you?
- What obstacles did or can occur?

### III. Working in groups (by country)

#### Dissemination

- How and with regard to whom can we disseminate the progress, success and results of our project?
- What media, tools, partners etc. can we use?



**Thanks for listening**