



Centro Region Rural Village

Centro Region, Portugal

General overview

The Centro Region, located in central Portugal, occupies a strategic position in the country. Home to 16% of Portugal's population (2021) (1), the Region comprises 78 municipalities. The gross domestic product (GPD) is €20 492 (2). The average life expectancy is 82 years (2019) (3) and the infant mortality rate (2020) is 2.5 per 1000 (4). The Region hosts an aged population: in 2020, it recorded one of the highest ageing indexes (237.3) (5) and one of the lowest fertility rates (1.23 births per woman) in Europe (6).

The Regional Health Administration of Central Portugal, a regional public institute of the Ministry of Health, is responsible for the implementation of national health policies and the coordination of all levels of health care in the Centro Region, in accordance with the National Health Plan.

In the Centro Region, the National Health Service comprises 86 primary-health-care (PHC) centres, 12 hospital institutions (individual hospitals and hospital centres with overall 4202 beds overall), 102 long-term care units (2774 beds) and 6 palliative care units (102 beds). They represent an extensive health-care network, including centres for specialized outpatient care, nurseries, and institutions providing care for older people, as well as adults and children with physical or mental disabilities.

The Regional Health Administration manages several public health programmes and activities related, for example, to: immunization (National Immunization Programme); screenings (cervical, breast and colorectal cancer, diabetic retinopathy and children's eye health); child and maternal

health (children's oral health, healthy eating, childhood obesity, adolescent suicide prevention); and – in conjunction with the municipalities, the regional environmental authorities and water-pipe

suppliers – environmental-health activities on waste management and the surveillance of water used for drinking and recreational purposes.

Regional activities linked to the WHO European Programme of Work

The following priorities and activities are linked to the three core priorities of the European Programme of Work (EPW) (7) – (i) moving towards Universal

Health Coverage (UHC); (ii) promoting health and well-being; and (iii) protecting against health emergencies).



Moving towards UHC

The national health-care system in Portugal comprises three complementary components: (i) the National Health Service, the functions of which are the financing, regulation, management and universal provision of health-care; (ii) the social and private sectors, which provide health-care services; and (iii) subsystems of public and private insurance, which deal with the financing and provision of health care. In 2020, national health expenditure was 10.2% of the GDP (8).

In 1990, the Fundamental Health Law (Law 48/1990), restructured the National Health Service, its main objectives being: (a) universality in terms of the population covered; (b) the provision of full comprehensive care, or a guarantee to this end; (c) a service that is free of charge for users, taking their economic and social conditions into account; (d) guaranteed equity in user access with the aim of mitigating the effects of economic, geographic and other inequalities in access to health care; and (e) regionalized organization and decentralized and participatory management.

Priorities

- to consolidate PHC reform (i.e., to enhance the implementation of the new organizational model of family primary-care units (Portuguese acronym: USF)): in 2020, the percentage of people registered in USF in the Centro Region was 51.7% (9);
- to develop action related to secondary prevention by increasing the coverage of the following population-based screenings (oncological and non-oncological): breast cancer (50–69 years) from 62% to 70%; cervical cancer/human papillomavirus quinquennial test (25–60 years) from 35% to 60%; colorectal cancer/biennial fecal occult blood test (50–70 years) from 8% to 20%; diabetic retinopathy from 10% to 40%; and visual infancy-childhood screening (2–4 years) from 70% to 82%;
- to ensure the implementation of the National Immunization Programme: in 2020, pertussis-vaccine coverage for the first dose in 3-month-old children (9) was 98.5%; and measles-vaccine coverage for the second dose (recommended) in 6-year-old children (9) was 96.2%.



Promoting health and well-being

Priorities:

- to promote the integration of patients in the Long-term Care Network: the integration rate in 2020 was 92.1% (9);
- to ensure responsiveness to problems of psychoactive substance use and addictive behaviours: in 2020, 6953 outpatients were clinically treated at integrated response centres and alcohol units (9);
- to promote clinical surveillance and control of cardiovascular diseases and diabetes: in 2020, the percentage of hypertensive patients who had been evaluation for cardiovascular disease risk in the previous 3 years was 61.6%, and the proportion of diabetic patients registered with glycated hemoglobin $\leq 8\%$ was 54.0% (9);
- to promote healthy eating: in 2019, 11.3 % of the population were registered in primary health care as being obese (10);
- to increase the prescription of generic drugs: in 2020, 63.9% of all medicine packages prescribed were generic (9);
- to promote maternal and child health clinical surveillance: in 2020, the proportion of 7-year olds with weight and height registration was 80.9%; in 2020, the proportion of 14-year olds who had been fully vaccination through the National Immunization Programme was 96.4% (9);
- to promote the timely response of hospitals in scheduling the first specialist appointment referred by primary health care: in 2020, the proportion of patients referred to outpatient specialist consultations who received treatment within a clinically appropriate (optimal) time frame was 57.1% (9);
- to consolidate the organizational procedures for surgery towards reducing the median waiting time, which is currently 4 months (9);
- to promote the integration of patients in the Long-term Care Network: the current integration rate is 92.1% (9).



Protecting against health emergencies

The most recent health emergencies that have had a major impact on the population of the Centro Region were the forest fires of 2017–2018 and the ongoing COVID-19 pandemic (May 2022).

The COVID-19 pandemic has resulted in enormous challenges for the health services in the Centro Region, especially the public health departments. As stakeholders, all regional and local teams were assigned to combat it, promoting interinstitutional cooperation with municipalities, social security, schools, civil protection, the military, the police, senior day-care centres and nursing homes, and public and private hospitals. Efforts were focused on ensuring a rapid and adequate response to all citizens, especially the most vulnerable (those with health or income disadvantages).

This collaborative effort was extended to the COVID-19 vaccination campaign, which made it possible to reach the entire population, prioritizing the most vulnerable, and resulting in excellent vaccination coverage rates in the Region.

Due to its geodemographic, economic and environmental characteristics, the Centro Region is at high risk of environmental disasters, particularly forest fires, which are increasing in frequency and magnitude. The fires of 2017 and 2018 posed a challenge for the Regional Health Administration of Central Portugal. While such a challenge was not new, it affected the population considerably with respect to: human loss; respiratory diseases; psychological well-being; and air, water and food contamination.

Highlights related these events include a strengthened and coordinated mental-health response, the establishment of the Regional Task Force for Disaster Preparedness and Response, and an assessment of the impact of wildfires on population health (research collaborative project).

Actions linked to the EPW flagship initiatives

(The Mental Health Coalition; Empowerment through digital health; The European Immunization Agenda 2030; Healthy behaviours: incorporating behavioural and cultural insights.)

Initiatives relative to the Mental Health Coalition

- **Mais Contigo.** This project targets adolescents with the aim of promoting mental health and preventing suicide, thus, contributing to reducing mental illness in adult life. Schools are considered to be a privileged setting for the implementation of action to promote mental health and prevent suicide, engaging all stakeholders involved (students, teachers, parents, assistants).
- **Domestic/household violence.** This project aims to prevent domestic/household violence.

Initiatives relative to healthy behaviours: incorporating behavioural and cultural insights

- **Minorsal.saúde.** This pioneering salt-reduction project, which aims to reduce the amount of salt added to bread and soups, was implemented in 2007. As of February 2022, it covers more than 1200 bakeries and close to 4500 production and distribution units in the catering sector (involving nursery- and elementary-school canteens and senior households). Collaboration between the local public health departments, the baking industry and the catering sector in conducting the project has been key to its success.
- **Tãodoce.não.** This project aims to reduce the consumption of foods and beverages (sweetened soft drinks) with a high content of fast-absorbing sugars and ultimately contribute to a reduction in the rates of diabetes, obesity and overweight, mainly in young people. A fundamental operating strategy of this project is health literacy.
- **Conta, Peso e Medida.** This project aims to reduce the prevalence of childhood obesity and associated risk factors.
- **Assessing general and avoidable mortality in health regions and mainland Portugal.** This project aims to update local and regional health profiles and to support decision-making in health governance with a view to improving it and reducing inequalities.

Initiative specific to the Centro Region

Cres(SER): mental health in pregnancy and early childhood

This is a pilot project, which proposes a new way of looking at mental health and well-being in childhood by implementing a community network to maximize existing resources through a strategy based on health literacy and psychosocial intervention. The focus has been on the weekly

widespread distribution of brief pedagogical messages, underpinned by a dynamic training process in day-care centres. Family and health professionals are also involved.

The aim of the project is to improve psychosocial indicators, particularly in terms of self-esteem, social and environmental commitment, and citizenship.

The three most important topics for collaboration within the Regions for Health Network

These are:

1. establishing health-promotion/public health programmes;
2. tackling health planning and health-policy implementation and evaluation with a view to achieving the Sustainable Development Goals (11) at the regional level, based on the principles of Health in All Policies (12,13);
3. ensuring the availability of highly qualified health-care/health-services staff and exchanging experience on working in international projects, for example, on international public health care and health management/administration.

Main partners and collaborators

The Portuguese Ministry of Health (<https://www.sns.gov.pt/>).

Directorate-General of Health (<https://www.dgs.pt/>).

University of Coimbra (<https://www.uc.pt/>).

Ageing@Coimbra (<https://ageingcoimbra.pt/>).

Coimbra University Hospital Centre (<https://www.chuc.min-saude.pt/>).

Pedro Nunes Institute (<https://www.ipn.pt/>).

University of Salamanca – Centro de Investigación del Cáncer/Interreg España-Portugal – Project IDIAL-NET (<http://idialnet.usal.es/pt/arsc-pt/>).

National Statistics Institute (<https://www.ine.pt/>).

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