To: (10)(2e) [(10)(2e)@rivm.nl]; (10)(2e) [(10)(2e)@rivm.nl]
Cc: (10)(2e) [(10)(2e)@eurohealthnet.eu]; (10)(2e) 10)(2e) [(10)(2e)@eurohealthnet.eu]; (10)(2e) (10)(2e) [(10)(2e)@eurohealthnet.eu]; (10)(2e) [(10)(2e)@rivm.nl]
From: (10)(2e)
Sent: Wed 5/27/2020 7:10:49 AM
Subject: RE: H2020 proposal on "Behavioural, social and economic impacts of the outbreak response"
Received: Wed 5/27/2020 7:11:58 AM

Dear (10)(2e),

Many thanks for having shared your ideas - they are incorporated into the first draft which will be shared with you shortly. We look forward to further discussions.

Best,
(10)(2e)

From: (10)(2e) <(10)(2e)@rivm.nl>
Sent: Tuesday, May 26, 2020 3:06 PM
To: (10)(2e) <(10)(2e)@eurohealthnet.eu>; (10)(2e) <(10)(2e)@rivm.nl>
Cc: (10)(2e) <(10)(2e)@eurohealthnet.eu>; (10)(2e) 10)(2e) <(10)(2e)@eurohealthnet.eu>; (10)(2e) <(10)(2e)@eurohealthnet.eu>; (10)(2e) <(10)(2e)@rivm.nl>
Subject: RE: H2020 proposal on "Behavioural, social and economic impacts of the outbreak response"

Dear (10)(2e),

We will discuss our contribution with (10)(2e) and (10)(2e) but before we had already discussed some ideas and maybe it can be added in the first draft.
Our ideas were:

- Comparing the measures taken by countries and the impact on infection rates and human behavior

- Comparison of the degree of behavioural scientific input in government decision-making and presentation of measures: what is the impact of behavioural scientific insights into the (communication about the) measures on people's behavior.

- Comparing data on behavioural measures and behaviour of people: how can we better predict the behaviour of people in the event of a next pandemic?

- What explains the variation in people's behaviour in relation to viral patterns over time?

And the possibility to set up an European monitor.

Best regards,
(10)(2e)

(10)(2e)
(10)(2e)

Centrum Gezondheid en Maatschappij, afdeling Gezond Leven
Postbus 1 (10)(2e)
3720 BA Bilthoven
Bezoekadres: Antonie van Leeuwenhoeklaan 9, Bilthoven
(10)(2e)
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(10)(2e)@rivm.nl

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Gezondekinderopvang.nl
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PS. Ontvangt u onze maandelijkse CGL-nieuwsbrief al? Meld u nu aan!

Volg Loketgezondleven.nl ook op

twitter

From: (10)(2e) < (10)(2e) @eurohealthnet.eu>
Sent: maandag 25 mei 2020 19:46
To: (10)(2e) < (10)(2e) @rivm.nl>; (10)(2e) < (10)(2e) @rivm.nl>
Cc: (10)(2e) < (10)(2e) @eurohealthnet.eu>; (10)(2e)10)(2e) < (10)(2e) @eurohealthnet.eu>; (10)(2e) < (10)(2e) @eurohealthnet.eu>
Subject: Re: H2020 proposal on "Behavioural, social and economic impacts of the outbreak response"

Dear (10)(2e),

I also wanted to confirm with you that we have been put in touch with your colleague (10)(2e), through (10)(2e) (from Trimbos). (10)(2e) started bringing together partners on the bid prior to its official publication, and then invited us to lead the consortium. We are now coordinating the proposal drafting, and plan to put all partners in touch when we share the draft proposal later this week. I believe that (10)(2e) and (10)(2e) may already have been discussing ideas concerning RIVM's contribution to the bid.

Best,
(10)(2e)

From: (10)(2e) < (10)(2e) @eurohealthnet.eu>
Date: Monday, 25 May 2020 at 18:15
To: (10)(2e) < (10)(2e) @rivm.nl>, (10)(2e) < (10)(2e) @rivm.nl>
Cc: (10)(2e) < (10)(2e) @eurohealthnet.eu>, (10)(2e)10)(2e) < (10)(2e) @eurohealthnet.eu>, (10)(2e) (10)(2e) < (10)(2e) @eurohealthnet.eu>
Subject: RE: H2020 proposal on "Behavioural, social and economic impacts of the outbreak response"

Dear (10)(2e),

Many thanks for this. On our side, we are aiming to share a first draft of the proposal outline with all partners by latest Wednesday. It would be great if we could receive your input by then so that we can already reflect this in the thinking.

Thanks a lot,
(10)(2e)

From: (10)(2e) < (10)(2e) @rivm.nl>
Sent: Monday, May 25, 2020 5:49 PM
To: (10)(2e) < (10)(2e) @eurohealthnet.eu>; (10)(2e) < (10)(2e) @rivm.nl>
Cc: (10)(2e) < (10)(2e) @eurohealthnet.eu>; (10)(2e)10)(2e) < (10)(2e) @eurohealthnet.eu>; (10)(2e) < (10)(2e) @eurohealthnet.eu>
Subject: RE: H2020 proposal on "Behavioural, social and economic impacts of the outbreak response"

Dear (10)(2e),
I will check our ideas in our behavioral unit working on CoVID-19. I hope to come back to you soon with our intention and ideas.
Best regards,

(10)(2e)
(10)(2e)
(10)(2e)

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Postbus 1 (10)(2e)
3720 BA Bilthoven
Bezoekadres: Antonie van Leeuwenhoeklaan 9, Bilthoven

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Gezondekinderopvang.nl
Elk kind verdient een gezonde start!

PS. Ontvangt u onze maandelijkse CGL-nieuwsbrief al? Meld u nu aan!

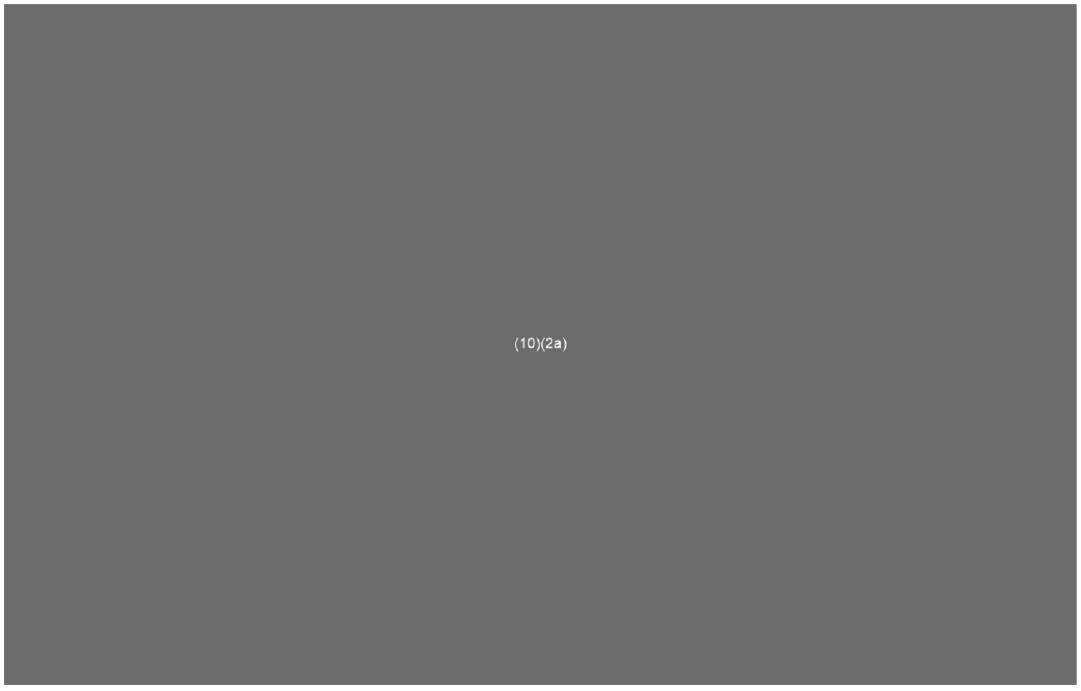
Volg Loketgezondleven.nl ook op

twitter

From: (10)(2e) < (10)(2e) @eurohealthnet.eu>
Sent: donderdag 21 mei 2020 11:56
To: (10)(2e) < (10)(2e) @rivm.nl>; (10)(2e) < (10)(2e) @rivm.nl>
Cc: (10)(2e) < (10)(2e) @eurohealthnet.eu>; (10)(2e)10)(2e) < (10)(2e) @eurohealthnet.eu>; (10)(2e) < (10)(2e) @eurohealthnet.eu>
Subject: H2020 proposal on "Behavioural, social and economic impacts of the outbreak response"

Dear
Dear (10)(2e),

I hope this finds you well.



Please don't hesitate to reach out should you have any questions, and we look forward to hearing back from you.

Best,
(10)(2e), on behalf of (10)(2e) and the EuroHealthNet team

H2020 Call guidelines: Behavioural, social and economic impacts of the outbreak response

Scope:
Proposals should focus on lessons learnt: they should i) address how to mitigate social and economic impacts of the outbreak response related to health systems; ii) identify non-intended consequences of epidemic-control decisions; and iii) provide answers to social, including gendered, dynamics of the outbreak and the related public health response. Proposals should analyse the effects and efficiency of these responses (including resilience factors), democratic governance, multi-level cooperation, the critical gaps and the various exit strategies, their underlying methodologies and regional adaptations. Proposals are expected to develop guidelines and best 'next practices', and implement interventions to mitigate impacts and boost wellbeing.

In particular, in their proposals the applicants are encouraged to integrate multiple medical, social sciences and humanities disciplines, including anthropology, psychology, sociology, epidemiology, implementation science, journalism & communication, economics and political sciences, as well as gender studies and intersectional research to address the following inter-related dimensions:

- **Analyse and compare outbreak responses across Europe and impacts on human behaviour and social dynamics** by different regions and countries, taking into account societal and cultural structures, health system preparedness and resilience, population densities, population risk groups, climate, pollution, among other factors. Proposals are encouraged to develop guidance for health behavioural patterns to positively influence adherence to behavioural advice and prevent disinformation about health issues and confinement, isolation and social distancing at societal, community and individual levels. Furthermore, the proposals should study factors contributing to the use of harmful self-medication and in anticipation of possible hesitancy towards vaccines.
- **Mental health and health inequalities:** The proposals should address the immediate and long-term mental health impact in relation to, for example, confinement and social isolation, time spent indoors, repeated media and technology consumption, and disruption of work/school-life balance. They should also address the potential exacerbation of health inequalities affecting a number of vulnerable groups. These could be frontline healthcare workers (a majority of which are women), who might face ethical challenges, suboptimal working conditions and suffer from traumatic stress. In addition, proposals could focus on mental health and health inequalities impacts for elderly and other age groups, people with pre-existing conditions and comorbidities and those with precarious socio-economic conditions (e.g. migrants, the homeless and/or unemployed).

The Commission considers that proposals requesting a contribution from the EU of between EUR 4 and 10 million would allow this specific topic to be addressed appropriately. Of note, a proposal requesting the maximum envisioned contribution must be able to deliver on all the dimensions mentioned above, to include partners from a wide range of disciplines and to deliver results that are representative of the whole EU27 and associated countries. Moreover, in case there is more than one funded project, cooperation, communication, collaboration and coordination across research groups will be strongly encouraged.

Expected Impact:

- To improve the resilience, wellbeing and mental health of the population, frontline workers and, in particular, of the most vulnerable groups and mitigate health inequalities during and after pandemics.
- To contribute to a better understanding of the impact, effectiveness, the public health preparedness and responses (control) that have been taken at different governance levels in the context of the ongoing epidemic of COVID-19 in terms of; acceptability, adoption, appropriateness, feasibility, fidelity, implementation cost, coverage, sustainability of diagnosis and clinical management of patients and survivors infected by SARS-CoV-2 as well as front line workers and communities.
- To prepare holistic assessments of the social, economic and political impacts of the outbreak and its responses, and to propose and deploy evidence-based policy measures (transferable best practices, methodologies) and other initiatives to improve industry's and society's adaptation capacity and resilience as well as supporting the availability of critical technologies and tools (during and after a shutdown) that accelerate and enable a fast recovery of the current healthcare emergency.
- To contribute to a holistic public health preparedness and response in the context of ongoing and future epidemics.

- To provide health authorities with guidance for further public health interventions, and to support implementation of actions to; mitigate or manage consequences of current policies, and to better tailor future pandemic management strategies e.g. on confinement.
- To deliver results within 3 - 36 months to end-users at scale.

EuroHealthNet

(10)(2e)

(10)(2e)

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1000, Brussels, Belgium

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www.health-inequalities.eu
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