

Round table session on compensation health research (CHR) and building a European Research Network on Compensation Health (EURNoCH)

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Compensation Health Research (CHR) aims to study the influence of compensation schemes, for instance in case of work disability or after traffic injuries, on health and health related outcomes. There is research that suggest that people in a claim situation have more symptoms or recover more slowly. What is causing this? What factors are relevant and determine the optimal compensation scheme? What compensation scheme does not harm the health of sick or injured victims, but facilitates optimal recovery?

The answers to these questions are part of compensation health research and essential insights for the process of further harmonization of legislation in the EU.

Besides introducing and presenting the area of compensation health research we also want to invite interested delegates to join the European Research Network on Compensation Health (EURNoCH).

What is this session about?

In this round table session the research area of Compensation Health Research (CHR) will be introduced and presented, participants will be invited to discuss various aspects of CHR and the possibilities and relevance of future research. Furthermore, interested delegates are invited to join the European Research Network on Compensations Health (EURNoCH). This collaboration aims to provide a European network on compensation health research facilitating International research.

The following aspects will be presented:

- An overview of earlier research on compensation health
- What are the relevant factors in compensation schemes (or legal procedures) related to health or health related outcome parameters.
- What is the place and role of secondary gain?
- The International perspective. What can we learn from International research on the effect of change of compensation schemes?
- What does the optimal compensation scheme look like?
- What kind of research do we need in the future?
- The biopsychosocial-model: After the bio- and psycho-, finally time for the social part?
- Building a European research network on compensation health.

Who should participate?

This round table session is relevant for everyone interested in the relationship between compensation schemes and health, for everyone interested or involved in research regarding aspects of compensation systems and health related factors and, for all delegates interested in joining the European Research Network on Compensation Health (EURNoCH).

Background

Each year 42.000 EU citizens are killed and 3.5 million are injured in road traffic collisions. In its 1995 Green Paper, the European Commission noted that in a single year, road traffic injuries cost the European Union approximately 15 billion Euros in medical, administrative and damage reparation expenditures alone. In 2002, the annual cost of road traffic collisions to society was estimated at 160 billion Euros and is now estimated at 200 billion Euros. Medical costs and the level of compensation have also generally increased.

When a EU citizen gets injured in a traffic collision, the economic and non-pecuniary losses usually are compensable, but compensation practices and procedures vary widely between Member States with unclear effects. Civil liability coverage exists in all countries. A number of factors impact on compensation scheme outcomes. Guaranteeing minimum levels of protection through compulsory third party insurance has an impact on compensation and health outcomes, but so do societal changes, standards of living, the evolution of mortality rates, new technologies in dealing with injuries, the circumstances in each case and how non-pecuniary losses are evaluated by the courts. All these will create differences in compensation and health outcomes with some merely creating differences between individual cases and others leading to important differences between countries.

Epidemiological research shows that, as a group, people injured in traffic collisions who are involved in compensation processes recover on average less well than those who are not. (1-5)

There is evidence that changes in the design and operation of compensation schemes, and in the services provided by agencies and lawyers, can improve health outcomes and return-to-work.(3,4)

Research shows that disability assessments vary vastly across Europe. (6) The number of workers on disability benefits also varies across Western European countries. Different legislation, compensation schemes, eligibility rules, levels of juridification and adversariality, and/or generosity of benefits can explain these variations.

Aim of Compensation Health Research

Research is needed to provide a better understanding of what exactly causes the detrimental effects of compensation procedures and how they can be optimized, in order to enable informed changes in future policy, case law, the modus operandi of the legal profession and relevant institutions, and perhaps even to inspire legislative change.

An International comparison and investigation of compensation schemes in relation to health related factors is essential to understand what compensation system factors influence health outcomes like health-related quality of life, functional recovery and return to work, and how a compensation scheme can be designed that does not harm the health of work disabled employees and self-employed, and injured victims, but facilitates optimal recovery. CHR aims to investigate the relationship between relevant factors in the compen-

sation system and health related outcomes.

Compensation Health Research can deliver to policy makers the information they need to design the EU compensation systems of the future. Optimized compensation schemes can facilitate injury recovery, return to work, promote health and reduce the cost of work disability and road traffic injuries to society.

In Australia, Compensation Health Research is already a rather established research area, as illustrated by the annual Australian Compensation Health Research Forum (www.achrf.com.au).

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