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Public health a driver of other public policies

European Health Forum

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Dr. Leiner, Ladies and Gentlemen,

I am very pleased to be here with you in this unique setting, to share some ideas with you about the future of public health policy in Europe today. Because the European Health Forum Gastein has by now established itself as an important focus for high-level discussions on the key health issues facing Europe's decision-makers. It is a genuine stakeholders forum - as it brings together decision-makers from policy and administration, science and industry, and the key advocates of patients and citizens concerns - to debate today's health issues and to move the health policy community towards ever greater consensus. The results of these discussions, and the impact of the Gastein declarations, have proved both useful and influential.

Unfortunately, I was unable to attend the whole of the conference. But I know that a number of my Commission officials, have played an active role in our proceedings. And I am particularly pleased that the Commission's forum on the Community's future health policy was so well attended. So, let me congratulate the organisers, in particular your president, Dr Leiner, for having launched this important initiative which is clearly meeting a real need in Europe.

1. Health - a High Profile Challenge

Given the recent evolution of public health policy at local, national and particularly European levels, our Forum is timely in its focus on this rapidly developing dossier. It also reflects the fact that health issues are increasingly occupying a central place on the public policy agenda in Europe today. Increasingly, networks of public health experts and public representatives from across Europe, are working together to set out common approaches to tackling health priorities.

Because health policy is no longer just a professional specialisation. It is a public context. You only have to look at the impact which issues such as food safety, AIDS and blood products have made in recent years, to understand that public health is becoming a driver of other public policies. Similar to the way in which environmental considerations have become standard reflexes of the body politic over the last twenty years - so public health considerations are fast becoming embedded in the consciousness of today's decision makers.

At European level, the fact that a Commissioner has been given specific responsibility for Public Health and Food Safety, backed up with a new Directorate General, is a clear signal of this prioritisation of Public Health. And as you are aware, health related issues are receiving a high level of political attention from the Prodi Commission whether we consider the White Paper on Food Safety, Tobacco initiatives or the forthcoming Public Health Strategy.

And so, for public policymakers today - at all levels, whether European, national, regional or local - public health priorities increasingly influence the mainstream of contemporary policymaking. Whether we are dealing with the demographic disciplines of economic planning, the elaboration of inclusive social policy or the enforcement of food safety measures. Or indeed, in the wider world of our relations with our global partners, such as when we are seeking to provide effective development assistance to tackle the scourge of communicable diseases like AIDS, TB, and Malaria.

By the way, this is an issue I was discussing with Mrs. Brundtland and other health policy leaders at a global round table on tackling communicable diseases held in Brussels yesterday. The message from that meeting was clear- if we don't act quickly on access to better health systems, medicines, research, and education - there will be little enough left of these disease ravaged societies, to develop in the coming years.

And so, in preparing decisions in other policy sectors, the current of public health priorities constantly pressures today's decision-makers to take a wider view of their dossiers. Particularly in the light of the key health challenges facing our societies. Because tomorrow's challenges, demand coherent responses in today's policies.

2. Key Challenges in Health

So what are the key challenges for European policymakers and policy advocates today? Well as I am sure you will agree the first of these is the ageing of the European population. This is a development which will change the pattern of disease in our countries and impose added financial burdens on already stretched health systems.

Secondly, as you are discussing here today, there is the rapid development and introduction of new technologies in health. The pace of research and technical innovation is accelerating, and over the coming years we are likely to see enormous changes in methods of diagnosis, treatment and care, with profound consequences for how we organise our health services.

Third, and partly as a result of demographic changes and the introduction of new technologies, health expenditure is rising. All European countries are struggling to meet the demand for health services at the same time as trying to contain the continual rise in health service costs.

Next, the issue of enlargement. Because, the forthcoming enlargement of the Community, presents an acute additional challenge. This means that we must take account of the candidate countries very different health situation where, generally speaking, health status is lower than in the E.U., and where in addition, there is significantly less money available to spend on health.

And last but by no mean least, both nationally and at Community level, we have to respond to public concerns and expectations. People are rightly concerned about how well their health is being protected, and these worries have, of course, been heightened as a result of the various food safety crises which we have had in recent years. Moreover, the general public has growing expectations about what health services should provide and about the quality of those services. Our citizens and their patient groups - many of whom are here today - are growing more vocal about these expectations. And as policymakers, we must be more attuned to the voice of the public, in public health. Or to put it another way, we must be more effective at responding to the "public", in public health.

In addition to these challenges, the fact of living in a world which is being transformed by communications, travel and technology, highlights new risks and opportunities. Because whether we are looking at the European Union or the Global Village, our world has been reduced by travel and opened up by information technology. And we need to be attentive to these transformations.

In today's Europe, quality of life issues like health, play an important role in defining citizenship and in shaping public policy. Of course, this is no secret to those of you who work in health

advocacy organisations. In line with this, Europe has become increasingly attuned to the democratic touchstones of sovereignty and subsidiarity. And I believe that in partnership with Member States, our health policies will increasingly address the quality of life issues which so define contemporary citizenship, all the while respecting the spirit of subsidiarity.

Because today's citizens probably value feelgood factors like good health and decent healthcare, as much as any amount of apparently abstract legal dispensations. For those of us who spend our lives developing the rule of law and constitutional rights, this may come as something of a disappointment! But when they examine the pros and cons of their European, regional or national citizenship, it is increasingly practice, rather than theory, that is decisive in today's democracies. Or to put it another way, today's citizen's are just as concerned about their quality of life, as the quantity of their rights. And so we need to ensure that hard-earned principles are backed up in day to day experience for our citizens. And the development of health policy is a clear case in point.

In discussing different aspects of the contemporary health context, you have, I understand, dealt with the challenges of technological progress, the impact of the Internet and other communication technologies, and the evolution of a European e-Health policy.

This is both timely and important. Because in this interconnected world with increased public health risks and opportunities, our citizens expect greater choice, higher standards and better health. And I will be finalising suitable e-Health measures with my services in the near future, as part of the e-Europe initiative.

This is an issue of increasing importance. For example, there are now over one quarter of a million health-related sites on the Internet. And in addition to the numerous magazines and journals on health, we are now seeing a growing number of specialised television and radio programmes.

Another important aspect of this renewed civic interest in public health is the desire for more transparency and a more inclusive approach to governance in the elaboration of Community health policies. As you are aware, in order to address this issue a vital part of the new health package was the announcement that we shall be setting up a new body: the European Health Forum. I am conscious that there are demands from many quarters that policy-making at Community level should be more open, transparent and responsive.

This new Forum will help to address this concern. It will bring together representatives of the public health community - voluntary bodies, health professionals, academics and patients' organisations - to discuss Community health issues and priorities. In this way, all those with an interest will have the opportunity to make an input into the shaping of the Community's health policy. My services are shortly to launch a consultation exercise on this, and I am sure that you will all take the opportunity to express your views on this vital issue.

Ladies and Gentlemen, one thing that all these issues have in common is that they demonstrate clearly that the European Community has an important and growing role in health. A fact which was of course recognised in the latest revision of the Treaty. This not only extended the Community's competence in certain areas, but also underlined that all Community policies must contribute towards achieving a high level of health protection.

It is against this background that the Commission put forward in May its new health strategy and its proposal for a new public health programme. I know that you have had an opportunity to discuss our proposals in detail in the discussion forum yesterday. And I can assure you that my officials have carefully noted down your comments and suggestions. We will give them due attention over the coming months.

Today I will restrict myself to making just one or two points on our new health policy.

The two documents adopted in May are linked and should be seen as a package. The health strategy document describes how many Community policies interact and have a bearing on our population's health. Internal market policies, for example, regulate certain health-related products, such as pharmaceuticals or medical devices, and they also lay down rules for the recognition of diplomas of health professionals. Environmental policies cover rules for emissions into the air, the soil or water. Radiation protection is clearly an important area in its own right. Finally, the findings generated by our research programmes help to inform and underpin policy-making in health.

Our work on public health is thus one important element of our health strategy, but by no means the only one. We need to improve our understanding of how different policies and actions interact, and how they influence health status and health systems within the Community.

Over the coming years, we will take a number of measures to ensure that the Community's overall approach is fully coherent and consistent. This will involve first taking steps to strengthen co-ordination between policy areas. We shall also place greater emphasis on assessing the health impact of policy proposals and actions. And we shall support the development of criteria and methods for evaluating policy proposals and their implementation.

My aim is to develop over time, a health impact assessment system which is both effective and adapted to the needs of the policy process. So that, as I have said earlier, health enters the mainstream of policymaking.

The new public health programme is a crucial element of the new strategy.

But, in addition to the collection of information on mortality and morbidity, the new public health programme contains proposals to gather and analyse data on a number of key developments within health systems, and to look at questions of best practice and benchmarking. This should provide both citizens and those directly responsible for health systems, with some vital missing links. Because such a stream of high quality information, will facilitate an informed choice in health planning and policy. Thereby, making difficult choices easier.

3. Health and Enlargement

In talking about the importance of a clear picture of European public health priorities, I would like to say a few words about the issue of our forthcoming EU enlargement. Of course, the candidate countries are very different. Each has its own health system, traditions and specific health situation. We must be careful, therefore, not to generalise either about the problems they face or about appropriate solutions. But nonetheless, taking the countries as a group, we can see that there are a number of considerations which apply to almost all.

Their health status indicators compare poorly with those of the Member States of the Community. As is often the case for lower-income countries with less-developed health systems, they also face serious problems with communicable diseases. In addition, the candidate countries, with one or two exceptions, have fewer resources to spend on health. Their health systems are in need of significant reform to improve their overall effectiveness, as well as requiring a number of specific changes to bring them in line with the relevant Community legislation.

A rather different but related issue, is the possible consequences of enlargement for the health status and systems of the existing Member States. The free circulation of products, notably certain pharmaceuticals, blood products and medical devices, raises issues relating to safety, quality control and pricing as well as the effects of competition and internal market rules. Similarly, there are potential concerns relating to the free movement of health professionals and of patients.

But rest assured, the Community is taking steps to ensure that these questions are properly addressed in the enlargement process. As you may be aware, in May 1999, the Commission published a discussion document on Health and enlargement. And a major public hearing on this topic was organised in July this year by

And I am sure that, the new health strategy and public health programme will address issues arising from enlargement. The health information system will provide the latest set of comparable data. There will be an improved capacity to respond quickly to major health threats as the surveillance and control networks will be open to the candidate countries. Finally, our focus on health determinants is particularly relevant in the candidate countries. As many of them face important problems related to environmental pollution and have to deal with high rates of smoking, alcohol and drug abuse. In clarifying these issues we know that we need to begin to

work together with our future member states now, to improve the quality of health in tomorrow's Europe.

Ladies and Gentlemen, today I have highlighted several points that I consider particularly important for health policy in Europe. And all the more so in view of a Europe which will soon be considerably enlarged. Although as I take in the beauty of Gastein here in Austria, here in central Europe, I begin to wonder whether the journalistic phrase "expansion to the east" is the right way to describe what will in fact be, a return to the center.

I suppose in summary, this idea of a return to the centre is what I have been trying to underline, in speaking to you today. A return of constructive public health policies to the centre of the European agenda and to the democratic experience of our present and future citizens. The Community has a large role to play in this and the Commission's health package is one important step down this road to a proactive strategy serving our long-term needs through an integrated policy.

And so, I hope that in co-operating on these life and death issues as you are doing here in Gastein today - we can act together to ensure an increasingly productive and healthy life, in the future, for all our citizens.

Thank you.