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Summary

The European Heart Network (EHN) is a Brussels-based alliance of heart foundations and other concerned non-governmental organisations throughout Europe. EHN has 30 member organisations in 26 countries.

EHN plays a leading role in the prevention and reduction of cardiovascular disease through advocacy, networking and education so that it is no longer a major cause of premature death and disability throughout Europe.


EHN agrees with the Communication’s emphasis on health inequalities, ageing and children’s health and strongly supports the inclusion of a new strand on disease prevention to reinforce and complement the health determinants strand.

EHN suggests amendments to Article 2 as well as to the Annexes 1 and 2. These can be found in the Annex to this paper.
Introduction


It is European Heart Network’s (EHN) understanding that the framework programme on health and consumer protection has been established to achieve synergies primarily of an economic and administrative nature. EHN can support this rationale and considers that the proposed framework programme strikes a reasonable balance between potential common actions whilst also maintaining actions specific to each of the two policy areas. In particular, EHN welcomes the proposal to more than double the budget for health, increasing it from 52 million euros a year to about 116 million euros a year.

Below, EHN sets out some comments pertinent to EHN’s aims and objectives.

Communication on a health and consumer strategy

EHN is pleased to see that the Commission opens its chapter on health by stating that health is a basic human right and that making European citizens healthier is the ultimate goal of all health activities pursued under the Treaty.

EHN welcomes the Communication’s emphasis on health inequalities, ageing and children’s health.

EHN also welcomes the inclusion of a new strand on disease prevention to reinforce and complement the health determinants strand. EHN works extensively on health determinants, notably nutrition, physical activity and tobacco, as well as on policy development in these areas, thus embracing the whole-population approach. However, EHN strongly believes that making a clear link between health determinants and a specific disease outcome is effective in communication. EHN also believes that there is added value in working on distinct aspects of specific diseases at EU level. In that context, EHN notes that actions under the disease prevention strand will include support for secondary prevention, screening and early detection through exchange of good practice, platforms, studies and networking.

Proposal for a programme of Community action in the field of health and consumer protection

Proposal

In the proposal itself, EHN’s only comment is on Article 2 on aims and objectives. Article 2.2 (a) sets out the common objectives for health and consumer protection:
– to protect citizens from risks and threats that are beyond the control on individuals;
– to increase the ability of citizens to take better decisions about their health and consumer interests;
– and to mainstream health and consumer policy objectives.

EHN suggests that the formulation of the objective to increase the ability of citizens to take better decisions about their health and consumer interests does not take into account the socio-economic and environmental factors sufficiently.

EHN points out that it would be useful to spell out that health and consumer policy objectives must be mainstreamed into other Community policies.

Annex 1

In Annex 1 on common actions, EHN welcomes that the examples given, of what constitutes risks and threats beyond citizens’ control, include unfair commercial practices. EHN believes that this brings to the fore the fact that the major disease burden in the EU comes from non-communicable diseases on which cross-border commercial practices have an important impact.

EHN also notes and applauds the stated intention to increase civil society and stakeholders’ participating in policy-making through strengthening of as well as training and capacity-building for Community-level health and consumer organisations. EHN also welcomes the intention to strengthening Community-level consultative bodies and mechanisms.

The third objective on mainstreaming health and consumer protection objectives into other Community policies is the area where Community action alone can be effective. It is critically important that sophisticated tools be developed to enable the health community to demonstrate in a measurable way the impact that other Community policies have on health and Healthy Life Years.

Annex 2

EHN believes that the major disease referred to in Annex 2, 4.1 should be listed to include cardiovascular diseases, cancers and mental illness, as is the case in the Communication.

Conclusions

EHN welcomes the Commission Communication on a Health and Consumer Protection Strategy and Proposal for a Decision establishing a Programme of Community action in the field of Health and Consumer protection 2007-2013. EHN hopes that the joint programme will achieve the synergies sought without any detrimental effects on either of the two policy areas.

EHN approves of the doubling of the budget for action on public health protection.
EHN agrees with the Communication’s emphasis on health inequalities, ageing and children’s health.

EHN strongly supports the inclusion of a new strand on disease prevention to reinforce and complement the health determinants strand. EHN believes that a focus on specific diseases will enhance health promotion activities and facilitate monitoring of outcomes as well as evaluation of effectiveness.

In the annexe to this position paper, EHN has listed a few amendments to the proposal.
Annex

*Amendments:*

Amendments are indicted in *italics*.

**Article 2 - Aims and objectives**

**Article 2.2 (a)**

The common objectives for health and consumer protection to be pursued through the actions and instruments set out in Annex 1 to this Decision shall be:

- to protect citizens from risks and threats that are beyond the control on individuals;
- to enable citizens to take better decisions about their health and consumer interests;
- and to mainstream health and consumer policy objectives into other Community policies.

**Annex 1**

Same amendments as to Article 2.2 (a)

**Annex 2**

**ANNEX 2 – HEALTH**

**Objective 3: contribute to reducing the incidence of major diseases**

4.1 Development and implementation of actions on major diseases of particular significance in view of the overall burden of disease in the Community, namely cardiovascular diseases, cancers, diabetes and mental illness, where Community action can provide significant added value to national efforts.