Subject: The formation of sub-groups under the Multi-Stakeholder Platform on the Implementation of the Sustainable Development Goals

Dear First Vice-President Timmermans,

The European Chronic Disease Alliance (ECDA) follows with interest the Multi-Stakeholder Platform (MSP) on the Implementation of the Sustainable Development Goals (SDGs). Our objectives are to prevent chronic diseases and, more generally, to preserve and promote health. Ahead of the next MSP Management Committee meeting, on 14 March 2018, we write to impress upon you how important it is that the sixth Reflection Paper ‘Towards a Sustainable Europe by 2030’ addresses the challenges that the EU and its Member States face because of the large and increasing burden of chronic diseases.

To ensure effective attention to this challenge, the ECDA suggest the creation of a ‘horizontal’ sub-group on Health and Social Affairs.

In the EU, 550 000 people in working age die from four major chronic diseases (cardiovascular disease, cancers, respiratory diseases and diabetes) every year. This carries a significant societal and economic cost. Indeed, OECD has estimated that losing 550 000 productive lives costs the EU economy € 115 billion a year. This corresponds to 0.8% of GDP in the EU.3

These figures stress the importance of reaching SDG 3 (and its target to reduce by one third premature mortality from non-communicable diseases). They also stress that a healthy population is a condition sine qua non for reaching the other SDGs and ensuring resilient and competitive EU societies and economies. Health could be said to constitute Europe’s greatest wealth-generating resource.

Creating a sub-group on Health and Social Policy goes to the very heart of ‘Better Regulation’. It ensures a coherent and streamlined policy development. It also echoes EU citizens’ call for more European-level decision-making in dealing with health and social security issues – a call which comes especially from young people.3

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1 http://www.oecd.org/health/health-at-a-glance-europe-23056088.htm
2 http://www.oecd.org/health/health-at-a-glance-europe-23056088.htm

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Many, if not most, EU policies have a direct or indirect impact on population health. If the impact is negative, this may, perversely, hinder the achievement of a resilient and competitive EU – one that can provide for future generations – that the policies were intended to achieve. Simultaneously, healthy workforce, human capital and a strong economy underpin the implementation of most, if not all, SDGs. So rather than putting health into sub-groups on other polices we suggest putting other policies into a sub-group on health.

The questions the sub-group on Health and Social Policy would have to ask are, for example, what would a Common Agriculture Policy (CAP) look like if it were developed with a view to achieve SDG 3? How might that help to achieve other SDGs, say SDGs 12 (on responsible consumption and production) and 13 (on climate action)? See also illustration in annex.

We would be very happy to discuss further how public health can be a vehicle for policy coherence, intergenerational equity, as well as representing an exceptional opportunity for added value to all EU Member States.

Yours sincerely,
Prof. Raymond Vanholder
Acting Chairman, for the European Chronic Disease Alliance

European Academy of Allergy and Clinical Immunology (EAACI)
European Association for the Study of the Liver (EASL)
European CanCer Organisation (ECCO)
European Heart Network (EHN)
European Kidney Health Alliance (EKHA)
European Respiratory Society (ERS)
European Society of Cardiology (ESC)
European Society of Hypertension (ESH)
European Society of Medical Oncology (ESMO)
International Diabetes Federation Europe (IDF Europe)
Annex: World Health Organization illustration