

FLASH n°124 – July 2014

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- More resources and attention shoud be devoted to the improvement of #mentalhealth! @OECD bit.ly/1k7Tm2D
- AIM @AIM_Healthcare · 7 juil. Read AIM's memorandum for the European elections. @AIM_Healthcare bit.ly/1qD0yJN

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AIM and you

AIM adopts Declaration on Air Pollution and Health

26 June - AIM adopted during its General Assembly a declaration on air pollution and health as it thinks it's high time for the consequences of air pollution on health to be recognised and for actions to be taken.

Acknowledging the impact of air pollution on citizens' health, the increased health costs for the healthcare system as a whole, and taking into account that previous measures from the European Commission don't go far enough and that new findings in WHO's assessment show greater health effect of air pollutants than those already known, AIM understands that it is "time to act". The organization has thus adopted a declaration on air pollution and health in which it calls for Member States and MEPs to adopt more ambitious and binding commitments for emission reductions for the years to come. Furthermore AIM wants European decision-makers to align the EU's ambient air quality standards with the health based recommendations made by WHO.

Find the declaration on AIM Website.

European Institutions

European Commission

EU Commission: WTO Fund to support Developing Countries

22 July – WTO announces it will set up a fund to help developing countries and least developed countries to implement the Trade Facilitation Agreement.

As the WTO defines it, "the Trade Facilitation Agreement contains provisions for faster and more efficient customs procedures through effective cooperation between customs and other appropriate authorities on trade facilitation and customs compliance issues. It also contains provisions for technical assistance and capacity building in this area." The new Trade Facilitation Agreement Facility should ensure that every developing country is assisted in the implementation of the Agreement. Its main objectives are the increase of trade flows, the expansion of duty collection revenue and the improvement of the efficiency of customs administrations.

For more information on this topic, please read EU Commission's article.

Council appoints four new commissioners

17 July - The Council of the European Union which gathers ministers of Member states appointed by common accord with the President of the Commission 4 new commissioners to replace the ones elected as Members of the European Parliament.

To replace Mr. Olli Rehn responsible for economic and monetary affairs and the euro, Mr. Jyrki KATAINEN was appointed from Finland while Poland sent Mr. Jacek DOMINIK to take over the financial programming and budget portfolio. Mr. Ferdinando NELLI FEROCI (Italy) replaced Mr. Antonio Tajani, responsible for industry and entrepreneurship and lady Martine REICHERTS of Luxembourg will join the team in charge of justice, fundamental rights and citizenship. These commissioners will be in charge until the term current Commission term of office (31 October 2014). A whole new college will be appointed then.

Priorities of Commission President Jean-Claude Juncker on health and social issues

15 July - Commission's President Juncker published his political guidelines for the new European Commission.

In a 14 page document, the President speaks for the safeguard of Europe's health, social and data protection standards and cultural diversity on the altar of free trade. He reckons that the safety of the food and the protection of Europeans' personal data will be non-negotiable. He announced his will to implement support and reform programmes that do not only go through a fiscal sustainability assessment; but through a social impact assessment as well. Finally, an ambitious Jobs, Growth and Investment Package should be carried out to strengthen Europe's competitiveness and to stimulate investment for the purpose of job creation. The new European Commission will begin to work in November 2014. In autumn, it will publish a more detailed working program. You can find the Political guidelines for the new European Commission <u>Here</u>.

> Presidency

Italian Presidency: Medical devices and Clinical Trials as priorities

22 July - The Italian Health Minister was auditioned by the European Parliament Committee Environment and Health (ENVI) in Brussels. The Minister presented the priorities of the Italian Presidency for the EU for the six next months. The Presidency has the mission to organise and chair all meetings of the Council of Ministers (Except Foreign Affairs). It has a huge power to shape the agenda of the EU by moving forward some issues and "burying" others. Key points of the audition:

- Italian Presidency priorities and events: Italian Minister for Health Beatrice Lorenzin said that the Italian
 Presidency would focus on the importance of vaccinations, patient-centred innovation, and the importance of
 healthy lifestyles in preventing diseases. She outlined the conference that the Presidency will hold over the
 next six months, including on women's health, care costs, HIV/AIDS, and healthcare for young people.
- TTIP Matthias Groote (S&D) raised concerns about the possible watering down of clinical trials regulations as
 part of the TTIP negotiations, and Margrete Auken (Green/EFA) said that this is an area US pharmaceutical
 companies are focusing on in negotiations. Eleonora Forenza (GUE/NGL) said that animal welfare standards
 are under threat under the food element of TTIP. Beatrice Lorenzin said that quality standards of clinical trials
 must be kept up and that the health of citizens is not negotiable. However, she added that TTIP is a major
 opportunity, and Europe is big enough to play the game in a competitive and equal way.
- **Medical devices:** Lorenzin noted that the Italian Presidency had inherited the medical devices and in-vitro medical devices from the previous Parliament, and intends to continue with these, creating an efficiency and effective system. The Italian Presidency has scheduled an intense series of activities to examine the proposed legislation, and all member states have been written to. The aim is to define by August a shared Council position.

You can find the Website of the Italian Presidency Here

> European Parliament

Maternity Leave: Plans to withdraw the EU Maternity Directive

15 July - The European Parliament is planning to withdraw the revised EU directive regarding maternity leave, a measure which would have dramatic social consequences.

Since its first reading on 20 October 2010, the proposed Directive, which provides measures such as 20 weeks fully paid maternity leave, measures to protect women from dismissal on return or two weeks fully paid paternity leave, was blocked in its process of adoption by some Member States. For many MEPs, this withdrawal would directly affect women's rights and particularly equal professional opportunities. It would also leave place to wage differentials between men and women and have an impact on women's income. Moreover, the decision would slow down or even hinder the pursuit of an employment rate of 75 percent for women, as it was set in the strategic objectives of the European Union for 2020.

For more information on the topic, please read the Parliament Magazine's article.

Pharmaceuticals and Medical Devices

HIV: High Prices hinder Access

21 July – Doctors without Borders (MSF - Médecins sans Frontières) reports that high prices continue to represent a barrier to access to HIV treatment, particularly in developing countries.

MSF report underlines the need to develop tools which ensure better quality of care, such as the "viral load monitoring", which allows to detect adherence problems earlier and to help people to stay on more affordable treatment for longer. Unfortunately, many countries, like South Africa, India or Kenya, have failed to implement this monitoring on a wide scale, mainly because of its price per test. Important steps need to be carried out in order to reduce the costs and the complexity of the introduction of viral load monitoring, which include the renting of

instrument, better price negotiations and the use of more efficient sample collection techniques.

MSF's annual drug pricing report states that second-line regiments are still more than double the cost of first-line treatment. The need for countries to overcome patent barriers in order to enable wider and more affordable access to treatment is urging.

For more information on the topic, please read the article.

> National Health Policies

International Collaboration: AMA and OISS sign important Agreement

23 July – The Alliance of Mutualism of America (AMA) and the Ibero-American Organisation of Social Security signed a cooperation agreement in Madrid.

During the meeting, relevant issues for the Latin-American environment were dealt with, particularly the inclusion of the population in the different areas of Social Security and Protection. The agreement will allow AMA's members to take advantage of OISS knowledge, strategies, innovation and management of technical and political projects. AMA actively takes part in organisations like the OISS in order to increase the presence of mutualism in each and every Latin-American country, and, at the same time, to spread and improve social protection in the region. For more information on the <u>AMA</u> or the <u>OISS</u>, visit their webpages.

The decline in social spending especially affects the health sector in Europe

22 July - When it should soften the impact of the crisis, social spending is decreasing in Europe. Health expenditures are the most affected.

After the 2009 crisis, most European countries have reduced their spending on social protection. The declines were particularly important in Greece, Latvia, Portugal and Romania. In 2011, health care spending reached 10.6% of GDP for the EU-15. France stood a little above average with 10.9% after Ireland, the Netherlands and Denmark who have devoted the largest share of their GDP to health. Conversely, Lithuania and Malta had the lowest levels of health expenditure. The decline in health spending was solid in Greece, where the situation has become preoccupying for the citizens.

This decline in health expenditure can be explained by medical expense control policies, weak growth of hospital spending and an epidemic favorable contribute to reducing health spending sometimes at the expense of patients. One of the major challenges that the various countries of the Union must fight remains the ageing population. This involves managing the issue of dependence, while ensuring the financing of old-age insurance and health insurance systems. It is estimated that in 2060, the dependency ratio of the elderly will be 52.6% in the EU27.

More information in the Report Employment and Social Developments in Europe 2013.

Iran is implementing an inclusive health coverage program in order to extend medical insurance to all Iranians by 2018

15 July - Medical insurance was first introduced in Iran in 1935. However, 10 to 15 million people, especially the underprivileged, cannot afford to take out medical coverage.

To cope with this problem, Iran announced a plan to extend universal health insurance to all Iranians called Rouhanicare and inspired by Obamacare. According to his year's budget plan, the state will dedicate 10 percent of the revenues generated from redirecting subsidies away from energy and food into health insurance. The President promised that at least five million citizens who are the most vulnerable will be the first people to benefit from the initiative.

Kinshasa prepares regional conference on social protection in Africa

16 July - Africa regional conference on social protection will be held in December 2014 in the Democratic Republic of Congo.

This regional meeting will aim at contributing to the creation and development of a regional consensus for social protection policy in the African region. It will allow politicians, high-level administrators in the field of social protection worldwide, academia, civil society and NGOs to share their experiences, new research and best practices on existing programs in the field of social protection, particularly in developing countries. The work of the regional conference will

be held in four committees focused on the social security aspects that are essential for the establishment of a social protection floor. These include access to health care services, maternal health, children's access to nutrition, education, as well as coverage for the elderly and people with disabilities. More information Here.

Uruguay: Social Public Spending invested on Improvement of Healthcare and Social Security

30 June – The Uruguayan Government published a report on Social Public Investment Programme, which has risen by 83% for the period between 1989 and 2012, particularly in the areas of health, public education and social security. The report states that public spending on health and public education has doubled, partly thanks to the National Health Fund's insurance assignments, and that a notable rise has also been registered as far as social security is concerned. The study also analyses public social spending in terms of age group and reflects that the spending has risen mainly for children and people above 65 years old. Though the report shows clear progress, many think that these measures are insufficient in a country where 25% of children live under the poverty line. For more information on the topic, please read the <u>article</u> (ES).

Ivorian Coast: universal health coverage foreseen for the end of the year

On 5 February 2014, the Ivorian Parliament voted on a law establishing the universal health insurance. Expected to come into force by the end of the year and implemented by the National Social Security Fund (CNSS), it should change the lives of hundreds of thousands of people who don't have access to healthcare.

According to the predictions, 380,000 people will be concerned. The current budget of the CNSS, which represents 36 million euros may not be sufficient, and a 2% rise in social security contributions is already provided to partially finance this reform. The international donors and the State will contribute. AIM Ivorian Member, MUGEF-CI (Mutual for Civil Servant) has been identified by the Government to provide services as delegated manager for the implementation of the universal health coverage.

Health and Long-term care

> Trends in health system

European Court of Justice: morbid obesity may amount to a 'disability' for the purposes of the Equal Treatment in Employment Directive

17 July - Whilst there is no general principle of EU law prohibiting discrimination on grounds of obesity in its own right, morbid obesity may come within the meaning of 'disability' if it is of such a degree as to hinder full participation in professional life on an equal footing with other employees.

The European Court of justice was caught by the Danish court of justice to ask if obesity can be classified as a disability and therefore fall within the scope of the Equal Treatment in Employment Directive. In his opinion released 17th of July, the Advocate General pointed out that certain illnesses, if medically diagnosed and resulting in long-term limitations, could be classified as a disability for the purposes of the Directive.

He considers that if obesity has reached such a degree that it plainly hinders participation in professional life, then this can be a disability. In his opinion, only extreme, severe or morbid obesity, that is to say a BMI(*Body Mass Index*) of over 40, could suffice to create limitations, such as problems of mobility, endurance and mood, which amount to a 'disability' for the purposes of the Directive.

It would be for the national courts to determine whether one's obesity falls within this definition. NOTE: The Advocate General's Opinion is not binding on the Court of Justice. It is the role of the Advocates General to propose to the Court, in complete independence, a legal solution to the cases for which they are responsible. The Judges of the Court are now beginning their deliberations in this case. Judgment will be given at a later date.

Please find the entire Opinion Here.

European Environment Agency urges for 'systemic' approach to environment, health concerns

11 July - According to the European Environment Agency (EEA), Governments need to study the connections between health and environmental concerns, which could save them money and improve societal well-being.

Noxious emissions can damage the environment, as seen in acid rain or reduced crop yields, or human health, with higher incidences of respiratory diseases. Invasive plants can cause significant irritation amongst those allergic to its pollen. Use of cars, sedentary work environments or poor nutrition can cause cancers, obesity, chronic diseases. The (gigantic) resulting cost of these afflictions falls on governments and taxpayers. However, with many problems being inter-linked, the potential for governments to reduce costs is great. Referring to a <u>Report</u> released in February 2014, the EEA says that health and environment should be more associated to gain a system-wide understanding of multiple causes and effects. Sometimes the problem can be that ministries are divided into "silos", with relatively little interaction between them. For example, work and health policies are being drafted by the ministries of labour, whereas air pollution and environmental issues by environmental agencies and nutrition by public health ministries.

A European Commission communication on nutrition, with inputs from various directorates, is expected within the coming months. Find the entire article <u>Here</u>.

UN: Chronic Diseases hit Poor hardest

10 July – At the United Nations General Assembly, UN World Health Organisation (WHO), Director General Margaret Chan expressed deep concern about prevention and control of non-communicable diseases as far as poor are concerned.

The Assembly's 2011 Political declaration gave leadership to WHO in the fight against non-communicable diseases, which include diseases such as cancer, cardiovascular diseases or diabetes. The organization has thus settled global mechanisms and a roadmap for coordinate multi-sectorial action and monitoring of results. Progress is obvious and achievements numerous, amongst which the establishment of a department responsible for those diseases in the Ministry of Health of 95% of countries reporting data. However, as WHO Director General states, overall progress is insufficient and uneven. Margaret Chan sees "a lack of capacity to act, particularly in the developing world", where health systems should be better prepared to face the costs and demands of long-term management of chronic diseases. The dynamics of socioeconomic progress are mainly the cause of the rise of non-communicable diseases, as they have fostered unhealthy lifestyles. Therefore, it becomes crucial to educate people, change human behaviours and shift focus from cure to prevention. According to Mrs. Chan, this cannot be done by the health sector only; all ministers should get involved.

For more information on the topic please read the article.

H2020: Smartphone App helps Patients with Bipolar Disorder

The EU funded project UBICOM MENTAL HEALTH has developed an application which could help benefit to patients with bipolar disorder and help manage and mitigate its effects.

Based on the idea that the body has natural rhythms which influences well-being, the app, which will be downloadable on every smartphone and iOs device, is designed to analyse data such as sleep habits or the amount of activity in a person's body through captors in the mobile phone. It is meant to be used as part of treatment or as a standalone app and constitutes one more example of the potential offered by technology to patients with mental illnesses. For more information, read the <u>article</u>.

Call for proposals, Consultations

17.07.2014-03.10.2014

Public consultation on the Europe 2020 strategy 05.05.2014 – 31.08.2014 http://ec.europa.eu/europe2020/public-consultation/index_en.htm

Public Consultation on the Determination of Potential Health Effects of Nanomaterials Used in Medical Devices

http://ec.europa.eu/health/scientific committees/consultations/public consultations/scenihr consultation 22 en.htm

Studies, Videos, Positions

European Association for Palliative Care: Prevalence and characteristics of patients with advanced chronic conditions in need of palliative care in the general population - A cross-sectional study

06.05.2014

http://www.eapcnet.eu/Portals/0/Clinical/Publications/PM201428%284%29_G%F3mez-Batiste.pdf

European Centre for the Development of Vocational Training: Sharing knowledge about vocational education and training

Updated 2014

 $\label{eq:http://bookshop.europa.eu/en/sharing-knowledge-about-vocational-education-and-training-pbTl0414518/?CatalogCategoryID=iEKep2lx3hEAAAEud3kBgSLg$

European Commission, Directorate-General for Research and Innovation, State of the innovation union 2014

 $\label{eq:http://bookshop.europa.eu/en/state-of-the-innovation-union-pbKl0414508/?CatalogCategorylD=iEKep2lx3hEAAAEud3kBgSLg$

European Commission, CHAFEA - Consumers, Health and Food Executive Agency Action on health inequalities in the European Union

2014

http://bookshop.europa.eu/en/action-on-health-inequalities-in-the-european-union-pbEB0114081/?CatalogCategoryID=iEKep2Ix3hEAAAEud3kBgSLq

Eurostat, Basic figures on the EU

Second quarter 2014

http://bookshop.europa.eu/en/basic-figures-on-the-eu-pbKSGL14002/?CatalogCategoryID=iEKep2Ix3hEAAAEud3kBgSLq

EMCDDA — European Monitoring Centre for Drugs and Drug Addiction, General report of activities 2013

2014

Events in Europe

23/24.October.2014 - European Economic and Social Committee: Extraordinary Meeting focused on "A new Social Security"

Milan

4/5 September 2014 – EPHA: Annual Conference "Tectonic tensions - wealthy Europe's fear of commitment" Brussels

http://epha.org/5979

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