



MANIFESTO



All Policies for a Healthy Europe

Improving citizens' well-being

Supported by



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CONTENTS

Manifesto Summary

1.1 Introduction	5
1.2 Health and well-being clusters	9
• Healthy Societies	10
• Healthy Environment	11
• Healthy Care Systems	12
• Digital for all policies & digital inclusion	12
1.3 Governance mechanisms	15
1.4 Key Facts	18

*For the full manifesto document with further information,
please visit healthyeurope.eu/manifesto.*

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The health and well-being of people must be central to any model of inclusive growth and sustainable development. If Europe cares about sustainable development, it should care about health and well-being.

-

Lieve Wierinck

MEP, ALDE

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The Commission's multi-stakeholder platform on the Sustainable Development Goals has demonstrated that we can reconcile diverse opinions, learn from each other, and jointly develop practical ideas and solutions for the wellbeing of our present and future generations.

-

Jyrki Katainen

Vice-President of the European Commission

”

1.1

INTRODUCTION

New ways of defining economic and societal goals are emerging. The old GDP-centric model is giving way to approaches that place human and environmental well-being at the heart of government policy. The Sustainable Development Goals are a crucial example of this, as is the growing emphasis on the need to ensure ‘inclusive growth’ and reduced inequalities. If the EU is to respond to the needs and concerns of its citizens, it is vital that the new European institutions should embrace the paradigm shift. Citizens’ well-being must be at the centre of EU policies.



1.2
million people
die prematurely every
year in EU countries

(see more on p.16)

Health and well-being are intrinsically linked. The World Health Organisation considers them inseparable: health is ‘a state of complete physical, mental, and social well-being’. At European level, however, ‘health’ is too often interpreted narrowly – as meaning the treatment and care of people with chronic diseases or other health conditions.

Public expenditure
on health and
long-term care is on
the rise. Projections
suggest it **could reach**
12.5% of GDP in
2060.

All Policies for a Healthy Europe champions a broader vision: one which takes seriously Europe’s role in addressing

the multi-dimensional determinants of health and well-being – economic, social, environmental, commercial and political.¹

While life expectancy continues to rise, each year in the EU chronic diseases lead to the premature death of more than half a million people aged between 25 and 64.² Significant health inequalities persist between countries, regions, and across socio-economic groups (based on gender, income, ethnicity). Chronic diseases carry a significant economic burden for Member States – from reduced employment and earlier retirement to higher healthcare and social spending. Europe has a vital role to play in supporting Member States to address these challenges.

In the framework of an EU sustainable development strategy and enhanced efforts to ensure inclusive growth, cross- and inter-sectoral action on health and well-being must be at the heart of EU priorities for the next five years and beyond. That means **health and well-being considerations should**

inform policies and decision-making across sectors – in the interest of citizens.

The Sustainable Development Agenda in particular is a key framework for advancing inter-sectoral action on health and well-being, and the core themes of the European

Public expenditure on health and long-term care is on the rise. **Projections suggest it could reach 12.5% of GDP in 2060.**

(see more on p.16)

1 | On the determinants of health see: WHO: 'The Determinants of Health': <https://www.who.int/hia/evidence/doh/en/>; I. Kickbusch et al. 'The Commercial Determinants of Health', The Lancet 4, 12 (2016); M. Bekker et al. 'Public Health and Politics: Towards a Public Health Political Science', European Journal of Public Health 28, Issue Supplement_3 (2018)
2 | OECD, European Commission, Health at a Glance: Europe 2016



Commission's 'Towards a Sustainable Europe by 2030' Reflection Paper also feature prominently in this manifesto.³ They include: circular economy, clean energy, sustainable food, and social fairness, including in relation to health and health systems.

EU action on health and well-being should be guided by strong equity principles, so that all sections of society benefit (especially those at greatest risk of poor health and social exclusion), and so that no one is left behind.

The new European institutions should encourage and facilitate multi-level governance – with cities, regions, national governments, and civil society organisations at European and at grassroots level working collaboratively with EU bodies in different contexts and formats. In doing so, the EU can become a global leader in innovating new approaches to social investment, the circular economy, and the digital transformation of health systems.

To deliver on this approach, *All Policies for a Healthy Europe* makes the following key recommendations:

- Support cross-sectoral and inter-sectoral action within **health and well-being 'clusters'**
- Create **governance mechanisms** that facilitate inter-sectoral action and multi-level cooperation on health and well-being

3 | European Commission, 'Towards a Sustainable Europe by 2030' Reflection Paper (2018)

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Health and well-being are not a cost, but an investment in our citizens and in the economy.

-

Brian O'Connor

Chair of the European Connected Health Alliance

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“

We must take charge of change. We must harness globalisation, the digital revolution, and the greening of our economies. We must enable and protect our people. So that we can all together reap the rewards of progress.

-

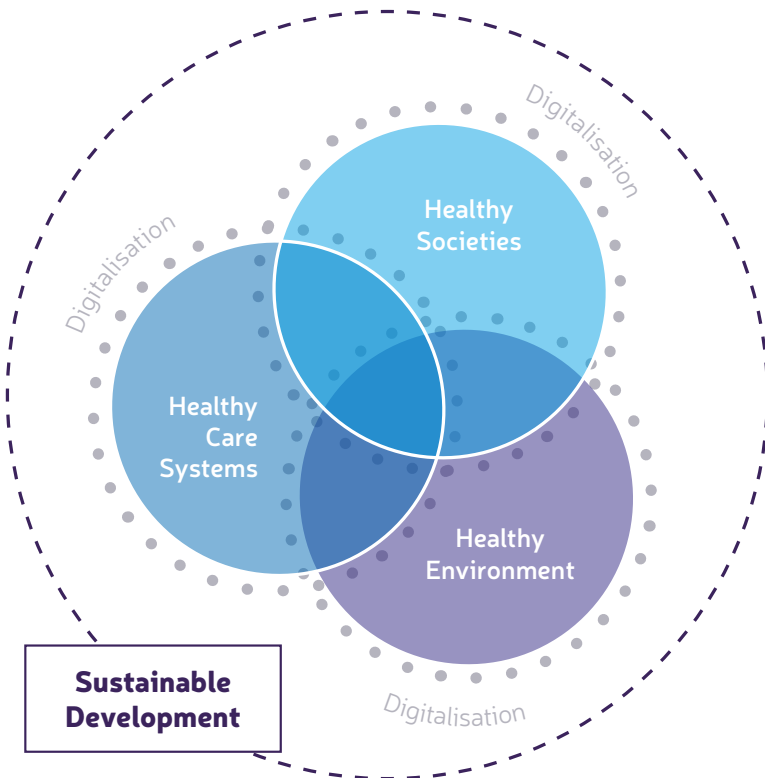
Marianne Thyssen

European Commissioner for Employment, Social Affairs, Skills and Labour Mobility

”

HEALTH AND WELL-BEING CLUSTERS

All Policies for a Healthy Europe proposes three main clusters within which the major determinants of health and well-being would be addressed:



I. Healthy Societies

Encompasses health promotion, primary prevention, and enabling structures that contribute to physical and mental well-being, including regulatory measures that incentivise healthy choices and protect against harmful ones.

Key focus areas include: diet and nutrition, physical activity, smoking cessation, reducing alcohol-related harm, health promotion in schools and workplaces, work-life balance, active and healthy ageing, poverty reduction, housing, social inclusion and social protection, and the international dimension of EU policies. Reducing health inequalities between socio-economic groups must also be prioritised.

On average **1 in 8** children in the EU, aged 7-8 are obese.

Relevant policy areas: Economic & Financial Affairs, Education, Employment, Social Affairs & Inclusion, Digital, Food & Agriculture, Health, Internal Market and Industry, Taxation, International Cooperation & Development, Regional & Urban Policy, Research & Innovation, Trade.

Every year, **mental health problems affect more than 1 in 6** people across the EU.

(see more on p.16)

II. Healthy Environment

Environmental health and human health are intrinsically linked.

Building on the EU's 7th Environment Action Programme, the WHO Draft Strategy on Health, Environment and Climate Change, and in line with the Sustainable Development Agenda, this cluster should encompass air and water quality, noise pollution, hazardous chemicals, food systems sustainability, clean energy, urban planning (for example, by strengthening public transport services and access to green spaces), and the role of corporate actors in improving environmental and human health – including in the context of the EU's Urban Agenda and in accordance with Circular Economy principles.



74% of the EU urban population **are exposed to concentrations** of particulate matter **exceeding WHO guidelines**
(see more on p.16)

***Relevant policy areas:** Agriculture, Climate Action, Digital, Food, Environment, Health, Internal Market and Industry, Mobility and Transport, Regional and Urban Policy, Rural Development.*

III. Healthy Care Systems

Supporting the modernisation and sustainability of health and long-term care systems.

Action within this cluster should ensure universal health coverage without discrimination and measures to address inequalities in access to care and health outcomes.

Efforts are needed to strengthen prevention (secondary/tertiary), patient-centred chronic disease management (including patient empowerment, health literacy, self-care, and patient-reported outcome/experience measurement), health

workforce sustaina-

bility, and the dig-

ital transformation of

care. Improving vaccination

coverage and actions to combat

antimicrobial resistance and

other cross-border health

threats must also be included

in this cluster.

Only 3% of health budgets are spent on prevention.

(see more on p.16)



Relevant policy areas: *Economic & Financial Affairs, Health, Digital, Education, Employment, Justice, Regional & Urban Policy, Research & Innovation, Social Affairs & Inclusion, Structural Reform.*

Digital for all policies & digital inclusion

Within each cluster, data-driven tools and technologies present tremendous opportunities for improving health and well-being – including Big Data analytics in public health, smart systems for energy efficiency, artificial intelligence, learning healthy systems (LHS), early detection of disease, research, and the use of digital tools to strengthen economic and social inclusion. Europe has a key role in fostering a vibrant health data ecosystem underpinned by trust. Adoption of new digital tools in health care must go hand-in-hand with equity principles, so that all sections of society can enjoy the benefits that new technologies provide. Enhancing digital health literacy is crucial in this regard.



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The Zeitgeist is now.
We have everything we
need to power health and
wellness. We just need
the right leadership and
investments.

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-

Rachel Dunscombe
CEO NHS Digital Academy

“

The EU treaties already
state that people's health
should be 'ensured in the
definition and implementation of all
Union policies and activities'.

The question is why does this not
happen already?

-

Karin Kadenbach
MEP, S&D

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Cross-and inter-sectoral action doesn't need to be complicated, but does require political commitment and mechanisms that facilitate cooperation between policy areas and different levels of governance (regional, national, European) to improve health as a shared objective.⁴ *All Policies for a Healthy Europe* recommends that the next Commission should:



Mandate a senior European Commissioner to oversee cross- and inter- sectoral action on health and well-being, supported by the Commission health services and the Secretariat-General. This could fall within the remit of a Vice-President for Health and Well-being or Sustainable Development.

Strengthen Health and Well-being Impact Assessment

including health equity, by further developing the 'health toolbox' and supporting evidence/information systems. Health impact assessment should be carried out at an early, formative stage in the policy making process, drawing upon internal and external health expertise.



4 | Wismar et al., 'Intersectoral Governance for Health in All Policies', *Eurohealth* 18, 4 (2012), p.3-7



Align resources with inter-sectoral priorities:

Opportunities to facilitate inter-sectoral collaboration and support local level initiatives on health and well-being should be identified within all policy clusters of the next Multi-annual Financial Framework.

Embed well-being in European economic governance:

Ensuring effective implementation of the European Pillar of Social Rights via the European Semester would be an important step in this direction. The EU's Open Method of Coordination can also provide a framework for coordinated action at Member State level.



Maintain a 'Home for Health' within the Commission:

a centre of knowledge and expertise that would support cross-sectoral action and inter-sectoral collaboration, deliver on health-specific priorities (such as the EU Health Programme), and cooperate with other international organisations (such as the WHO and OECD). In the context of cross-sectoral action, there should be a unit within the Commission's health directorate(s) responsible for coordination between other sectors and the dedicated health services.





Ensure systematic citizen and stakeholder participation – for example, through the creation of thematic Forums and ‘Dialogues’ that feed into policy development. The EU’s Urban Agenda provides a positive, recent example of cooperation between different levels of governance.

Other European institutions can support inter-sectoral action on health and well-being by exploiting existing inter-sectoral synergies within EU Council configurations and European Parliament committees, as well as through a more prominent role for Parliamentary intergroups dedicated to specific inter-sectoral themes.

Alignment with other health and well-being initiatives

This manifesto is complementary to other campaigns and initiatives calling for citizen-centred policies to enhance human and environmental health and well-being. These include EU4Health, the EU Health Summit, and the Patient Access Partnership.

The critical feature of *All Policies for a Healthy Europe* is a multi-stakeholder consensus, within and beyond the health sector, on the need for cross-sectoral and inter-sectoral action. It builds upon past work in the area of Health in All Policies, and updates it to align with and strengthen wider EU agendas on sustainable development and inclusive growth.

1.4

KEY FACTS

In 2018, the OECD surveyed people in 19 countries about the economic and social risks that matter most. **People's greatest concern (on average) in the next two years was 'becoming ill or disabled'.**

Among people from low-income households, 'securing and/or maintaining adequate housing' was also seen as a major risk.

In Belgium, Estonia, Finland, France, Germany, Greece, Ireland, Portugal, Slovenia, Lithuania, **more than half of respondents said that becoming ill or disabled was among their top three concerns.**

Across the EU, total **costs associated with mental ill-health** are estimated to be **600 billion Euro**.

Health care spending : **190 billion Euros**

Lower employment rates and productivity loss: **240 billion Euros**

Every year, **mental health problems affect more than 1 in 6 people** across the EU.

Sources:

OECD, European Commission, 'Health at a Glance': Europe 2016

European Commission, 'State of Health in the EU', Companion Report, 2017

OECD, 'Risks that Matter', 2018 Survey



All Policies for
a Healthy Europe
Improving citizens' well-being

1.2 million
people die
prematurely every
year in EU countries

But still, **public expenditure**
on health and long-term care is on the rise. Projections suggest it **could reach 12.5% of GDP in 2060.**

On average **1 in 8**
children
in the EU, aged 7-8
are obese.

Only
3% of
health budgets
are spent on
prevention

790.000
EU citizens die
prematurely each year
from tobacco smoking,
alcohol consumption,
unhealthy diets and lack
of physical activity

In 2017 there were
32.7 million
diabetics in Europe, a
significant increase from 18.2
million in 2000. A further
12.8 million are estimated
to have undiagnosed
diabetes.

On average
across the EU,
30-year-old
men with a low level of
education can expect to
live about 8 years
less than those with a
university degree.

74% of
the EU urban population
are exposed to
concentrations of particulate
matter **exceeding**
WHO guidelines

Air pollution,
including particulate matter,
nitrogen dioxide, and ground
level ozone, **is the leading**
environmental cause of
early mortality in the
EU, causing about 400.000
premature deaths

For the full manifesto document with further information, please visit healthyeurope.eu/manifesto.





European
Public Health
Alliance



European
Connected Health
Alliance



European Union
of Private
Hospitals



European
Patients'
Forum



European Health
Management
Association



Global Alliance
of Mental Illness
Advocacy
Networks-Europe



Active Citizenship
Network



Re-Imagine
Europa



European Union
of Medical
Specialists



Finnish Federation
for Social Affairs and
Health



EU40



International
Exchange Erasmus
Student Network



Humanwise



Federation of the
European Sporting
Goods Industry



European
Public Health
Association



European
AIDS Treatment
Group



European Federation
of Associations of
Families of People
with Mental Illness



Institute
for European
Environmental
Policy



European
Association
Working for Carers



European Institute
for Innovation
through Health Data



Digital Health
Society



EuropaBio



MedTech
Europe



European Cancer
Patient Coalition

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This initiative is enabled
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