



Healthcare and  
social benefits for all

# AIM FLASH

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**EDCs: PROTECTING  
EUROPE FROM  
HORMONE DISRUPTORS**  
p.2



**PHARMACEUTICAL POLICY  
REMAINS HIGH ON THE  
INTERNATIONAL AGENDA**  
p.3



**SOCIAL ECONOMY  
EUROPE DISCUSSES  
ACTION PLAN** p.4



**POTENTIAL AND  
CHALLENGES OF  
mHEALTH FOR EUROPE**  
p.4

## CONTENT

### 2

#### European Affairs

Protecting European Children's Health against the Marketing of Industry

EDCs: Protecting Europe from Hormone Disruptors

First meeting of the European Compass Forum on Mental Health and Well-Being

### 2

#### Pharmaceuticals And Medical Devices

Pharmaceutical policy remains high on the international agenda

### 3

#### Health Policies

AIM keywords resonating in Gastein

Fiscal Policies for Diet and the Prevention of NCDs

92% of the World's Population exposed to unsafe Levels of Air Pollution

SEE discusses Action Plan

### 4

#### eHealth

Potential and Challenges of mHealth for Europe

### 5

#### International

Launch of an International survey on psychosocial risks at school

Creating a mutual for Teachers in Burkina Faso

## PROTECTING EUROPEAN CHILDREN'S HEALTH AGAINST THE MARKETING OF INDUSTRY



On 25 May, the Commission presented a draft proposal of the Audiovisual Media Services Directive, which governs EU-wide coordination of national legislation on all audiovisual media. The directive notably covers the advertisement of tobacco, alcoholic beverages and unhealthy food, which are three of the main preventable risk factors responsible for a high burden of non-communicable diseases. Find out more on [page 2](#).

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## EUROPEAN AFFAIRS

### COMMISSION

### PROTECTING EUROPEAN CHILDREN'S HEALTH AGAINST THE MARKETING OF INDUSTRY

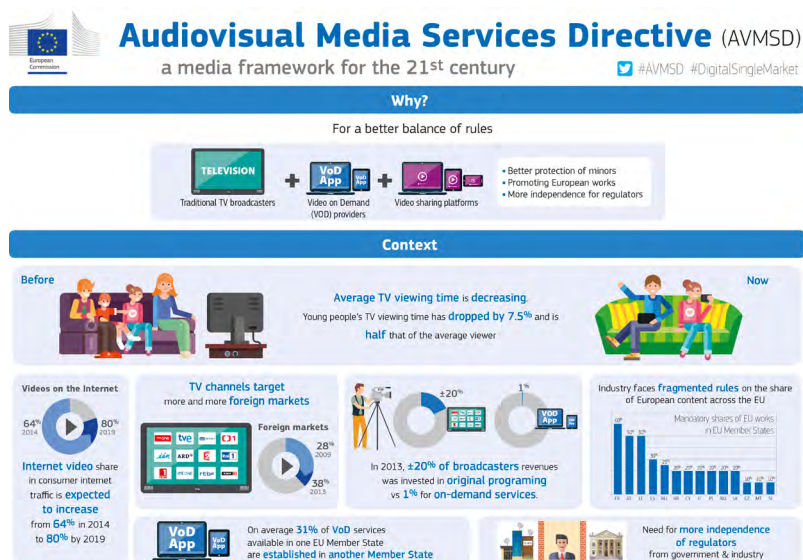
On 25 May, the Commission presented a draft proposal of the Audiovisual Media Services Directive, which governs EU-wide coordination of national legislation on all audiovisual media. The directive notably covers the advertisement of tobacco, alcoholic beverages and unhealthy food, which are three of the main preventable risk factors responsible for a high burden of non-communicable diseases. The proposal is currently being discussed at the Parliament. Numerous evidence has shown the tremendous burden of disease caused by the consumption of tobacco, alcohol or food rich in fat, trans-fatty acids, salt or sodium and sugars. These products are a threat to European health and well-being and their consumption should not be encouraged in any way. Recent data shows that more than 3.5 million children now have type 2 diabetes, which was once unknown in this age group; and that "about 13.5 million children have impaired glucose tolerance, which is a precursor to diabetes. Around 24 million have high blood pressure and more than 33 million have fatty liver disease as a result of obesity, which is more often associated with alcoholism and can lead to cirrhosis and liver cancer".

The Commission's proposal to review the Audiovisual Media Services directive is an opportunity to ensure that European children's and adolescents' health is properly protected from the influence of the industries in question. However, the wording proposed by the Commission would not, in AIM's view, further minimize the exposure of minors to audiovisual commercial communications for the above mentioned products. AIM has therefore proposed amendments and is currently lobbying EU institutions in view of protecting European children and adolescents from influences which would be harmful to their health.

AIM has also recently co-signed a [declaration](#) endorsed by a wide coalition (lead by the Public Health Alliance (EPAH) with which it plans to continue working on this file in the future.

### EDCs: PROTECTING EUROPE FROM HORMONE DISRUPTORS

In June, the Commission presented criteria to identify endocrine disruptors in the field of plant protection products and biocides. AIM judges the current proposal as too limited as it would identify hardly any substance as harmful. Years of damage to human health will be necessary before a substance can be identified as harmful



and banned. EDCs should be removed from the market as soon as possible in order to safeguard the health of EU citizens.

At European level, policy developments in on endocrine disrupting chemicals have been going on since 1996. In 1998, the Parliament issued a resolution and a year later the EU developed a strategy. By 2006 the EU Reach law came out, a reform on how chemicals are dealt with in the EU. Three years later, the EU revised its EU pesticides law, taking a major step forward: pesticides which are harmful to health are then banned.

Commission was meant to publish EDC criteria in 2013, a deadline which passed, consequently leading the EU Court of Justice to take action. Finally, in June 2015, the Commission proposed some criteria which are currently discussed by expert biocides groups. The file does not follow the ordinary European legislative procedure. Indeed, in this case, neither the Council nor the Parliament will need to either accept or reject the criteria as proposed by the Commission. They will not have the chance to propose amendments. It is therefore highly important to call for criteria which will efficiently protect public health.

AIM, with the help of the Health and Environment Alliance (HEAL) has drafted a letter calling for adequate criteria. It was sent to national health ministers and other relevant actors in order to influence the crucial vote which took part on 17th October.

AIM "Prevention working group" will also most probably prepare a more general declaration to be adopted by AIM.

### TOP TWEETS

AIM @AIM\_Healthcare · Sep 14  
We knew he would mention solidarity, but did @JunckerEU talk about healthcare? We checked it: [goo.gl/A14Rg2](http://goo.gl/A14Rg2) #SOTEU2016 #SOTEU

AIM @AIM\_Healthcare · Sep 16  
European Pillar of Social rights is 2017 priority for @EU\_Commission and @JunckerEU #socialrights #solidarity [data.consilium.europa.eu/doc/document/S](http://data.consilium.europa.eu/doc/document/S)

AIM @AIM\_Healthcare · Sep 16  
EU spending on health is €1300 (!) billion per year. @EU\_Commission presents 5 options to improve #HTA @EUnetHTA [ec.europa.eu/smart-regulati](http://ec.europa.eu/smart-regulati) ...

## FIRST MEETING OF THE EUROPEAN COMPASS FORUM ON MENTAL HEALTH AND WELL-BEING

6-7 October – The first meeting of the EU Compass Forum took place in Luxembourg, aiming at establishing a platform for monitoring progress to tackle the challenge of implementations and monitor developments in Member States. It is also expected to further the mental health agenda by facilitating dialogue between stakeholders.

Mental healthcare in Europe is characterized by a huge treatment gap; the lack of sound data; the existence of structural barriers, especially in countries with limited health coverage, and financial barriers, especially given the trend in healthcare cost containment. The Compass Forum builds on its predecessor, the Joint Action on Mental Health and Well-Being, to implement the recommendations it issued and try to find a solution to the above mentioned challenges. The first report issued by the Compass was presented on 6 October in Luxembourg. It includes a summary of the key mental health activities developed by Member States; an assessment of the progress made towards the objectives of the European Pact for Mental Health; and recommendations for the future.

During the meeting, participants discussed issues such as access to integrated and coordinated care through a public health, systems and whole of government approach; the prevention of depression; eSolutions to mental health issues and self-management tools, and whole-of-society approaches to the treatment and prevention of mental health problems.

A part of the forum focused specifically on the emerging issue of the refugee crisis and mental health. In Europe, 30 000 people request asylum every week. Isabel de la Mata, Principal Advisor for Mental Health and Crisis management at the European Commission explained that the main problem lies in the definition of refugees, who can be regular migrants, asylum seekers (mostly from Syria, Afghanistan, and Irak), refugees or irregular migrants. Except for the last "category", all have the same right as Europeans when it comes to access to healthcare. Ms. de la Mata also described the psychological issues which migrants can face. Confronted to traumatic situations, they often hide their mental ailments during the relocation process in order to be able to move on. Later, when they reach the "target" country, they are placed in centres 24 hours a day without anything to do or any possibility to enter the labour market. Consequently, their state deteriorates and many are in need of psychological but also of financing expertise. Finally, the necessity of a culturally appropriate and "language"-oriented support was highlighted.

## PHARMACEUTICALS AND MEDICAL DEVICES

### PHARMACEUTICAL POLICY REMAINS HIGH ON THE INTERNATIONAL AGENDA

*AIM continues to be actively involved in pharmaceutical policy debates in Brussels and beyond. The discussion about access to innovative medicines started for AIM in 2015, with the publication of a position paper on the topic, together with the European Social Insurance Platform (ESIP). The Council adopted in June 2016 under the Dutch Presidency conclusions on strengthening the balance in the pharmaceutical systems in the EU and its Member States. Currently the European Parliament is finalizing a so called "Own Initiative Report" on EU options for improving access to medicines. All these papers call for*

*stronger collaboration between member states to ensure sustainable access.*

The draft version of the EP report states it very clearly 'prices of new medicines have increased to the point of being unaffordable for many European citizens. A point that is comes back continuously is the call for more collaboration in the field of health technology assessment (HTA). AIM wants to contribute to the work that is currently being carried out in EUnetHTA, the network for collaboration on HTA across Europe. The European commission published recently a so called "Inception Impact Assessment" on Strengthening EU cooperation on HTA for public consultation. AIM will contribute to that consultation.

The pharmaceutical industry has been pushing hard for action related to 'Adaptive Pathways'. This approach, which should ensure that innovative drugs reach patients more quickly, has raised concerns among different stakeholders, including AIM. We published our concerns in the summer of this year and we continue to comment on the ADAPT-SMART program, carried out by EMA and the pharma industry which deals with the topic.

Also at international level sustainable access to pharmaceuticals is becoming a more and more relevant topic. AIM is member of the advisory group for the "Fair Pricing Forum" of the World Health Organization. The United Nations Secretary General established recently a High-Level Panel on Access to Medicines, which published last month a report on the topic. The report is linked to the 2030 Agenda for Sustainable Development. The High-Level Panel focusses on the incoherencies between international human rights, international trade agreements, intellectual property rights (TRIPS) and public health objectives. It states that uneven application of policies in these fields within and among states can create tension that fuel policy incoherence. It calls for more transparency of R&D costs, production, marketing, distribution costs of pharmaceuticals and clinical trial data. The report can be found [here](#).

## HEALTH POLICIES

### AIM KEYWORDS RESONATING IN GASTEIN

*AIM participated last month in the European Health Forum in Bad Gastein, Austria. The conference, broadly recognized as the yearly conference on EU healthcare policy, had this year as title "Demographics and Diversity in Europe, New Solutions for Health".*

Solidarity and collaboration, keywords for AIM, were keywords resonating in the Alps, words that got linked to tackling the challenges EU healthcare systems are facing today.

The first keynote speaker, Nick Fahy, a health systems expert from the UK, saw the Brexit (and anti-EU sentiment in many other EU

countries) as a backlash against globalisation and the impact it had and still has on the semi- and unskilled workers. They feel left behind, receive too little protection. The state of healthcare was seen as a clear example of this lack of solidarity, according to Fahy. Globalisation requires solidarity, strong social protection systems.

The audience was invited to participate in the debate by asking questions and making comments, through an especially for the event developed mobile application. The answer to the question, what do we need as a response to demographic change and mi-

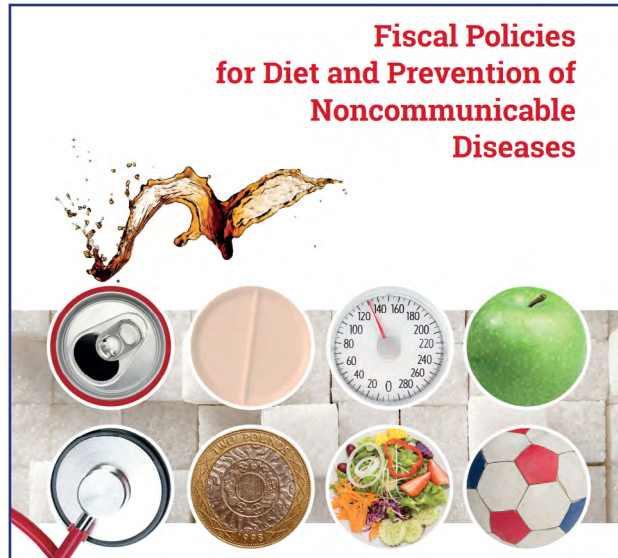


gration pressures was clear. EU policy makers were unanimous: more solidarity in healthcare policy is needed. More AIM basically. Elias Mossialos, Professor Health Policy at the London School of Economics, spoke at a side event about pharmaceuticals and the tension between value, profit and accessibility. Collaboration was the keyword in his intervention. Healthcare payers have to get their act together, he said. They currently fail to coordinate their action. Together European healthcare systems are the biggest monopsony purchasing power in the world. Define unmet medical need and cost-effectiveness together and procure collectively, said Mossialos. Something for AIM to think about...

## FISCAL POLICIES FOR DIET AND THE PREVENTION OF NCDs

WHO published a report on the technical meeting of experts in fiscal policies which was held on 5 and 6 May 2015 in Geneva in order to address the increasing number of requests from Member States for guidance on how to design fiscal policies on diet. The meeting aimed at reviewing the evidence and existing guidance, discussing country case studies and "providing considerations with regards to the scope, design and implementation of effective fiscal policies on diet."

Conclusions stressed that appropriately designed taxes on sugar-sweetened beverages have already proven to result in reductions in consumption. Likewise, subsidies for fresh fruits and vegetables reducing price by 10-30% are effective in increasing intake. Another



conclusion drawn up concerned countries with strong tax administration, where taxes calculated based on nutrient content seem to have a greater impact.

The necessity to effectively counteract the industry's arguments and efforts to oppose the development and implementation of tax measures was also highlighted. Finally, participants to the meeting also called for a manual on developing and implementing fiscal policies for diet. For more information, read the [Report](#).

## 92% OF THE WORLD'S POPULATION EXPOSED TO UNSAFE LEVELS OF AIR POLLUTION

September - WHO published new national estimates on exposure to air pollution and its consequences for health. According to the new model, 92% of the world population lives in places where air quality levels exceed WHO limits.

Through interactive maps which highlight "air pollution danger spots", WHO aims at providing relevant information which could be used as a reference for the monitoring of progress in the fight against this phenomena. The model contains the most detailed data which the WHO has ever communicated as regards external air pollution and is based on satellite measurements, air transport models and ground station monitors for more than 3000 locations, both rural and urban. To see the interactive maps, click [Here](#).

## SEE DISCUSSES ACTION PLAN

28 September - Social Economy Europe (SEE), the EU umbrella organization gathering cooperatives, mutuals, foundations, associations, social enterprises, ethical banks and paritarian institutions organized a public hearing to discuss a European Action Plan for Social Economy.

The Social Economy Intergroup demands an action plan to be included in the next working programme. Panellists underlined that all kinds of data and theory on social economy are already available and that it is now time to act. Some obstacles to implementation were highlighted: the lack of a consistent database of statistics on Social Economy in the EU; the need to identify one contact person at national level as well as within the Commission.

During the hearing, the Commission recognized the importance of social economy enterprises as they have proven to be more resilient to the economic crises than traditional economy. It more precisely referred to mutuals, mentioning that their development is to be developed despite the failure to achieve a mutual statute.

The finalisation of the agenda for the Presidency conference to be held on 30 November and 1 December 2016 was also announced. The meeting will focus on two topics: social economy as a driver for regional growth and the variety of legal frameworks in national legislations. Both Commissioners Thyssen and Bieńkowska will be present.

For more information, please read the Detailed [Minutes](#) of the meeting.

## eHEALTH

### POTENTIALS AND CHALLENGES OF mHEALTH FOR EUROPE

13 October - A Joint Public Hearing was held between the European Parliament's Committee on Industry Research and Energy and the Committee of the Environment, Public Health and Food Safety on the topic: "Towards a mHealth Framework for Europe".

The Hearing was split in two sessions which focussed, on the one hand, on the potential positive outcomes of mobile health, and, on the other, on the ways to overcome the implementation challenges it brings with itself. Discussions covered a wide range of topics amongst which the issue on how to ensure interoperability and the active involvement of users, particularly when it comes to consent for the use of their health data in big data processes. The necessary shift from a curative to a more preventive approach to healthcare, as well as data ownership, portability, personalised healthcare and the reliability of mHealth solutions were also covered issues. Please contact AIM secretariat for a detailed report of the meeting.

## INTERNATIONAL

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### LAUNCH OF AN INTERNATIONAL SURVEY ON PSYCHOSOCIAL RISKS AT SCHOOL

3 October - The Education and Solidarity Network and MGEN have recently put on air their Survey on psychosocial risks of education professionals. It aims at getting information on the education workers' psychosocial risks in several countries.

The results will be processed by a data analyst, compared with data of other countries participating in the study and compiled in a report like the International Survey on The Determinants of Occupational Health for Education Professionals published in 2015.

Results will help develop a keener understanding of education professionals' working conditions and support future actions in the field. In order to draw accurate conclusions from this survey, the highest possible response rate from teaching staff, education support personnel, unionists and non-unionists, young and more experienced professionals will be needed.

The survey is available in English, French and Spanish. It is available [here](#).

#### BURKINA FASO

### CREATING A MUTUAL FOR TEACHERS

In order to open the way to the future creation of a healthcare mutuals for teachers in Burkina Faso, the Education and Solidarity Network, of which AIM is a founding member, has planned, in collaboration with its partners, a one-year mission in situ, which will enable to accelerate the negotiations with the Burkinabe government and to solve important technical details.

The mission will more precisely focus on the practical implementation of the law establishing universal healthcare coverage in the country as well as its possible consequences for the project. It could be financed by the Luxemburgish government and carried out in Burkina Faso by a project manager. The creation of this teachers' mutual would allow to protect 70000 professionals of the education sector as well as their families.

### CALL FOR PROPOSALS, CONSULTATIONS

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[Public consultation on the European Pillar of Social Rights](#)  
08.03.2016 – 31.12.2016

[Public consultation on strengthening EU cooperation on Health Technology Assessment \(HTA\)](#)  
21.10.2016 – 13.01.2017

[Calls for proposals on: Rare Diseases, mental health, chronic and rheumatic diseases, breast cancer](#)

#### PLANNED

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Evaluation of the Fee System of the European Medicines Agency  
September 2017

### STUDIES, VIDEOS, POSITIONS

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[Health Policy and Planning](#)  
Oxford Journals - December 2016

[New Eurohealth, Special Gastein Issue on Demographics and Diversity in Europe](#)  
European Observatory on Health Systems & Policies (2016)

[Targeting innovation in antibiotic drug discovery and development: the need for a One Health–One Europe–One World Framework](#)  
European Observatory on Health Systems & Policies (2016)

## HEALTH EVENTS IN EUROPE

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### NOVEMBER

**10-11**

9th European Public Health Conference  
All for Health - Health for All  
in Vienna (Austria)

**16**

SEE Hearing on the Role of Social Economy for a successful Social Pillar  
in Brussels (Belgium)

**23-24**

AIM Board of Directors Meetings  
in Paris (France)

**25**

AIM International Conference on Financial Regulation for Healthcare Mutuals  
in Paris (France)

### DECEMBER

**1**

Outside in Series: Transforming Healthcare with Disruptive Innovation (Politico)  
in Brussels (Belgium)

### JANUARY

**16**

OECD Health Forum  
in Paris (France)