

PRESS RELEASE

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1721st meeting of the Council

- HEALTH -

Brussels, 27 May 1993

President: Ms Magda DE GALAN
Minister for Public Health of the
Kingdom of Belgium

The Governments of the Member States and the Commission of the European Communities were represented as follows:

Belgium:

Ms Magda de GALAN Minister for Public Health,
Environment and Social Integration
Ms Léona DETIEGE Flemish Minister for Employment and Social Affairs

Denmark:

Mr Torben LUND Minister for Health

Germany:

Mr Horst SEEHOFER Federal Minister for Health

Greece:

Mr Dimitrios KREMASTINOS Minister for Health, Social Welfare and Social
Security

Spain:

Ms Maria Angeles AMADOR Minister for Health

France:

Ms Simone VEIL Minister d'Etat, Minister for Social Affairs, Health and Urban
Affairs

Ireland:

Mr Brendan HOWLIN Minister for Health

Italy:

Ms Maria Pia GARAVAGLIA Minister for Health

Luxembourg:

Mr Johny LAHURE Minister for Health

Netherlands:

Mr Ate OOSTRA Deputy Permanent Representative

Portugal:

Mr João DE VALLERA Deputy Permanent Representative

United Kingdom:

Mr Brian MAWHINNEY Minister of State for Health

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Commission:

Mr Padraig FLYNN Member

FUTURE GUIDELINES FOR THE "EUROPE AGAINST CANCER" PROGRAMME

The Council adopted the following Resolution of future guidelines for the "Europe against Cancer" programme following evaluation of it for the period 1987-1992.

THE COUNCIL OF THE EUROPEAN UNION

Having regard to the Treaty establishing the European Community,

Considering Article 3(2) of Council Decision 90/238/Euratom, ECSC, EEC of the Council and the Representatives of the Governments of the Member States, meeting within the Council, of 17 May 1990 adopts a 1990 to 1994 action plan in the context of the "Europe against Cancer" programme, ⁽¹⁾

Whereas a report on the evaluation of the effectiveness of action undertaken in the context of the "Europe against Cancer" programme (1987 to 1992) was submitted by the Commission on 23 March 1993,

RECOGNIZES the importance of the programme, which remains entirely valid today, in particular in its role as a catalyst for, and spur to, action in the Member States to combat cancer;

CONSIDERS that backing projects carried out in Member States and undertaking Community action are appropriate means of implementing the programme;

UNDERLINES, however, the need to redefine and strengthen, as provided in the programme, forms of co-operation between the Commission and Member States and - as one of the means available for that purpose - to ensure improved co-ordination between the various committees under the programme with a stronger role for the Consultative Committee;

INVITES the Commission to submit in due course a draft third action plan, taking into account the Council Resolution of 27 May 1993 on future action in the field of public health as well as the objectives and improvements set out in below.

1. AREAS OF ACTION**A. PRIMARY PREVENTION**

The Council gives high priority to action in primary prevention where the Community

⁽¹⁾ OJ L 137, 30.5.1990, p. 1.

can continue to provide impetus for national action.

(1) Information

- (a) Objective : To improve Community citizens' knowledge of cancer prevention in order to encourage them to adopt healthy life-styles, in particular by disseminating the European Code.
- (b) Improvements:
- to ensure adequate dissemination of information
 - to improve the quality of exchanges of information on cancer prevention activities between Member States.
 - to target information campaigns more precisely on specific groups.

(2) Health education

- (a) Objective : To undertake action directed particularly at young people and children at an early stage to encourage healthy life-styles.
- (b) Improvements :
- to make greater effort to implement basic health education programmes giving priority to anti-smoking education and emphasizing in particular healthy nutrition.
 - to co-ordinate action undertaken in the context of the cancer programme with that in other programmes, particularly those of international organizations, involving health education.
 - to encourage innovation in continuing training for teachers and others with responsibility for health education.

B. SECONDARY PREVENTION

The Council recognizes that Community action in this field has allowed the knowledge and experience acquired in some of the Member States to be spread throughout the whole Community.

- (a) Objective : To contribute, by Community action, to the development and implementation of efficient screening methods, having due regard to the specific features of each Member State.

(b) Improvements :

- to disseminate suitable practice based on the guidelines drawn up for quality control in the early diagnosis of and screening for cancer.
- to improve the quality of screening through continuing training.
- to continue to study effectiveness of and accuracy in screening, taking into account the particular characteristics of each Member State.

C. OTHER ACTION

The Council stresses the importance of continuing Community action in the areas of research, epidemiological studies, care and training.

(1) Research

(a) Objective : To extend knowledge of the causes, prevention and treatment of cancer.

(b) Improvements :

- to make Community action in this field more transparent to Member States and show, in particular through dissemination and exploitation of research findings, how research contributes to the programme.
- to reinforce basic research and work linking biomedical research to clinical research.
- to increase co-operation between Member States through greater participation in European research networks and through exchanges of young researchers.
- to strengthen co-operation with international organizations involved in cancer research.

(2) Cancer registers and epidemiological studies

(a) Objective: To facilitate the collection, in particular in co-operation with the WHO, of reliable and comparable data on the incidence of cancer in order to monitor the problem, identify trends and carry out epidemiological studies at a European level.

(b) Improvements:

- to strengthen links between existing cancer registers in the context of

the European network.

- to encourage epidemiological studies to be carried out on the risks associated with cancer.

(3) Care

(a) **Objective :** To promote co-operation between Member States in the fields of quality control regarding care, palliative care and responsibility for patient welfare.

(b) **Improvements :**

- to increase exchanges of experience and dissemination of best practice and know-how at a European level.
- to promote exchanges of experience on the way in which aspects relating to informing patients, responsibility for their welfare and psychosocial counselling for patients are included in the care which they receive.

(4) Training

(a) **Objective:** To help to improve cancer-related training for health-care workers.

(b) **Improvements:**

- to increase participation in the initial and continuing training networks for health-care workers involved in the fight against cancer.
- to facilitate mobility during training.
- to encourage consideration of psychosocial aspects in the training of health-care workers involved in the fight against cancer.

II. THE MEANS

The Council continues to support a comprehensive approach to fighting cancer by using several complementary means, such as those mentioned below, in the context of Community action.

A. LEGAL MEANS

(a) **Objective :** The legal means adopted by the Council must reinforce public health policy on cancer prevention in each Member State, particularly to promote healthy life-styles and to create an environment conducive to such efforts.

(b) Improvements :

- Community action must encourage the action to be undertaken by Member States.
- Increase the account taken of health aspects in Community policies, with particular attention to cancer risk factors.

B. FINANCIAL MEANS

(a) Objective : To strengthen the role of Community action as a catalyst for Member States' action.

(b) Improvements :

- Make available appropriate resources to continue the fight against cancer, inter alia through cancer research.
- Criteria to ensure consistency in the programme as a whole must be submitted to the various committees before projects are selected.
- Work closely with the Member States to simplify and speed up the funding procedures used in the programme's administration, and ensure that those procedures are better known.

C. CO-OPERATION

(a) Objective : Strengthen co-operation between all the parties involved in the programme.

(b) Improvements :

- Strengthen and extend existing networks and pilot projects.
- Increase co-operation with international organizations involved in the fight against cancer.
- Develop communication and co-operation between the programme and the authorities in the Member States involved in the fight against cancer.
- Inform Member States of all projects.

III. METHOD OF PROGRAMME EVALUATION

The Council is aware of the need to clarify the objectives established by the 1990 Decision in order to improve the effectiveness of programme evaluation.

- (a) **Objective :** Ongoing assessment of the programme, particularly when the annual report on execution is submitted, on the basis of the effectiveness of action undertaken and achievement of the objectives set out above.
- (b) **Improvements :**
- Work on the basis of intermediate objectives on which there is a consensus in the Community.
 - See to the incorporation of an evaluation procedure right from the planning stage of measures.
 - Submit the evaluation within the specified time limit.

EUROPE AGAINST AIDS

The Council adopted the following Resolution concerning the extension to the end of 1994 of the 1991-1993 plan of action in the framework of the "Europe against AIDS" programme.

THE COUNCIL OF THE EUROPEAN UNION,

Having regard to the Treaty establishing the European Community;

Whereas Decision 91/317/EEC of the Council and the Ministers for Health of the Member States, meeting within the Council of 4 June 1991 adopted a plan of action in the framework of the 1991 to 1993 "Europe against AIDS" programme ⁽²⁾;

CONSIDERING the conclusions of the Council and the Ministers for Health, meeting within the Council, on 27 May 1993, concerning the need to ensure that the activities of the "Europe against AIDS" programme are continued throughout 1994;

NOTES the report from the Commission to the European Parliament and the Council on the implementation of the plan of action in 1991-1992 in the framework of the "Europe against AIDS" programme;

NOTES the preliminary draft budget for 1994, which contains funding for the programme in question, and the proposal for a Decision presented by the Commission concerning the extension to the end of 1994 of the 1991-1993 plan of action adopted in the framework of said programme;

⁽²⁾ OJ L 175, 4.7.1991, p. 26.

REQUESTS the Commission, pending adoption of the aforementioned proposal for a Decision:

- to ensure that the 1991-1993 plan of action is continued in 1994;
- when pursuing the "Europe against AIDS" programme in 1994, to take account of the following guidelines.

Guidelines for the continuation in 1994 of the 1991-1993
plan of action in the context of the "Europe against AIDS" programme

These guidelines are based on the Council's mid-term assessment on the basis of the Commission's report on the implementation of the action plan in 1991-1992.

I. Structure of the programme

- (a) Objective: Ensure Community support for the activities carried out by the Member States under the programme.
- (b) Improvements: -
- Strengthen and make optimum use of the human and financial resources allocated to the programme.
 - Ensure that the Advisory Committee fully carries out its role.
 - Strengthen co-ordination with national structures and programmes, within the Commission, especially as regards research, and between the Commission and international organizations.

II. Evaluation of the programme

- (a) Objective: Improve the transparency of the decision-making mechanism and strengthen the continuous evaluation of the programme to assess the effectiveness of the action undertaken.
- (b) Improvements: -
- Establish more precise selection criteria.
 - Direct selected projects towards targeted and coherent objectives, of a social and less exclusively medical nature.
 - Provide for continuous evaluation of all projects.
 - Tailor the programme to the development of the disease.
 - Inform the Member States of the whole content of the said projects.

SELF-SUFFICIENCY IN BLOOD IN THE EUROPEAN COMMUNITY

The Council adopted the following conclusions on self-sufficiency in blood in the European Community:

"THE COUNCIL OF THE EUROPEAN UNION,

Having regard to Directive 89/381/EEC ⁽³⁾ which provides in particular for special provisions for medicinal products derived from human blood or human plasma,

Taking into account the European Parliament Resolution on self-sufficiency in, and safety of, blood and its derivatives in the European Community,

Taking into account work carried out by the Council of Europe,

APPRECIATES the Commission communication on blood self-sufficiency in the Community;

WELCOMES the recommendations made in that communication;

REAFFIRMS the need to achieve self-sufficiency in blood and its derivatives in the Member States and the Community, in particular through co-operation between Member States, in accordance with the principle of voluntary, unpaid blood donations;

AGREES on the need periodically to update, where appropriate in liaison with the Council of Europe, the studies carried out by the Community regarding blood donations and the availability and use of blood and its derivatives, and on the need to examine the possible consequences for self-sufficiency in blood and derived products in the Community of the emergence of substitute medicinal products;

AGREES to promote Community support for measures in the Member States, in particular those undertaken by national donor organizations, in order to improve information on the usefulness and importance of donations with a view to increasing the availability of blood and products derived from blood;

AGREES to encourage efforts in the Member States in the training and informing of medical staff, for example through Community support for the publication of good-practice guides in order to ensure optimum use of blood and its derivatives;

AGREES to continue to promote the quality and safety of blood collection and of blood-derivative production through Community measures in accordance with the rules laid down in Directive 89/381/EEC."

The Council also took note of the Commissions intention to draw up a list of legal and practical provisions, taking full account of scientific developments, concerning systems for the collection, control, treatment, distribution and sale of blood and derived products, and on

⁽³⁾ OJ L 181, 28.6.1989, p. 44.

that basis submit any appropriate proposals for common minimum safety criteria.

SETTING UP OF AN EPIDEMIOLOGICAL NETWORK IN THE COMMUNITY

The Council adopted the following conclusions on the setting up of an epidemiological network in the Community.

THE COUNCIL OF THE EUROPEAN UNION,

considering the Community's need to ensure a high level of human health protection, in particular by preventive action;

recalling inter alia the Resolution of the Council and the Ministers for Health of the Member States, meeting within the Council, of 13 November 1992, on the monitoring and surveillance of communicable diseases ⁽⁴⁾;

taking account of current work in this field, in particular in international organizations, and the existence in several Member States of networks responsible for gathering and processing epidemiological data;

AGREES that it is necessary for the Community as a whole to acquire a better knowledge of pathologies on the basis of their causes and their epidemiological context;

CONSIDERS that a network should be developed at Community level the main purpose of which would be to collect and co-ordinate information from monitoring networks in the Member States;

EMPHASIZES that the smooth running of such a network requires that theoretical training in epidemiology and practical preparation in epidemiology in the field be developed for the teams participating in the network;

REQUESTS the Commission, in its proposals relating to the framework of action in the field of public health, to devote special attention to setting up an epidemiological network in the

⁽⁴⁾ OJ C 326, 1.12.1992, p. 1.

Community and to examine for that purpose, with the experts appointed in conjunction with the Member States and on the basis of a prior inventory of current proceedings and mechanisms existing at Community level and that of Member States, the feasibility of such a network, taking account of the provisions contained in these conclusions and ensuring the comparability and compatibility of data.

ADVERTISING FOR TOBACCO PRODUCTS

The Council held an exchange of views on the proposal for a Directive on the approximation of the laws, regulations and administrative provisions of the Member States on advertising for tobacco products.

Noting that the delegation's positions on this proposal had not developed sufficiently to enable a compromise formula to be found which would secure the required majority, the Council instructed the Permanent Representatives Committee to continue discussing the proposal with a view to the Council's work under the next Presidency.

FRAMEWORK FOR ACTION IN THE FIELD OF PUBLIC HEALTH

The Council received with great interest the Commission communication on the framework for action in the field of public health presented by Commissioner Flynn. The communication contains proposals for a Community framework in that field, in the light of the entry into force of the Treaty on European Union which introduced explicit provisions on public health.

The Council agreed to examine the communication without delay, in order to give its verdict on the priorities, the fields of action and the relative importance of the different activities undertaken in each field of action.

EUROPEAN DRUG PREVENTION WEEK

The Council adopted the following statement on Drug Prevention Week:

THE COUNCIL,

HAVING TAKEN NOTE of the Commission communication concerning an assessment of the European Drug Prevention Week;

TAKING ACCOUNT of what has been learnt following the organization of the European Drug Prevention Week held from 16 to 22 November 1992;

CONSIDERS that a second European Drug Prevention Week to be held in October 1994 should, together with the Commission's activities in this sector, make an effective and tangible contribution to improved co-operation in Europe;

CONSIDERS that in this context, special attention must be paid to the effectiveness and the assessment of lasting primary prevention actions, targeted on young people in particular;

REQUESTS the Commission and the Member States to commence without delay the preparatory organization of the second European Week, making use of the network of national co-ordinators and, where appropriate, national organizing committees.
