

The Role of Health Education in Improving Health in Europe – a Policy Maker's Perspective

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Honoured Members, Representatives of Patient's organisations and of the Commission, Ladies and Gentlemen,

My task here is to give the politicians view. I must say as a citizen, and a politician, I find the figures indicating our future situation in the health field, chocking and alarming. Changes are necessary. On European as well as on national level.

During the past five years **only** one single doctor specialised in allergies has been educated in my country Sweden. The coming five years 50% of the current allergy specialists will retire and in the next five years an aging population will demand more and more healthcare. This is the situation in Sweden where allergy problems are common. Other countries have other particularities.

If you have the patients best on top of your agenda, which means to be able to give the patient access to the best possible care within medically reasonable time, the future doesn't look too bright.

Unless we use all our resources and all the possibilities within the Union for a more efficient allocation.

The driving forces in the union to achieve what patients need, namely;

- accessibility,
- quality,
- and sustainable financing

are the Commission and the European Parliament.

The Member States governments are really not a patient's best friend in these issues!

The measures to achieve these three objectives are;

- patient mobility,
- better regulation on safety issues,
- developed health services on EU level
- free movement of health care providers,
- and freedom of establishment.

The instruments are the Treaty, the European Court of Justice and of course the political will of the Commission and the MEPs.

But the result of the referenda in France and the Netherlands were, from a patient's point of view, some very heavy steps backwards. The Constitution contains the Charter of Fundamental Rights and in this Charter freedom of establishment is one of the strongest articles. The contents of health care though should remain in the hands of member states, as the proposed treaty makes clear.

We don't want the set-backs of constitution to slow down the positive developments on health issues which have come from the EP and the Commission.

So what do we need?

Now, more than ever, we need the patient's voices in the opinion building process to strengthen the patients view.

The different bodies of the Union can provide the legal instruments for better healthcare but the empowerment comes from the enlightened health consumer.

During the political process in the EP on the service directive and the patient's mobility we managed to find a compromise, helped on its way through the amendment which I and Mr Fjellner managed to get into the report on patient mobility which keeps health within the service directive and asks the Commission for a separate proposal on public health to be presented within six months from the entry into force of the service directive.

This position is in line with the public as recent surveys show that 64% of patients are ready to go abroad to receive health care.

But such a decision should be taken by an enlightened health consumer empowered through EU legislation. The aim should be to promote the patients own choice based on adequate knowledge. The impact on public opinion should be enforced through patient's views presenting their opinions in conferences like this one, and other platforms like EPs interest group for patients or the new Health and Consumer Intergroup.

One of our simple practical ways of arriving at a more European approach to health care is the EU health card which was, as far as I know, of introduced as an idea at the Kangaroo interest group in the EP in 1995.

The coming debates on PPP will probably move these issues forward. Before the end of this year the Commission is supposed to establish a PPP to improve access to quality information on medical product for the public with the involvement of DG Enterprise ad DG Health. In parliament the Committee on internal market and consumer protection will be involved.

The patient's voice must be heard and respected. On example of a platform for the patient's voice is the EU Health Policy Forum bringing together umbrella organisations representing stakeholders in the health sector to

ensure that the EU's health strategy is open, transparent and responds to the public concerns. The Forum seeks to cover four groups of organisations:

- Non-governmental organisations in the public health field and patients' organisations.
- Organisations representing health professionals and trade unions.
- Health service providers and health insurance.
- Industry with a particular health interest.

Health information should have an educational aspect and include information about available medicines on the market and inform about what they treat and their side effects- especially important as we know that the wrong use of medicines is a very common ground for needing hospital care. This health information might also be used to warn for dangers in the market such a false medicines coming into the EU right now through the open border between Finland and Russia, due to the Finnish border guard strike.

Involved stakeholders, EU institutions and interest groups should spread the patient's rights; the right to information and care according to case law and the freedoms and rights of the treaty.

I would like to finish with a sunshine story from my private life showing that everything cannot be regulated; that common sense and understanding must top up the regulation. I will give you an example from practical life.

A friend from Switzerland came to visit me in France and had forgotten all his medicine at home. Without any recipes he managed to get hold of all the medications he needed from our local pharmacist. It was done in half an hour without any bureaucracy, my friend could stay in France and did not have to go to hospital.

The most important person in health care is the patient and the local pharmacist remembered that.

The patient's voice should fill out the bones of the EU's technical body with living blood. Articles are less attractive than human beings, a lesson we just now learnt in two referenda.

Let us make a fresh start with exchange and communications with patients, the electorate and human beings in the centre instead of technical euro-language. What could be a better issue than patients rights and views and do it in the EP, the best platform for citizen's opinion building?

Thank you for your attention!