



European Public Health Alliance



EPHA Annual Review 2002 and 2003

Message from the General Secretary

The past two years have been a period of major expansion for the European Public Health Alliance mainly because of two political developments: preparations for EU enlargement and the drafting of the new European Constitution.

The accession process has pushed EPHA to grow eastwards – and it has done so at a cracking pace. We already had several members in Central and Eastern Europe at the beginning of 2002. But since then, numbers have grown considerably. By 2002, we had made a decision to make special efforts to accept requests to give seminars and presentations in countries of the EU enlargement. During that year we conducted a survey on the needs of NGOs in accession countries and the following year organised a joint capacity building workshop with Soros in Latvia. All this contributed to a real sense that EPHA had “enlarged” even before the European Union.

The programme for developing a new European Constitution was second additional area of activity that attracted much of our energy. Although the final draft did not match our original hopes, our work in co-ordinating and informing the health constituency on developments provided a major “plus” not only for EPHA’s own status but also for that of the health group in civil society at the European level.

Inside EPHA offices, activities on the theme of environment and health grew to such an extent that we decided to launch a new, spin-off network. At a meeting in April 2003, the priorities of the EPHA Environment Network (EEN) were agreed and an executive body elected. The launch of this autonomous, yet closely linked, network has the combined benefits of furthering the needs of the NGO health community in Europe while at the same time stimulating new sources of financing.

A great deal of pleasure surrounded our plans for EPHA 10th Anniversary. During several months beforehand, both in staff meetings but also in informal discussions, we tried to define precisely what had been achieved for public health in Europe in the past 10 years; what had been the milestones; and, who had been our public health heroes. We celebrated our tenth birthday during the AGM in June 2003.

A milestone in EPHA’s achievements took place in mid-2002. DG Health and Consumer Protection announced the first meeting of the EU Health Policy Forum. For many years, EPHA had been asking for a formal consultation process, and the European Commission had now responded. EPHA and a substantial number of its members were asked to take part.

All these developments combined have placed major demands on staff, interns and members of the Executive Board, including EPHA President Andrew Hayes. I would like to take this opportunity to thank everyone. The people making up this hugely committed group of people seem always willing to take on extra duties – often while simultaneously riding a major financial storm. But what we all know is that none of the progress made would have been possible, nor would it have been worthwhile, without the support, enthusiasm and positive feedback of our valued members.

Tamsin Rose, General Secretary
European Public Health Alliance
August 2004

About EPHA

The European Public Health Alliance is an international not-for-profit association bringing together local, national, European and international non-governmental organisations and other non-profit groups active in promoting health.

More formally, the EPHA's mission is:

- To promote and protect the health of all people living in Europe
- To advocate greater participation of citizens in health-related policy making at the European level.

Membership

By June 2003, membership had grown to 86, including 30 European networks. Eighteen new groups joined during 2002 and another eight were approved at the AGM the following year. The number of countries represented has increased both within Western Europe and especially within the countries of what is now the enlarged European Union.

The majority of EPHA members are involved either in public health generally or a disease-specific area, such as cancer, heart conditions, respiratory diseases or HIV/AIDS. The number of groups involved in environmental issues and in support of health and patients' rights has shown special expansion. The number of health professional groups represented has also grown so that EPHA now represents not only networks of associations of European doctors and nurses but also networks of physiotherapists and groups representing many types of complementary practitioners.

Secretariat

The membership decides the work plan at an AGM with the help of an executive board (see page 8) while the secretariat is responsible for implementing it and developing policy responses.

The secretariat staff is as follows:

General Secretary:

Tamsin Rose

Policy Director:

Génon Jensen

Communications Manager:

Diana Smith

Policy, Communications and information officers:

Regina Sauto Arce (until 2002), Inaki Otalora (until 2002), Laura Fernandez (until 2003), Francesco Longu, Lara Garrido Herrero.

Administration Officer:

Carole Défossé (until September 2003)

Finance Officer: part time

Danielle Limonnier (until September 2003)

Strengthening the voice of health in civil society

EPHA takes advantage of four main approaches to create a strong network for the promotion of public health at the European level. These include consultation with members and other NGOs to produce clear visions and statements on a range of issues; representation of members at a vast range of venues; alliance building with other not-for-profit advocacy groups, and capacity building to support the growth and maturity of health networks in Europe.

Consultation

EPHA produces policy positions and statements that contribute to creating a representative voice for the not-for-profit health sector at the European level. This is achieved this by drafting responses to EU policy proposals and then organising meetings and circulating the statements to members for their comments and additions.

During the period of this review, EPHA consulted its members on issues related to the new European Constitution, European governance, pharmaceutical policy including patient information, questionable claims about food products, known as “food claims”, and many other areas. It also discussed with members proposals and developments within the EU Health Policy Forum and the EU Patients’ Forum.

Representation

As a result of its consultation work, EPHA is able to speak on behalf of its members at formal consultations and working group meetings of the European Union institutions. These include:

Health Intergroup: One of the key platforms allowing EPHA to put policy positions across to European MPs is the Health Intergroup. It enables NGOs, public health authorities and health professionals to share their expertise with those in the European Parliament and other institutions. In March 2002, the Intergroup discussed the EU Pharmaceuticals Review in Strasbourg providing an important opportunity to challenge the industry lobby perspectives with those of citizens’ and consumer groups, such as EPHA and Health Action International. EPHA has provided the secretariat for the Intergroup since 1995.

EU Health Forum: The formal EU consultation process on health was established in 2002. Since then, EPHA has regularly taken part in meetings and used the occasion to promote the health NGO perspective on issues ranging from health inequalities to the priority needs of NGOs in the accession countries.

Broader non-EU committees and groups: EPHA is a member of the committee established by the World Health Organization responsible for planning the Environment and Health ministerial meetings every four years. It is also a key member of the Platform of European Social NGOs, which provides an opportunity to bring health issues to the European social policy agenda.

Alliance building

Forming partnerships on particular issues can also strengthen the voice of health in civil society. Examples include the highly successful joint seminar organised by Health Action International and EPHA in January 2002 on direct to consumer advertising of pharmaceutical drugs. This meeting attracted over 100 participants and was responsible for a major shift in thinking on proposed liberalisation of advertising standards.

Later the same year, EPHA joined animal protection and environment groups in an Open Letter to Agriculture Commissioner Frans Fischler. The letter expressed concerns over the Common Agriculture Policy and argued that healthy and nutritious food should feature among the objectives.

Capacity building

Apart from EPHA’s regular seminars aimed at strengthening the capacity of members for advocacy at the European level, a joint seminar was organised with the Soros Institute in Latvia. In April 2003, about 100 participants gathered in Riga for workshops covering leadership skills, coalition building and experiences in advocacy.

Advocating for public health

EPHA's advocacy activities aim to convince policy-makers and other stakeholders of the need for health-promoting policy in Europe. This involves raising awareness of key issues affecting citizens' health both within the health sector and in other areas of policy making.

Health in the Constitution

The status of health within the European constitution is crucial to the "competence" of European institutions in health. It was therefore vital to follow discussions and advocate for health to have a stronger role in the new constitution. Early on in the process, EPHA brought together more than 45 health groups to sign a letter to the Convention on the Future of Europe expressing their deep concerns. It also organised continuous monitoring of developments and co-ordinated health representation at meetings. EPHA made the views of the NGO health community widely known and prompted a Health Intergroup meeting on "Future public health competence of the EU" to raise awareness of concerns among MEPs and Commission staff.

Children's environmental health needs

A survey of environment and health priorities carried out by EPHA on behalf of WHO had shown that NGOs considered children's health to be one of the top issues. Children are worse affected by passive smoking and by traces of chemicals in food, air and water than are adults. EPHA decided to start its advocacy work on children's environmental health with the help of a consultative process which would culminate in a widely distributed booklet entitled "Children's health in Europe: Tackling the environmental threats". Because development of the booklet contents allowed EPHA members to prioritise the themes and policy responses, the process produced key messages and recommendations on children's health. It also offered concrete examples of success stories from members showing what community groups, governments and other organisations could do to reduce or contain environmental threats. These were fed into a wider health and environment NGO consultation in Brussels in December 2003 in preparation for the Ministerial meeting in Budapest that took children as its main theme.

Determinants of health

Efforts to encourage stronger policy on reducing inequality in Europe are probably the most part of work aimed at improving health in Europe. Because of the significance of inequality on health status, the vast majority of EPHA members are concerned about this area and support all EPHA efforts in it. Working closely with key members, EPHA was able to propose some action points at several meetings organised during the past two years, especially during the Belgian and Danish presidencies.

The needs of health NGOs in countries of the enlargement

Many opportunities were also found to raise the issue of health NGOs in accession countries, including at the EU Health Policy Forum in June 2002. Having conducted our survey on "Health and Enlargement" in the first half of 2002, EPHA was able to identify priorities and make known the needs of health NGOs in Central and Eastern European countries. The overwhelming majority of survey respondents felt that EU membership would bring benefits for health, especially in terms of access to information for the promotion of public health. Most had already been involved in policy making in their own countries and wanted new opportunities to participate at the EU level.

Defending NGO transparency

When the European Commission announced a major new process through which to consult with civil society on health, EPHA took a lead in co-ordinating feedback on how it should be managed and organised. One element of common concern was the lack of transparency on criteria for membership of the EU Health Policy Forum. Industry-driven "pseudo" NGOs might be able to achieve membership and therefore distort the opportunity for open, public consultation.

Monitoring developments

Supporting the health community in its attempts to identify priority issues affecting health involves monitoring developments at three levels: in the European institutions, within the international context, and at the community or grassroots level.

Following EU policy making

One of EPHA's most important tasks is to monitor the policy making process within the EU institutions. This is vital to ensure that key issues and developments are identified and shared with members and the wider health community.

The task is not an easy one. Many different institutions must be included. Health-related developments can occur in the Council of Ministers, the European Parliament and its various committees, the Council of Europe, and in the various European courts. They can also emerge from one of the many European agencies. While monitoring activities related to access to care, health promotion, different health conditions such as cancer, HIV/AIDS, heart disease and mental health, may be relatively straightforward, covering the health implications of developments in agriculture, trade, transport and urban policy is much more difficult.

Some of the important overarching themes required monitoring entirely new structures, for example the Convention on the Future of Europe responsible for developing the new constitution. Tracking developments on tobacco labelling and advertising in Europe, the pharmaceutical review process, patient mobility, GMOs and food safety almost always required not only visiting official EU sources of information but also relevant NGO websites to identify policy positions and advocacy activity.

Support on decisions about what to monitor is provided through the discussions at the Annual General Meeting, seminars, the policy co-ordination meetings or within the working groups on different policy areas. Nevertheless, identifying what should be included in EPHA's information bulletins (regular newsletter or sent out on "health alerts") is a time-consuming and difficult task.

Keeping track of global influences

EPHA has tended to follow the effects of international developments on health mainly through development conferences or international meetings. For example, EPHA staff has taken part in two ministerial meetings of the World Trade Organisation following international attention given to the effects of trade restrictions on property rights and the costs of pharmaceuticals in developing countries.

Towards the end of 2002, EPHA decided to produce an issue of the European Public Health Update on "Making trade work for health" in January/February 2003 to help identify key issues in relation to trade and health in Europe. Through the experience of the WTO meetings and contacts with other health development NGOs, WHO and EPHA members, it was possible to identify some of the key issues that should be monitored. They included the effect of trade on social policy and income inequality, how trade affected food standard setting and how trade agreements might undermine public health services. The exercise also highlighted the need to monitor developments on the progress of the Framework Convention on Tobacco Control as a precedent in international legislation in that it is aimed at promoting health rather than trade.

Listening to communities

The priorities of health NGOs, particularly organisations working at the grassroots, must also be monitored to help to identify issues and set the agenda. Staff in these organisations sees at first hand the problems communities are facing, and they listen to what communities believe are the root causes and the solutions. The process of developing EPHA's publication on children's environmental health involved some of these groups by contacting them for success stories that could be included in the publication as examples of potential policy responses.

Making information accessible

EPHA ensures that the results of its policy monitoring are widely available via a number of different channels. These include presentations and interventions, the mailing out of printed materials, electronic newsletters, "health alert" e-mail messages and the EPHA website.

Website

An excellent new version of EPHA's website was launched in May 2003. It is divided into six main sections: About EPHA; Environment; Europe – its institutions and agencies, health trends, EU enlargement, etc.; Food and Agriculture; Society – health inequalities, vulnerable groups, health rights, civil society, etc., and Wealth - trade, economics and their impact on health conditions in Europe and worldwide. Back issues of the EPHA electronic newsletter and the *European Public Health Update* are available online. Since its launch the number of visitors to the site has increased dramatically. By the end of 2003, the number of hits per day had reached almost 9,000.

Electronic news bulletins

The monthly newsletter follows the sections of the website providing a comprehensive monitoring service of developments affecting health taking place within the European institutions. It also gives a special attention to the work, activities and resource materials of both EPHA members and the EPHA secretariat.

During the course of the Convention on the Future of Europe, regular "Convention updates" were emailed to all those interested in tracking developments on what was happening to "health" in the debate on the European constitution. Messages of thanks and appreciation came flooding in when this service was launched. They came not only from EPHA members but also from staff at the Commission and other European institutions.

"Health alerts" are sent out when information comes in that is urgent, particularly for sections of the membership involved in a working group, such as pharmaceuticals.

Printed materials

The *European Public Health Update* continued to be one of EPHA's main communication tools with a circulation of just under 1,000. Many copies are distributed at conferences and seminars by EPHA staff, and others are sent out, often as bulk copies, following requests.

Themes during 2002-2003 included health inequalities, sustainable development, the European Union's role in health care, food and CAP reform, children's health, future EU health policy, trade and health, water, and 10 years of public health in Europe. The journal also featured interviews with the Spanish, Danish and Greek health ministers and the general policy section focused on the EU health framework, consultation mechanisms, and recent WHO policy developments affecting Europe. *Update* also provided reports of EPHA seminars, which was especially useful for those who could not attend.

The "Children in Europe" booklet was disseminated to the EPHA network but many more copies went out in response to requests for bulk copies from EPHA members, who wanted to send them to their own members, and from four WHO offices in Europe.

Media coverage

To reach specific groups of stakeholders, EPHA staff contributes occasional articles to specialist publications. For example, a feature aimed at MEPs appeared in *The Parliament Magazine*, 15 July 2002, at a time when they still had a chance to discuss the new health programme. Written by EPHA President Andrew Hayes, the article argued that the European Union should respond much more strongly to the public health challenge.

EPHA has traditionally devoted less time to reaching the general public. However, EPHA staff members frequently answer questions from journalists and are then sometimes quoted in newspapers and journals. For example, in November 2002 when the new health framework was announced, Communications Manager Diana Smith was quoted in the *European Voice* about EPHA's disappointment at the low level of resources allocated.

Membership services

EPHA members rely on the Alliance to keep health on the agenda and to provide them with the information and support they need to understand and contribute to policy development and programme implementation within the European Union.

Seminars

Around the time of the AGM or other events bringing members together, EPHA organises seminars, talks and activities on key policy developments and processes. Among the issues covered in 2002-2003 were the EU health programme, the "Open Method of Co-ordination", health in DG Environment, co-operation between WHO and the European Commission on sustainable development, public health priorities in Central and Eastern Europe, and the pharmaceutical review process especially in relation to direct to consumer advertising of prescription drugs. Those members who could not attend these meetings have access to written reports.

Policy co-ordination

EPHA holds regular two-monthly meetings in Brussels to share information and consult with members. Those who cannot be at these sessions can nevertheless respond to the agenda emailed to them and receive the minutes afterwards.

At these meetings, EPHA provides an introduction to its current activities and plans and then opens the floor for an information sharing session that allows each participant time to update others around the table on their work and reflections. The process stimulates discussion that often clarifies hearsay and frequently leads to a greater understanding of how the EU works. Sometimes it is the basis for work initiatives, such as a division of monitoring tasks or coordinated advocacy activities. Announcements about forthcoming events creates opportunities and raises awareness of emerging priorities within the public health non-governmental sector in Europe.

Working groups

Some years ago, the widely acknowledged benefits of co-operation between member groups on particular issues prompted the formation of working groups. These now exist on food and nutrition, alcohol, pharmaceuticals, health care issues, and children's health. The former environment and health working group has evolved into a separate, spin-off NGO known as the EPHA Environment Network or EEN.

"Members only" website

The EPHA website has a major section that is accessible only to members (with a password). It contains the minutes from the EPHA policy co-ordinating group, links to important documents related to EU health policy, resources to help facilitate EPHA members' advocacy efforts (e.g. contact details for key health officials in the Commission, national ministries, European Parliament and so on.) Following the introduction of the new website, members are now able to upload their own articles to relevant sections of the site.

Telephone information desk

As EPHA's website has become more resourced and easier to use, fewer telephone requests are made to staff for information. This has afforded important time-saving and increased cost-effectiveness. However, direct contact with secretariat staff remains an important membership service. There are also often benefits for EPHA from these two-way exchanges on priorities and needs. Sometimes they trigger ideas for new services that EPHA could offer. For example, during the past two years many existing members have asked secretariat staff for NGO contacts in Central and Eastern Europe. The series of requests have prompted the current updating and expansion of the EPHA European health directory.

Organisational structure and accounts

The General Assembly

EPHA's membership meets at an Annual General Meeting, which takes place usually in June. Each member has either "full membership" status with two votes on decisions to be taken or "associate membership" with only one vote. Full members are almost always non-governmental organisations while associate members are professional associations, such as organisations of doctors and nurses, or national and local authorities or academic and educational institutions.

EPHA President and Executive Board Members 2001-2003

Andrew Hayes, President

International Union against Cancer and the Association of European Cancer Leagues

Janice Cave, Vice President

Royal Society for the Prevention of Accidents, United Kingdom

Henning Bech-Larsen, Treasurer

Blue Cross European Community Group, Denmark

Katerina Sokou

Greek Network of Health Promoting Schools Association, Greece

Claude Rivière

Association Nationale de Prévention de l'Alcoolisme, France

Vicky Claeys

International Planned Parenthood Federation – European Network

Ian MacArthur

Chartered Institute of Environmental Health (until October 2002)

Owen Metcalfe

Institute of Public Health in Ireland (from November 2002)

Accounts 2002-2003

EPHA receives funding from the European Commission, from membership fees and subscriptions to publications and from occasional contributions from members and other health organisations.

During these two years we would especially like to acknowledge the support received from Norwegian Temperance Alliance, Standing Committee of Nurses of the European Union (PCN), Pharmaceutical Group of the EU (PGEU), International Planned Parenthood Federation – European Network, Welsh Food Alliance, and the UK Public Health Association.

The latest available figures on the EPHA budget are given below.

Budgeted Income March 2002 - March 2003	
Grant from the European Commission	241.839,17
Publication Sales	7095,37
Membership Fees	38596,37
Other Incomes	208002,88
Total Income	495533,79
Budgeted Spending March 2002 - March 2003	
Staff	232.599,15
Office	193902,89
Translation	8844,05
Publication	23591,85
Missions	3894,51
Other	3920,9
Total Spending	466753,35