EU enlargement: a public health assessment

Enlargement is the most important political issue the European Union faces today. A new voting balance was agreed at Nice, completion of laws for the *aquis comunitaire* proceeds, and decisions on the re-distribution of resources are soon to be taken.

The *aquis comunitaire* for health has not been a priority for enlargement countries, mainly because health is included in other areas. But health is moving up the EU political agenda with recognition of the health aspects of trade (e.g. food safety, tobacco), health protection (e.g. drugs, communicable diseases), information (e.g. developing Eurostat data) and health care (e.g. new E112 cards, health insurance markets).

The enlargement countries are concerned with these developments, but also with particular characteristics of their own. In general, the health status of the enlargement countries is poorer than in the 15 EU countries, partly in relation to lower income and education levels and partly through different (earlier) public health and health service policies.

All EU and enlargement countries are members of the World Health Organisation, and Ministries of Health participate in Europe-wide development within the framework of Health-21. Implementation of policies, however, often depends on training and service provision, dependent on finance from other sources.

There are substantial health-related development projects in the enlargement countries. The European Union funds some, for example through Phare, Interreg, Tempus and Leonardo projects. Donors and the World Bank have provided substantially more funds for 'structural reform' of health systems and capital infrastructure.

A particular concern in enlargement countries since 1990 has been the environment, which was heir to poor practice and poor regulation. WHO's European Environment and Health Committee has set agendas for environment and health work through Ministerial Conferences, and working towards a fourth Conference in Budapest in 2004.

Contribution of EUPHA

EUPHA is a voluntary association of national public health organisations in European countries. It holds annual research conferences, which have been important in strengthening exchange and standards for public health researchers of enlargement countries. At the Annual Meeting in 2001, presentations were made by researchers from 8 candidate and four other CEE countries. Thanks to a grant from the Open Society Institute of the SOROS foundation, 36 public health experts from CEE countries could submit and present abstracts. Moreover, at the annual meeting 2001, a joint EU/WHO workshop was held on the EU/WHO project “Highlights on health in the candidate countries for accession to the EU”.

The European Journal of Public Health, our scientific journal, provides a forum for the exchange of research results and gives updated information to scientists and the public health community.

The EUPHA sections (on social security and health, on health promotion, on public health practice and policy, on health services research, on epidemiology, on youth and on food and nutrition) as well as the website of EUPHA also provide a means of targeted and rapid communication about the growing public health agenda.
Public health and enlargement.

EUPHA proposes four areas, which the EC Directorate of Health and Consumer Safety may consider of importance for the enlargement countries:

1. Developing the agenda within the new public health programme. The Commission has extended funding for existing programmes to collaborating groups within the candidate countries. We would expect this to develop for the new public health programme, and that learning and expertise may be readily exchanged between partners.

2. Priorities for research and action. The public health agenda of enlargement countries may be different from the existing 15. New priorities need to be recognised, for example, controlling the promotion of products harmful to health such as tobacco and car transport, and developing new approaches for mental health and disability. The necessary changes in major EU spending, especially the CAP and structural funds, must be accompanied by health impact assessment. Strengthening research and professional practice in public health and health services will support this agenda and the political processes needed to implement reform.

3. Advisory expertise. The public health associations of the enlargement countries bring together scientific and professional expertise that can be of great assistance to the Commission. We recommend the development of appropriate pathways for provision of this expertise, both by country and by topic, so that the most effective ways are found in dealing with issues in hand.

4. Collaboration. While commercial factors have led to globalisation in many fields, public health remains notably isolated within countries. The enlargement process can allow the Commission to strengthen exchange and development of health expertise – science, management, and professional – that is not currently supported by market forces. Public support at European level is needed for public health. Enlargement brings that more evidently into focus.

EUPHA is grateful to provide input into development of the strategy for enlargement, and offers contributions to this process from scientific experts and professional associations.