



# NEWSLETTER

## General Meeting 2014 and Workshop on Effective strategies to inform policy makers about the real value of physiotherapists and physiotherapy

The European Region of the WCPT is pleased to announce that on 4th of April 2014, 34 Member Organisations have registered to participate in the General Meeting of the Europe Region 2014, to be held on 8 – 10 May 2014 in Copenhagen, Denmark.

27 Member Organisations have also registered for the Workshop on Effective strategies to inform policy makers about the real value of physiotherapists and physiotherapy (and influence their decisions) to be held on 7 May 2014 at the same venue.

We would also like to announce that the documents for the General Meeting have been posted on the ER-WCPT website. Those documents are available on the following link:

<http://www.physio-europe.org/index.php?action=161>

Just after the end of the GM and taking advantage of the fact that most of the ER-WCPT Foundation members will be present, a short Foundation meeting will also take place. A dedicated call and agenda has been circulated among the members by e-mail.

## Elections at the 2014 General Meeting

At the closing date for nominations for the ER-WCPT Executive Committee, the following candidatures were received by the secretariat of the Region in due time:

**Position: Chairman of the ER-WCPT**

Candidates: Sarah Bazin (UK)

**Position: Treasurer of the ER-WCPT**

Candidates: Treasurer: Gerhard Eder (Austria)  
Bodo Schlag (Germany)

**Position: Regional Representative of the ER-WCPT**

Candidates: John Xerri de Caro (Malta)  
Sebastian Zdunski (Poland)

**Position: Alternate Regional Representative of the ER-WCPT**

Candidates: No candidates

**Position: 1st and 2nd Alternate Members of the ER-WCPT Executive Committee**

Candidates: Maarit Keskinen (Finland)

## Chronic Diseases Joint Action gets started at kick-off meeting in Madrid

The “CHRODIS” Joint Action, addressing chronic diseases and promoting healthy ageing across the life cycle, co-financed by the EU Health Programme, starts its work today at a kick-off meeting in Madrid.

The objective of CHRODIS is to help EU countries and regions exchange good practices in tackling chronic diseases. A special focus will be given to health promotion and disease prevention, multi-morbidity (people with more than one long-term condition) and diabetes.

The CHRODIS Joint Action, involving 38 organisations from 22 Member States, Norway and Iceland, will run until the end of March 2017. The principal expected outcome will be a mechanism for the collection, validation, scaling up and transferring of good practices to address Chronic Diseases, multi-morbidity and diabetes.

Chronic diseases such as diabetes, cardiovascular, respiratory and musculoskeletal diseases and depression, are increasingly prevalent in the EU. According to the World Health Organisation, 86% of



deaths in Europe are due to chronic diseases, and the joint EC/OECD "Health at a Glance: Europe 2012" report<sup>1</sup>, notes that more than 6% of people aged 20-79 years in the European Union, or 30 million people, had diabetes in 2011.

Experts agree that many chronic diseases are either preventable or can be delayed, and rates can be vastly tackled by reducing or avoiding key risk factors such as smoking, over-nutrition and unbalanced diets, physical inactivity, alcohol consumption and exposure to certain chemical substances.

Part of the EU's comprehensive approach to tackling the chronic disease burden in Europe is to co-finance

projects and actions, carried out by Member States, through the Health Programme. CHRODIS is the first EU-funded Joint Action in the area of chronic diseases and healthy ageing. It is funded! under the 2013 Plan, with 50% EC co-funding of € 4,6 million and a total cost of € 9,2 million.

### **More information on EU action to address major and chronic diseases:**

[http://ec.europa.eu/health/major\\_chronic\\_diseases/policy/index\\_en.htm](http://ec.europa.eu/health/major_chronic_diseases/policy/index_en.htm)

### **Link to report:**

[http://ec.europa.eu/health/reports/docs/health\\_glance\\_2012\\_en.pdf](http://ec.europa.eu/health/reports/docs/health_glance_2012_en.pdf)

## Conference on the modernisation of the Professional Qualifications Directive

On **12 February 2014** the Directorate-General for the Internal Market and Services of the European Commission organized in Brussels a **one day Conference entitled "Modernisation of the Professional Qualifications Directive: safe mobility"**.

This high-level event followed the entry-into-force of the new legislation on 17 January 2014 and provided a solid basis for the continued work with stakeholders and Member States to ensure the Directive is implemented in a timely way.

The Conference provided participants with the opportunity to discuss the changes introduced by the modernisation of the Professional Qualifications Directive.

The Conference addressed the following issues in panel discussions:

- Facilitating mobility: The European Professional Card
- Reinforcing safeguards for citizens and patients: The Alert mechanism and knowledge of languages
- Facilitating qualifications: Recognition of traineeships and the importance of diversity in education systems
- Simplification: Points of Single Contact and Common Training Principles

The General Secretary attended on behalf of the ER-WCPT. Colleagues from the Italian and Belgian associations were also present.

Watch the video of the conference:

<http://scic.ec.europa.eu/streaming/index.php?es=2&sessionno=a35fe7f7fe8217b4369a0af4244d1fca>

Further information:

[http://ec.europa.eu/internal\\_market/qualifications/new](http://ec.europa.eu/internal_market/qualifications/new)

## Conference 'Health in Europe, making it fairer'

This major conference organised in Brussels on 18 March 2014 by DG Sanco addressed the issue of improving fairness and equity in health in Europe, improving access to health and combating discrimination in health.

The Conference aimed to:

- highlight current issues on fairness in health, access to health and discrimination in health in Europe
- exchange information on policies and good practice in improving fairness and equity in health and combatting discrimination.
- propose conference conclusions on common principles and values on improving equity and combatting discrimination

The workshops targeted issues and good practice in promoting equity and combatting discrimination in health promotion, prevention and treatment:

- in chronic non-communicable diseases
- in communicable diseases - particularly HIV/AIDS, and
- of disadvantaged groups and persons in vulnerable situations.

A conclusions document was discussed in plenary in the final session, highlighting common principles and values on improving equity and combatting discrimination in health. This text will support the definition of future approaches to fairer health in Europe.



Participants were: EU Member States, the Greek Presidency, the European Parliament, and other EU institutions; EU agencies including the Fundamental Rights Agency (FRA), the European Asylum Support office (EASO), the European Centre for Disease Prevention and Control (ECDC), the European Monitoring Centre for Drug and Drug Addiction (EMCDDA); Joint United Nations Programme on HIV/AIDS (UNAIDS), the World Health Organisation

(HO), the International Organisation for Migration (IOM), Open Society Institute (OSI), Soros Foundation all the member organisations of the EU Health Policy Forum and Commission Services including DG JUST, DG EMPL, DG REGIO.

The General Secretary attended the conference on behalf of the ER-WCPT, as a Member of the European Health Forum.

## 3rd EU Health Programme (2014-2020)

On 21 March 2014, the **Third Health Programme** (Regulation (EU) No 282/2014 of the European Parliament and of the Council of 11 March 2014 on the establishment of a third Programme for the Union's action in the field of health (2014-2020) and repealing Decision No 1350/2007/EC) was published in the Official Journal of the European Union. It **entered into force** one day after its publication in the Official Journal. It is available in all EU official languages on EUR-lex (reference L 86, Volume 57, 21 March 2014).

<http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32014R0282>

More information:

Health Programme 2014 – 2020 Presentation

[http://ec.europa.eu/health/programme/docs/healthpgm\\_pres\\_nov2013\\_en.pdf](http://ec.europa.eu/health/programme/docs/healthpgm_pres_nov2013_en.pdf)

Q&A on the third Health Programme 2014-2020

[http://europa.eu/rapid/press-release\\_MEMO-14-139\\_en.htm](http://europa.eu/rapid/press-release_MEMO-14-139_en.htm)

## Third Health Programme promotes optimal cooperation

*By Tonio Borg, European Commissioner for Health*

With the adoption of the Third Health Programme for 2014-2020, we are entering into a new phase for supporting action on public health in the European Union. The programme is the key tool to support EU health policy, to foster cooperation with Member States and health stakeholders and to help improve health outcomes across the European Union. The programme is designed to support and complement Member States' action in areas where cooperation at EU level is either indispensable or provides important added value.

This cooperation becomes increasingly important in the current economic context. Member States are under pressure to strike the right balance between providing universal access to high-quality health services and respecting budgetary constraints. In this context, more than ever, Member States have much to gain from action under the Programme to exchange knowledge

and good practices, to un-lock the potential of innovation in healthcare and to foster prevention.

With this new programme we will be able to strengthen action to promote health and prevent diseases; to be better prepared to protect citizens against health emergencies and to coordinate responses at European level; to support public health capacity-building and contribute to innovative, efficient and sustainable health systems; and, last but not least, to improve people's access to medical expertise for specific conditions and to improve healthcare quality and patient safety.

I encourage Member States and stakeholders to make full use of the opportunities this programme offers to improve the health of our citizens across the European Union.

## Public consultation on Preliminary Opinion on Definition Primary Care by Health Expert Panel

The European Commission and its independent Expert Panel which gives non-binding advice on matters related to "effective ways of investing in health" launched a public consultation on a preliminary opinion. The opinion on "**a frame of reference in relation to primary care with a special emphasis on financing**

**systems and referral systems**" seeks to provide a core definition of primary care.

It underlines the importance of primary care and makes recommendations for its strengthening in terms of infrastructure, organisation, access, and financing.





Once published, the opinion should provide guidance to EU countries that are making efforts to improve the organisation and sustainability of their health systems.

The consultation will run until **11 May 2014**. Interested parties are invited to provide comments on this preliminary opinion.

Note: The EU Matters and Professional Issues WGs will provide a response on behalf of the Region. However, MOs can also provide individual response through the link below:

[http://ec.europa.eu/health/expertpanel/consultations/primarycare\\_en.htm](http://ec.europa.eu/health/expertpanel/consultations/primarycare_en.htm)

## Info Day on the Third Health Programme 2014-2020

Brussels, 11 April 2014. The purpose of this Info Day is to provide information about the main features of the Third Health Programme and how it can contribute to fostering health in Europe by encouraging cooperation between Member States to improve the health policies that benefit their citizens.

**Objectives:** The Info Day will provide an overview of the Third Health Programme and give an opportunity to stakeholders to ask questions and learn more on its design and practical implementation, in particular:

1. What is the overall aim of this programme and what is new if compared to previous programmes?

2. What is the EU added value?
3. What are the objectives and priorities foreseen?
4. Who can benefit from the programme?
5. What is the available budget and what are the financial mechanisms involved?
6. How will the programme be implemented?

The General Secretary will attend the info day on behalf of the ER-WCPT

For further information

[http://ec.europa.eu/health/programme/events/info\\_day\\_2014\\_en.htm](http://ec.europa.eu/health/programme/events/info_day_2014_en.htm)

## Alarming obesity rates in the WHO European Region require urgent action to protect children's health

A **WHO Europe Report**, presenting an update on the marketing of foods high in fat, salt and sugar to children in the period 2012–2013, highlights **increasing obesity rates** in children. The overview about nutrition, obesity and physical inactivity in all 53 countries within the European Region, emphasises diverging obesity prevalence rates and the need for joint action to implement necessary policies at all levels, integrated in the WHO policy framework for health.

According to the WHO Europe Report, overweight has gone through a **process of normalisation**, which needs to be prevented through convergent policy action in the European region. Nowadays, 27% of 13-year-olds and 33% of 11-year olds are overweight according to the WHO Europe Report. Physical activity and a healthy nutrition are often lacking, which may have health consequences during childhood, but could become even more severe during adulthood. Chronic diseases in later life years could be the outcome of non-action earlier in life. The alarming obesity rates clearly mirror the lack of engagement, which most EU Member States demonstrate at the moment.

The country's profiles on nutrition, obesity and physical inactivity in all 53 countries within the European Region

also demonstrate **diverging obesity rates**- among 11-year-old boys and girls, the prevalence of overweight was highest in Greece (33%), Portugal (32%), Ireland (30%) and Spain (30%) and lowest in the Netherlands (13%) and Switzerland (11%). The profiles were launched at a conference in Athens, Greece at the opening event for the Greek Presidency of the European Union (EU). In 23 out of 36 countries, more than 30% of boys and girls aged 15 years and over are not getting enough physical activity. Among adults, women's rates of **insufficient physical activity** range from 16% in Greece and 17% in Estonia to 71% in Malta and 76% in Serbia.

These diverging obesity rates have to be tackled jointly, supporting especially the most vulnerable on **national, regional and local levels**. Actions need to be put in place instead of neglecting the apparent health problems of our future generation. As European countries differ in their policy actions - while Northern European countries and France have already implemented important policy measures to prevent obesity, others are still lacking important policies. The WHO policy framework for health proposes a **whole government approach** and **intersectoral initiatives** in line with Health 2020. Policy measures need to be



implemented for **schools to promote consumption of fruit and vegetables**, together with lunch initiatives and **taxation on foods high in fat, salt and sugar**. **Tighter controls on advertising, sound systems for surveillance and monitoring**, and action to **promote physical activity**, especially among children have to be realised. Member States have to act quickly - we cannot

watch the next generation suffering from obesity due to a lack of physical activity and unhealthy nutrition.

For further information:

<http://www.euro.who.int/en/health-topics/disease-prevention/nutrition/country-work>

## WCPT Congress 2015 - Call for abstracts

Find out why you should submit an abstract to present at the WCPT Congress 2015 - watch the video at <http://www.wcpt.org/congress/abstracts>.

Abstract presentations are the main way of showcasing your research and innovations. There were nearly 2,500 platform and poster presentations at the last WCPT Congress in 2011 in Amsterdam.

Exciting new innovations are being introduced to the abstract presentation options including:

1. Rapid five platform sessions - five slides in five minutes
2. State of the art platform sessions profiling the developments that you can't afford to miss
3. Poster walks led by high profile moderators

To access the submission system and download the full call for abstracts go to:

<http://www.wcpt.org/congress/abstracts>.

The deadline for submissions is 31st October 2014.

