# ENABLING GOOD HEALTH FOR ALL A REFLECTION PROCESS FOR A NEW EU HEALTH STRATEGY

Some ideas....

#### Engagement with health

In England Derek Wanless has promoted the concept of "Full Engagement" by the population with health issues, so that more people make healthy choices. In Britain we have a very successful "Duke of Edinburgh's" Award scheme for school aged children, for which they undertake a number of tasks. I suggest we need a parallel scheme based on health and social care, to give our children exposure to health and care issues and make them more health conscious.

### Healthy options

If we are all to live healthier lives government needs to find ways to make healthy options easier and unhealthy options more difficult. A prime area is 'convenience foods'. If all convenience foods were healthy options then there would be substitution of unhealthy food by healthy food. With emerging evidence that fizzy sugary drinks play a major role in obesity this should apply to drink as well as food.

## Health protection

When SARS threatened Europe in 2003 it was clear that it would be free to spread unless measures could be put in place. Surely we need a plan that ensures that social mixing is reduced when a threat becomes a reality. For example conferences and conferences could be suspended and travel by public transport reduced to essential journeys (with the need for a pass). We need to design such measures now and think through how to deal with the cost of such measures, and put infrastructure in place.

#### Health research

There is a need for greater investment in research that can lead to major health improvement, and to contribute towards global campaigns. At present the biggest sums are spent by pharmaceutical companies – very necessary but usually resulting in high cost but incremental progress. What if the EU required pharmaceutical companies to contribute a proportion of their research spend every year to 'public interest' health research. I would suggest 10% would not be too onerous and yet the resulting fund would be enough to kick start major programmes. The public interest health research agenda should be shaped by people from around the world and eminent thinkers and scientists from other fields as well as health researchers. This would be a major contribution by Europe to a better world in the future.

### Efficiency and effectiveness of health services

While more and more people accept that healthy living is the route to a longer healthier life, most resources go on treating illness. Yet no record is kept of how useful treatments are. In the UK we have tried 'audit' of clinical care, but the results have been unimpressive. The time has come to have every treatment of every citizen registered, together with the diagnosis and age and gender of the patient – and a record of whether the treatment was effective or not. A record by the patient and not necessarily by the doctor. Funding should be withdrawn from treatments that do not work for given diagnoses for given age/sex groups. A vast potential for savings – and avoiding unnecessary and unhelpful treatments.

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