

Minutes

Formal Meeting Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases

9 February 2022

On 9 February 2022, the Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases (SGPP) held a virtual meeting, chaired by DG SANTE. The representatives of 23 Member States, plus Iceland and Norway, attended the meeting together with a number of Commission services, and agencies¹.

Update on Healthier Together - EU Non-Communicable Diseases Initiative 2021

DG SANTE updated the SGPP on the draft Non-Communicable Diseases Initiative, which focusses on implementation, helping EU countries to transfer best practices, develop guidelines, roll out innovative approaches to reduce the burden of non-communicable diseases (NCDs). Initial priorities were suggested for each of the five strands, being health determinants, cardiovascular diseases, diabetes, chronic respiratory diseases and mental health and neurological disorders. An integrated approach to all strands was proposed, incorporating addressing social determinants and health literacy, age/gender/culture-sensitive prevention and management, effective screening approaches, labour participation of patients and carers, system reform for person-centred, integrated care, and multimorbidity. An overview was also provided of the aim, scope and strands within the paper. Member States expressed their support for the initiative and stressed the need for a strong 'Health in All Policies' broader approach focusing on health promotion and disease prevention. The sub-group on NCDs will continue developing this initiative.

DISCUSSION

Finland welcomed the proposal and were positive about the inclusion of prevention and management of NCDs in the initiative, as well as the cooperation between the Europe's Beating Cancer Plan and the NCD Initiative. In the sub-group, they look forward to a broad approach to prevention and control of NCDs, with not just a focus on diseases, but also on health determinants. The approach is a Health in All Policies with EU added value; Finland looks forward to an integrated approach based on these determinants. They opined that adopting a lifestyle approach as a common factor, rather than determinants of health, focusses too much on a person's own responsibility. The focus should rather be on what the EU can do, i.e. a structural approach. They concluded by advocating an evidence-based approach, using what already exists rather than reinventing.

Portugal completely concurred with Finland. Portugal welcomed the European-level initiative and added that it is totally in line with national activities. They too suggested changing from a lifestyle approach and rather focus on health literacy and behavioural sciences, by building and implementing new best practices. They concluded by suggesting the highlighting of health promotion ecosystems within the multifarious Commission frameworks, which would fit with a Health in All Policies approach.

Romania welcomed the initiative and suggested that legal instruments be addressed as health determinants, i.e. looking at ways to regulate to support behavioural change.

¹ Directorate-General for Research and Innovation and the Health and Digital Executive Agency

Iceland agreed with both Finland and Portugal on the need to focus on a comprehensive approach, i.e. a Health in All Policies approach. This would address determinants of health, and create environments and conditions that promote healthy lifestyle, health and wellbeing for all. In Europe, these structures are already in place; the competency of these should be exploited.

Austria concurs with Finland, Portugal, and Iceland, and welcomes the cooperation between EBCP and the NCD Initiative, moving beyond targeting specific diseases by means of an integrated approach based on health determinants.

Slovenia supported the suggested approach of collaboration among sub-groups and relevant sectors.

DG SANTE thanked the SGPP for their positive reaction to connect the two sub-groups under health determinants. The Commission will benefit from the expertise of both groups, for example on lifestyle determinants. They then reinforced the invitation to Member States to collaborate on priorities.

Best practices

The SGPP was informed by DG SANTE of the actions implementing best practices on integrated care and primary care and on health promotion and disease prevention (under the third Health Programme and the EU4Health Programme). Specifically, the following **Joint Actions** were highlighted: (1) a Joint Action on health systems, entitled JADECARE², which supports the transfer of four best practices in digitally enabled integrated person centred care; one on mental health called ImpleMENTAL³, which supports the transfer of two best practices on suicide prevention and on mental health system reform; and (3) two Joint Actions which are being prepared on NCD prevention to support the transfer of best practices on healthy lifestyles and on prevention of type 2 diabetes. Two calls for projects will be launched in the first quarter of 2022 to transfer best practices in the area of mental health for children in vulnerable groups.

The SGPP was then informed about the **new best practice exercise for 2022-2023** and agreed to launch an open call for practices on the five themes of the NCDs initiative (cardiovascular diseases, diabetes, chronic respiratory diseases, mental health and neurological disorders, health determinants). The sub-group on NCDs will be tasked to examine relevant promising practices and best practices that were validated in the past but not implemented because of limited funding. At the request of Member States, a dedicated workshop on methodology and criteria for promising practices will be organised by DG SANTE. Practices resulting from the process will be included in the NCD Initiative 'tool kit', for potential funding from the EU.

DISCUSSION

Germany proposed that Joint Actions be made more open and flexible to accommodate different health and social care systems in Member States. DG SANTE acknowledged that this was a valid point and responded that Member States appreciate the flexibility of being able to select elements from more than one best practice and combine them, resulting in a tailored approach.

Belgium asked if there would be specific criteria at Member State level to identify the best practice, for example to make a differentiation from the open call on NCDs last year. DG SANTE explained that the usual criteria would be applied which had been discussed and agreed by SGPP some years ago, but these would also include vaccination. Aware that the process is burdensome, DG SANTE has contracted a study to review the process for the

² [Jadecare | Joint Action on implementing digitally integrated person-centred care](#)

³ [Health Programme DataBase - European Commission \(europa.eu\)](#)

future. The ultimate aim is to open more opportunities for actions, to support the NCD Initiative and to find concrete opportunities for Member States in the actions.

Italy asked about the procedures within the different processes and the role of the sub-group within it. DG SANTE explained the three different elements of public health interventions: (1) best practices are treated in the usual and agreed manner, and address not just risk factors, but comorbidity, multimorbidity, etc.; (2) through CHRODIS and CHRODIS+ many useful best practices were tested or piloted but not implemented, however the practices are promising. The NCD sub-group will discuss these; and (3) within the Best Practice Portal, there are many best practices which are neither in Joint Actions nor being implemented or tested, as they have not been ranked highly enough by Member States. There could be some that will be useful for the NCD Initiative, so a proposal will be made to the sub-group who will then decide. In response to **Italy's** question as to what happens at the end of the process, DG SANTE responded that the best practices will feed into the projects and Joint Actions in the context of the NCD Initiative. Italy then suggested that, due to the process of selection of promising practices and interactions among experts being so important, a specific workshop should be organised with methodological experts. **Spain** asked for clarification regarding the different criteria to be used in the two processes: for regular best practices and for promising practices.

DG SANTE concurred on the need to identify the criteria, thus a dedicated workshop for the sub-group will be organised. This dedicated workshop will cover promising practices and will review those best practices already collated. It was agreed that for the normal best practices, the previous criteria would be applied; this ensures that there will be sufficient best practices to feed the Joint Actions in order for consortia to choose which practices to implement.

Implementable research results and best practice review – interim report

The external contractor (EUHealthSupport) presented the interim results of a study, whose aim is to produce a toolkit to systematically identify (and implement) policy-relevant research results to address major public health challenges prioritised by the SGPP. Useful research projects will be identified from the wealth of research programmes, and those more mature projects could then be implemented at the national level. Such research results could become part of the solutions package to the SGPP, bringing an additional and innovative tool to address public health challenges identified in the SGPP; the tool will then be made available to the Member States.

Finally, the interim results on the study about reviewing the best practice assessment process were presented. DG SANTE agreed that the draft final reports will be shared with SGPP, who will then have the opportunity to ask questions before finalisation. This is considered the optimal way for the SGPP to benefit from the best practices.

Update on Europe's Beating Cancer Plan and the activities of the cancer sub-group

DG SANTE, co-chair of the **SGPP sub-group on cancer**, reported back to the SGPP on the work of the sub-group, on the implementation of the **Europe's Beating Cancer Plan**, and on the **Horizon Europe Mission on Cancer**.

DG SANTE updated the SGPP on the activities of the **SGPP sub-group on cancer**, including the creation of two Thematic Working groups on Comprehensive Cancer Infrastructures and the Cancer Inequalities Registry. Since spring 2021, the sub-group on cancer has held six virtual meetings, jointly chaired by DG RTD and DG SANTE. In addition, there have been two virtual meetings each of the Thematic Working Groups: (1) on the Comprehensive Cancer Infrastructures/Centres; and (2) on the Cancer Inequalities Registry. The sub-group has had updates on the implementation of the Horizon Europe's Mission on Cancer and on the Europe's Beating Cancer Plan. Eight Member States have

also given presentations on developments at national level and further initiatives on specific themes relevant for cancer control have been discussed in the sub-group.

The SGPP was updated on the **Europe's Beating Cancer Plan Implementation Roadmap**, which was released on 17 November 2021, with an indicative timeline to 2025. It includes several joint actions linked to the Europe's Beating Cancer Plan to support Member States on HPV vaccination, set up a Network of Comprehensive Cancer Centres, and strengthen e-health. Recommendations on cancer screening are currently under preparation and will be finalised in early March. They will inform the development of a Commission proposal to revise the 2003 Council Recommendations on cancer screening. The European Parliament's Special Committee on Europe's Beating Cancer adopted its report on the Cancer Plan in December 2021 and a plenary vote is expected to take place in February.

The SGPP was then updated on the first amendment to the **Horizon Europe Mission work programme 2021-2022**, which was adopted on 15 December 2021 with a deadline for submission of proposals on 26 April 2022. It contains a number of research actions to support the Mission on Cancer, in particular in the areas of understanding, screening and quality of life. The final meeting of the current Mission Board on Cancer took place on 9 December 2021. A new Board will be established to support and advise on the implementation phase of the Mission. A call for expression of interest was launched on 5 January 2022 with deadline for application of 2 February 2022.

It was agreed that the sub-groups on cancer and on NCDs would work in close collaboration with a focus on health determinants and common risk factors for non-communicable diseases.

AOB and Conclusions

The French representative presented the objectives and priorities⁴ of the **French Presidency of the Council of the European Union**. These are the support of the development of the EU Health Union and building on the EU4Health Programme, with priorities assigned to cross-border health aspects, governance, etc. In addition, the European Health Data space will be launched during the French Presidency. There is a huge gap in life expectancy across EU, so it is clearly the time to build on lessons learnt, as has been done during the recent pandemic. Finally, key events were outlined: past events on resilience, citizenship and cancer control, and upcoming events on rare diseases, antimicrobial resistance and mental health. The speech concluded with the call to build a common narrative to revive EU strategies on global health.

The Chair closed the meeting thanking participants and informed them of the next meeting of the SGPP which will take place on 10 June 2022 and will be online.

⁴ [Programme of the Presidency - French Presidency of the Council of the European Union 2022 \(europa.eu\)](https://european-council.europa.eu/media/en/press-operations/infographic-124246.aspx)