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NOTE

From: General Secretariat of the Council
To: Council

Subject: **Employment, Social Policy, Health and Consumer Affairs Council
session on 7 December 2018**
State of health in the EU
- Information from the Commission

Delegations will find in the Annex a note from the Commission services on the above-mentioned subject to be raised under "Any Other Business" at the session of the Council (EPSCO) on 7 December 2018.

THE STATE OF HEALTH IN THE EU

After the success of the first State of Health in the EU cycle (2016-18), the European Commission has recently launched its second iteration (2018-20) with the publication of “Health at a Glance: Europe 2018” on 22 November 2018. It will be followed in 2019 with the publication of Country Health Profiles and their Companion Report.

Building on the success of a new knowledge brokering cycle

In 2016, the European Commission launched the *State of Health in the EU* as a response of Commissioner Andriukaitis to his Mission Letter to “build up country-specific and cross-country knowledge which can inform policies at national and European level”.

The *State of Health in the EU* brings together internationally renowned expertise to strengthen the evidence-base on the performance of health systems and aims to support Member States’ efforts towards better knowledge, reinforced sharing of good practices and stronger evidence-based policy-making. It provides Member States with both the material for mutual learning and an opportunity to have an open exchange on good practices.

The two-year cycle comprises four connected deliverables, starting with the joint OECD-Commission report *Health at a Glance: Europe*. This is followed every odd-numbered year with a set of Country Health Profiles and an accompanying Commission report. Subsequently, voluntary exchanges are organised with interested Health Ministries, on the basis of all the preceding analysis, up until the launch of the next *State of Health in the EU* cycle. The *State of Health in the EU*'s voluntary exchanges give Member States an opportunity to brainstorm alternative policy actions, and explore possible synergies in areas covered by Commission policies and exchange best practices. During the first cycle, a total of seven voluntary exchanges were organised from May to September 2018 on topics including health workforce, health financing, health promotion and prevention, use of health data and integrated care. Many of the voluntary exchanges took place alongside national reform processes.

The framing device for the whole *State of Health in the EU* cycle, along which most of its deliverables are structured, remains the 2014 Commission Communication on effective, accessible and resilient health systems¹.

Health at a Glance: Europe 2018 kicked off the second State of Health in the EU cycle

Health at a Glance: Europe 2018, which was launched on 22 November 2018, presents comparative analyses of the health status of EU citizens and the performance of the health systems of the 28 EU Member States, 5 candidate countries and 3 EFTA countries. It provides a cross-EU overview as a basis for the country-specific analysis that is to follow.

The publication has two parts. Part I comprises two thematic chapters, the first focusing on the need for concerted efforts to promote better mental health, the second outlining possible strategies for reducing wasteful spending in health without undermining access or quality of care. Part II presents the most recent trends in key indicators of health status, risk factors and health spending. It also discusses progress in improving the effectiveness, accessibility and resilience of European health systems.

¹ COM/2014/215

Key findings of the Health at a Glance: Europe 2018 report

The *Health at a Glance: Europe* report captures the evolution of EU health systems in terms of their effectiveness, accessibility and resilience, using the latest available data. The report calls for improving mental health promotion, and using health funds more wisely, notes slowing gains in life expectancy, and highlights persistent challenges in preventing risk factors such as smoking, alcohol and obesity.

- Over 84,000 people died of suicide, or other mental health problems across Europe in 2015. The total direct and indirect costs of mental health problems are estimated to amount to more than 4% of GDP in the EU; over EUR 600 billion per year.
- Evidence from various countries suggests that a part of health spending could be reallocated to better use without undermining access or quality of care. A mix of policy levers could optimise spending by improving its value for money.
- Life expectancy was rising rapidly and steadily across EU countries until 2011. Since then, a marked slowdown was observed, which appears to be mainly the result of an increased mortality from circulatory diseases, and of periodic increases in mortality rates among elderly people due to bad flu seasons.
- Alcohol control policies have reduced overall alcohol consumption in many countries, but heavy alcohol consumption remains an important public health issue, as nearly 40 % of adolescents report binge drinking in the preceding month.

