



**COUNCIL OF
THE EUROPEAN UNION**



8980/05 (Presse 117)

(OR. fr)

PRESS RELEASE

2663rd Council meeting

Employment, Social Policy, Health and Consumer Affairs

Luxembourg, 2-3 June 2005

President

Mr François BILTGEN

Minister for Labour and Employment, Minister for Culture,
Higher Education and Research, Minister for Religious
Affairs

Ms Marie-José JACOBS

Minister for the Family and Integration, Minister for Equal
Opportunities

Mr Mars DI BARTOLOMEO

Minister for Health and Social Security

of Luxembourg

P R E S S

Main Results of the Council

The Council reached unanimous political agreement on a draft Regulation on **nutrition and health claims** made on the labelling, presentation or advertising of foods.

The Council reached political agreement by qualified majority on a draft Regulation on the **addition of vitamins and minerals and of certain other substances** to foods.

The Council reached political agreement on a draft Directive intended to give effect to the agreement concluded by the social partners concerning certain aspects of the working conditions of workers assigned to cross-border services in the railway sector.

The Council reached political agreements on draft Regulations amending the Regulations establishing a European Agency for Safety and Health at Work and a European Foundation for the Improvement of Living and Working Conditions.

The Council agreed on a general approach to a draft Decision on Guidelines for the Employment Policies of the Member States (2005-2008).

CONTENTS¹

PARTICIPANTS.....	5
ITEMS DEBATED	
EMPLOYMENT AND SOCIAL POLICY.....	8
– Guidelines for employment 2005-2008	8
– Railway workers - agreement by social partners	10
– Bilbao Agency and Dublin Foundation	11
– Working time.....	13
– Economic migration.....	15
– European Institute for Gender Equality	17
– Beijing Platform for Action - Council conclusions	18
HEALTH	22
– Medicinal products for paediatric use.....	22
– Nutritional claims	24
– Vitamins, minerals and other substances added to food	25
– Action programme for health and consumer protection	26
– Obesity, nutrition and physical activity	28
– HIV/AIDS - Council conclusions.....	32
– Mental health - Council conclusions.....	37
Other business.....	41

¹

- Where declarations, conclusions or resolutions have been formally adopted by the Council, this is indicated in the heading for the item concerned and the text is placed between quotation marks.
- The documents whose references are given in the text are available on the Council's Internet site <http://ue.eu.int>.
- Acts adopted with statements for the Council minutes which may be released to the public are indicated by an asterisk; these statements are available on the abovementioned Council Internet site or may be obtained from the Press Office.

OTHER ITEMS APPROVED

None

PARTICIPANTS

The Governments of the Member States and the European Commission were represented as follows:

Belgium:

Mr Rudy DEMOTTE

Minister for Social Affairs and Public Health

Czech Republic:

Mr Zdeněk ŠKROMACH

Deputy Prime Minister and Minister for Labour and Social Affairs

Mr Petr LÁMA

Deputy Minister for Health with responsibility for health insurance

Denmark:

Mr Lars Løkke RASMUSSEN

Minister for the Interior and Health

Mr Lars BARFOED

Minister for Family and Consumer Affairs

Mr Claus Hjort FREDERIKSEN

Minister for Employment

Germany:

Ms Renate KÜNAST

Federal Minister for Consumer Protection, Food and Agriculture

Mr Gert ANDRES

Parliamentary State Secretary to the Federal Minister for Economic Affairs and Labour

Mr Klaus Theo SCHRÖDER

State Secretary, Federal Ministry of Health and Social Security

Estonia:

Mr Jaak AAB

Minister for Social Affairs

Greece:

Mr Panos PANAGIOTOPOULOS

Minister for Employment and Social Protection

Spain:

Ms Elena SALGADO MÉNDEZ

Minister for Health and Consumer Affairs

France:

Mr Christian MASSET

Deputy Permanent Representative

Ireland:

Ms Mary HARNEY

Tánaiste (Deputy Prime Minister) and Minister for Health and Children

Mr Tony KILLEEN

Minister of State at the Department of Enterprise, Trade and Employment (with special responsibility for Labour Affairs including Training)

Italy:

Mr Roberto MARONI

Minister for Labour and Social Policy

Mr Francesco STORACE

Minister for Health

Cyprus:

Mr Christos TALIADOROS

Minister for Labour and Social Insurance

Mr Andreas GAVRIELIDES

Minister for Health

Latvia:

Mr Gundars BĒRZIŅŠ

Minister for Health

Ms Dagnija STAĶE

Minister for Welfare

Lithuania:

Mr Žilvinas PADAIGA

Minister for Health

Ms Vilija BLINKEVIČIŪTĖ

Minister for Social Security and Labour

Luxembourg:

Mr François BILTGEN

Minister for Labour and Employment, Minister for Culture, Higher Education and Research, Minister for Religious Affairs

Ms Marie-Josée JACOBS

Minister for the Family and Integration, Minister for Equal Opportunities

Mr Mars DI BARTOLOMEO

Minister for Health and Social Security

Hungary:

Mr Gábor CSIZMÁR
Mr Jenő RÁCZ

Minister for Labour and Employment
Minister for Health

Malta:

Mr Louis GALEA
Mr Louis DEGUARA

Minister for Education, Youth and Employment
Minister for Health, the Elderly and Community Care

Netherlands:

Mr Johannes Franciscus HOOGERVORST
Mr Henk VAN HOOFF

Minister for Health, Welfare and Sport
Secretary of State for Social Affairs and Employment

Austria:

Mr Martin BARTENSTEIN
Ms Maria RAUCH-KALLAT

Federal Minister for Economic Affairs and Labour
Federal Minister for Health and Women

Poland:

M. Pawel SZTWIERTNIA
Mr Rafał BANIAK
Ms Magdalene SRODA

Deputy State Secretary, Ministry of Health
Deputy State Secretary, Ministry of Social Policy
Minister for Equality (Men and Women)

Portugal:

Mr António CORREIA DE CAMPOS
Mr Fernando MEDINA

Minister for Health
State Secretary for Employment and Vocational Training

Slovenia:

Mr Janez DROBNIČ
Mr Andrej BRUČAN

Minister for Labour, the Family and Social Affairs
Minister for Health

Slovakia:

Mr Ľudovít KANÍK
Mr Peter OTTINGER

Minister for Labour, Social Affairs and the Family
State Secretary of the Ministry of Health

Finland:

Ms Tarja FILATOV
Ms Liisa HYSSÄLÄ

Minister for Labour
Minister of Health and Social Services

Sweden:

Mr Hans KARLSSON

Mr Morgan JOHANSSON

Ms Ann-Christin NYKVIST

Minister at the Ministry of Industry, Employment and
Communications, with responsibility for Working Life
Minister at the Ministry of Social Affairs, with
responsibility for Public Health and Social Services
Minister for Agriculture, with responsibility for Consumer
Affairs

United Kingdom:

Mr Alan JOHNSON
Ms Rosie WINTERTON

Secretary of State for Work and Pensions
Minister of State, Department of Health

Commission:

Mr Vladimír ŠPIDLA
Mr Markos KYPRIANOU

Member
Member

The Governments of the acceding States were represented as follows:

Bulgaria:

Ms Ivanka CHRISTOVA

Deputy Minister for Labour and Social Affairs

Romania:

Mr Gheorghe BARBU

Mr Mircea CINTEZA

Minister for Labour, Social Solidarity and the Family

Minister for Health

.....

ITEMS DEBATED

EMPLOYMENT AND SOCIAL POLICY

– *Guidelines for employment 2005-2008*

The Council agreed on a general approach to the proposal for a Decision on Guidelines for the Employment Policies of the Member States (2005-2008).

The general approach covered the following guidelines:

- Implement employment policies aiming at achieving full employment, improving quality and productivity at work, and strengthening social and territorial cohesion;
- Promote a lifecycle approach to work;
- Ensure inclusive labour market, enhance work attractiveness, and make work pay for job-seekers, including disadvantaged people, and the inactive;
- Improve matching of labour market needs;
- Promote flexibility combined with employment security and reduce labour market segmentation, having due regard to the role of the social partners;
- Ensure employment-friendly labour cost developments and wage-setting mechanisms;
- Expand and improve investment in human capital;
- Adapt education and training systems in response to new competence requirements.

These guidelines should guide Member States' employment policies in addressing the following three priorities:

- The need to attract and retain more people in employment, increase labour supply and modernise social protection systems;

- The need to improve the adaptability of workers and enterprises;
- The need to increase investment in human capital through better education and skills

Following the guidelines issued by the 2005 Spring European Council, the proposal for a Decision on employment guidelines is one of the elements of the proposal for Integrated Guidelines for Growth and Jobs. The outcome of the Council's proceedings will be submitted to the June European Council for approval. The Integrated Guidelines for Growth and Jobs will serve as the basis for the national reform programmes to be submitted by Member States by Autumn 2005.

The Employment Committee and the Social Protection Committee delivered their Joint Opinion on 13 May 2005 (8986/05). The European Parliament delivered its opinion on 26 May 2005 and the Economic and Social Committee gave its opinion on 31 May 2005. The Committee of the Regions has not yet delivered its opinion.

Proposed legal basis: Article 128(2) of the Treaty - obligation to consult the European Parliament, the Economic and Social Committee, the Committee of the Regions and the Employment Committee.

– *Railway workers - agreement by social partners*

The Council reached political agreement on a draft Directive intended to give effect to an agreement concluded in January 2004 by the social partners (Community of European Railways and the European Transport Workers' Federation) on certain aspects of the working conditions of mobile workers assigned to cross-border services in the railway sector¹.

The Directive will be formally adopted at a forthcoming Council meeting. Austria, Slovakia and the United Kingdom stated that they intended to abstain at the formal adoption of the act.

In view of concerns expressed by delegations regarding the impact of certain aspects of this Directive, particularly in the context of the liberalisation of the railway sector, the Commission agreed to report to the Council, before the date laid down for the transposition of the Directive², on the economic and social impact of this agreement and to take the necessary measures in the event of a new agreement between the social partners.

The Agreement covers, in particular, daily and weekly rest, breaks, driving time, records of working hours and provisions for future evaluation and follow-up. It should be stated that in matters of social policy, Article 139(1) of the Treaty gives the social partners at Community level the possibility of entering into a dialogue which may lead to contractual relations, including agreements which can be implemented, at the joint request of the signatory parties, by a Council Decision on a proposal from the Commission. On 8 February 2005 the Commission presented a proposal for a Decision (6364/05), attaching the agreement concluded by the social partners.

Legal basis: Article 139(2) of the Treaty - consultation of the European Parliament not required³.

¹ Directive 2003/88/EC concerning certain aspects of the organisation of working time (OJ L 299, of 18.11.2003, p. 9) provides for derogations from Articles 3, 4, 5, 8 and 16 for persons working in the rail transport sector on board trains.

² Three years after the date of entry into force of the Directive.

³ The European Parliament nevertheless adopted an own-initiative resolution on 26 May 2005 (B6-0319/2005).

– ***Bilbao Agency and Dublin Foundation***

The Council reached political agreement¹ on each of the draft Regulations amending the Regulations establishing:

- a European Agency for Safety and Health at Work² (9121/05);
- a European Foundation for the Improvement of Living and Working Conditions³ (9119/05).

The draft Regulations are essentially aimed at making the operation of these agencies more efficient, particularly in the context of EU enlargement.

The European Parliament delivered its opinion on 28 April 2005.

The Regulations will be formally adopted at a forthcoming meeting of the Council.

Legal basis: Article 308 – consultation procedure with the European Parliament, unanimity required for a Council decision.

European Agency for Safety and Health at Work (Bilbao)

Most amendments proposed by the European Parliament were welcomed by the Council and are included in the text.

The Agency's main tasks are:

- to collect and disseminate information in the Member States in order to pass it on to the Community bodies, Member States and interested parties;
- to promote and support cooperation and exchange of information and experience;

¹ The Council had arrived at a general approach on each of these draft Regulations on 4 October 2004 (Press Release 12400/04).

² Regulation (EC) No 2064/94 (OJ L 216, 20.8.1994, p. 1), amended by Regulation (EC) No 1654/2003 (OJ L 245, 29.9.2003, p. 38).

³ Regulation (EEC) No 1365/75 (OJ L 139, 30.5.1975, p. 1), amended by Regulation (EC) No 1649/2003 (OJ L 245, 29.9.2003, p. 25).

- to supply the Commission in particular with the information it needs to prepare and evaluate legislation and measures in the area of safety and health at work.

In carrying out its activities, the Bilbao Agency devotes particular attention to small and medium-sized enterprises.

The Agency's main characteristic is its information network of national focal points. Through that network the Agency cooperates closely with the competent national authorities in Member States and the research centres designated to coordinate and transmit the information for and from the Agency.

The Agency has a tripartite Administrative Board made up of representatives of governments, employers' organisations and employees' organisations. The Commission is also represented on the Administrative Board.

The aim of this legislative proposal is to strengthen the strategic role of the Administrative Board, while assigning more administrative tasks to the existing Bureau and recognising its role officially.

The Commission proposal aimed at amending the initial Regulation to enable decisions to be taken by an absolute majority within the Administrative Board was adopted by the Council with the following exceptions: decisions in the context of the annual work programme and those with budgetary repercussions for the national focal points also require the consent of the majority of members of the governments representatives' group.

European Foundation for the Improvement of Living and Working Conditions (Dublin)

The tasks of the Foundation are to develop and to pursue ideas on the improvement of living and working conditions in the medium and long term in the light of practical experience and to identify factors leading to change.

The Foundation has a tripartite Administrative Board made up of national representatives of governments, employers' organisations and employees' organisations. In addition, the Commission is represented on the Board.

The aim of this proposal is to strengthen the strategic role of the Administrative Board while assigning more administrative tasks to the existing Bureau and recognising its role officially.

Provisions have been included to extend the application of the Staff Regulations of Officials of the European Communities to the staff of the Foundation. Hitherto the Foundation has had its own Staff Regulations.

– *Working time*

The Council examined an amended proposal for a Directive submitted by the Commission on 31 May 2005 (9554/05), the aim of which is to amend Directive 2003/88/EC on the organisation of working time¹, following the opinion delivered by the European Parliament at first reading on 11 May 2005 (8725/05).

The aim of the Commission proposal is to improve legal certainty with regard to regulating working time, particularly in the light of the case law of the Court of Justice relating to inactive periods of on-call time in certain professions, particularly the medical profession.²

The main amendments which the proposal for a Directive will introduce into Directive 2003/88/EC concern:

- extending the reference period for calculating maximum weekly working time to 12 months;
- introducing definitions of "on-call time" and "inactive periods of on-call time";
- conditions for applying the opt-out from the provisions relating to maximum weekly working time.

Following the Council's discussions, the President drew the following conclusions in an oral statement:

- Most Member States have not had time to look in detail at the amended proposal as submitted by the Commission on 31 May. It has therefore not been possible to arrive at final conclusions today.
- The main point under discussion was the opt-out. There are two extreme positions: on the one hand those Member States which are calling for freedom of choice, stressing the need for economic growth and hence asking for the opt-out, and on the other those which feel that extending the reference period for calculating weekly working time to one year gives enough flexibility to make it possible to envisage a definite end to the opt-out. Between these positions there are many variations. The delegations have also expressed their willingness to find a viable compromise, in view of the urgency of finding a Community solution to the question of how to treat inactive periods of on-call time, following the Court of Justice judgments in the SIMAP and JAEGER Cases.

¹ OJ L 299, 18.11.2003, p. 9.

² SIMAP and Jaeger Cases.

- The President noted that a solution acceptable to both the Council and the Parliament might depend, inter alia, on further consideration of two types of problem: firstly, problems in the health sector and secondly problems arising from the fact that in many Member States employees had several work contracts simultaneously.
- The President took note of the Commission's willingness to take account of these two aspects by fixing a time limit, in its amended proposal, for the opt-out, but one which could be extended. However, many delegations expressed doubts about the absence of objective criteria for extending the time limit and stressed the need to take a decision which would respect Member States' interests. The President also noted that the Commission was willing to look for a compromise.
- In view of the problem of lack of time coupled with the political will to continue the debate, the Council instructed Coreper to monitor the discussions and inform the Council accordingly.

Legal basis: Article 137(2) – co-decision procedure with the European Parliament and qualified majority required for a Council decision.

– *Economic migration*

The Council held an exchange of views on the *Green Paper on an EU approach to managing economic migration (5436/05)*, submitted by the Commission on 14 January 2005, and in particular on its implications for the working of domestic labour markets, in the context of the European employment strategy.

The Green Paper concerns admission procedures for the economic migration of third country nationals. It proposes a number of options with a view to the progressive introduction of a Community legislative framework, in accordance with an action plan which the Commission is due to submit this year. The action plan would follow on from the adoption of the Hague Programme, which laid the foundations for progress within the framework of freedom, security and justice.

The aim of the discussion was to enable the Commission to sound out delegations' initial reactions to the questions asked in the Green Paper.

Discussion centred on the following three topics in particular:

- possible Community measures (for example minimum standards, accelerated admission procedures when there is a shortage of labour in a particular sector, improving the EURES system, etc.) for access by third country nationals to domestic labour markets, also taking into account the need for flexibility in view of the diversity of national situations;
- the possibility of adopting a sectoral approach to the admission of third country nationals to domestic labour markets with the aim of promoting access by certain categories of migrants according to needs;
- the need for better coordination of procedures relating to immigration and access to the labour market on the one hand with measures for the social integration of third country nationals in the host country on the other.

During the discussion, delegations acknowledged that the subject of migration warranted action at EU level, insofar as all European Union States were affected when third country nationals entered a Member State. However, action should fully respect the principle of subsidiarity by setting a common framework for some aspects while not encroaching on Member States' responsibility for managing migratory flows.

In their remarks the delegations broached subjects such as: defining the limits between those aspects which should be resolved at Community level (for example, databases on labour market requirements) and those which it would be better to resolve at national level; the need for flexible solutions which should take into account the specific characteristics of the Member States (for example the different demographic trends in the various Member States); the need to ensure that there was no Community national prepared to fill a job before offering it to a third country national, and the need for migration policy to go hand in hand with measures for integrating migrants.

Moreover, a number of delegations pointed out that freedom of movement for workers had not yet been achieved within the European Union.

The Commission announced that it would take these remarks into account when drawing up its action plan.

– *European Institute for Gender Equality*

Pending receipt of the European Parliament's opinion, the Council arrived at a general approach on a draft Regulation establishing a European Institute for Gender Equality.

The Commission submitted its proposal in accordance with the conclusions of the European Council on 17 and 18 June 2004 (paragraph 43).¹

The aim of the Commission proposal (7244/05) is to establish an institute to give technical support to the Community institutions and the Member States, in particular as regards the collection, analysis and dissemination of data and comparable statistics and the development of methodological tools for integrating gender equality policies.

The Institute will have the aims of helping to promote and strengthen gender equality, helping the Community institutions to fight all discrimination on the grounds of gender and increasing awareness of issues linked with gender equality among European Union citizens.

The decision on the seat of the Institute will be taken at intergovernmental level. Interested delegations have submitted their applications.

Legal basis: Articles 13(2) and 141(3) of the Treaty – co-decision procedure with the European Parliament and qualified majority required for a Council decision.

¹ 10679/04.

– *Beijing Platform for Action - Council conclusions*

The Council adopted the following conclusions:

"THE COUNCIL OF THE EUROPEAN UNION,

Recognising that:

gender equality is a fundamental principle of the European Union enshrined in the EC Treaty and one of the objectives and tasks of the Community and that mainstreaming equality between women and men in all its activities represents a specific mission for the Community;

Reaffirming that:

the full enjoyment of all human rights by women and girls is an inalienable, integral and indivisible part of universal human rights and is essential for the advancement of women and girls, peace and development;

Considering that:

1. following the UN's Fourth World Conference on Women in Beijing in 1995, the Madrid European Council (15 to 16 December 1995) requested an annual review of the implementation in the Member States of the Beijing Platform for Action;
2. since 1999, sets of quantitative and qualitative indicators have been developed by subsequent Presidencies in some of the 12 critical areas of concern in the Beijing Platform for Action, namely: 1999 - Women in political decision-making; 2000 - Women in the economy (reconciliation of work and family life); 2001 - Women in the economy (on equal pay); 2002 - Violence against women; 2003 - Women and men in economic decision-making; 2004 - Sexual harassment at the workplace. Each year the Council has adopted conclusions on these indicators;
3. the report of the Luxembourg Presidency of the Council of the European Union presented at the European Conference held in Luxembourg on 2 and 3 February 2005 on the implementation of the Beijing Platform for Action and the outcome documents of the 23rd special session of the General Assembly of the United Nations (Beijing + 5), undertook an analysis of progress made within the European Union, of national mechanisms, their methods and tools and identified obstacles preventing the full realisation of gender equality as well as the major remaining challenges;

4. the European Parliament resolution of 10 March 2005 on the "Follow-up of the fourth World Conference – Platform for Action (Beijing + 10)" and the opinion of the European Economic and Social Committee of 9 February 2005 on "Beijing +10: Review of progress achieved in the field of gender equality in Europe and in developing countries";
5. the common declaration adopted on 4 February 2005 by the EU ministers responsible for gender equality policies as the basis for future European strategies;
6. the political declaration, adopted on 4 March 2005, during the 49th session of the Commission on the Status of Women on the implementation of the Beijing Platform for Action and the outcome documents of the 23rd Special Session of the General Assembly of the United Nations in 2000, which reaffirms the Declaration and Platform of Action of Beijing,

THE COUNCIL OF THE EUROPEAN UNION

1. ACKNOWLEDGES the conclusions of the report of the Luxembourg Presidency on "Progress made within the EU" following the Beijing Platform for Action and the outcome of the Presidency conference on the Review of the implementation of the Beijing Platform for Action held on 2 and 3 February 2005 in Luxembourg;
2. WELCOMES the declaration adopted on 4 February 2005 in Luxembourg by the ministers of the EU Member States responsible for gender equality policy, as a part of the review of the implementation of the Beijing Platform for Action (Beijing + 10) and the outcome documents of the 23rd Special Session of the General Assembly of the United Nations held in 2000;
3. WELCOMES the political declaration adopted by the UN Member States on 4 March 2005 during the 49th session of the Commission on the Status of Women in New York;
4. REAFFIRMS its strong support for, and commitment to, the full implementation of the goals and objectives set and the commitments made in the Declaration and Platform for Action of the Fourth World Conference on Women, the Beijing + 5 Political Declaration and Outcome Document of the 23rd Special Session of the General Assembly of the United Nations;

5. REAFFIRMS the commitment to the promotion of gender equality and women's empowerment, including through development cooperation and partnership, and recognises that gender equality and women's empowerment are of fundamental importance for the achievement of sustainable development and the eradication of poverty;
6. EMPHASISES the need to take concrete steps both to implement gender mainstreaming and in support of specific actions to achieve gender equality;
7. ENCOURAGES Member States and the Commission to develop methods and tools for gender mainstreaming, such as gender budgeting, gender audit and gender impact assessment as a priority for the future and to further develop gender expertise and gender training;
8. UNDERLINES the importance of enhanced dialogue and cooperation with civil society and the social partners;
9. INVITES Member States and the Commission, in connection with activities under the programme for equality between women and men, the work of the future European Institute for Gender Equality and other Community activities, to continue to focus on the critical areas of concern mentioned in the Beijing Platform for Action;
10. INVITES Member States and the Commission to support, encourage and disseminate research; to continue to improve the collection and compilation of timely, reliable, comparable data disaggregated by sex on the multiple factors that affect the full enjoyment by women of their civil, political, economic, social and cultural rights, including their right to development, and on violations that are particular to women and girls; to disseminate the findings and to use data thus collected to set time-bound targets and to assess the implementation of the human rights of women;
11. INVITES Member States and the Commission to strengthen institutional mechanisms and to create a framework to assess the implementation of the Beijing Platform for Action in order to create a more consistent and systematic monitoring of progress;
12. INVITES the Commission to include the assessment of relevant indicators, developed for the follow-up of the implementation of the Beijing Platform for Action, in its annual report to the Spring European Council;

13. CONFIRMS the mission of the high-level group on gender-mainstreaming established by the Commission to follow up the Beijing Platform for Action in the Council and to ensure gender mainstreaming in Council formations;
14. STRESSES the importance of strengthening the link between the implementation of the Convention on the Elimination of all forms of Discrimination against Women and its Optional Protocol, the Beijing Platform for Action, the Cairo Programme of Action, the Copenhagen Declaration and Action Programme, the Millennium Declaration and the Millennium Development Goals and emphasises the need to adopt, at European level, a coherent approach towards these different objectives which are reinforced mutually;
15. URGES the Member States and the Commission to ensure that the Beijing Declaration and Platform for Action and the Cairo Programme of Action are fully integrated into the preparation for, and the outcome of, the Millennium Summit in September 2005. Moreover, a gender perspective should be fully taken into account during the high-level review of the Millennium Declaration and integrated through the seven strategic priorities identified in the Millennium Projects in order to empower women and meet the Millennium Development Goals."

HEALTH– *Medicinal products for paediatric use*

Pending receipt of the European Parliament's opinion, the Council held a policy debate on the proposal for a Regulation on medicinal products for paediatric use (13880/04) with a view to further examination of the text.

The debate focused on the following two questions:

- extension of the validity of the supplementary protection certificate, as a way of encouraging investment in pharmaceutical products for paediatric use;
- allowing public access to data on paediatric clinical trials in order to avoid unnecessary paediatric clinical trials.

During the debate, particular emphasis was placed on the importance of encouraging research in this field and improving access to paediatric medicines, in view of the need to produce medicines adapted to the specific physical and psychological characteristics of children.

The delegations recognised the incentive value of a measure extending the protection certificate. Some of them, however, wanted to discuss the proposal further, in particular the length of the extension¹ and the date on which the impact of the mechanism would be reviewed, given the less positive effects that such a measure might also produce (e.g. delay in the placing on the market of generic medicines).

Delegations were generally in favour of making the results of clinical trials more widely available, as this would help to avoid unnecessary clinical trials, but further discussion was needed to establish, in particular, how widely available this would mean.

The proposal was drawn up further to the Council Resolution of December 2000², in which the Commission was invited to make proposals for the development of clinical research so that medicinal products fully adapted to the specific needs of children would be available on the EU market. It is estimated that 50-90% of medicinal products used in paediatric medicine have never been specifically studied or authorised for use in that age group.

¹ The Commission has proposed 6 months.

² See Press Release 14517/00.

The main objective of the proposal is to improve child health while removing obstacles to intracommunity trade in paediatric medicinal products.

The aims are as follows:

- to ensure that the medicinal products used to treat children have been the subject of high quality research;
- to ensure that those medicinal products are duly authorised;
- to improve information on the use of medicinal products intended specifically for children;

while avoiding unnecessary clinical trials on children.

To that end, the proposal contains a combination of obligations and incentives. The main obligation is that a paediatric investigation plan must be submitted as part of the procedure for obtaining market authorisation, while incentives are provided through the extension of exclusive rights and the introduction of a new type of market authorisation for generic medicines, the PUMA.

The proposed system covers medicinal products for human use within the meaning of the Directive on the Community code relating to medicinal products for human use.

The proposal also introduces some amendments to the Regulation creating a supplementary protection certificate for medicinal products¹, the Directive on the Community code relating to medicinal products for human use² and the Regulation laying down procedures for the authorisation and supervision of medicinal products³, all made in full compliance with the EU clinical trials Directive⁴.

Proposed legal basis: Article 95 of the Treaty - co-decision procedure with the European Parliament and qualified majority required for a Council Decision.

¹ Regulation (EEC) No 1768/92 (OJ L 182, 2.7.1992, p. 1), as last amended by the Act of Accession 2003.
² Directive 2001/83/EC (OJ L 311, 28.11.2001, p.67), as last amended by Directive 2004/27/EC (OJ L 136, 30.4.2004, p. 34).
³ Regulation (EC) No 726/2004 (OJ L 136, 30.4.2004, p. 1).
⁴ Directive 2001/20/EC (OJ L 121, 1.5.2001, p. 34).

– *Nutritional claims*

The Council reached unanimous political agreement on a draft Regulation on nutritional and health claims¹ which may be used in the labelling, presentation and advertising of foods.

The European Parliament delivered its opinion on 26 May 2005. The text of the draft Regulation will be formally adopted by the Council as a *common position* after finalisation in the official languages, then forwarded to the European Parliament for its second reading.

The food industry has responded to increased consumer interest in the information appearing on food labels by highlighting the nutritional value of products through claims in their commercial communication (labelling, presentation and advertising).

In order to avoid misleading consumers and to ensure the proper use of claims as a marketing tool, the draft Regulation intends to allow only claims which are clear and meaningful to the consumer, subject to certain conditions. The person marketing the food should be able to justify the use of the claim.

The draft Regulation covers foods to be delivered as such to the final customer or supplied to restaurants, hospitals, schools, canteens and other large-scale caterers.

The Commission has proposed (11646/03) Community harmonisation of rules in order to ensure a high level of consumer and public health protection, while removing obstacles to the proper functioning of the internal market and to the free movement of foods arising from the co-existence of different national laws.

Proposed legal basis: Article 95 of the Treaty - co-decision procedure with the European Parliament and qualified majority required for a Council Decision.

¹ A claim is a message stating, suggesting or implying that a food has particular characteristics; a health claim is a claim stating, suggesting or implying that a relationship exists between a food and health; a nutrition claim is a claim which states, suggests or implies that a food has particular nutrition properties due to its caloric value or its nutrients (e.g. "low in fat", "rich in vitamin C", "high in protein").

– *Vitamins, minerals and other substances added to food*

The Council reached political agreement, by a qualified majority¹, on a draft Regulation on the addition of vitamins and minerals and of certain other substances to food.

The European Parliament delivered its opinion at first reading on 26 May 2005. The text of the draft Regulation will be formally adopted by the Council as a *common position* after finalisation in the official languages, then forwarded to the European Parliament for its second reading.

The draft Regulation aims to harmonise the national rules on the addition of nutrients (vitamins, minerals and certain other substances) to food, while ensuring that foodstuffs on sale are safe and properly and clearly labelled so that consumers can make an informed choice, and that they do not present any risk for public health. Harmonisation was also deemed necessary to facilitate the free movement of these products within the Community. The text lists the vitamins and minerals that may be added to foods, as well as the forms and conditions in which they may be added.

The provisions of the draft Regulation do not apply to the food supplements covered by Directive 2002/46/EC² and do not affect the specific provisions on foods for particular nutritional uses, novel foods and food ingredients, food additives and flavourings and authorised oenological processes.

Proposed legal basis: Article 95 of the Treaty - co-decision procedure with the European Parliament and qualified majority required for a Council Decision.

¹ Denmark stated its intention to vote against when this Regulation is adopted.

² OJ L 183, 12.7.2002, p. 51.

– *Action programme for health and consumer protection*

The Council held a debate on the health aspects of the proposal for a Decision establishing a programme of action in the field of health and consumer protection (2007-2013) (8064/05).

The proposal for a programme of Community action in the field of health and consumer protection 2007-2013 provides that the future actions of the EU in the field of Public Health will focus on five objectives:

- to protect citizens against health threats;
- to promote policies that lead to a healthier way of life;
- to contribute to reducing the incidence of major diseases in the EU;
- to contribute to the development of more effective and efficient health systems, and
- to support the objectives above by providing health information and analysis.

The debate focused on whether these objectives corresponded to the expectations of the Health Ministers.

The debate gave delegations an opportunity to state their initial reactions to the Commission proposal which brings together, in a single integrated programme, the objectives pursued by the two public health and consumer protection programmes currently in place ¹.

Delegations also stressed the need to enhance the added value of the common actions in this area, pointing, in particular, that it would be useful to improve cooperation between Member States' health systems and to improve the way in which cross-border health threats (pandemics) were addressed.

¹ Decisions Nos 786/2002/EC (OJ L 271, 9.10.2002, p. 1) and 20/2004/EC (OJ L 5, 9.1.2004, p. 1), as amended by Decision No 786/2004/EC (OJ L 138, 30.4.2004, p. 7).

They also pointed to the need to deal with the risk factors in order to prevent major diseases.

Following the debate, the President concluded that these objectives were very broadly shared by the delegations.

Proposed legal basis: Articles 152 and 153 of the Treaty - co-decision procedure with the European Parliament and qualified majority required for a Council Decision.

– *Obesity, nutrition and physical activity*

The Council held an exchange of views on the problem of combating obesity, after which it adopted the following conclusions:

"THE COUNCIL OF THE EUROPEAN UNION

1. RECALLS that Article 152 of the Treaty states that a high level of human health protection shall be ensured in the definition and implementation of all Community policies and activities, and that Article 153 of the Treaty states that consumer protection requirements shall be taken into account in defining and implementing other Community policies and activities;
2. RECALLS that one of the objectives of the programme of Community action in the field of public health (2003-2008) is to promote health and prevent disease through addressing health determinants across all policies and activities, in particular by preparing and implementing strategies and measures, including those related to public awareness, on life-style related health determinants, such as nutrition, physical activity;
3. RECALLS the Council Resolution of 14 December 2000 on health and nutrition¹, the Conclusions of the Council and the Ministers for Health of the Member States, meeting within the Council on 15 May 1992, on nutrition and health², the Resolution of 3 December 1990 concerning an action programme on nutrition and health³, the Council Conclusions of 2 December 2002 on obesity⁴, the Council Conclusions of 2 December 2003 on healthy lifestyles⁵, as well as the Council Conclusions of 2 June 2004 on promoting heart health;
4. RECALLS the European Union's support for the adoption of the Global Strategy on Diet, Physical Activity and Health at the World Health Assembly of May 2004, and recognises the strength of the evidence contained in the report "Diet, Nutrition and the Prevention of Chronic Diseases"⁶ which underpins the measures proposed in the Global Strategy;
5. RECOGNISES the major and growing contribution of unhealthy lifestyles to the burden of a significant number of chronic diseases;

¹ OJ C 20, 23.1.2001, p. 1.

² OJ C 148, 12.6.1992, p. 2.

³ OJ C 329, 31.12.1990, p. 1.

⁴ OJ C 11, 17.1.2003, p. 3.

⁵ OJ C 22, 27.1.2004, p. 1.

⁶ "Diet, Nutrition and the Prevention of Chronic Diseases", Report of a joint WHO/FAO Expert Consultation, WHO Technical Report Series 916, 2003.

6. RECOGNISES the potential which the promotion of healthy diets and physical activity has for reducing the risk for a number of diseases and conditions, such as obesity, hypertension, heart disease, diabetes, stroke, osteoporosis and certain forms of cancer and in addition considerably improving the quality of life;
7. RECOGNISES the beneficial effects of healthy diets and physical activity in the prevention and treatment of chronic diseases with regard to both the citizens and the national health care systems;
8. NOTES WITH CONCERN the rise in obesity prevalence rates throughout the European Union, and particularly among children, as well as the negative consequences thereof for cardiovascular health and type 2 diabetes amongst others;
9. RECOGNISES the importance of addressing inequalities that may exist within Member States regarding obesity, diet and physical activity;
10. RECOGNISES that obesity is a multi-causal condition which requires a comprehensive preventive approach, including multi-stakeholder efforts at local, regional, national, European and global levels;
11. RECOGNISES that it is necessary to ensure the involvement of all stakeholders in order to build up social awareness for the importance of healthy diets and physical activity, particularly with regard to children, and to counteract misleading forms of advertising;
12. WELCOMES the recent launch by the Commission of the European Platform for Action on Diet, Physical Activity and Health as an important step forward in this regard, which is expected to contribute to pursuing healthy nutrition and physical activities and to halting current obesity trends through determined action by the stakeholders represented in the Platform, and ENCOURAGES Member States to launch as appropriate initiatives within the context of their overall national strategy and to work in synergy with the European Platform;
13. STRESSES the importance of strengthening links between efforts to promote healthy diets and physical activity and other Community policies, such as the agriculture, transport, environment, culture, education and consumer policy areas. Whenever new or revised Community legislation with an impact on nutrition and physical activity is prepared, synergies should be sought with the objectives pursued through health policy measures. Moreover, addressing the obesity epidemic and promoting healthy diets and physical activity should be mainstreamed into the agenda of other relevant Councils;

14. RECOGNISES that physical activity is considered to be an integral part of a healthy lifestyle and that learning to enjoy sport and physical activity at school and during leisure time, as well as starting education about healthy living at an early age is of utmost importance;
15. WELCOMES in this context the Commission's intention to present a Green Paper on nutrition, physical activity and health later this year, and to prepare for 2006 a Commission Communication integrating the results of the public consultation exercise initiated with the Green Paper;
16. CALLS UPON the Member States and, where appropriate, the European Commission to conceive and implement initiatives aimed at promoting healthy diets and physical activity, including:
 - (1) enabling citizens to make healthy dietary choices, and ensuring that healthy dietary options are available, affordable and accessible;
 - (2) fostering citizens' knowledge on the relationship between diet and health, energy intake and output, on diets that lower risk of chronic diseases, and on healthy choices of food items;
 - (3) ensuring that consumers are not misled by advertising, marketing and promotion activities, and that especially the credulity of children and their limited experience with the media is not exploited;
 - (4) enabling health professionals, including dietary experts, as well as other professionals having a recognised qualification in this field, to give, on a routine basis, practical advice to patients and families on the benefits of optimal diets and increased levels of physical activity, as well as contribute to the exchange of best practices in this field;
 - (5) encouraging stakeholders who are in a position to support the promotion of healthy diets (e.g. food producers, food processors, retailers, caterers) to take initiatives to this end, for example through voluntary action or agreements;
 - (6) mainstreaming of nutrition and physical activity into all relevant policies at local, regional, national and European levels, such as policies aimed at reducing the harmful effects of excessive alcohol consumption, as well as creating the necessary supporting environments;

- (7) monitoring the trends of healthy nutrition and physical activity in the population and further developing research and the scientific basis for actions in the field through, amongst others, the exchange of best practices at European level;
- (8) fostering education on, and the supply of healthy dietary choices at schools, especially with respect to the excessive intake of energy-dense snacks and sugar-sweetened soft drinks, and encouraging children and adolescents to exercise on a regular daily basis;
- (9) developing nutrition and physical education activities for children as an integrated part of health education in general, which should also focus on issues like combating smoking, excessive alcohol consumption, or the use of drugs, as well as promoting sexual health and mental health;
- (10) encouraging employers to offer healthy choices at workplace canteens, and to provide as appropriate facilities which encourage the practice of physical activity, and
- (11) fostering the development of urban environments that are conducive to physical activity, including the provision of safe cycling and walking paths."

– ***HIV/AIDS - Council conclusions***

The Council adopted the following conclusions on combating HIV/AIDS:

"THE COUNCIL OF THE EUROPEAN UNION,

1. RECALLS the Declaration of Commitments on HIV/AIDS adopted by the UN General Assembly Special Session on HIV/AIDS on 27 June 2001 signalling the emergence of a response needed to be successful in the fight against HIV/AIDS;
2. RECALLS the Council Recommendation of 18 June 2003 on the prevention and reduction of health-related harm associated with drug dependence¹, underlining the need for Member States to make available a range of different services and facilities, in order to reduce substantially the incidence of drug-related health damage;
3. REAFFIRMS the importance of the Conference "*Breaking the Barriers – Partnership to fight HIV/AIDS in Europe and Central Asia*" (Dublin, Ireland, 23-24 February 2004) in highlighting the threat posed by the rise of HIV/AIDS;
4. RECALLS in this respect the request expressed in the Dublin "Declaration on Partnership to fight HIV/AIDS in Europe and Central Asia" to strengthen the capacity of the European Union to fight effectively the spread of HIV/AIDS;
5. WELCOMES the "Vilnius Declaration" as an outcome of the Ministerial Conference "*Europe and HIV/AIDS – New challenges, New Opportunities*" (Vilnius, Lithuania, 17 September 2004) highlighting the need for joint efforts *to strengthen* comprehensive prevention activities, including human capacity building and sustainable health care infrastructures, *to provide* universal access to care, support, and treatment, and *to build* effective partnerships between governments, civil society, private sector, and other international partners; moreover, recognising that in the European region the most vulnerable populations include drug injectors and their sexual partners, men who have sex with men, sex-workers, trafficked women, prisoners, ethnic minorities and migrant populations which have close links to high prevalence countries;

¹ OJ L 165, 3.7.2003, p. 31.

6. WELCOMES the Commission working paper of 8 September 2004 "*Coordinated and integrated approach to combat the HIV/AIDS epidemic within the European Union and in its neighbourhood*";
7. WELCOMES the Commission Communication of 29 October 2004 to the Council and the European Parliament on a *Coherent European Policy Framework for External Action to Confront HIV/AIDS, Malaria, and Tuberculosis* and ACKNOWLEDGES the Council Conclusions of 23 November 2004 which endorsed this Communication and urged, amongst others, the Commission and Member States to ensure that sexual and reproductive health is an essential component of HIV and AIDS prevention;
8. RECALLS the Council Conclusions of 23 November 2004 on a Renewed EU Commitment to the International Conference on Population and Development (ICPD) in the context of the Millennium development goals (MDGs);
9. TAKES NOTE of the on-going exchange of best practices on prevention through information campaigns, access to antiretroviral treatment with special focus on injecting drug users and migrant populations, and the prevention of mother to child transmission, during the Extended HIV/AIDS Think Tank meeting (Luxembourg, 5-6 April 2005);
10. WELCOMES the guidance of the informal ministerial meeting "Health in Europe: protecting the health of European citizens" (Paris, 13-14 April 2005) on a European strategy and HIV vaccine research;
11. UNDERLINES that the HIV/AIDS epidemic and the related underlying phenomena fuelling the spread of the epidemic are common, cause human suffering and disability, increase the risk of social exclusion, and have negative implications for national economies;
12. RECOGNISES that, as well as continuing to strengthen existing methods to prevent the disease, there is a need to further develop research, surveillance, and methods for effective interventions, in order to tackle the multifaceted HIV/AIDS epidemic;
13. RECOGNISES that HIV/AIDS as well as other communicable disease epidemics are fuelled to a great extent by common root factors, such as inequality between women and men, poverty and social marginalisation of the most vulnerable populations;

14. RECOGNISES the need for addressing the variety of problems related to combating the HIV/AIDS epidemic by way of increased cooperation between the Commission, Member States, accession, candidate and neighbouring countries, and international organisations such as UN AIDS, with the participation of people living with HIV/AIDS and the civil society concerned;
15. NOTES that whilst the primary responsibility for health systems resides with the Member States, there is an added-value to addressing the HIV/AIDS epidemic both at a pan-European and at a global level, including through appropriate development policies.

INVITES the Member States to:

- Promote the implementation of the Dublin "Declaration on Partnership to fight HIV/AIDS in Europe and Central Asia" and the "Vilnius Declaration" from the Ministerial Conference *"Europe and HIV/AIDS – New challenges, New Opportunities"*.
- Take further action to ensure that national multi-sectoral HIV/AIDS coordination structures, strategies, and financing plans are implemented, maintained and further developed in cooperation with people living with HIV or affected by HIV and that best practices and experiences are exchanged at Community level.
- Take further action to improve general knowledge and raise awareness of the general public on the prevention of HIV infection and other sexually transmitted infections, as well as information on sexual and reproductive health and to develop and implement evidence-based targeted activities to cover particular vulnerable populations.
- Take further action to promote safer and responsible sexual behaviour and practices, including through condom use, and scale up access for injecting drug users to prevention, drug dependence treatment and harm reduction services.
- Take appropriate action to counsel and support people with HIV/AIDS, their families and their friends; and to establish and maintain, through the appropriate legislative or other means, a respectful, non-discriminatory and accepting societal atmosphere and behaviour towards people with HIV/AIDS.

- Continuously work on maintaining and developing a sustainable, affordable, and accessible health care system as a basis for prevention, treatment, and care activities; and in this context pay special attention to the access to affordable anti-retro viral treatment, as well as other medical treatment, for all in need.
- Strengthen the co-operation of clinical trials in the continuing search for HIV-vaccines and microbicides in the context of a comprehensive global response, in collaboration with the European Commission and with due reference to the Community framework programme for research.
- Take into account the possibility of using horizontal EC financing instruments in the implementation of comprehensive national strategies.
- Continue to work closely together with the European Commission and other relevant international organizations and agencies, when planning and agreeing specific bilateral actions in the context of neighbourhood and development policy.

INVITES the Commission to:

- Support Member States in their efforts to implement the Dublin and Vilnius declarations.
- Contribute to efforts to improve general knowledge and to raise awareness of the general public on the prevention of HIV infection, as well as of other sexually transmitted infections.
- Contribute to activities that aim at establishing a respectful, non-discriminatory and accepting societal atmosphere and behaviour towards people with HIV/AIDS.
- Facilitate the use of existing EC financing instruments for the implementation of comprehensive national HIV/AIDS strategies within the Member States and in neighbouring countries.
- Promote the investment in the appropriate research and development of effective behavioural and risk reducing as well as prophylactic measures, such as vaccines and microbicides, and cure.
- Encourage the European Centre for Disease Prevention and Control to further reinforce and coordinate existing activities on the surveillance of communicable diseases, including HIV/AIDS, in coordination with national institutes and international specialised observatories.

- Facilitate the collaboration between the Member States, accession, candidate and neighbouring countries and relevant international organisations in order to promote the exchange of good practices and joint projects.
- Promote and continue the dialogue and cooperation with countries at a regional and global level, as well as with international organisations such as UN AIDS, both in health and development policy context, in order to achieve further regional and global progress in the fight against the spread of the HIV."

These conclusions will be submitted to the June European Council together with the conclusions adopted by the Council (General Affairs and External Relations) on 24 May 2005¹.

¹ 8817/05.

– ***Mental health - Council conclusions***

The Council adopted the following conclusions on a Community Mental Health Action:

"THE COUNCIL OF THE EUROPEAN UNION,

1. RECALLING the Council Resolution of 18 November 1999 on the promotion of mental health¹, which, *inter alia*, invited the Commission to consider incorporating activities on the theme of mental health in future action programmes for public health,
2. RECALLING the Council Resolution of 29 June 2000 on action on health determinants²,
3. RECALLING the Council Conclusions of 5 June 2001 on a Community strategy to reduce alcohol-related harm³ which, *inter alia*, underlined the close link between alcohol abuse, social exclusion and mental illness,
4. RECALLING the Council Conclusions of 15 November 2001 on combating stress and depression-related problems⁴, which, *inter alia*, invited Member States to take actions to improve knowledge on the promotion of mental health in primary care and other health services as well as in social services,
5. RECALLING the Council Conclusions of 2 June 2003 on combating stigma and discrimination in relation to mental illness⁵ which, *inter alia*, invited the Member States to give specific attention to the impact of stigma and discrimination related problems due to mental illness in all age groups, and ensure that these problems are recognised, giving special attention to the reduction of risks of social exclusion,
6. RECALLING the Council Conclusions of 2 June 2004 on alcohol harm reduction and young people which underlined that the burden of alcohol related avoidable death and suffering, in particular among young people, has become a common concern and that cooperation and coordination at Community level is needed,

¹ OJ C 86, 24.3.2000, p. 1.

² OJ C 218, 31.7.2000, p. 8.

³ OJ C 175, 20.6.2001, p. 1.

⁴ OJ C 6, 9.1.2002, p. 1.

⁵ OJ C 141, 17.6.2003, p. 1.

7. RECALLING that the programme of Community action in the field of public health (2003-2008)¹ is intended to contribute, *inter alia*, to ensuring a high level of human health protection in the definition and implementation of all Community policies and activities, through the promotion of an integrated and intersectoral health strategy, and to tackling inequalities in health and in mental health,
8. WELCOMES the outcome of the World Health Organisation European Ministerial Conference on Mental health Facing the Challenges, Building Solutions' held in Helsinki from 12 to 15 January 2005, which highlighted the importance of setting up an agenda and implementing an action plan for the Member States for the next five to ten years in the field of mental health, with a specific view on enhancing people's well-being and functioning by focusing on their strengths and resources, reinforcing resilience and enhancing protective external factors,
9. WELCOMES the declaration and the Action Plan of the Conference endorsed by ministers of health of the Member States of the World Health Organisation European Region in response to the challenges of the next five to ten years to develop, implement and evaluate policies and legislation that will deliver mental health activities capable of improving the well-being of the whole population,
10. RECOGNISES the important links between actions on mental health and the Communication of the Commission on the social agenda² especially in the direction of promoting a strategic approach to combating discrimination as well as on promoting equality between men and women,
11. UNDERLINES the necessity of a wider recognition of the far-reaching social, economic and structural elements embedded in mental health, contributing significantly to the social capital of nations, as well as the need for searching for synergies between the Action plan and the results of the projects funded from the present and future Public Health Programmes of the Community,
12. REITERATES that there is a need to enhance the visibility and public awareness of, on the one hand, the importance of mental health to everybody and, on the other hand, the specific role and benefits to be gained by designing and implementing valid and comprehensive mental health policies,

¹ OJ L 271, 9.10.2002, p. 1.

² COM (2005) 33 final, 9.2.2005.

13. CONSIDERS that mental health needs to be further developed as an integral element of the present and the next health strategy of the Community,
14. WELCOMES the Commission's intention to present in summer 2005 a Green paper on mental health, proposing options for action at Community level and in Member States in the fields of mental health information, mental health promotion and mental disorder prevention with a view to establishing an agreed framework for action and monitoring.

INVITES the Member States to:

- give due attention, according to their respective needs, to the implementation of the Declaration and Action Plan endorsed by the World Health Organisation European Ministerial Conference on Mental Health, while recognising the necessary long-term perspective of implementing appropriate actions;
- undertake action to collect good quality and comparable data on mental health, and on the economic and social consequences of common mental health problems, using the Community Public Health programme as appropriate;
- undertake action to design and implement comprehensive, integrated and efficient mental health systems that cover promotion and prevention together with treatment and rehabilitation, care and recovery, as emphasised in the Declaration adopted by the World Health Organisation European Ministerial Conference on Mental Health;
- further develop appropriate monitoring and evaluation mechanisms which allow for reasonable and reliable comparisons of the mental health status and of promotion and prevention practices within and between Member States;
- consider the optimal use of relevant funding instruments, such as Structural Funds, PHARE, and Twinning programmes, which can cover specific needs and challenges in the field of mental health.

INVITES the Commission to:

- support the implementation of the Declaration and Action plan endorsed by the World Health Organisation European Ministerial Conference on Mental Health, in collaboration with the World Health Organisation and other relevant international organisations;

- ensure that integrated impact assessment of future relevant Community legislation takes account of mental health aspects;
- emphasise the strong links between mental and physical health and drug and alcohol abuse;
- pay particular attention to vulnerable life stages, with a special focus on infants, children and young people as well as on the elderly, in its activities on mental health."

Other business

The Council also received information from the Presidency and the Commission on the following items:

- European Year of Workers' Mobility 2006 (9326/05)
- G10 - Pharmaceuticals (9368/05)
- Proposal for a Regulation on fees payable to the European Medicines Agency (7798/05)
- International Health Regulations in the WHO framework (9416/05)
- World Health Organisation Framework Convention on Tobacco Control (9443/05)
- Community influenza pandemic preparedness and response planning (9419/05)
- Proposal for a Directive on food additives and sweeteners – Progress report
- European Centre for Disease Prevention and Control (9420/05)
- Environment and health (9421/05)
- Health-care developments in the European Union (9422/05)
- Presidency's activities – Conferences held and planned (9303/05)
- Report on the application of the Directive concerning tobacco products (9423/05 + 9487/05)
- Non-discrimination and equal opportunities for all - Proposal for a Decision designating 2007 Year of Equal Opportunities (9631/05)

OTHER ITEMS APPROVED

None
