



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS
STANDING COMMITTEE OF EUROPEAN DOCTORS



Consensus meeting on access and equity for patients

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Standing Committee of European Doctors – CPME 1/2

- CPME **represents** the National Medical Associations of 27 countries in Europe and works closely with the National Medical Associations of countries that have applied for EU membership as well as specialized European medical associations.
- We aim to promote the **highest standards** of medical training and medical practice in order to achieve the highest quality of health care for all patients in Europe.
- CPME co-operates **proactively** with the institutions of the European Union. Policies are being set both in answer to developments in Europe as well as by **taking the lead** in matters regarding the profession and patient care.



Standing Committee of European Doctors – CPME 2/2

- Commitment to contributing the medical profession's point of view to EU and European policy-making through **pro-active cooperation** on a wide range of health and healthcare related issues.
- We believe the **best possible quality** of health and **access to healthcare** should be a reality for everyone.
- Strong advocacy for '**health in all policies**' approach to encourage cross-sectoral awareness for and action on the determinants of health, to prevent disease and promote good health across society.



Vulnerable Groups

- CPME emphasizes the **right to health** of the most disadvantaged and powerless within each society, of which their **access to health care** is an essential criterion of democracy.
- Physical, organizational and economical obstacles can often make it difficult for disabled and disadvantaged persons to receive the health care they are entitled to. Well educated people who are acquainted with their rights are more likely to receive healthcare than people with fewer resources.



Example: Undocumented Migrants

- Health of migrants is an important public health matter and countries need to formulate and implement **strategies** for improving their health.
- NMAs engage in necessary activities at **national level** to ensure that:
 - Doctors are free to provide services to undocumented migrants
 - Restrictions as to the type and/or extent of health care undocumented migrants can receive are lifted
 - Financial and organizational impediments for doctors and health institutions to provide healthcare to undocumented migrants are taken away



“Health Solidarity”

- In order to improve the effectiveness of public health services at **reducing health inequalities** it is crucial that public health programmes are enabled to cut across different sectors and engage local communities.
- In response to the European Commission Communication “Solidarity in Health” CPME suggested several measures to reduce inequalities in health:
 - Improving the data and **knowledge base and mechanisms** for measuring, monitoring, evaluation and reporting.
 - Improvements in infrastructure, especially **water and housing**
 - Improved **maternal and child** care
 - Securing the right to health for **disadvantaged people**, including undocumented migrants and asylum seekers



Tackling Health Inequalities at EU level

- The Commission should reform its approach to health inequalities through the **High-Level Expert Group** which membership would reflect the breadth of experience and expertise to address all the factors that affect health inequalities in which the EU can develop action.
- Immediate action at EU level has to include support for **job creation** as there is a wider relationship between improved **health and employment**. Especially in the context of economic crisis access to **preventive and curative healthcare** are fundamental rights which everyone is entitled to enjoy.
- In the long-term, a focus on **education, health literacy, information technology and strengthening anti-discrimination policies** are all vital to ensure improvement in health equity.



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Thank you for your attention!