Basic information

1994/0130(COD) COD - Ordinary legislative procedure (ex-codecision procedure) Decision	Procedure completed
Public health: Community action programme on health promotion, information, education and training 1996-2000 Amended by 2000/0192(COD) **Subject** 4.20.01 Medicine, diseases	

Key players

European Parliament

Former committee responsible	Former rapporteur	Appointed
ENVI Environment, Public Health and Consumer Protection	CABROL Christian E.A. (RDE)	30/08/1994
ENVI Environment, Public Health and Consumer Protection	CABROL Christian E.A. (RDE)	30/08/1994

Former committee for opinion	Former rapporteur for opinion	Appointed
AGRI Agriculture and Rural Development	KLASS Christa (PPE)	05/10/1994
BUDG Budgets		
REGI Regional Policy	The committee decided not to give an opinion.	

Council of the European Union

Council configuration	Meetings	Date
Competitiveness (Internal Market, Industry, Research and Space)	1886	1995-11-23
Education, Youth, Culture and Sport	1839	1995-03-31
Health	1890	1995-11-30
Health	1845	1995-06-02
Health	1823	1994-12-22

Key events

Date	Event	Reference	Summary
26/07/1994	Legislative proposal published	COM(1994)0202	Summary
14/09/1994	Committee referral announced in Parliament, 1st reading		
22/12/1994	Debate in Council		
01/02/1995	Vote in committee, 1st reading		Summary
01/02/1995	Committee report tabled for plenary, 1st reading	A4-0018/1995	
16/02/1995	Debate in Parliament		Summary
31/03/1995	Debate in Council		
18/04/1995	Modified legislative proposal published	COM(1995)0138	Summary
02/06/1995	Council position published	06937/1/1995	Summary
14/07/1995	Committee referral announced in Parliament, 2nd reading		
28/09/1995	Vote in committee, 2nd reading		Summary
28/09/1995	Committee recommendation tabled for plenary, 2nd reading	A4-0229/1995	
24/10/1995	Debate in Parliament		Summary
23/11/1995	Parliament's amendments rejected by Council		Summary
30/11/1995	Debate in Council		Summary
19/12/1995	Formal meeting of Conciliation Committee		
30/01/1996	Joint text approved by Conciliation Committee co-chairs	3617/1995	
31/01/1996	Final decision by Conciliation Committee		Summary
09/02/1996	Report tabled for plenary, 3rd reading	A4-0028/1996	
14/02/1996	Debate in Parliament		Summary
16/02/1996	Decision by Council, 3rd reading		
29/03/1996	Final act signed		
29/03/1996	End of procedure in Parliament		
16/04/1996	Final act published in Official Journal		

Technical information	
Procedure reference	1994/0130(COD)
Procedure type	COD - Ordinary legislative procedure (ex-codecision procedure)
Procedure subtype	Legislation
Legislative instrument	Decision
Amendments and repeals	Amended by 2000/0192(COD)
Legal basis	EC Treaty (before Amsterdam) E 129
Stage reached in procedure	Procedure completed
Committee dossier	CODE/4/07315

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Committee report tabled for plenary, 1st reading/single reading		A4-0018/1995 OJ C 056 06.03.1995, p. 0004	01/02/1995	
Text adopted by Parliament, 1st reading/single reading		T4-0091/1995 OJ C 089 10.04.1995, p. 0055-0072	15/03/1995	Summary
Committee recommendation tabled for plenary, 2nd reading		A4-0229/1995 OJ C 287 30.10.1995, p. 0005	28/09/1995	
Text adopted by Parliament, 2nd reading		T4-0498/1995 OJ C 308 20.11.1995, p. 0021-0033	25/10/1995	Summary
Report tabled for plenary by Parliament delegation to Conciliation Committee, 3rd reading		A4-0028/1996 OJ C 065 04.03.1996, p. 0058	09/02/1996	
Text adopted by Parliament, 3rd reading		T4-0055/1996 OJ C 065 04.03.1996, p. 0139-0149	15/02/1996	Summary

Council of the EU

Document type	Reference	Date	Summary
Council position	06937/1/1995 OJ C 216 21.08.1995, p. 0021	02/06/1995	Summary

European Commission

Document type	Reference	Date	Summary
Legislative proposal	COM(1994)0202 OJ C 252 09.09.1994, p. 0003	26/07/1994	Summary
Modified legislative proposal	COM(1995)0138  OJ C 135 02.06.1995, p. 0002	18/04/1995	Summary
Commission communication on Council's position	SEC(1995)1191 	10/07/1995	Summary
Commission opinion on Parliament's position at 2nd reading	COM(1995)0633 	29/11/1995	Summary
Follow-up document	COM(2000)0165 	22/03/2000	Summary

Other institutions and bodies

Institution/body	Document type	Reference	Date	Summary
CofR	Committee of the Regions: opinion	CDR0246/1994 OJ C 210 14.08.1995, p. 0081	16/11/1994	Summary
EESC	Economic and Social Committee: opinion, report	CES0050/1995 OJ C 102 24.04.1995, p. 0015	25/01/1995	Summary

CSL/EP	Joint text approved by Conciliation Committee co-chairs	3617/1995	30/01/1996	

Additional information		
Source	**Document**	**Date**
European Commission	EUR-Lex	

Final act	
Decision 1996/0645 OJ L 095 16.04.1996, p. 0001	Summary

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 16/11/1994 - Committee of the Regions: opinion

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 23/11/1995

The Council noted that it was unable to accept all the amendments approved by Parliament concerning the proposals for decisions adopting three action plans or programmes of action in the health field (combating cancer; health promotion, information, education and training; prevention of AIDS and certain other communicable diseases). It therefore decided to convene the Conciliation Committee on this matter in accordance with Article 189b of the Treaty.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 18/04/1995 - Modified legislative proposal

In its amended proposal, the Commission took over 23 of the 43 amendments tabled by the European Parliament at first reading as they stood or in a modified form. The main amendments related to the following points: - the programme would cover the period from 1 January 1996 to 31 December 2000; - it should take account of the past or current actions implemented in the Member States by the relevant authorities or other bodies involved in health policy (including organisations or agencies active in this sector); - as regards cooperation with other Community actions, the programme should take account of actions affecting health in the areas of education, training, and health and safety at work; - as regards support for the actions (annex): emphasis was placed on the coordination of the work carried out in the Member States. Further details were provided with regard to actions aimed at: . identifying better the socio-economic and cultural differences affecting health, . developing transnational networks of reference centres for documentation on health, . promoting, at Member State level, greater integration of health education in school curricula and health education for adults, . supporting training for health professionals (early detection of diseases and information on the use of medicines), . helping disadvantaged groups (migrants, the elderly, young people from less-favoured areas, etc.), . improving the public's awareness of the importance of a healthy diet, the prevention of cardiovascular diseases, the effects of alcohol, the benefits of physical activity, diseases linked to age, and the rational use of medicines; - with regard to comitology and the annual allocation of appropriations, the Commission adhered to the text of its initial proposal pending the provisions adopted at interinstitutional level.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 30/11/1995

The Council took stock of progress, in the context of the codecision procedure with Parliament, on the proposals for decisions on the adoption of action plans or programmes of action in the fields of: - combating cancer; - health promotion, information, education and training; - the prevention of AIDS and certain other communicable diseases. Specifically, the Council was briefed on the informal talks that had taken place between Parliament, the Council and the Commission with a view to the meeting of the Conciliation Committee on the matter scheduled for 19 December 1995. It will be recalled that the Council adopted its common positions on the proposals in question at its meeting on 2 June 1995. In the meantime, Parliament approved a number of amendments at second reading at the end of October. Some of those amendments concern the financial package for the programmes (for the 'cancer' plan, Parliament is proposing ECU 64 million instead of the ECU 59 million envisaged in the Council's common position; for the 'health promotion' programme, Parliament is proposing ECU 35 million instead of ECU 30 million). Other Parliament amendments relate to the specifics of the programmes and to a number of general basic provisions.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 25/01/1995 - Economic and Social Committee: opinion, report

As already emphasised in the Opinion on the Communication, the ESC recognised the need for Community action in the field of public health, and considered this move essential for disease prevention, the dissemination of health information and health education. It believed that a consistent prevention plan, based on an improvement in habits and lifestyles, could not only enhance the health care rights and quality of life of European citizens, but also help to curb medical treatment and care costs, which was a major problem currently facing all Member States. The ESC supported the reference to the principle of subsidiarity and proportionality in paragraph 65 of the Communication. It emphasised that the Community should act as a driving force and enhance the value of national and local initiatives in order to guarantee a high level of public health protection in Europe. The Commission should set up appropriate structures to encourage directly the organisation and management of national and trans-national pilot schemes, involving non-governmental organisations representing all parties concerned and scientific or training associations operating within Europe. In the first instance, national and European scientific associations operating in the sphere of public health should be involved, and they should be allowed to play an active role in training health professionals and, by extension, in health education. Finally, the ESC recommended that the schemes promoted should have a solid, scientific underpinning, that they be subject to cost-benefit analysis, and that special attention should be paid to the authenticity of public information, so as to avoid over-simplification and distortions.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 25/10/1995 - Text adopted by Parliament, 2nd reading

In adopting the recommendation for second reading by Mr Christian CABROL (UPE, F) with a view to the adoption of a Community programme on health education, the European Parliament indicated that the Council's common position was too general. Parliament felt, in particular, that too much emphasis had been placed on the intergovernmental aspects of the programme and that the reduction of the financial framework by ECU 5 million was not appropriate. In this context, the recommendation reincorporated the amendments adopted at first reading that aimed to: - restore the financial framework to its original level (ECU 35 million instead of the ECU 30 million proposed by the Council); - do away with the intergovernmental aspects of the programme (relating mainly to the implementation of the programme by the Member States); - ensure that the European Parliament was informed of the actions undertaken; - ensure the participation of and cooperation with certain relevant organisations such as those working in the field of social integration (both governmental and non-governmental); - clarify and strengthen the actions to be implemented, particularly: . establishing a European study programme designed to harmonise Members States' scientific data in the field of health, . promoting and supporting research programmes relating to epidemiology, . examining the role of nutrition in the etiology of diseases, . promoting health education in school curricula and developing exchanges of experience (support for the European Network of Health-Promoting Schools), . supporting the assessment of projects relating to health education aimed at young people and adolescents who have left the school system in settings such as sport and leisure activities, . promoting information on sexuality and contraception, . supporting preventive measures in the field of allergies, . supporting centres disseminating information about the rational use of medicines, . supporting measures to promote regular physical activity, . supporting studies on the ageing of the population in Europe; - promote measures to better target the sections of the population for whom the programme is most important: those disadvantaged as a result of their vulnerability or social exclusion, the elderly, migrants and those living in unfavourable areas.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 22/03/2000 - Follow-up document

PURPOSE : to present the interim report from the Commission on the implementation of the programme of Community action on health promotion, education, information and training (1996-2000). CONTENT : following the adoption of the programme of Community action on health promotion by the European Parliament and the Council, the Commission, in accordance with Article 7 of Decision 645/96/EC, presents this interim report. In this report, the Commission highlights the degree of consistency and complementarity reached between this plan and other relevant Community policies, programmes and initiatives, gives an overview on the international co-operation in health promotion and also reports on the adjustments which are deemed necessary as a consequence of the information gathered. Based on answers to a questionnaire which was dispatched to the Member States

representatives in the programme committee the links ot Member States' policies and an impact on the development of health promotion in their countries have been drawn up. Furthermore, the Commission presents first results of an evaluation which was carried out by a group of independant experts, who under contract to the Commission analysed the decision-making procedures of supported projects and the levels of activity in the different priority areas in the three years 1996-1998. Within this part, particular regard has been given to effectiveness and the achievement of the objectives of the measures undertaken.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 02/06/1995 - Council position

In its common position, the Council made various amendments to the presentation of this proposal and introduced more specific amendments concerning, in particular: - the establishment of the programme: the general objective of this programme was clarified. It aimed specifically to contribute towards ensuring a high level of health protection and comprised actions aimed at: . encouraging the "health promotion" approach in Member States' health policies, . encouraging the adoption of healthy lifestyles, . promoting awareness of risk factors, . encouraging intersectoral approaches to health promotion, especially for disadvantaged groups. The Council amended in particular the order of the sections in the annex and indicated the specific objective for each one (health promotion strategies and structures, specific prevention and health promotion measures, health information, health education, and vocational training in public health and health promotion). Finally, it withdrew or amended certain actions, particularly in the field of health education (no direct inclusion of health education in school curricula, only promotion of exchanges of experience), certain actions directed at target groups (the elderly, disadvantaged groups) or specific actions (e.g. promotion of physical exercise); - implementation: the Council stipulated that the programme would be implemented from 1 January 1996 to 31 December 2000. It defined more clearly the respective roles and contributions of the various actors participating in the implementation of the programme (particularly the Member States); - comitology: it provided for more active participation of the Member States in certain important decisions concerning the programme by establishing a mixed procedure: a management committee procedure for the important decisions and an advisory committee for other decisions (in accordance with the interinstitutional "modus vivendi"); - the programme's budget: the Council set out the scope of the financial support for the programme. The total allocations set aside for the programme amounted to ECU 30 million (instead of the ECU 35 million proposed by the Commission for a Community of 12 Member States); - consistency and complementarity: the Council clearly highlighted the importance of ensuring that there was complementarity between this programme and the relevant actions under the Community's education and training programmes (Socrates and Leonardo) and research programme (Biomed II); - with regard to monitoring and evaluation, the Council provided for fewer regular reports than had been proposed by the Commission or the EP but did not do away with the interim and final reports to be submitted to these institutions.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 26/07/1994 - Legislative proposal

This proposal for a European Parliament and Council decision aimed to adopt a Community action programme on health promotion, information, education and training for a period of five years (1 January 1995 to 31 December 1999) and totalling ECU 35 million (amount deemed necessary). This programme involved five main areas of action intended to promote public health in Europe: - health information: through efforts aimed at promoting better knowledge of the methods and techniques for providing health information and surveys on this issue; - health education: introduction of health education in schools and in the workplace as well as in specific situations to target young people in particular (sport, leisure, socio-cultural activities, etc.); - vocational training in public health and health promotion: support for cooperation between schools of public health and other training bodies with a view to developing common training courses among other things; - specific prevention measures: particularly for socially excluded or disadvantaged groups; - health promotion strategies and structures: surveys and comparative analyses of health promotion measures and support for national and regional health promotion bodies. The EEA countries and associated countries of Eastern Europe could participate in this programme.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 15/02/1996 - Text adopted by Parliament, 3rd reading

The European Parliament approved the joint text.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 29/11/1995 - Commission opinion on Parliament's position at 2nd reading

In its opinion following on from the opinion of the European Parliament at second reading, the Commission amended the Council's common position, taking over some of the amendments put forward by Parliament, including those aimed at: - setting the programme's budget at ECU 35 million (as opposed to the ECU 30 million proposed by the Council); - ensuring that the programme is implemented in close cooperation with the Member States; -

taking account of past or present measures implemented by the Member States; - ensuring consistency and complementarity with other similar Community programmes and initiatives; - as regards action to be taken (annex to the programme), supporting: . work to increase awareness of the socio-economic and cultural differences involved in relation to health promotion, . measures targeted at disadvantaged sections of the population (the elderly, migrants, those from disadvantaged areas), . measures linked to diet and other aspects of daily life that may cause diseases, . measures designed to encourage physical activity and personal hygiene, . studies into the ageing of populations, . work to increase awareness of the psychological and cultural mechanisms affecting health and ways of providing information on healthy lifestyles, . the promotion of better health education programmes in schools (support for a network of health-promoting schools with the WHO), . measures aimed at young people who have left school. Similarly, the Commission maintained its basic reservation concerning the problem of comitology and did not take over certain amendments adopted by the EP, including, in particular, those relating to information for Parliament, cooperation with the NGOs working in the field of social integration, sex education, the prevention of certain diseases and the correct use of medicines.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 15/03/1995 - Text adopted by Parliament, 1st reading/single reading

This proposal for a decision was approved by the European Parliament with the following amendments: - the programme should cover the period from 1 January 1996 to 31 December 2000 rather than from 1 January 1995 to 31 December 1999 and should take account of various past or current measures implemented in the Member States by the relevant authorities or other agencies involved in health policy; - as regards coordination with other Community measures in the same area, this programme should take account of Community measures which impact on health in the education, training and safety at work sectors; - the European Parliament should be consulted with the same status as the committee set up by the Commission to decide on the measures to be implemented under the programme. The Commission should take greater account of the opinion of the European Parliament when applying these measures; - cooperation with NGOs and other organisations working in the health sector should be encouraged when applying this programme; - in the annexes, emphasis has been placed on promoting and supporting programmes in various areas: health research (BIOMED), launching a European study programme designed to harmonise scientific data in Europe, supporting transnational networks of public health reference centres (especially networks of doctors and pharmacies), supporting charitable or official NGOs providing information to the elderly and to women, supporting action to combat nicotinism (in cooperation with the social partners), supporting action to combat accidents in the home, AIDS, cancer and drug addiction by strengthening education and training and supporting action directed at the most disadvantaged persons or persons living in poor circumstances (persons "at risk" such as the homeless or immigrants). Measures to promote good practices need to be launched along these lines: basic hygiene, early screening of illnesses, regular vaccination campaigns, rational use of medication and self-medication.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 29/03/1996 - Final act

- OBJECTIVE: adoption of a Community action programme aimed at promoting health education in the Community. - COMMUNITY MEASURE: European Parliament and Council Decision adopting a Community action programme on health promotion, information, education and training within the framework for action in the field of public health (1996-2000). - SUBSTANCE: . Duration and objectives: the programme is established for a period of 5 years (1 January 1996 - 31 December 2000) and aims to help ensure a high level of health protection. It includes actions aimed at: - promoting the 'health promotion' approach in the Member States' health policies by supporting various cooperation measures (exchanges of experience, pilot schemes, networks, etc.), - encouraging the adoption of healthy lifestyles and behaviour, - promoting knowledge of risk factors and health-promoting factors, - encouraging intersectoral and multidisciplinary approaches to health promotion, taking account of individual and collective socio-economic and environmental conditions (including those of less-privileged groups). . International cooperation: the programme is open for cooperation with the associated countries in Eastern Europe, Cyprus and Malta. In its implementation, cooperation with the WHO, the Council of Europe and the NGOs active in this field is encouraged. . Coherence and complementarity: it is to be implemented in coherence and cooperation with other relevant Community measures and programmes (SOCRATES, LEONARDO, BIOMED II etc.). . Budget: it is provided with a budget of ECU 35 million for the period in question. . Implementation: the Commission is responsible for implementing the plan in close cooperation with the Member States. It is assisted in its task by a committee whose role is a mixed one depending on the area in question (advisory and management). . Monitoring and assessment: the Commission will assess the measures carried out. It will submit to the EP, the Council, the ESC and the Committee of the Regions a mid-term and a final evaluation report on the programme. . Measures to be implemented: measures which can be funded under the action plan are listed in an annex: - action A: health promotion strategies and structures: comparative surveys and analyses of the impact of Community and national health promotion policies and strategies; support for transnational networks of national and regional health promotion bodies and promotion of joint projects, - action B: specific prevention and health promotion measures: support for promotion measures targeting socially excluded or vulnerable groups, analysis of the role of diet and other life-style factors in the etiology of disease, exchanges of experience with regard to cardio-vascular disease, measures in the area of the sound use of drugs and self-medication, prevention of alcoholism, promotion of physical exercise and bodily hygiene, support for studies of the aging population in Europe, - action C: health information: surveys and information campaigns on health promotion, improving psychological, sociological and cultural knowledge with a view to adopting healthy lifestyles, development of a European promotion infrastructure based on networking among key health centres, - action D: health education: exchange of experiences between Member States on the preparation of teaching material and health education modules (including support for the network of health-promoting schools), coordination of health education projects aimed at young people and adolescents no longer in the school system, support for innovative educational methods targeting adults and the elderly, support for programmes of education in the workplace (on smoking and alcohol in particular), - action E: vocational training in public health and health promotion: cooperation between schools of public health and universities with a view to developing common training courses and

exchanges of students and teaching staff, promotion of cooperation among Member States on the content of training courses for health professionals and decision-makers, support for training programmes in schools and for teachers, support for exchanges of experience in training health professionals in health promotion (detection and prevention of disease, etc.). - ENTRY INTO FORCE: 20.03.1996.

Public health: Community action programme on health promotion, information, education and training 1996-2000

1994/0130(COD) - 10/07/1995 - Commission communication on Council's position

In its communication outlining its opinion on the Council's common position concerning this proposal, the Commission stated that it could not support the Council text adopted on 2 June 1995. It had three reservations with regard to the Council's text: - the first related to the programme's budget: the Council provided for a total of ECU 30 million over five years whilst the Commission had proposed a financial framework of ECU 35 million without extension. The Commission considered that this sum was already too modest; - the second involved comitology: the Council introduced a "mixed" procedure for the implementation of the programme. The Commission felt that a straightforward advisory committee would be more appropriate and could eventually take over the seven areas of activity that in the Council's view came under "management"; - the last amendment related to the annexes: the Council did not incorporate in its common position certain EP amendments that were included in the Commission's amended proposal. In particular, these included the amendments concerning the integration of health education in school curricula, support for actions targeted at risk groups (the elderly, migrants, etc), support for measures promoting physical activity and bodily hygiene, and support for studies on the ageing of the population and the associated illnesses. The Commission pointed out that it had included a declaration in the Council's minutes stating that it did not support the text of the common position.