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Priorities of the Austrian and Finish Presidencies

Author

Rory Watson

EU Correspondant

RORYWATSON@SKYNET.BE

The Austrian and Finnish governments have already established the priorities for their two Presidencies as they steer European Union business throughout the year. Whether they manage to achieve their objectives will depend not just on their diplomatic skills, but also on the willingness of the European Parliament and EU governments to strike compromises, particularly on legislative proposals. Vienna will have its work cut out if it is to reach agreement on the provisions of an updated working time directive. As negotiations between employment ministers in Brussels shortly before Christmas demonstrated, there is a huge gulf between those countries who wish to retain the opt-out from the 48-hour week and those that wish to phase it out eventually.

Surprisingly, a large part of the complex negotiations were filmed and broadcast live to media and the public, sitting elsewhere in the building, and provided a fascinating insight into the way deals are normally put together behind closed doors. But, even with the evident goodwill that existed on all sides, the gap proved too wide to bridge. If that remains the case, then behaviour in this area, particularly on on-call time, will be determined more by rulings from the European Court of Justice, as in the past, than by legislation agreed by Europe's politicians.

The two governments may have greater success on the services directive, an ambitious piece of legislation that aims to liberalise the cross-border market in this area. The probable outcome should become clearer in mid-February when the European Parliament will vote on the draft text. At stake, from the medical point of view, is whether health services should be excluded from the scope of the legislation. The Parliament is split over the issue. The Left basically supports exclusion. The Right accepts such a solution for public health services, but believes that private services should be covered.

The results, either way, will have implications for the health sector. The European Commission, which has drawn up its own public health priorities programme for 2006, will have to take this into account as it finalises a wide-ranging strate gy paper. Due to be completed by the end of the year, this aims to set the framework and provide a more coherent approach to EU public health activities.

While fully accepting that the provision and management of healthcare remains a national responsibility, this will emphasise where Union activity can bring added value. This is notably the case in developing the EU's capacity to respond to health emergencies. Here, the recently established European Centre for Disease Prevention and Control based in Stockholm, which is helping to put in place a structure for handling pandemics, will have a key role to play. The strategy paper will also examine how to tackle inequalities in health treatment and how to strengthen the Union's role in international health organisations and its relations with national health systems.

Further measures to highlight the dangers of tobacco loom large on the Commission's agenda. It will launch a new awareness programme aimed at the young, deglamourising the practice of smoking, and is considering setting up a European Youth Parliament to discuss tobacco control.

Member states which have failed to fully implement EU legislation banning tobacco advertising, that came into effect last August, face legal action. The main culprit is Germany. Berlin tried unsuccessfully to persuade the European Court of Justice to declare the legislation illegal and has still not transposed the EU directive into national law. But some countries – Italy, Spain and Hungary – are believed to be flouting the new rules by allowing advertising at Formula One racing events. Others, such as the Czech Republic and Portugal, have still not notified the Commission of the measures they have taken to implement the legislation. Organ transplantation is another area where the Commission is exploring the possibility of further EU action. Union rules already cover blood, human tissue and cells. The Commission is now examining issues such as the donation and trafficking of organs and intends to table a legislative proposal later this year to guarantee their quality and safety.

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