

## Joint Statement on “Improving the employment of people with chronic diseases in Europe”

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### Call to Action to enhance labour opportunities for people with chronic diseases

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*Considering that EU Member States are committed to achieving the targets of the Sustainable Development Goals and particularly Goal 3 on Good Health and Well-Being<sup>1</sup> and considering that the European Union shall ensure a high level of human health protection<sup>2</sup>,*

*Considering that the European Union is committed to the Health-in-all-Policies approach in EU Treaties,*

*Considering that the European Union and Member States aim to combat social exclusion and discrimination; and that “access and opportunities for all should be ensured [...] in particular by [...] removing barriers to labour-market participation”<sup>3</sup>*

*Considering the aims and objectives of the European Pillar of Social Rights<sup>4</sup>, and particularly its two streams on “Equal opportunities and access to labour market” and “Social protection and inclusion”,*

*Having regards to the Article 3 of the Treaty on European Union<sup>5</sup> which sets out objectives of full employment and social progress in Europe, and taking into consideration that employment is a policy of shared competence between the European Union and Member States<sup>6</sup>,*

*Considering that investment, growth and job creation are the cornerstones of the Europe 2020 Strategy and priorities of the Juncker Commission work, which targets an employment rate of 75% for people aged 20–64 by 2020<sup>7</sup> and outlines the importance of participation of all working-age people in the labour market,*

*Considering that the prevalence of chronic diseases in Europe is rising, particularly affecting people of working-age<sup>8</sup> and that 23.5% of the working population in the 28 EU Member States report to suffer from a chronic illness, while an increasingly postponement of the retirement age is observed in all EU countries,*

*Considering that health and work are interrelated in many ways<sup>9</sup> and that facilitating the professional integration and reintegration of people with chronic diseases on the labour market would bring significant economic and social benefits in EU countries<sup>10</sup> in addition to personal benefits for individuals with chronic diseases in terms of quality of life and well-being,*

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<sup>1</sup> United Nations, Resolution 70/1 adopted by the General Assembly on 25 September 2015. Transforming our world: the 2030 Agenda for Sustainable Development. [http://www.un.org/ga/search/view\\_doc.asp?symbol=A/RES/70/1&Lang=E](http://www.un.org/ga/search/view_doc.asp?symbol=A/RES/70/1&Lang=E)

<sup>2</sup> Consolidated version of the Treaty on the Functioning of the European Union (TFUE) – Part three: Union policies and internal actions – Title XIV: Public Health - Article 168 (ex Article 152 TEC). Official Journal 115, 09/05/2008 P.0122 - 0124

<sup>3</sup> Council Decision (EU) 2015/1848, 5 October 2015, on guidelines for the employment policies of the Member States for 2015

<sup>4</sup> [https://ec.europa.eu/commission/priorities/deeper-and-fairer-economic-and-monetary-union/european-pillar-social-rights\\_en](https://ec.europa.eu/commission/priorities/deeper-and-fairer-economic-and-monetary-union/european-pillar-social-rights_en)

<sup>5</sup> Consolidated version on the Treaty on European Union, Article 3.

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:C:2008:115:0013:0045:en:PDF>

<sup>6</sup> Consolidated version of the Treaty on the European Union, Article 4

<http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv%3Aai0020>

<sup>7</sup> Europe 2020 Strategy – Targets. [https://ec.europa.eu/info/strategy/european-semester/framework/europe-2020-strategy\\_en](https://ec.europa.eu/info/strategy/european-semester/framework/europe-2020-strategy_en)

<sup>8</sup> Oortwijn W, Nelissen E, Adamini S, van den Heuvel S, Geuskens G, Burdof L. Social determinants state of the art reviews - Health of people of working age - Full Report. (2011) European Commission Directorate General for Health and Consumers. Luxembourg. ISBN 978-92-79-18526-7

<sup>9</sup> OECD/EU (2016), Health at a Glance: Europe 2016 - State of Health in the EU Cycle, OECD Publishing, Paris. DOI:10.1787/9789264265592-en

<sup>10</sup> Participation To Healthy Workplaces And inclusive Strategies in the Work Sector, Pathways Project. Deliverable number 4.1. Report on the comparison of the available strategies for professional integration and reintegration of persons with chronic diseases

We, undersigned organisations, call upon the European Commission, the European Parliament and EU Member States' Governments to recognise the central role that health and well-being play in building strong and sustainable social market economies and an effective, productive and healthy workforce.

We urge them to consider the importance of addressing the health, social, economic and structural barriers linked to the employment of people with chronic diseases in Europe and ensure that in the long-run, all Europeans affected by chronic conditions are able to contribute to the economy and are given similar opportunities on the employment market as healthy people, according to their health status. To this effect, the European Pillar of Social Rights and the EU semester process can play an important role towards more inclusive labour markets as well as more prevention-oriented health systems.

We therefore call on the EU Institutions and EU Member States to prioritise the following actions to ensure that while further preventive actions are taken to halt the rise in the incidence of chronic diseases in Europe, our European economies and societies adapt to a changing environment and especially a population who are increasingly individually affected by one or more chronic conditions. This means:

### **1. Investing in prevention and earlier detection of chronic diseases**

Prevention is essential to address the growing incidence of chronic diseases in Europe and minimising related societal challenges including employment prospects for workers presenting chronic illnesses.

We thus urge the European Commission and EU Member States to invest more in preventive measures and reframe policies to strengthen disease prevention, while enhancing measures aimed at earlier detection.

#### **Recommendations to Member States**

- **Invest in public health promotion and disease prevention** via the **adoption of national strategies** including effective health education and training in schools, at the workplace, in community centres and health centres; and **ensure increased spending on prevention in healthcare systems** to ultimately shift healthcare resources towards public health promotion activities and ensure that healthcare systems become disease-prevention models;
- **Implement effective policy and regulatory action on the major risk factors of chronic diseases**, in particular on tobacco and alcohol consumption, air pollution and other endocrine disruptors, unhealthy diets and physical inactivity and facilitate healthy food choices. Actions needed include -but are not limited to:
  1. **appropriate national plans respectively on tobacco, diets, alcohol, and on improving air quality;**
  2. addressing obesity including **reformulation of processed food, marketing limitations of food and drinks high in fat, salt and sugar (HFSS) and bans on advertising targeting children, soda taxes** as recommended by the WHO<sup>11</sup> which shall be priorities to effectively reduce chronic diseases prevalence in Europe. Member States shall use legislative tools such as advertising restrictions on unhealthy products on audio-visual channels, regulating salt and industrially produced trans fatty acid content, and plain tobacco packaging, to facilitate behavioural change in practice;
  3. strengthening/setting-up **nation-wide awareness campaigns, in partnership with national/local health organisations and regional/local authorities, to deter consumption of unhealthy products and risky lifestyles and to incentivize healthy behaviours,**

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and mental health issues based on five categories of social welfare models in Europe. [http://www.path-ways.eu/wp-content/uploads/pathways\\_report\\_identify.pdf](http://www.path-ways.eu/wp-content/uploads/pathways_report_identify.pdf)

<sup>11</sup> Guideline: Sugars intake for adults and children. Geneva: World Health Organization; 2015. [http://apps.who.int/iris/bitstream/10665/149782/1/9789241549028\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/149782/1/9789241549028_eng.pdf)

4. Adopt specific measures and targets to measure progress on the above
- **Ensure that all policy frameworks including agriculture and food production policies, environment policies fully incorporate a public health perspective** and align with public health needs;
- **Encourage employers to promote healthy diets and physical activity, provide help quitting smoking and help detect the presence of disease risk factors** in the workplace - in accordance with individual privacy rights - via dedicated information sessions/trainings at the workplace, including as part of their corporate social responsibility activities.

### Recommendations to the European Commission

- Urgently **develop a comprehensive EU Action Plan based on the “health-in-all policies” approach, to support Member States efforts on chronic diseases**, with the target to achieve a 45% reduction in chronic diseases across the EU by 2030 in line with the WHO Europe reflections<sup>12</sup>.  
Such a comprehensive plan must address not only health and research policies, but also agriculture, transport and communication, environment, regional development and finance, among other relevant sectors. To support the plan, the European Commission must put greater emphasis on implementing a “health-in-all policies” approach notably by instigating proper health impact assessment, in accordance with Article 168 of the Lisbon Treaty;
- **Support the development of a permanent EU-wide awareness campaign on chronic diseases and risk factors such as a European Day on Chronic Diseases/Chronic Diseases Awareness Day**, via the Third EU Health Programme and future health programmes, which would serve as a common awareness framework across Europe for use and adaptation at national level in accordance with the context, specificities and needs of each EU Member State;
- **Strengthen risk factor-specific awareness initiatives or schemes** such as the “ex-smokers are unstoppable” campaign, the “school fruit scheme” or “The European Week of Sport” to reduce tobacco use, improve diets and promote physical activity across Europe, as well as the Green Week campaigns, to work on indoor and outdoor air quality;

### **2. Improving the integration of care to strengthen chronic disease rehabilitation, recovery and employment**

Integration or coordination of services along the care continuum can have a positive impact on the quality of patient care and therefore improved health outcomes for patients<sup>13</sup>. In addition, integrated care results in economic benefits with long and short-term cost-savings including avoidance of complications and related health costs, reduced health-care utilisation, and labour productivity gains when the patients are of working age<sup>14</sup>. Furthermore, rehabilitation programmes should be an essential part of the care pathway of a chronic disease patient, not only easing disease recovery but also supporting the patient after/during treatment.

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<sup>12</sup> WHO. Can Europe exceed the global target and reduce premature mortality by 45%? Press release. 8 June 2017  
<http://www.euro.who.int/en/media-centre/sections/press-releases/2017/can-europe-exceed-the-global-target-and-reduce-premature-mortality-by-45>

<sup>13</sup> Ellen Nolte, Emma Pitchforth. European Observatory on Health Systems and Policies. Policy summary II. What is the evidence on the economic impacts of integrated care? 2014

<sup>14</sup> Idem source 13

## Recommendations to Member States

- **Develop integrated health services incorporating social, psychological support as well as return to work services and occupational medicine as appropriate**, to meet the actual needs of chronic disease patients including by using IT solutions;
- Systematically **include rehabilitation programmes as part of a patient's treatment plan**, to be financially supported by the national health-care system. Every eligible patient should be legally entitled to participate in rehabilitation programmes regardless of gender, age, socio-economic status, ethnicity or place of living; and not be discriminated because of his/her condition;
- Systematically **include return-to-work, work retention, work-related costs and management of chronic conditions at the work place in national health strategies** and in chronic diseases-specific national plans;
- **Systematically involve patient and professional organisations and other stakeholders** in relevant processes and initiatives;
- **Develop awareness-raising campaigns to improve understanding of the benefits of rehabilitation programmes** aiming at the public, employers, appropriate health-care professionals and patients;
- **Ensure appropriate training of healthcare professionals including by providing training curricula on 1) patient-centric multi-disciplinary team working spanning primary and specialist care; 2) informing patients about rehabilitation programmes** and their benefits, and motivating them to participate; **3) referring patients to work-related counselling** to facilitate a quicker return to work and higher quality of life; 4) including occupational medicine in the curricula for specialty training;
- Invest in **national E-health strategies to provide cost-effective E-health prevention** and intervention programmes for people with chronic diseases and the general population.

## Recommendations to the European Commission

- Raise awareness on and **support development of IT solutions to address problems of communication and information transfer between health and social care providers** in the primary and secondary care settings, including patients' access to their healthcare records;
- Foster **research on integration of care for chronic diseases** across the EU;
- Systematically **involve patient and health professionals organisations and other concerned representatives** (such as employers and social rehabilitation and support providers) **in relevant projects and initiatives**;
- **Develop communication activities to improve the understanding of the benefits of rehabilitation programmes**, or financially support such campaigns developed at EU or national levels by non-governmental organisations working under unbiased interests;
- **Support the training of healthcare professionals to enhance integration of care, as well as to inform patients about rehabilitation programmes** and encourage uptake as appropriate;
- **Encourage the exchange of best practices across Member States** on integration of care, rehabilitation programmes and return-to-work programmes; and ensure the development of related European guidelines and recommendations such as the European Guide for Quality National Cancer Control Programmes.

### **3. Putting in place a favourable environment including financial/non-financial incentives and adequate policies to support employment, return-to-work or retention at work of people with chronic diseases**

An improved participation of people with chronic diseases in the labour market cannot become real without adequate policies and strategies, both at national and employer/company levels, facilitating their professional (re) integration. Workplace policies have the potential to have a significant impact both on workers' lives and the productivity of a company to the benefit of the overall society and economy. Good practice examples are already in place in some countries and options available to policy makers and employers to manage chronic diseases and employment activation of chronically-ill workers. In order to create inclusive labour markets and reduce long-term unemployment, both employers and employees from large to Small-and-Medium-sized Enterprises and self-employment should receive the relevant support.

#### **Recommendations to Member States**

- Ensure that **policy provisions focus on the capacity to work and on the tasks that persons with chronic diseases can perform** rather than on the inability to work<sup>15</sup>;
- Ensure that national policy frameworks are supportive of persons with chronic diseases in terms of employment such as by providing partial return-to-work schemes where needed;
- Define and implement **national workplace health strategies including rehabilitation, retention of work and return-to-work interventions for companies** to design and adapt according to their mental and physical health needs and corporate contexts to ensure sustainable employment;
- Develop **holistic policies and funding systems covering the action costs of hiring people, and in-work support** (adequate and sustainable financing for the support to unemployed, employers, staff, etc.);
- Provide **incentives in the means of financial support to companies for conducting workplace arrangements**, with consideration for SMEs, to ensure employment of people with chronic diseases. Where such financial support is already in place in the context of persons with disabilities, ensure that it is also available for people with chronic diseases;
- **Promote the development of national and local employment support/reintegration agencies and counselling agencies, to support people to return-to-work.** Such agencies shall offer training courses and guidance for professional development, and work closely with companies/employers<sup>16</sup> to provide adequate support for persons with chronic diseases in terms of job profiles, requalification and acquisition of new skills through training;
- **Encourage initiatives at national and/or local levels, such as points of contact responsible for co-ordinating employment services and liaising with health centres** to ensure adequate reintegration and return-to-work for people with chronic diseases after a period of absence;
- Ensure the development of national chronic diseases **guidelines and recommendations for business management teams and line managers on how to manage staff capability fully integrating workers with chronic diseases; according to the specificities of the national policy framework;**
- **Ensure that welfare benefits (e.g. medical coverage, travel, child care) are not immediately withdrawn** when people with chronic diseases gain employment in order to avoid the benefit trap; and **ensure that financial support is provided to employees with chronic diseases to make gradual return**

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<sup>15</sup> Comparison of available strategies for professional integration and reintegration of persons with chronic diseases and mental health: Report based on five categories of social welfare models in Europe [http://www.path-ways.eu/wp-content/uploads/pathways\\_report\\_executive\\_summary.pdf](http://www.path-ways.eu/wp-content/uploads/pathways_report_executive_summary.pdf)

<sup>16</sup> [Idem source 15](#)

**to work possible**, such as partial capacity schemes and frameworks allowing to combine a share of sick leave benefit with the wage earned;

- **Ensure an effective application and monitoring of anti-discrimination legislations** in order to grant to all the right not to be discriminated against on the grounds of health, and prevent risks of social exclusion in the workplace for people with chronic diseases.

### Recommendations to the European Commission

- Building on the objectives of the Juncker Commission Strategy prioritising jobs, growth and investment, ensure that the European Fund for Strategic Investments (EFSI) and other European structural and investment funds instruments include a component to support companies investing in innovative business models to facilitate the inclusion of people with chronic diseases in the labour market (employment, return-to-work or retention at work);
- Ensure that the European Commission's **Country Specific Recommendations part of the European Semester Process put stronger emphasis on responding to societal challenges**, including **recommendations to define policies making labour markets more inclusive for people with chronic diseases**, in line with a growing prevalence of chronic illnesses among working-age people.  
As high levels of unemployment for persons with chronic diseases are observable in all EU Member States, references should be made to the specific country situation and recommendations should include expanding employment support measures for people with chronic diseases.
- Develop general **EU guidelines on workplace health promotion and work retention** aimed at businesses and employers, combining improvements in the organisation and working environment with active participation from the employees with chronic conditions<sup>17</sup>;
- Develop a **Commission study on available policies and measures building up on the final report of the EU funded Pathways Project**, and ensure appropriate follow up action involving all stakeholders;
- Put in place and financially support through the European Social Fund or as part of the EU Pillar of Social Rights an **EU Employment and Chronic Diseases Award for companies**, to reward exemplary initiatives by employers who ensure employment opportunities for persons with chronic diseases within their businesses;
- Support Member States in **exchanging good practices in the management of workers with chronic illnesses and promote evidence-based interventions** including examples of regulations developed in some Member States (see paragraph e) above), to support their development. For this reason, the European Commission could set up a working group made up of EU Member States Governments' representatives working on economic, health and social affairs to jointly discuss the issue and achieve this best practice sharing. The European Commission could also develop a repository of national initiatives to allow comparison between countries; registry of individual cases, their problems, approaches and outcomes, with the same aim;
- **Allocate funding for the development of networks of excellence for occupational health professionals** under the Third Health Programme;
- **Support Member States in the implementation of the Council Recommendations on Long-term unemployed**. It is essential that any measure aiming to tackle long-term unemployment provides the support services needed with sufficient funding to enable them to successfully work with both long-term unemployed, employees (at risk) and employers in an integrated approach;

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<sup>17</sup> For reference to the concept of workplace health promotion, see: Promoting healthy work for workers with chronic illness: A guide to good practice - European Network for Workplace Health Promotion (ENWHP). [http://www.enwhp.org/uploads/media/ENWHP\\_Guide\\_PH\\_Work\\_final.pdf](http://www.enwhp.org/uploads/media/ENWHP_Guide_PH_Work_final.pdf)



- **Promote and support the development of supported employment agencies throughout Europe** (either within public employment agencies or through private non-profit organisations);
- **Support companies and especially small and medium companies in implementing employment plans** for people with chronic illnesses.

#### ***4. Ensuring appropriate training of employers on the issue of chronic diseases and working conditions and promoting chronic disease awareness at the work place***

##### **Recommendations to Member States**

- Encourage the **inclusion of educational modules on health and mental health promotion, disease prevention and chronic disease management at the workplace in curricula in business and management schools and higher education as relevant;**
- Support the development of **one-day trainings on how to accommodate employees with chronic diseases for business managers and senior/management teams in company settings,** in collaboration with healthcare professionals;
- Ensure the establishment of **voluntary educational sessions on risk factors for chronic diseases and life with a chronic condition for employees and staff in companies,** as part of companies' corporate management plans. Such sessions could be organised in cooperation with health professionals involved in the treatment of chronic diseases and chronic disease workers;
- **Develop national chronic diseases guidelines for line managers, employers and employees** to inform and support employers and employees coping with chronic disease conditions in the workplace, building on the UK Chronic Conditions guidelines for Line Managers and Employees;
- **Carry out national awareness campaigns and initiatives to help promote health in workplaces and reduce stigma and discrimination** in relation to chronic illness, by breaking the taboos around specific conditions;
- Support the **development of anti-stigma campaigns in the workplace** with ambassadors who help to create awareness and provide training and support to people with chronic and/or disabling conditions<sup>18</sup>.

##### **Recommendations to the European Commission**

- Develop **toolkits for employers to help them support employees with chronic disease;**
- Create an **online interactive platform for use by all interested stakeholders, including businesses, to promote and disseminate initiatives aimed at enhancing business managers' training** to drive the exchange of best practices. This could complement and align with the activities of the horizontal work package on the employment of people with chronic diseases of the CHRODIS Plus Joint Action.

Putting in place these actions will make significant contribution to achieving the sustainable employment component of the Europe 2020 Strategy and in particular the objective of "achieving a 75% employment rate for 20–64 year olds throughout the EU". Many workers who live with or develop chronic illnesses continue to make a valuable contribution to the European workforce that should not be disregarded<sup>19</sup>. While employers and workers, but also the economy in general and healthcare systems, currently bear the impact of chronic illness, it is urgent to improve the health and well-being of people of working age and deal earnestly with the chronic disease epidemic in Europe.

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<sup>18</sup> Mental Health Europe Toolkit on Article 27 of the UN CRPD and the Right to Work [https://issuu.com/mhesme/docs/toolkit\\_on\\_article\\_27\\_of\\_the\\_uncrpd\\_54d453ab32e703](https://issuu.com/mhesme/docs/toolkit_on_article_27_of_the_uncrpd_54d453ab32e703)

<sup>19</sup> Idem source 17

# ecda

United to reverse the rise in chronic disease

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The European Chronic Disease Alliance led on the development of this Call to Action via the EU Health Policy Platform in collaboration with organisations working in the health, social and employment sectors