



**COUNCIL OF
THE EUROPEAN UNION**

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REPORT

from:	Permanent Representatives Committee (Part 1)
to:	Council
No. prev. doc.:	14119/08 JEUN 89 SAN 222 SOC 592
Subject:	Draft Resolution of the Council and the Representatives of the Governments of the Member States, meeting within the Council, on the health and well-being of young people - <i>adoption</i>

At its meeting on 29 October 2008 the Permanent Representatives Committee noted that there was unanimous agreement on the text of the above draft resolution.

The Council is therefore invited to adopt the resolution on the basis of the appended text.

**Resolution of the Council and the Representatives of the Governments of the Member States,
meeting within the Council, on the health and well-being of young people**

THE COUNCIL OF THE EUROPEAN UNION AND THE REPRESENTATIVES OF THE
GOVERNMENTS OF THE MEMBER STATES, MEETING WITHIN THE COUNCIL,

RECALL that the European Commission White Paper of 21 November 2001 entitled "A new impetus for European youth"¹, approved by the Council in its conclusions of 14 February 2002, laid down that health should be regarded as a driver for the social inclusion and empowerment of young people and as indispensable to developing their active citizenship;

In its resolution of 27 June 2002² the Council laid down a framework for European cooperation in the youth field; one of its three areas is the inclusion of a "youth" dimension in other relevant European policies;

The European Pact for Youth, adopted by the European Council on 22 and 23 March 2005, is one of the instruments contributing to achievement of the Lisbon objectives for growth and employment;

In its November 2005 resolution on "addressing the concerns of young people in Europe – implementing the European Pact for Youth and promoting active citizenship"³, the Council agreed that whenever a "youth" dimension was included in other relevant European policies, priority should in particular be given to a healthy lifestyle for young people;

¹ 14441/01 - COM(2001) 681 final.

² OJ C 168, 13.7.2002, p. 2.

³ OJ C 292, 24.11.2005, p. 5.

In its resolution of May 2007 on equal opportunities and the participation of young people in society⁴, the Council urged Member States to prioritise the concerns of young people in the policies which affect their quality of life, such as health;

In its communication of September 2007 "Promoting young people's full participation in education, employment and society"⁵, the Commission urged Member States to take initiatives in the area of young people's health;

In its conclusions of 16 November 2007 on a transversal approach to youth policy⁶, the Council noted that from 2009 the Commission would produce a European Union progress report on youth every three years;

In its conclusions of 6 December 2007 on the Commission White Paper "Together for Health: A Strategic Approach for the EU, 2008-2013"⁷, the Council highlighted the need to address key health determinants such as nutrition, physical activity, alcohol, drugs, tobacco consumption and environmental risks, and take into account the role of gender and stressed the need to promote health within the settings of everyday life, i.e. family, schools, workplace, and leisure places;

In its resolution of 22 May 2008 on the participation of young people with fewer opportunities⁸, the Council emphasised that health problems were an obstacle to the active participation of young people and urged the Member States and the Commission to promote a healthy lifestyle for young people via their health strategies.

⁴ OJ C 314, 22.12.2007, p. 1.

⁵ COM(2007) 498 final.

⁶ OJ C 282, 24.11.2007, p. 16.

⁷ 15611/07.

⁸ OJ C 141, 7.6.2008, p. 1.

NOTE THAT

1. although on the whole the health of young people in Europe is satisfactory, certain fields are of particular concern such as nutrition, physical activity, alcohol abuse, sexual and mental health;
2. particular attention should be paid to promoting a healthy lifestyle and preventive measures, especially in the context of sexual activity, alcohol abuse and drug use, smoking, eating disorders, obesity, violence, gambling and addiction to information and communication technologies;
3. a number of factors linked to living conditions, such as poverty, unemployment, job insecurity, housing problems, early school-leaving and discrimination can risk the health and well-being of young people, as well as constitute an obstacle to young people turning to or having full access to preventive facilities and high-quality free healthcare systems which in turn can affect their health and quality of life;
4. young men and women experience different challenges concerning health and well-being and gender issues should therefore be taken into consideration when dealing with the health of young people;
5. a healthy physical and social environment is essential for healthy development. Efforts should be made to improve the quality of the settings in which young people live, work and learn;
6. parents play a vital role in the well-being and healthy environment of young people and further measures should therefore be taken to support them.

EMPHASISE THAT

1. there are strong links between the health and well-being of young people and their social inclusion and level of education;
2. it is necessary to assist young people in becoming more responsible for their own health and in raising their self-esteem and increasing their autonomy, in particular by raising young people's awareness of the positive effects of a healthy lifestyle and of the risks related to their health.

AGREE THAT

1. precise knowledge of the state of health, the needs and expectations of young women and men in terms of health, as well as existing practice, experience and lessons learned in this field, all duly assessed, is required both to contribute to ensuring the efficacy and efficiency of youth health policy and to aim to better take into account, within tailored strategies, the specific nature of this group, with particular reference to potential differences within the group due, inter alia, to age, sex, place of residence or socio-economic factors and giving priority to young people with fewer opportunities;
2. the health and well-being of young people should be addressed by a comprehensive and cross-sectoral approach encompassing all appropriate areas, in particular the public health system, formal and informal learning, employment and social inclusion, childhood and family, sport, cultural activities, research, the environment, the media and consumer protection;

3. the promotion of physical activity and a well-balanced diet is necessary for adopting a healthy lifestyle;
4. special attention should be paid to young people's mental health, particularly promoting good mental health especially through schools and youth work, and to the prevention of self-harm and suicide;
5. health policy in its youth dimension should involve the local, regional, national and European levels of public policy and be based on a broad partnership between those involved in formal, non-formal and informal learning, healthcare professionals, economic and social partners, especially youth associations, and the media.

INVITE THE MEMBER STATES TO

1. promote the "youth" dimension in health-related initiatives and the implementation of measures for the health of young people which are appropriate, cross-sectoral, duly coordinated and systematically evaluated;
2. involve young people and all the relevant youth policy stakeholders in the development and implementation of health-related initiatives, in particular via peer learning;
3. promote access to leisure-time activities, cultural and physical activities of all young people;
4. take into account health and well-being of young people in programmes and policies concerning information and the media;
5. support the training of youth workers and NGOs in the area of prevention and health and well-being of young people, in basic counselling, early intervention, identification of difficulties of young people and signposting to other services.

INVITE THE COMMISSION TO

1. ensure that the "youth" dimension is taken into account in its health-related initiatives;
2. involve young people and relevant youth policy stakeholders at all levels of its action in this area.

INVITE THE MEMBER STATES AND THE COMMISSION TO

1. improve knowledge on and research into this topic with regular updates thereon, taking into account differences in the health and well-being of young people due, inter alia, to sex, age, geographical and socio-economic factors, sexual orientation or disability;
2. gradually integrate data on health and well-being, using existing data sources into the report drawn up by the Commission every three years on the situation of young people in Europe;
3. raise awareness of the factors affecting young people's health;
4. foster the exchange of best practice on the issue of health and well-being for young people, at local, regional, national and European levels, particularly by relying on the existing structures;
5. make the best use of the possibilities offered by the already existing policies, programmes and other instruments of the European Union, in particular the European Structural Funds and the Youth in Action programme, in order to develop projects relating to the health and well-being of young people;
6. strengthen the partnership with young people and their organisations, stakeholders in the youth field and civil society in the area of young people's health.