(2004/C 88 E/0393)

WRITTEN QUESTION E-2146/03

by John Bowis (PPE-DE) to the Commission

(27 June 2003)

Subject: Commission response to Council Conclusions on health matters

How is DG Social Affairs working to bring forward proposals in response to the Council Conclusion of 31 March 2003 (Combating stigma and discrimination in relation to mental illness), the Council Conclusion of 18 March 1999 (Mental health promotion) and the Council Conclusion of 15 March 2001 (Combating stress and depression)?

Answer given by Mrs Diamantopoulou on behalf of the Commission

(31 July 2003)

Issues relating to mental health fall mainly within the remit of the Directorate General for Health and Consumer Protection.

However, as far as discrimination in employment is concerned, the Community can, under Article 13 of the EC Treaty, take appropriate action within the limits of its powers to combat discrimination, inter alia, on the grounds of disability. On the basis of these powers, the Council adopted on 27 November 2000 Directive 2000/78/EC establishing a general framework for equal treatment in employment and occupation (1). This Directive prohibits any discrimination in these areas, be it direct or indirect, on the grounds of religion or belief, disability, age or sexual orientation. The Council Directive prohibits discrimination against individuals with disabilities who otherwise meet the skill, experience, education and other job-related requirements of a position held or desired and who, with or without reasonable accommodation, can perform the essential functions of a job. People with mental health problems could, in this context, avail of the protection afforded by the Directive.

With regard to disability, this Directive recognises that the failure to provide reasonable accommodation in the workplace can constitute discrimination. The obligation to accommodate is aimed at removing barriers to the participation of people with disabilities in employment. This means that employers shall take appropriate measures to enable people with disabilities to have access to, participate in, or advance in employment, or to undergo training, unless such measures would impose a disproportionate burden on the employer.

As to the poverty and social exclusion dimension, issues relevant to the situation of disabled people are covered by common objectives agreed at the European Council of Nice in December 2000, in particular through objective 3 ‘action for the most vulnerable’.

The Joint Report on Social Inclusion (JIR), based on an analysis of the National Action Plans (NAPs) elaborated by Member States in 2001, identifies a number of recurring risks or barriers that play a critical role in limiting people's access to the main systems that facilitate inclusion in society. In the case of people with disabilities the majority of Member States clearly identify them as a group potentially at risk of social exclusion and set out a more or less coherent strategy for their inclusion.

The issue of mental health is raised by a majority of NAPs/inclusion Member States agree on the need to tackle mental health problems through various sets of policy measures, relying in particular on greater local and regional co-operation, better provision of outreach and emergency accommodation services and specific training for health and social services' employees.