



## **European Shiatsu Federation Political Action Work for ESF By**

*Seamus Connolly, Political and Research Officer, November 2011.*

### **General Background.**

The primary objective of the European Shiatsu Federation is to establish the legal right to practice shiatsu according to its own philosophical and methodological basis and based on the appropriate level of professional training for safe and effective practice.

The right to practice shiatsu is determined by National law. Across Europe the law varies from freedom to practice under Common Law jurisdiction, e.g. in Ireland and the UK, to various degrees of toleration without any legal establishment, to where it is forbidden unless practiced by a medically trained professional e.g. Hungary.

The same applies to almost all Complementary and Alternative Medicine (CAM), modalities across Europe.

There are three major effects, among many others, of this legal situation:

- Access to shiatsu and all CAM is limited to those who can afford to pay, so millions of citizens cannot avail themselves of it
- Thousands of practitioners operate in a “grey” legal zone and cannot freely say what shiatsu is, what it can offer, and cannot openly promote their practice or develop their livelihood
- Professional training and development is hampered because of the legal uncertainty.

### **Why Politics.**

Politics governs citizen rights, freedoms and duties and determines the law governing them. Politics determines the distribution of wealth, poverty and power, who can do what or not, who is taken care of and who not. Democratic politics is our *opportunity* to participate in determining these things. Political systems vary somewhat in Europe but all are structured to channel citizen views provided we avail ourselves of those structures.

### **Those who do it get what's going. Those who don't get what's left!**

Shiatsu and CAM practitioners in general tend to avoid politics and even dislike it. However, politics and politicians are expressions of all of us. It is an illusion to think we are separate from them. Lobbies, those benignly perceived, e.g. associations for the homeless, and those negatively perceived, e.g. the pharmaceutical industry, are groups of people using the political structures to serve their own interests. Participation is the common key for all. Other factors such as money and political skill also count of course.



## **Why EU Political Action.**

Most CAM practices have hardly any legal recognition. CAM is often attacked and is poorly developed. Research evidence is selective, research funding poor, research methodology is often inappropriate. There is still a political and practical divide between CAM and conventional medicine. Freedom to practice across EU borders is not established. All of these restrict practitioners and deprive the public.

But, the EU has established the rights of freedom of movement and freedom of establishment in its founding Treaty, the Treaty of Rome. These are the rights to establish your profession, and, to practice it throughout the EU. Treaty rights have to be specifically enacted to have effect and in the case of shiatsu and CAM this has not yet happened.

The EU acts as a guarantor of rights throughout the EU. It is also the originator of new European policies, laws and freedoms based on the above Treaty rights. It can promote and eventually enforce individual and group rights where these are unequally applied in Member States. On the negative side the EU has passed several restrictive laws relating to the availability of CAM natural medicines and products.

The EU has overarching Public Health policies and programmes crossing all borders covering the CAM agenda and providing for cross border patients rights.

EU 2020 is the new political programme focused on solutions to the economic crisis and citing health as a major EU challenge to be tackled.

Any European scale actions that can enhance citizen health, prevent chronic disease, reduce health system costs, improve the longevity of workers and citizens, and contribute to economic growth can be included in EU funded health actions

## **EU Political Context for Health.**

The EU has a public health strategy and programme even though delivery of health services is the responsibility of national Governments. The current EU public health strategy is:

- ▶ to tackle the major lifestyle diseases,
- ▶ to promote better health and healthy ageing,
- ▶ to provide health information to citizens,
- ▶ to reduce illness related work absence and loss of productivity
- ▶ to address health inequalities
- ▶ to contribute to economic growth



## **Opportunity and Risk**

Engaging in political work presents opportunities and risks. According to CAMDOC, the European alliance of medical doctors practicing CAM there are 160,000 doctors practising CAM in Europe. They have an effective lobby promoting “evidence based CAM” or “integrated medicine”, which for many is code for CAM practiced by doctors. They have strong relationships with researchers and they have the advantage of professional recognition already. Their members are not all in favour of CAM practiced by non doctors, yet at the European political level all the stakeholders in CAM have to work together now.

The current EU public health strategy mirrors the areas where CAM works best. There is a drive for integrated CAM (medical CAM), an organised view, supported by research, promoting medical practitioners of CAM. But CAM practices by non-medical practitioners are more in line with the EU public health priorities than medical practice.

**To take advantage of this, a strong lobby is more essential than ever.**

## **ESF Political Work History.**

Some of the highlights of the ESF’s political work have been:

- Lannoye (Collins) Report to the European Parliament in 1997 which included shiatsu as one of the 8 CAM modalities enjoying some form of legal recognition and deserving of some form of European recognition.
- Participation in 3 Health Open Forums where the case for the use of shiatsu and CAM was presented to an audience of health stakeholders from all over Europe.
- Bratislava health conference in 2005 which was the first time a formal presentation of CAM was made at an EU health open forum
- Inclusion of CAM , in both the current EU health and research programmes

The focus of this work was legal recognition, the right to practice and to practice across borders, and to achieve equity of access for citizens

## **Political Access and Strategy.**

Because neither shiatsu nor CAM in general had a recognised political base in Europe, these were ad hoc and opportunistic actions. Success was reliant as much on goodwill as on any actual acceptance of CAM. My analysis of our political action to that date was that the prerequisites for political success are a political base, an organisational structure, and, a strategy. Furthermore, that more effective action is reliant on continuous presence in Brussels. Additionally, it was not, and is not, possible for any individual CAM method to gain recognition alone at the European level. An alliance with the other CAM stakeholders (patients, doctors, producers) was going to be necessary to make progress.



**Therefore, the ESF decided on a new strategy to put political work on a professional basis, to fund that, and to form the alliances.**

Our first action was the formation of EFCAM, a legal not for profit organisation of pan European CAM organisations representing non-medically trained practitioners. Currently EFCAM has 7 members representing 18 CAM methods, (acupuncture, homeopathy, kinesiology, massage, reflexology, shiatsu among them) in 20 countries, and, directly or indirectly, 170,000 practitioners (figure based on professional association registers).

The next step was the formation of an alliance with patient, doctor and manufacturers organisations, EUROCAM (see more below).

Combined with creating a political base was a change in our political strategy. This was a shift from attempting to get European recognition legislation to participation in EU programmes to show:

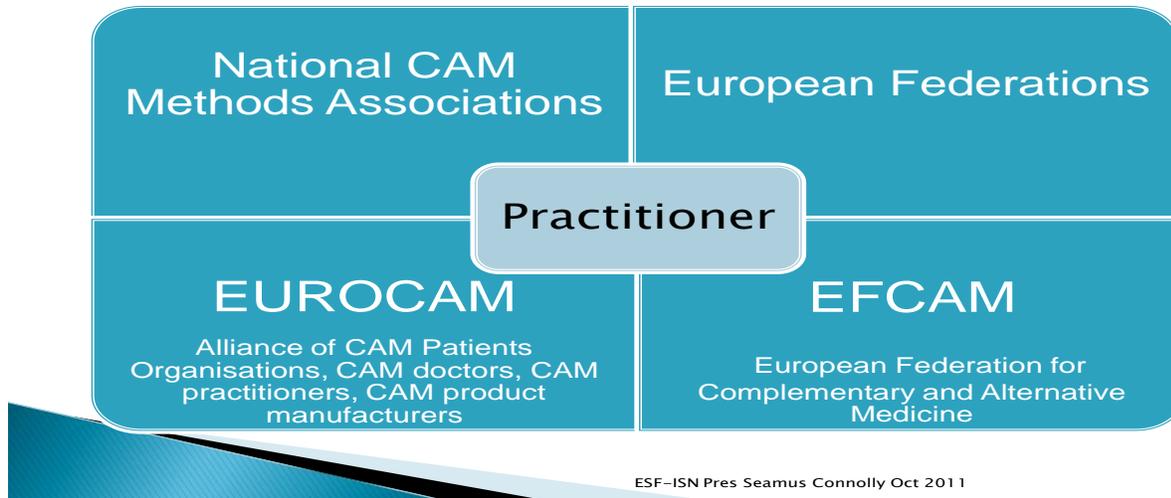
1. that CAM is a part of the daily life of many citizens
2. that CAM can add value to the EU programmes on: health promotion, health literacy, healthy ageing, to the wellbeing of citizens, to productivity and to sustainable healthcare costs.

There are a number of reasons for and benefits of this strategy:

- European level recognition gives us status, support and credibility
- National level profile is raised positively as a result
- National Governments often follow European developments
- This level of European recognition helps neutralise opposition
- Our strategy is to distinguish CAM from medicine and to promote it's essential characteristics for health maintenance and health promotion



## ESF POLITICAL WORK ORGANISATION



### Political Action Historic Event.

While the existence of CAM had begun to become known at the higher levels of the EU administration it had no traction and was not related sufficiently in their minds to general public health policy. Secondly, while they had been lobbied over the years it was inconsistent and on behalf of the narrowest of interests within CAM looking for something from the EU, but without offering anything to EU health policy. I therefore persuaded the Director General of DGSANCO (EU Health Directorate), Mr. Robert Madelin, to meet representatives of the 4 sectors of CAM, patients, doctors, practitioners and manufacturers on the basis that we had something to offer for citizen health. He agreed to meet strictly on the basis that the entire sector would meet him and not present sectional interests. The meeting took place in March 2009. It's critical importance was as follows:

The 4 major CAM Stakeholders met the EU for the first time ever (doctors, practitioners, patients and manufacturers)

A Joint Position Paper on the role, contribution of and issues for the entire CAM sector in Europe was presented (available on request from ESF)

Joint Follow-up actions

Some of the outcomes of that meeting were:

- the understanding that dealing with behaviour and lifestyle problems were at the core of EU public health policy



- that if CAM could show how it can contribute to that agenda there would be an open door for it in DG SANCO ( Health Directorate)
- that the same would apply in relation to patient safety
- that the promotion of CAM by dual trained doctors would be particularly helpful, as would making known the experiences of patients

Most importantly of all though it fastened the stakeholders together in a much more powerful platform for political action on behalf of CAM, particularly in bringing the political organisations of CAM doctors and CAM practitioners together at the European level.

- This confirmed the ESF's strategy.**

### **Political Strategy Results.**

Other important outcomes flowed from this meeting:

- Inclusion of reference to CAM on the EU Health Portal
- Part funding for an EU CAM Conference in 2012
- EFCAM became the only CAM member of the EU Health Policy Forum, EUHPF, the EU's official public consultative body on health
- EFCAM became a regular official invitee to EU consultations and events, e.g. AHAIP, Active and Healthy Ageing Innovation Partnership which aims to add 2 healthy life years to European longevity, on the new EU policy on chronic diseases, on the next new health and research programmes

### **EFCAM's Role**

Because no CAM method working on its own can be effective at the European level, EFCAM's role is crucial in enabling the ESF to pursue its own political action. The two threads of that role are:

- ▶ **1)** Support the actions in each individual member country pertaining to the legal right to practice, to the availability of medicines and products and to achieving excellence in professional competence
- ▶ **(2)** Act at the European level:

to support action at the national level and to directly lobby all the relevant EU institutions to network and undertake joint actions with compatible European organisations.

To form the strongest possible lobby for non-medically trained practitioners at the European level



To continue to lead the European political strategy for CAM in the interests of practitioners

To balance the strong influence of other stakeholders

To be recognised as the representative body for non-medical CAM practitioners in the EU

### **EFCAM's Achievements.**

- ▶ European Map of CAM for the EU
- ▶ The Only CAM member on the EU Health Policy Forum, the EU's official consultative body on all health matters
- ▶ The official representative organisation for non-medical CAM in the EU.
- ▶ Advisory Board member of CAMbrella, European wide research project on the prevalence of CAM in Europe and to produce a roadmap for EU funded CAM research
- ▶ Founder of the European Parliament Interest Group for CAM
- ▶ The non-medical CAM contact for the EU Health Portal
- ▶ Only official CAM participant in the AHAIP, Active and Healthy Ageing Innovation Partnership, the most significant current action on health by the EU
- ▶ Organiser of a campaign for a new EU Directive on herbal medicines
- ▶ Official consultants for CAM on the EU 5 year health and research programmes.
- ▶ The link between non medical CAM practitioners and European patients groups

### **Conclusions.**

Political action works. But only if consistent, strategic, and sufficiently funded. Increased funding is urgently needed now to maintain momentum and to build on it.

As a result of the work to date we are now recognised as a legitimate health stakeholder within the European political system. Tremendous opportunities can flow from this for shiatsu if we are sufficiently professional and organised. As shiatsu organisations this can support us to protect the right of practitioners to practice in legally and socially safe and supportive conditions. All the other organisational work ultimately relies on this.

### **Further Information.**

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