



Mr István Mikola,
Minister of State for Security Policy
and International Cooperation

Brussels, 30th September 2016

Open letter

to the attention of István Mikola, Minister of State for Security Policy and International Cooperation

cc: Zoltán Ónodi-Szűcs, Minister of State for Health Care;
László Kövér, President of the Hungarian Parliament;
Benedek Sallai R., President of the Sustainable Development Committee and Zsolt Németh, President of the Foreign Affairs Committee of the Hungarian Parliament;
Péter Harrach, Lajos Kósa, Erzsébet Schmuck, Bertalan Tóth, and János Volner, Chairpersons of the Political Groups in the Hungarian Parliament

Subject: Public health concerns with regard to the ratification of CETA

Dear Minister,

I am contacting you following the recent Citizens' Dialogue on EU Trade Policy discussion you have participated in with Commissioner Malmström in Budapest¹ and I would like to express the deep concerns the European Public Health Alliance (EPHA)² has with regard to the Comprehensive Economic and Trade Agreement (CETA).

While trade liberalisation initiated in CETA has the potential to support public health by economic growth and greater employment opportunities, this can be undermined by its unintended side effects harming our health. Our **identified key public health concerns** reflect some of the points made by the Hungarian National Council for Sustainable Development (NFFT) with regard to TTIP and other relevant agreements, such as CETA:³

1. **CETA will eliminate tariffs on unhealthy processed food and drinks**, which could lead to a further decrease in prices and will contribute to the Non-Communicable Disease and obesity epidemic both in Europe and in Hungary.⁴
2. **CETA does not protect our health from unhealthy diets** and does not contain specific measures needed to protect the consumer and patients from **antimicrobial resistance (AMR)**.⁵
3. **CETA does not guarantee that public services - including healthcare services - will not be subject to market liberalisation in future** due to limited reservations, negative listing and a 'ratchet clause' locking in current and future liberalisation.⁶

¹ https://ec.europa.eu/hungary/events/20160913_citizens_dialogue_Malmstrom_hu

² EPHA is a change agent and a network of 90 public health organisations advocating for better health – [EPHA website](#)

³ NFFT Resolution, Point 27, http://nfft.hu/assets/NFFT_resolution_TTIP_03Dec2015_EN_final.pdf

⁴ NCDs are responsible for 86% of all deaths and 70 to 80% of health care budgets, an estimated € 700 billion per year are spent on chronic diseases in the European Union [link](#) see also NFFT Resolution, Point 9, 26b

⁵ More than 25.000 people die in the EU each year from infections caused by antibiotic resistant bacteria http://www.euro.who.int/_data/assets/pdf_file/0005/136454/e94889.pdf See also NFFT Resolution, Point 26b

⁶ bit.ly/1OaCZH7 See also NFFT Resolution, Point 16, 26b

4. **Revised investment protection measures will not stop tobacco, alcohol and unhealthy food investors** from challenging public health laws such as the Hungarian legislation on **plain packaging of tobacco**⁷ or the **maximum levels of Trans fatty acids (TFAs)**⁸
5. **CETA fails to ensure policy coherence between trade and health.** The Sustainable Development Chapters of do not recognise the public health sustainability aspects by omitting any reference to global public health relevant treaties, commitments or objectives. This is a failure in light of the health relevant aspects of the recently adopted the Sustainable Development Goals (SDGs)⁹ **CETA remains incoherent with key public health policy goals** as it remains silent on alcohol related harm, and does not address the cornerstones of unaffordable medicine prices in both in Canada and in Europe and Hungary.¹⁰

The flagship role of Hungary as regards introducing progressive public health policies like the Hungarian tax on unhealthy products¹¹ is essential to contribute to the fight of growing burden of NCDs and obesity and this why it important to take into account health considerations when trade policy objectives are defined by the interplay of economic interest in stake.

On behalf of the European Public Health Alliance, I call on your role to reconsider the support of the CETA agreement and address our public health concerns by calling for a better deal for health and consumers. We will be following the public debate in the Hungarian Parliament on CETA beginning 3th October within the Sustainable Development Committee with great attention.

Yours sincerely,



Nina Renshaw

EPHA Secretary General

⁷ <http://epha.org/open-letter-congratulating-hungarian-minister-of-health-on-plain-packaging/>

⁸ <http://epha.org/transfats-regulation-the-lowest-hanging-fruit/> See also NFFT Resolution Points 19-21, 26.d

⁹ E.g. Goal 3 Ensure healthy lives and promote well-being for all at all ages <https://sustainabledevelopment.un.org/sdg3>

¹⁰ See also NFFT Resolution Points 23, 26.f and 26.g

¹¹ <http://epha.org/epha-open-letter-to-welcome-the-hungarian-tax-on-unhealthy-products/>