



Plenary meeting of Committee 2

Terceira, Açores-P, 23rd October 2007

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Document for information

AER SUMMARY European Commission Consultation SOCIAL REALITY STOCKTAKING

OBJECTIVE

- Public consultation launched on **26th February 2007**
- **Objective:** encourage a debate, determine what is Europe's current social reality, create a consensus on the common social challenges Europe is faced with, adopt an open approach to identifying and responding to these challenges

Supporting Material:

- Background paper prepared by the Bureau of European Policy Advisers (BEPA)
- Eurobarometer on European Social Reality 2006

Both these documents are available on the European Commission's website:
http://ec.europa.eu/citizens_agenda/social_reality_stocktaking/index_en.htm#

BACKGROUND

The emergence of new trends:

- Demographic changes: ageing population, migration
- Globalisation is a reality
- New values: individual, family, community, society
- The transition towards a post-industrial knowledge economy
- The questioning of the welfare state model

WHY THIS CONSULTATION?

- We need to consider the role of European policies and the social context in which future policy actions should be developed
- Europe's social dimension should be considered and developed in parallel to the European internal market
- **The European Commission has presented this consultation as an opportunity to analyse the current situation and list trends and challenges. There is no commitment that the outcomes of this consultation will serve as a basis for the Commission's future policies.**

MAIN ISSUES RAISED IN THE CONSULTATION (RELATED TO THE THEMES OF COMMITTEE 2)

The consultation document outlines Europe's current social reality and clearly identifies key challenges.

The two main themes considered are **the transformation of European societies and the problems raised by an improved quality of social life.**

➤ **DEMOGRAPHICS, “AGEING”, FAMILY LIFE & WELL-BEING**

Analysis :

- We are faced with a triple challenge: the baby-boom generation will soon retire from active life, fertility rates are declining and as a result there are more retired people depending on fewer active persons.
- In the EU15, a combination of family benefits, different forms of childcare and flexicurity have encouraged fertility rates and an increased participation of women in the labour market.

Questions to be considered:

- The division of responsibilities and the respective roles of the family, the community and the State.
- The interaction between employment, family and gender equality policies.
- The correlation between government policies and fertility rates.
- Reconsider the economic and demographic viability of European societies.

➤ **POVERTY & INEQUALITY**

Analysis :

- Poverty is a very serious problem in Europe: 72 million citizens in the EU25 are at risk of poverty.
- Categories most affected by poverty: children, followed by elderly persons and single persons under the age of 30 living alone.
- Levels of poverty and inequality are interrelated: the most equal societies have the least poor.
- Tendencies among the different EU Member States differ, but in general we are witnessing a reinforcement of inequalities, with young persons being the first to suffer from these.

Questions to be considered:

- The economic, social and political cost of the situation described above.
- How legitimate are theories justifying today’s inequalities? The *Rawlsian* argument states that inequality is tolerable as long as it generates extra wealth that can then benefit the poorer members of society: those least fortunate will benefit from incentives to create greater wealth. Is this argument still today, when inequalities in our societies are on the rise?

➤ **ACCESS TO HEALTH & QUALITY OF LIFE**

Analysis :

- Increase in life expectancy and in healthy life years varies between EU Member States and between different social groups.
- Health expenditure has been rising consistently all across Europe over the past decades.
- “Diseases of affluence” (diseases resulting from a high quality of life, for example obesity) are increasing and there is more evidence of links between the environment and health.
- The key factors for assessing our ‘quality of life’ have changed (for example, more emphasis on environmental protection)

Questions to be considered:

- What is the future of our health systems in light of the impact of demographic ageing?
- To what extent are what we consider “diseases of affluence” in fact illnesses resulting from inequalities in today’s societies?
- We are faced with new challenges: global warming and its implications, what is Europe’s role, what measures should we take, what are the right solutions?

➤ **DELINQUENCY & INCREASED INSECURITY**

- We need to clarify the distinction between the real and the perceived threats.
- European societies are not “extremely violent”, but the situation differs across Member States.

- A high proportion of crimes committed across Europe are linked to drugs.
- What should the response of the justice system be? It is hard to take into account both the manifestations of criminality and its causes.

➤ **MIGRATION, ETHNIC DIVERSITY & INTEGRATION**

- Many European cities are being transformed following recent waves of migration.
- There are economic, social and cultural benefits resulting from migration and the diversity it fosters.
- The fate of migrant communities is often worrying: there is a marked progress in combating racism and intolerance but problems relating to discrimination, access to employment and “correct” social services persist.
- The reaction of the local population, worried by the pace and size of this phenomenon, often poses an obstacle to integration.
- We still need to respond to cultural challenges and to reaffirm our ideals of social cohesion.

AER SECRETARIAT COMMENTS

This consultation can also be considered as a counterbalance to the European Lisbon Strategy. So far the EU has concentrated on fostering economic growth and supporting the creation of a dynamic knowledge-based economy. The development of Europe’s social dimension is essential to ensuring that the Lisbon Strategy is successful and legitimate for the citizens.

WHAT IS THE AER’S ROLE?

This consultation is an opportunity to raise the region’s concerns and voice their political priorities.

In order to be successful however, we need to ensure that:

- existing measures are applied, before launching a process for developing new political priorities and new measures;
- the outcomes of this consultation are transcribed into a clear European political agenda;
- concrete measures are adopted and implemented as a result of this consultation process.

Highlighting the Region’s priorities in this area:

- **Apply the progress achieved by research and development in the field of health** (for example e-health, which renders healthcare services more accessible and more effective)
- **Hold a political debate on the measures needed to respond to demographic change.**
- **Implementing solutions for facilitating rapid reaction and cooperation in times of crisis** (emergency planning)
- **Insist on MAINSTREAMING:** It is important to consider the impact that a measure adopted in one policy area will have in another policy area. It is therefore necessary to introduce a social dimension to economic policy and *vice versa*: for example, the Lisbon Strategy in employment policy should be complemented by an emphasis on gender equality.

NEXT STEPS

- Contributions to the European Commission’s consultation must be submitted by 31st December 2007.
- The Committee 2 Secretariat has drafted a questionnaire to the member regions.
- Responses to the AER Questionnaire should be submitted to the Committee 2 Secretariat (Ms Camille Bulot, st.com21@aer.eu; fax: +33 3 69 20 13 17) by 30th November 2007, so as to formulate the common Committee 2 response.

CB, September 2007