DECLARATION

We, the Ministers responsible for health in the 47 member states of the Council of Europe, meeting at the 9th Council of Europe Conference of Health Ministers in Lisbon on 29 to 30 September 2011 on the invitation of the Portuguese Government,

RECOGNISING THAT

Healthy children are the future of Europe and the rights of every child to equitable access to health care which is appropriate, child-oriented and of good quality must be respected;

The health and well-being of children are priority goals shared by all member states within the general context of human rights and the specific framework of children's rights;

Investment in children’s health and well-being ensures better outcomes for the entire lifespan and may reduce the burden on health and welfare systems, since a significant number of avoidable physical and socio-psychological problems in adult life have their origins in infancy and childhood;

Effective and efficient child-friendly healthcare contributes to social cohesion;

AWARE THAT

Protection and equitable access to health care are the right of all children, without any discrimination, in order to enable their well-being and healthy development;

There are, however, significant inequalities in health status and health outcomes of children and their families within and between member states;

Children are resourceful and have coping capabilities, but they rely on society's protection and need special attention to achieve and maintain good health and avoid the adverse effects of the social determinants of health;

CONVINCED THAT

Children’s optimal health and development should be built on the core pillars of participation, promotion, protection, prevention and provision;

A child-friendly health care approach must be rights-based, child-focused and ensure children's participation in health care decisions affecting them, taking into account their age and maturity, as well as the active involvement of the family;
RECALLING

Existing universal and European standards protecting and promoting children’s rights such as the 1989 United Nations Convention on the Rights of the Child, the European Convention on the exercise of Children’s Rights (1996), and the revised European Social Charter, as well as the United Nations Millennium Development Goals, the Action Plan of the Council of Europe Third Summit and the Council of Europe Disability Action Plan;

The following Recommendations of the Committee of Ministers to member states:


The 2009-2011 Strategy of the “Building a Europe for and with Children” Programme, which called on the Council of Europe inter alia to promote the exchange of experiences with regard to initiatives in health and medical care and to increase the involvement of children and possibilities for them to express their opinions, improve their access to information and ensure quality care adapted to their rights and needs;

ARE RESOLVED TO PROGRESS TOWARDS

A child-friendly health care approach which includes in particular:

- children’s rights as a guiding principle in the planning, delivery and monitoring of health care services for children;

- equitable access to quality health care services for all children;

- appropriate integrated services for children with special needs;

- eliminating discrimination against any child on any ground, such as sex, race, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth or other status;

- facilitating the implementation of the principle in Article 6 of the Oviedo Convention with regard to the child’s participation in medical decisions;

- founding all decisions regarding children’s health on their best interests, in a process involving the children themselves and their families;

- evidence-based interventions by professionals with appropriate competences, dedication and knowledge of child-specific physical and well-being needs, as well as their psycho-social situation;

- parents or carers being allowed, encouraged and helped to stay with the child receiving health care, unless this goes against the child’s best interest;

- health care institutions making the necessary arrangements to facilitate parents or carers staying with the child receiving health care;
- working together with other ministries and other relevant stakeholders to effectively address the bio-psycho-social development of every child and the social determinants of health;

- improving health education to empower children to make informed choices about healthy lifestyles;

- consulting and involving children and, where appropriate, their families, in the planning, assessment and improvement of health care services;

- improving the infant mortality rates according to national goals, in order to achieve the UN Millennium Development Goal No 4 by 2015;

- identifying and sharing good professional practices, research, policies and strategies focused on children’s health and well-being in partnership with other relevant stakeholders;

- facilitating the development of appropriate practical tools for health practitioners to implement the child-friendly health care approach;

**UNDERTAKE TO**

Strengthen the rights-based approach to children’s health by taking steps to implement the Guidelines on Child-friendly Health Care, adopted by the Committee of Ministers on 21 September 2011;

**PROPOSE THAT**

Those member states which have not yet done so consider signing and ratifying relevant legal instruments, in particular the revised European Social Charter and the Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse;

The Committee of Ministers pursues its activities in the health field as a component of human rights and democracy, taking into account the reform process under way;

The 2nd Council of Europe Conference of Ministers responsible for Social Cohesion (Istanbul, Turkey, September 2012) takes into account the child-friendly health care approach;