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# 2017: a challenging year for public health in Europe

Among the most popular Twitter messages last year was from J K Rowling: "If we all hit ctrl-alt-del simultaneously and pray, perhaps we can force 2016 to reboot".[1] This captured perfectly the mood of those attending the European Public Health conference in Vienna in November, 2016, when Donald Trump won the US Presidential election. For many, there was sense of déjà vu, because they had also been in Oslo in May, 2016, at the 6th European Conference on Migrant and Ethnic Minority Health when they heard that a narrow majority of the British population had rejected the European ideals of tolerance and solidarity, listening instead to politicians peddling hatred and outright lies.

Inevitably, public health professionals in Europe are looking forward to 2017 with considerable anxiety. Elections, referendums, and polling in many European countries have shown a considerable increase in support for extremist parties. The parallels with the 1930s are all too clear. A period of prolonged austerity has left many people behind who see little hope for the future for themselves or their children. Charismatic populist politicians have filled the political vacuum vacated by the mainstream parties. They offer simplistic and unrealistic solutions, exploit fear, and sow divisions in societies.

2017 is a year of elections in some important countries in Europe. Although, for historical reasons, the extreme right wing Alternative für Deutschland has struggled to achieve substantial support in Germany, it was quick to exploit the attack on a Berlin Christmas market in December, 2016, holding Angela Merkel responsible for the deaths.[2] Nigel Farage of the UK Independence Party (UKIP) used an interview about the tragedy in Berlin to attack the widower of Jo Cox, the Member of Parliament murdered by an English nationalist, for his support of the Hope Not Hate group.[3] In France, Marine Le Pen has managed to recast the image of the Front National, appealing to blue collar workers who, as in Germany, feel threatened by migration. It seems likely that she will reach the final round of the French presidential election but, like her father, be defeated by the majority of French voters who reject her message. Perhaps the greatest concern is in the Netherlands, where Geert Wilders' Party for Freedom continues to lead polls, despite, or perhaps helped by, his conviction for inciting discrimination.[4] However, again, he seems unlikely to achieve power because the Dutch electoral system almost invariably produces a coalition government and none of the mainstream parties are willing to collaborate with him. The fact that these politicians can achieve any significant electoral support is, of course, a matter for great concern. All of them reject many of the core principles of public health, including solidarity, equality, and non-discrimination. Many seek a dismantling of measures that have protected health for decades. At least for now, the practical threat that they pose seems small, but there are no grounds for complacency because they influence the dominant narrative across Europe.

The situation is rather more worrying in the UK. 6 months since the referendum on European Union (EU) membership, it is clear that the government has absolutely no idea of what to do next. A series of detailed reports from parliamentary committees[5] have set out the enormous scale of the challenges ahead, yet ministers can only mouth meaningless platitudes such as Brexit means Brexit or that Brexit will be red, white, and blue. Any statement resembling a serious policy is contradicted within hours.[6]

This lack of direction has many implications for health.[7] Much of the legislation underpinning public health in the UK comes from the EU, including environmental standards, health and safety at work, and consumer safety. It is clear that many people who supported Brexit view it as an opportunity to get rid of what they see as unwarranted interference in their personal freedom. For example, UKIP wants to rescind the ban on smoking in public places,[8] and some Conservative politicians support the removal of current EU employment rights.[9] Regardless of whether the UK succeeds in leaving the EU, something that cannot be assumed given the government's clear inability to articulate the issues, damage is already being done as much-needed professionals from the rest of the EU consider their long-term future, in part as a response to the growth of xenophobic attacks.[10] The National Health Service, the social care system, and British universities all depend on large numbers of EU citizens, who have rights that go with that status that go far beyond the basic right to remain.[11,12] The imminent loss of the European Medicines Agency will damage

the British pharmaceutical industry, a major export earner, and the probable move of substantial parts of the financial services industry will exacerbate the reduction in government revenues already predicted by the independent Office for Budget Responsibility. Finally, the chaos and confusion generated by the Brexit decision threaten to paralyse the machinery of government, which alone would question its ability to take effective action should it face emerging threats to health, even before any possible disengagement by the UK from the European Centre for Disease Control and Prevention.

Europe's public health community must prepare for a difficult 2017. Europe's history offers too many examples of both how public health can be subverted by authoritarian politicians[13] and how governments fail to respond to health threats. In November, 2016, organisations from across the continent signed the Vienna Declaration, which seeks to update the Ottawa Charter for the 21st century.[14] It has the political determinants of health at its heart and offers a firm underpinning for what could be dark days ahead.

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