

Policy and Advocacy Task Force

Committee Composition

Chair(s):	The President of the European Society of Endocrinology.
Full members:	Up to six Scientific support representatives covering the key focus areas of ESE's Policy and Advocacy strategy. Up to six Political support representatives including: An Endo-ERN representative. An Early-Career representative. ESE's representative to the European Medicines Agency (EMA). ECAS representatives nominated and selected by ECAS. Members are proposed by the Committee and ratified by the Executive Committee.
Ex-officio members:	ESE President-elect. ECAS Representative (Executive Committee). UEMS Representative.
Co-opted members:	Up to two additional members may be co-opted for a limited period to fulfil a specific role, subject to Executive Committee approval.

Quorum

There should be at least 50% of Scientific representatives and 50% of Political representatives.

Duration of Service

Chair(s):	Co-terminous with office.
Full members:	For a period of 2 years or co-terminous with their engagement at the entity they represent in the task force. During the introduction of this Task Force, membership may be staged so that not all members retire at the same time.
Ex-officio members:	Co-terminous with office.
Co-opted members:	Up to two additional members may be co-opted for a limited period to fulfil a specific role, subject to Executive Committee approval.

Reporting

The Task Force reports to the Executive Officers Board and the President will report to the ESE Executive Committee.

Meetings

At least 3 meetings per year; meetings may be arranged by video/teleconference.

Remit

1. To develop the overall ESE Policy and Advocacy strategy and set priorities.
2. To review strategy and priorities on an annual basis, to ensure the most relevant set of objectives for the policy and advocacy efforts at all times.
3. To plan and support the implementation of activities to support the priorities.

4. To support the development of ESE position papers and other documentation as necessary to support the agreed strategy.
5. To secure that ESE and by extension European endocrinology is represented at the level of the European Institutions (Commission, Parliament and other stakeholders).
6. To develop alliances and collaborations with other relevant stakeholders in European endocrinology (national and specialty societies, patient advocacy, Endo-ERN in the area of policy and advocacy).
7. To oversee ESE's involvement with other relevant bodies, including but not exclusive to the Biomed Alliance, the Initiative for Science in Europe and others.
8. To inform the engagement with our industry partners, though the Industry Partnership Board, in policy and advocacy themes of common interest.
9. To develop a policy and advocacy supportive media outreach strategy.
10. To create awareness, inform and communicate with the ESE membership on all policy and advocacy matters that impact on endocrinology, research based as well as clinical, and endocrine patient care and health in general.
11. To act as a central point of expertise for this area to ESE leadership, members and external stake holders.
12. To periodically meet with MEPs and members of EU Commission.
13. To develop a Hormone Interest group within European Parliament.

Additional notes

- All Task Force members need to be paid up members of the European Society of Endocrinology.
- Task Force members should make every effort to attend all meetings. Any member who does not attend a meeting for a year will be asked to step down, other than in exceptional circumstances.
- The Task Force will liaise with other ESE Committees as appropriate.
- All papers and minutes must be treated in strictest confidence.
- All Task Force members must act in the best interest of the Society.
- Any potential conflicts of interest should be declared at the start of the meeting or as they arise, and the member concerned should take no part in the discussion.
- The Chair should not serve a second consecutive term of office, unless there are exceptional circumstances identified by the Executive Committee.
- The Society is committed to equal opportunities and the promotion of equality, diversity and inclusion and where possible this Task Force should follow the principles of [ESE's Equality, Diversity and Inclusion Policy](#).
- Task Force membership should represent the key areas of interest; geographical spread; and gender considerations.

Current membership

Chair

Martin Reincke, Germany, co-terminous with office (President, 2021-2023).

Full members

Scientific Support:

Felix Beuschlein, Switzerland, (representing research science area) (2020-2022).

Simona Glasberg, Israel, (representing rare disease area) (2020-2022).

Josef Koehrle, Germany, (representing the environment area (EDC's) (2020-2022).

Monica Marazuela, Spain, (representing cancer area) (2020-2022).

Bulent Yildiz, Turkey, (representing obesity area) (2020-2022).

Political support:

Davide Carvalho, Portugal, (ECAS representative) (2020-2022).

Stefano Frara, Italy, (representing early-career) (2020-2022).

Francesco Giorgino, Italy, (ECAS representative) (2020-2022).

Alberto Pereira, Netherlands, (representing Endo-ERN) (2020-2022).

Manel Puig, Spain, (ESE's representative to EMA) (2020-2022).

Patrice Rodien, France, (ECAS representative) (2020-2022).

Barbara McGowan, UK, (representative of the Society for Endocrinology) (2021-2023).

Ex-officio

Jérôme Bertherat, France, co-terminous with office (President-Elect, 2021-2023).

Anton Luger, Austria, co-terminous with office (ECAS representative, 2020-2024).

UEMS Representative, Maeve Durkan (Ireland), co-terminous with office as President of the UEMS Board.

ESE Team

Helen Gregson, Chief Executive Officer, co-terminous with office.

Dirk De Rijdt, Director of Strategic Partnerships, co-terminous with office.

Mischa van Eimeren, EU Liaison.

ESE Team member responsibility: Director of Strategic Partnerships.