

The eight EULAR 2012 objectives

Guiding principle: All activities of EULAR will recognize the need for equity, access, transparency and engagement.

1. By 2012, EULAR will have strengthened activities in areas that are currently less prioritized, such as non-inflammatory and orphan diseases.
2. By 2012, musculoskeletal diseases will be recognized as a priority and “major disease” area (reflected for example by research policy, disability legislation, access to care).
3. By 2012, all EULAR stakeholders (people with arthritis, health professionals, practicing clinicians, basic and clinical scientists, industry, etc) will have further strengthened their partnership.
4. By 2012, EULAR will have increased its international partnerships (such as with ACR, AFLAR, EMEA, WHO, BJD, EU granting, etc).
5. By 2012, EULAR will be the leading source for evidence-based expertise and opinion, and will have further fostered global thought leadership, throughout the spectrum of musculoskeletal conditions.
6. By 2012, rheumatology will be among the most attractive specialties in medicine for young physicians and health professionals.
7. By 2012, EULAR will have brought on board high quality, young generation contributors in all EULAR activities.
8. By 2012, EULAR will have provided standards of care and foster access to optimal care of people with musculoskeletal conditions in Europe.