New EU Global Health Strategy - Public Consultation

Fields marked with * are mandatory.

Introduction

There have been major changes since the 2010 EU global health strategy, and so a review is now necessary.

In the past decade, we have understood, more than ever, **the many related factors affecting health** and the need to address them in a comprehensive, joined-up way. This would also enable the EU to better tackle health inequalities and fend off global threats, all based on its commitments to human rights and health equity.

Climate change and the destruction of natural habitats have increased the risk of animal viruses, which can cause pandemics. This brings the close links between the environment, animal and plant health, and human health sharply into focus (the 'One Health' approach).

There is also a better understanding of the complexity of gender's effect on health and of the link between lifestyle and nutrition; or between non-communicable diseases and mental health.

The **COVID-19 pandemic** has underlined the importance of effectively preparing for and reacting to emergencies. At the same time, it has slowed down or even reversed progress in meeting the international community's health goals set out in 2015 (the UN's Sustainable Development Goals). Most of all, it has been a call to reflect on how other EU policies, described below, can help fight global health threats.

- Health systems must be strengthened to withstand threats, and existing gaps in **international cooperation** must be closed to ensure the right to healthcare for everyone.
- A new approach to pharmaceuticals and technologies is necessary to ensure access for everyone to safe, high-quality, affordable and effective treatments, while boosting innovation to deal with neglected needs and diseases.
- **Digitalisation** is a powerful tool with huge potential to facilitate access to health and deal with global health needs. **Research** is an essential enabler as more powerful technologies become available.
- Social protection, education and skills are essential to make universal health coverage a reality and curb inequalities so that everyone has access to health services.

Finally, the global landscape has changed in the following two ways.

- 1. In a more geopolitical world, health has inevitably acquired a geopolitical dimension, linking with other policies such as trade or security. This confirms the need for a 'health in all policies' approach.
- 2. Many private and public players and initiatives have emerged, helping to tackle threats but making it more challenging to achieve an effective and coordinated approach.

As we advance our European Health Union, our international approach has been adapting to the fundamental changes outlined above. It is necessary now to set out a strategy that builds on the experience from the last decade and provides guidelines for the coming years in a complex environment. This will ensure, beyond pandemics, that the EU and its Member States can effectively improve the health of citizens, reduce health inequalities, protect against threats, and consolidate EU global leadership in health.

The new strategy should be considered together with the parallel communication on pandemic preparedness and response, which is also in preparation.

As confirmed by Eurobarometer surveys, **health is one of the topics for which EU citizens** see the greatest legitimacy for EU global action. This strategy should therefore reflect the views and concerns of the public and organisations concerned.

To provide guidelines for an updated global health strategy, this open consultation asks what policies and measures should the EU focus on and how this should be done. Each section starts with a summary of the current state of reflection in the Commission (which are not necessarily Commission positions). Respondents can then comment on these reflections and complement them.

About you

* Language of my contribution

- Bulgarian
- Croatian
- Czech
- Danish
- Dutch
- English
- Estonian
- Finnish
- French
- German
- Greek
- Hungarian
- Irish
- Italian
- Latvian
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- Maltese
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- Slovenian
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 - Academic/research institution
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 - Company/business organisation
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 - Non-governmental organisation (NGO)
 - Public authority
 - Trade union
 - Other

If you selected 'Other' in the previous question, please specify below

- Professional health organisation
- Health professional
- Civil society organisation
- International organisation
- Governmental/multilateral organisation

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* Surname

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* Organisation name

* Organisation size

- Micro (1 to 9 employees)
- Small (10 to 49 employees)
- Medium (50 to 249 employees)
- Large (250 or more)

Organisation budget (please specify what percentage is of public funds if relevant)

Transparency register number

255 character(s) maximum

Check if your organisation is on the <u>transparency register</u>. It's a voluntary database for organisations seeking to influence EU decision-making.

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* Country of origin

Please add your country of origin, or that of your organisation.

This list does not represent the official position of the European institutions with regard to the legal status or policy of the entities mentioned. It is a harmonisation of often divergent lists and practices.

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* My organisation is from/I work in (if different from country of origin)

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- Europe region (non EU)
- Middle East
- Asia
- Oceania
- Northern Africa
- Sub-Saharan Africa
- North America
- Latin America and the Caribbean

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Part 1. Stakeholder input

The EU strategy should provide more structural and effective channels of dialogue with the public and stakeholders to ensure their views are fully considered and help adapt to a fast-changing environment. The annual Global Health Policy Forum (held on 21 June 2022 as part of the European Development Days) is an opportunity to collect input for this consultation and follow up the strategy's implementation after it has been adopted.

1. What are your ideas to improve stakeholder input and their channels to follow up the strategy's implementation?

From the perspective of those working in improving cancer care across Europe and beyond, ECO would welcome the opportunity to input to the application of the Strategy throughout its implementation period, alongside other impacted disease communities.

Particular value could be predicted, by the chance to establish linkages with the wide variety of activities that take place in global health within an active multi-stakeholder setting.

An example, in the cancer sector, would be to point out the connections available between the EU's activities on HPV cancer elimination, and global efforts towards the WHO's cervical cancer elimination strategy. This is a case study area where the EU can play a strong international leadership role in global health policy by demonstrating what has been achieved via EU and national instruments, spreading learning and giving inspiration.

Another example, might be the experience the EU has gained in working with stakeholder organisations, such as the European Cancer Organisation, in responding to the health needs of people in situations of war, such as in Ukraine.

However, such potential linkages will be less likely to be pointed out if opportunities for that exchange are not provided.

To facilitate such exchange ECO suggest an annual hybrid event to share with stakeholder organisations progress on the strategy implementation and to give meaningful opportunity for stakeholder input.

The easy-to-use Have Your Say consultation portal could also be used on a more regular basis and not only for legislative initiative i.e. to take input during strategy implementation periods.

ECO suggest improving stakeholder input on the implementation of the strategy with:

We would also encourage region-specific stakeholder involvement processes.

Part 2. Defining priorities

Considering the diverse issues outlined above, the EU global health strategy must identify a manageable number of key priorities. The priorities described below are interconnected at times, reflecting the complex

nature of the issues addressed. However, each priority deserves individual attention. Beyond the importance of ensuring proper pandemic prevention, preparedness and emergency response, four priority areas appear key to structure our strategy.

- Effective and resilient health systems are essential to tackle health inequalities, being prepared for health threats and responding to them effectively. This requires investment in the health workforce, community health systems, inclusive and quality services, and public health capacities. Effective and resilient health systems also need to leverage digitalisation and give timely access to affordable and innovative pharmaceuticals and other medical countermeasures.
 Countries are generally more resilient to health threats when the overall population is in good health. This means stepping up efforts to achieve the health-related UN Sustainable Development Goals. Universal health coverage is a critical objective in this regard.
- A multi-sectoral, evidence-based 'One Health' approach is essential to mitigate the main risks from interactions between humans, animals and the environment, including the threat of antimicrobial resistance.
- Health issues have links with and are affected by many other policy areas. This means health has to be part of those policies (e.g. trade, global supply chain resilience, strategic autonomy) that are essential in helping achieve health policy objectives. The EU should map all single market and external tools that could be activated to help meet its global health goals and set out the conditions for their use.

2. What priority should be given to the areas described above?

	Low	Medium	High
Improve pandemic prevention, preparedness and response	0	0	۲
Strengthen health systems	0	0	۲
Accelerate progress in achieving the health-related UN Sustainable Development Goals, in particular universal health coverage	0	0	۲
Apply the 'One Health' approach comprehensively	0	0	0
Ensure global health is part of all policies, including mapping and activating policies and tools that can contribute to health goals	0		۲

3. Name five policies that have the most important impact on health goals in your view, and explain why.

1 – Achieving Cervical Cancer Elimination
Pursuing the elimination of cervical and other HPV cancers, can serve as a galvanising unifier of countries and inspire a new generation in the benefits of global health cooperation.

2 – Global action on cancer prevention

In areas such as tobacco control, reducing the harmful use of alcohol, and environmental quality, there is a powerful case for countries to work together, sharing approaches and setting international goals.

3 – International cooperation on health research

EU is leading the world in such initiatives as the creation of a European Health Data Space. ECO considers there is a case for assisting the achievement of greater global cooperation in the area of health data sharing.

4 - Common action on behalf of excluded and vulnerable groups

Europe has a duty to promote greater consciousness of the need for excluded and vulnerable groups to be better considered and treated within health systems

5 – EU-WHO Cooperation

More might be done in this area to increase the structural forms of cooperation between the EU and WHO.

4. What other priorities are more important than those described above? Why?

Which of the issues above should be de-prioritised as a result?

5. What are the main obstacles to achieving these priorities? What measures need to be taken to overcome these obstacles?

- 1. Mechanisms for cooperation between governments on health still not operating to a level of high effectiveness
- 2. Lack of formal mechanisms for stakeholder organisations to partner meaningfully with governments on achieving global health policy aims

- **3.** In prevention, a power imbalance between the economic interests of industry (e.g. good, alcohol and tobacco) and public health interests
- 4. Competition for resource and investment. Greater guidance needed in this area, including via initiatives such as the WHO Best Buys approach.

Part 3. Ensuring robust governance

EU leadership has played a major role in fighting the COVID-19 pandemic in the EU and beyond, especially through the Team Europe approach. However, the EU's global impact can be boosted further, not least given its substantial financial contributions to global health. EU leadership should be strengthened in three ways, together with more effective communication.

The first way, which could have a big impact, is to lead by example and apply an effective and comprehensive health policy within our own borders . Showing we meet our own responsibilities is essential to be credible in our external action—where we ask partners to make significant efforts. There are areas

where we could improve and boost its credibility. Examples include: (i) better measures against antimicrobial resistance; (ii) stepping up efforts to ensure universal access to safe, accessible, affordable and innovative pharmaceuticals and technologies to tackle infections and non-communicable diseases (including neglected diseases); (iii) an improved pandemic prevention, preparedness and response framework; and (iv) increasing digitalisation.

	Low	Medium	High	
Universal access to health care	0	0	۲	
Pandemic prevention, preparedness and response	0	0	۲	
Vaccination levels	۲	0	0	\mathbf{O}
Anti-microbial resistance	۲		•	
Safe, affordable, accessible and innovative pharmaceuticals	0	0	۲	
Digitalisation		0	۲	
Following robust bioethics principles	0	0	۲	

6. The importance of leading by example in each of these areas is...?

7. In what other areas should the EU lead by example? Why? Give a maximum of three areas.

The EU could lead by example in global health policy in some of the following areas:

- Achieving Cervical Cancer Elimination globally, by demonstrating success from its own HPV cancer elimination campaign, as set out in Europe's Beating Cancer Plan
- Achieving a Tobacco Free generation, as set out in Europe's Beating Cancer Plan
- Succeeding in achieving Member State agreement in areas of cancer and NCD prevention such as on;
 - Alcohol labelling
 - Food labelling
 - Tobacco excise
 - Regulation of novel tobacco products
 - Air quality regulation

In doing so, demonstrating the value of measuring inequalities to make investment more targeted e.g. via the EU Cancer Inequalities Registry.

8. How could this coordination be strengthened?

ECO supports data-led policy. The EU can demonstrate leadership globally in how data collection and policy monitoring mechanisms can bring about continuous improving policies in cancer.

An example is in Europe's Beating Cancer Plan which includes a multi-faceted Cancer Inequalities Registry. This provides the promise that policy can be better targeted towards the combat of inequalities highlighted within such a registry – both between countries and within countries, including with respect to social disparities related to such factors as age, gender and marginalised status.

The European Commission should consider supporting the coordination of its global health policy with similar data and monitoring exercises. This might include opening up the approach developed by the European Centre for Disease Prevention and Control for vaccine tracking during the COVID-19 pandemic to global vaccine priorities.

The Covid-19 pandemic demonstrated how important global cooperation is with respect to the management of international health crisis situations. HERA require a strong international engagement strategy.

Do you agree or disagree that the EU needs to fully participate in international forums and initiatives?

- Disagree
- Neutral
- Agree

9. How should the EU participate? In what forums and initiatives?

The EU should take a pragmatic and open approach to helping problem solve and unify in the field of global health. ECO suggests:

- Regular events on particular global health challenges that can connect EU member state governments, non state actors and global governments to raise awareness and identify solutions to common challenges. An example in this respect could include the shared fight against vaccine misinformation
- Making EU funding mechanisms more useable in respect to global health priorities. Processes for accessing EU funding should be continually reviewed for useability, especially for resource constrained NGO actors, who are typically the most nimble and adaptable for meeting urgent health needs, as demonstrated during the period of war in Ukraine.

In the context of a new WHO pandemic treaty, EU should adopt a particular leadership role facilitating high level and multi-stakeholder conversation

10. How can the EU support multilateralism with the WHO at its centre? (1000 characters maximum)

11.

Multilateralism is at the core of EU foreign policy. Here, the EU should include health as an important cross-cutting policy issue to reshape and orientate the global health agenda.

Based on the European model, it would be necessary to develop an international framework under the World Health Organisation with leadership, decision-making processes, binding decisions for its members and openness to the participation of non-state actors

12. How can we best engage bilateral and plurilateral partners? Who are the key partners?

ECO consider Non State Actor organisations as key organisations to support the achievement of global health policy goals. Often they are highly connected to change making individuals on the ground, such as healthcare professionals and others.

We recommend regular engagement fora and mechanisms to bring about their participation in the Strategy Implementation, as expressed elsewhere in our responses to this consultation.

philanthropic organisations and other private and public players and initiatives?

Part 4. Financing our strategy effectively and efficiently

Considerable financing is clearly necessary to address health challenges and problems – an issue unto itself given the resource context in the EU and abroad. The EU should improve coordinating and monitoring its spending to ensure transparency, consistency, proportionality and effectiveness in delivering its health policy goals.

14. Do you agree or disagree that there should be a more comprehensive mapping of all actors and finance strands in the EU and its Member States to monitor financial efforts and results?

- Disagree
- Neutral
- Agree

15. Do you agree or disagree that there should be a mapping of all global health players and investments, their goals, results and other details, such as thematic or geographic goals?

- Disagree
- Neutral
- Agree

16. Please let us know what other suggestions you have to improve transparency, consistency, proportionality and effectiveness in delivering our health policy goals.

Part 5. Other comments and ideas

17. Please share any other comments or ideas

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RAFT- ASSOR