

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
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- Finnish
- French
- German
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* I am giving my contribution as

- Academic/research institution
- Business association
- Company/business organisation
- Consumer organisation
- EU citizen
- Environmental organisation
- Non-EU citizen
- 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

* First name

Anna Lisa

* Surname

Mandorino

* Email (this won't be published)

a.mandorino@cittadinanzattiva.it

* Organisation name

255 character(s) maximum

* 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 [transparency register](#). It's a voluntary database for organisations seeking to influence EU decision-making.

* 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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- Yemen
- Zambia

- Democratic Republic of the Congo
- Denmark
- Lesotho
- Liberia
- Saint Helena
- Ascension and Tristan da Cunha
- Saint Kitts and Nevis
- Saint Lucia
- Zimbabwe

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

- EU member state
- 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?

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The story showed in particular during the COVID-19 pandemic, in a tangible way, the great reforming force of civic society organizations, capable of responding promptly to new needs.

On the other hand, however, civic associations have not always been involved by institutions in the definitions and implementation of the NRRPs, as emerged in our survey conducted in 18 EU countries: questioning 38 PAGs resulted in most cases, they have not been involved at all (35%) or were not informed of these processes 22%, while 35% responded positively. Even if 55% confirmed that their association had provided civic recommendations .

We suggest constant dialogue, that is, making dialogue with all stakeholders ordinary and not episodic, recognizing the contribution that civic associations can also make to protect health as a common good. In summary, demand and use the participation tool in a more structured way.

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.

For a definition of health systems, see [WHO/Europe | Health systems](#).

For Sustainable Development Goals see [Sustainable Development Goals \(SDG 3\) | United Nations Western Europe \(unric.org\)](#).

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

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

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

1000 character(s) maximum

- 1) Vaccination policies are supported by a life course immunization approach to balancing the attention to the paediatric/adult, mandatory/recommended, anti-covid/routine vaccination.
- 2) Access to ATMPs to guarantee a therapeutic response to those pathologies that currently do not find an answer in conventional therapies.
- 3) Fighting AMR that is a major global threat balancing human, and animal health with attention to environmental issues.
- 4) The focus on prevention policies, not only primary prevention, investing in the empowerment of the citizens for a correct lifestyle, investing in health literacy and global health culture, and investing in a correct dialogue with professionals to prevent, better manage, and reduce the burden of chronic diseases.
- 5) The full development of the health data space through a fully transparent and ethical ecosystem but also thanks to the capacity of citizens to read health data useful for patients and communities.

4. What other priorities are more important than those described above? Why? Which of the issues above should be de-prioritised as a result?

1000 character(s) maximum

A policy that is a priority for us is the fight against inequalities in access to health. As far as we are concerned, this principle must follow transversal objectives and keep in mind the intersectional differences of citizens and patients from Europe and beyond.

We ask that the policies against inequalities take into account gender differences (see gender medicine), the differences in access to care that those who live in rural or inner areas have compared to those who live in urban areas, the related differences to political, cultural and economic contexts.

Regarding the priorities you have indicated, we believe that none of them should be deprioritized.

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

1000 character(s) maximum

Globalization has broken down barriers apparently impossible to overcome and favored the reduction of inequalities from various points of view without, however, addressing essential issues such as access to health as a fundamental human right (WHO); it has contributed to the accentuation of inequalities (social and health) as the Covid 19 pandemic has demonstrated.

Therefore starting from the different levels of schooling and education that are an obstacle to a conscious approach to health issues.

The difficulties faced by those living in inner areas or rural areas in accessing care.

The difficulties of those who live in countries where health is not public and therefore the right to be treated depending on the economic condition of the patient, but also the access to civil rights in general for those who do not live in properly democratic contexts.

It is important to interconnect the issue of health with sectorial policies, enforcing rights starting from civil rights.

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.

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

	Low	Medium	High
Universal access to health care	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

Pandemic prevention, preparedness and response	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Vaccination levels	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Anti-microbial resistance	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Safe, affordable, accessible and innovative pharmaceuticals	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Digitalisation	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Following robust bioethics principles	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

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

500 character(s) maximum

In our opinion, there are two areas in which the European Union should lead by example: in foreign policy which should be a common foreign policy and not fragmented by the various foreign policies of the various member states.
A policy of welcoming migrants that should be a policy of true inclusion.
Reinforce a common global health policy across Europe considering the pandemic experience is now essential.

The second way to strengthen EU leadership is to improve coordination so as to speak with one voice— together with Member States, the European Parliament and stakeholders – at global, national and regional level.

8. How could this coordination be strengthened?

1000 character(s) maximum

More coordination among the three EU institutions: Parliament, Council, and Commission.
But above all a major sense of cooperation abandoning nationalism among the Member States.
From the citizen perspective, we aim for greater respect and fraternity renouncing egoism.

The third way to strengthen EU leadership is by ensuring the appropriate and full participation of the EU in international forums and initiatives, including in decision-making. This builds on the EU's commitment to multilateralism.

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

- Disagree
- Neutral
- Agree

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

1000 character(s) maximum

The European Union is weak since it's a hybrid institution, without changing its treaties it is hard to believe that the EU can have a role in other forums or initiatives as the G7 or in the G20 where maybe it would be important to have a voice of the whole European Union.

The WHO will always play a key role in introducing guidelines in the health sector at the international level, but the relationship between the Union and the WHO must not be of subjection but of mutual collaboration and based on constant listening to the global civil and social structure.

Furthermore, the EU must ask the WHO for a constantly transparent approach both in the issue of recommendations and in the management of the funds it receives, in particular with the clarification of the origin of the funds invested in the health sector in order to strengthen the confidence of European citizens in this crucial United Nations agency.

Global health requires a strong multilateral approach. This approach must be further strengthened by making the WHO and global health initiatives more efficient, with effective governance and adequate financing, and ensuring full capacity for implementation. This includes a binding pandemic instrument and strengthened international health laws. An improved multilateral approach should ensure transparency, accountability, effectiveness—as well as enforceability of rules.

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

1000 character(s) maximum

Global health requires a strong multilateral approach. This approach needs to be further strengthened by making WHO and global health initiatives more efficient, with effective governance, guaranteeing more transparency and accountability in the decision-making process.

The EU should have a multi-stakeholder approach to One health in the policies to be implemented by promoting a constant dialogue between the European and international institutions (WHO), transposing and /or suggesting, where necessary, the guidelines to be harmonized.

To further support multilateral work, the new strategy should strengthen bilateral cooperation (with non-EU countries) and plurilateral cooperation (with groups of countries, including the G7, G20 and OECD, and develop strategic health partnerships with other regions in the world). This cooperation should be based on mutual responsibility and effectiveness. Cooperation with the US and the EU-African Union Summit of February 2022 have both laid the foundation for improved partnerships in health.

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

1000 character(s) maximum

Bilateral and plurilateral partners can be involved by increasing the opportunities for discussion and agreement with European institutions.

All the partners mentioned so far are important: WHO together with other United Nations agencies, just think of FAO for food safety and UNICEF for children's health.

Nor should we neglect the relationship with those countries that aspire to EU membership and the neighbors in the Mediterranean.

Last but not least, strengthen relations with the developing countries so as to strengthen the management and prevention of global pandemics but also to promote healthy lifestyles aimed at preventing chronic diseases on a global level.

Global philanthropic organisations take an increasing place in the dialogue on global health discussions, providing more funding than many countries do. A wide range of private and public players and global health initiatives have also emerged. The new strategy should ensure that EU and global efforts complement each other and avoid fragmentation and duplication.

13. How can we ensure efficiency and effectiveness when working with philanthropic organisations and other private and public players and initiatives?

1000 character(s) maximum

To foster relationships with philanthropic organizations and NGOs, first and foremost it is necessary to put into practice strategies and tools for real listening.

In terms of subsidiarity, these organizations are very close to citizens and patients, which is why they know their needs well and are certainly the spokespersons of the most urgent needs.

In a reciprocal way as we ask for accountability and transparency from the EU institution, it must expect transparency from these organizations in terms of the provenance and origin of the funds they receive, but above all in the use of the resources of these organizations.

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.

1000 character(s) maximum

There should be an inseparable binomial transparency accountability, which means that European institutions give an account of the work in an intelligible way.

For example, during the pandemic, having secreted the contracts for the supply of vaccines left doubts about it. Idem for the fact that WHO created a foundation that raised funds more from privates more than from public donors.

The European Institutions should act as guarantors of transparency and accountability.

Part 5. Other comments and ideas

17. Please share any other comments or ideas

2000 character(s) maximum

- 1) Reinforcing the role and involvement of actors of the civil society and Patient Advocacy Groups who can be called in support of the institutions and for the benefit of the communities, towards a more resilient Healthcare Systems. So we really appreciate the recent HERA decision to implement a civil society forum as well as we appreciate the Patients' and Consumers' Working Party at EMA. We would like to see the same commitment in encouraging the member States in doing the same.
- 2) Almost three years after the first wave of the pandemic, we still perceive the urgent need to better address the consequences of the Covid-19. Priority attention to non-Covid patients, especially oncological and chronic, in order not to lose the progress achieved in the last 20 years in terms of prevention and treatment. Ease of access to health services and medicines to reduce inequalities and "leave no one behind". Investments to have more resilient health services and to support research for more equitable access to care and to address unmet health needs.

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