

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
- Lithuanian
- Maltese
- Polish
- Portuguese
- Romanian
-

- Slovak
- Slovenian
- Spanish
- Swedish

* 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

Panagiotis

* Surname

Chaslaridis

* Email (this won't be published)

panagiotis.chaslaridis@efanet.org

* 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.

28473847513-94

* 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.

- | | | | |
|---|--|-------------------------------------|--|
| <input type="radio"/> Afghanistan | <input type="radio"/> Djibouti | <input type="radio"/> Libya | <input type="radio"/> Saint Martin |
| <input type="radio"/> Åland Islands | <input type="radio"/> Dominica | <input type="radio"/> Liechtenstein | <input type="radio"/> Saint Pierre and Miquelon |
| <input type="radio"/> Albania | <input type="radio"/> Dominican Republic | <input type="radio"/> Lithuania | <input type="radio"/> Saint Vincent and the Grenadines |
| <input type="radio"/> Algeria | <input type="radio"/> Ecuador | <input type="radio"/> Luxembourg | <input type="radio"/> Samoa |
| <input type="radio"/> American Samoa | <input type="radio"/> Egypt | <input type="radio"/> Macau | <input type="radio"/> San Marino |
| <input type="radio"/> Andorra | <input type="radio"/> El Salvador | <input type="radio"/> Madagascar | <input type="radio"/> São Tomé and Príncipe |
| <input type="radio"/> Angola | <input type="radio"/> Equatorial Guinea | <input type="radio"/> Malawi | <input type="radio"/> Saudi Arabia |
| <input type="radio"/> Anguilla | <input type="radio"/> Eritrea | <input type="radio"/> Malaysia | <input type="radio"/> Senegal |
| <input type="radio"/> Antarctica | <input type="radio"/> Estonia | <input type="radio"/> Maldives | <input type="radio"/> Serbia |
| <input type="radio"/> Antigua and Barbuda | <input type="radio"/> Eswatini | <input type="radio"/> Mali | <input type="radio"/> Seychelles |

- Argentina
- Armenia
- Aruba
- Australia
- Austria
- Azerbaijan
- Bahamas
- Bahrain
- Bangladesh
- Barbados
- Belarus
- Belgium
- Belize
- Benin
- Bermuda
- Bhutan
- Bolivia
- Bonaire Saint Eustatius and Saba
- Bosnia and Herzegovina
- Botswana
- Bouvet Island
- Brazil
- British Indian Ocean Territory
- British Virgin Islands
- Brunei
- Bulgaria
- Ethiopia
- Falkland Islands
- Faroe Islands
- Fiji
- Finland
- France
- French Guiana
- French Polynesia
- French Southern and Antarctic Lands
- Gabon
- Georgia
- Germany
- Ghana
- Gibraltar
- Greece
- Greenland
- Grenada
- Guadeloupe
- Guam
- Guatemala
- Guernsey
- Guinea
- Guinea-Bissau
- Guyana
- Haiti
-
- Malta
- Marshall Islands
- Martinique
- Mauritania
- Mauritius
- Mayotte
- Mexico
- Micronesia
- Moldova
- Monaco
- Mongolia
- Montenegro
- Montserrat
- Morocco
- Mozambique
- Myanmar/Burma
- Namibia
- Nauru
- Nepal
- Netherlands
- New Caledonia
- New Zealand
- Nicaragua
- Niger
- Nigeria
- Niue
- Sierra Leone
- Singapore
- Sint Maarten
- Slovakia
- Slovenia
- Solomon Islands
- Somalia
- South Africa
- South Georgia and the South Sandwich Islands
- South Korea
- South Sudan
- Spain
- Sri Lanka
- Sudan
- Suriname
- Svalbard and Jan Mayen
- Sweden
- Switzerland
- Syria
- Taiwan
- Tajikistan
- Tanzania
- Thailand
- The Gambia
- Timor-Leste
- Togo

- Heard Island and McDonald Islands
- Burkina Faso
- Burundi
- Cambodia
- Cameroon
- Canada
- Cape Verde
- Cayman Islands
- Central African Republic
- Chad
- Chile
- China
- Christmas Island
- Clipperton
- Cocos (Keeling) Islands
- Colombia
- Comoros
- Congo
- Cook Islands
- Costa Rica
- Côte d'Ivoire
- Croatia
- Cuba
- Curaçao
- Cyprus
- Czechia
- Honduras
- Hong Kong
- Hungary
- Iceland
- India
- Indonesia
- Iran
- Iraq
- Ireland
- Isle of Man
- Israel
- Italy
- Jamaica
- Japan
- Jersey
- Jordan
- Kazakhstan
- Kenya
- Kiribati
- Kosovo
- Kuwait
- Kyrgyzstan
- Laos
- Latvia
- Lebanon
- Norfolk Island
- Northern Mariana Islands
- North Korea
- North Macedonia
- Norway
- Oman
- Pakistan
- Palau
- Palestine
- Panama
- Papua New Guinea
- Paraguay
- Peru
- Philippines
- Pitcairn Islands
- Poland
- Portugal
- Puerto Rico
- Qatar
- Réunion
- Romania
- Russia
- Rwanda
- Saint Barthélemy
- Saint Helena, Ascension and Tristan da Cunha
- Samoa
- San Marino
- Sao Tome and Principe
- Saudi Arabia
- Senegal
- Serbia
- Seychelles
- Sierra Leone
- Singapore
- Slovakia
- Slovenia
- South Africa
- South Korea
- South Sudan
- Spain
- Sri Lanka
- Sudan
- Suriname
- Sweden
- Switzerland
- Taiwan
- Tajikistan
- Tanzania
- Thailand
- Timor-Leste
- Timor
- Togo
- Tokelau
- Tonga
- Trinidad and Tobago
- Tunisia
- Turkey
- Turkmenistan
- Turks and Caicos Islands
- Tuvalu
- Uganda
- Ukraine
- United Arab Emirates
- United Kingdom
- United States
- United States Minor Outlying Islands
- Uruguay
- US Virgin Islands
- Uzbekistan
- Vanuatu
- Vatican City
- Venezuela
- Vietnam
- Wallis and Futuna
- Western Sahara
- Yemen
- Zambia

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

* 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

The Commission will publish all contributions to this public consultation. You can choose whether you would prefer to have your details published or to remain anonymous when your contribution is published. **For the purpose of transparency, the type of respondent (for example, 'business association', 'consumer association', 'EU citizen') country of origin, organisation name and size, and its transparency register number, are always published. Your e-mail address will never be published.** Opt in to select the privacy option that best suits you. Privacy options default based on the type of respondent selected

* **Contribution publication privacy settings**

The Commission will publish the responses to this public consultation. You can choose whether you would like your details to be made public or to remain anonymous.

- Anonymous**
Only organisation details are published: The type of respondent that you responded to this consultation as, the name of the organisation on whose behalf you reply as well as its transparency number, its size, its country of origin and your contribution will be published as received. Your name will not be published. Please do not include any personal data in the contribution itself if you want to remain anonymous.
- Public**
Organisation details and respondent details are published: The type of

respondent that you responded to this consultation as, the name of the organisation on whose behalf you reply as well as its transparency number, its size, its country of origin and your contribution will be published. Your name will also be published.

I agree with the [personal data protection provisions](#)

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?

1000 character(s) maximum

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 checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input 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

From a prevention and health outcomes perspective, the most important policy for health is the adoption of a genuine health-in-all policies approach. Within it, there are several policy areas that are crucial for health goals. These include:

1. Health system strengthening and development: increase the number and quality of health facilities and workforce in and outside the EU through aid
2. Pharmaceuticals: research, development, authorisation and access to the right medicine at the right time
3. Environmental protection and climate change actions: especially those policies addressing air pollution, biodiversity loss and adverse climate events affecting health i.e. heatwaves, wildfires, floods
4. Trade agreements: requiring healthy working conditions for employees outside EU, granting health and labour protection
5. Tobacco and smoking: production and commercialisation of tobacco and smoking products as well as actions to minimise exposure to smoke

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

Tackling the climate emergency, as it affects health and life in a variety of ways and is predicted to worsen, and the adverse health effects of globalisation.

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

1000 character(s) maximum

Political courage to put health before business and the resources to shift healthcare systems from care to prevention.

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 checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input 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

1. Stakeholder engagement for health, for example through patient involvement in health policies and delivery
2. Adaptation to climate change addressing efforts to protect the most vulnerable in society
3. Tobacco control

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

Through a global health strategy, action plan and framework that is co-developed with all the parties listed above through a health-in-all-policies approach and ensuring policy coherence.

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

Make the most of the health structures that existing within OECD and the Council of Europe as closer to the EU, and multilaterally, with all the health-related UN agencies and bodies such as N/AWHO, UNICEF, UNFPA, UNDP and public-private initiatives such as GAVI.

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

Support comes through a variety of ways: firstly, through an increased contribution to WHO and the rest of UN agencies and bodies focused on health (see question 10) to enhance their means and capacity to monitor and response. Secondly, by proposing and negotiating global health issues within the multilateral democratic structures such as WHA and ECOSOC. Thirdly, expanding technical and agency cooperation beyond the richest countries such as FDA, on medicines authorisation and HTA for example.

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

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

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

Part 5. Other comments and ideas

17. Please share any other comments or ideas

2000 character(s) maximum

Contact

Francisco.Perez-Canado@ec.europa.eu