We are entering an era in which nothing can be treated in isolation, and public policy needs to acknowledge and respond to growing complexity and to the impact many policies exert on public health.

In June 2018, coinciding with my nomination as President, EPHA celebrated its long-anticipated 25th anniversary in the good company of members and long-time supporters, including European Commission officials, current and former MEPs, and our civil society partners. Together we looked back at some of the key achievements that continue to shape public health in Europe, such as the Tobacco Products Directive, the Cross-Border Patients' Rights Directive and EU legislation on medical devices and clinical trials.

While the significance of these examples cannot be underestimated, at the same time there was a feeling that certain other things had not changed much: for example, prevention and health promotion activities still remain vastly underfunded across the EU, and despite a growing, unequivocal evidence base, it is as difficult as it ever was in the past to convince policymakers to think long-term and invest in public health interventions.

Creating closer links between Brussels and the national and local level is one of the tools at our disposal. In 2018, we intensified EPHA’s efforts of working with members and partners based in the Member States, and the feedback has been overwhelmingly positive: national members would like to get involved and build bridges. We thus organised a number of workshops to discuss barriers to accessing quality healthcare and the ongoing injustices experienced by disadvantaged populations, we involved members from across Europe in our project work on air pollution triggered by diesel cars, and we built up a Strategic Network on Antimicrobial Resistance.
that includes many national experts. At the end of the year, we invited EPHA member representatives based in non-neighbouring countries, including the WHO European Region, to share their thoughts on how our EU level work could be translated into successful advocacy strategies at national level. Encouragingly, participants identified many avenues for action and proposed stronger collaborations with cities, municipalities, regions and grassroots leaders.

We also stepped up our presence at national meetings and conferences and EPHA staff presented our positions from Estonia to Portugal to Greece and Poland.

The principles of the European Pillar of Social Rights, proclaimed over a year ago in Gothenburg, provide one avenue for initiating a step-change to find a better balance between economic and social policies. Health and social policies are often intertwined, and we encourage EU policymakers to identify ways of implementing a “Health in All Policies” approach that does the concept justice. We are entering an era in which nothing can be treated in isolation, and public policy needs to acknowledge and respond to growing complexity and to the impact many policies exert on public health.
Into the future
Why public health must engage with societal trends

I am proud to be taking over the leadership of an organisation that has achieved so much over the past quarter of a century. As a former member representative, I was myself actively involved in advocacy actions and followed EPHA’s transition very closely. For me the great thing about public health is that it is never stands still: what makes it difficult to grasp for some people is precisely what makes it exciting.

Responding to societal trends is one feature that characterises public health, as not doing so is not an option: too much is at stake. 2019 is a decisive year as we eagerly await the outcomes of the European Parliament elections followed by the EU institutional renewal process. Will health win out or be further marginalised? Will Europe’s fear mongers and populists triumph, or will we see a return to respectful, common sense politics? And what will happen to the country I was born and raised in, the United Kingdom? These are all big questions and many of us are worried about what the results might mean for the future of Europe.

The ongoing digitalisation of society is certainly one trend that appears to be irreversible, whether we like it or not. It has already altered our habits from the way we communicate to how we obtain news to how we shop and make transaction. But whereas until recently, we still marvelled at the conquest of devices such as smartphones, the next wave of technology will depend on the collection, storage, analysis and processing of vast amounts of Big Data that can serve as raw material for solutions infused with artificial intelligence (AI). While this could lead to more tailored treatment options, improve accuracy of diagnosis and put an end to wasteful health system practices, we need to exercise caution. A world in which health and other personal data (e.g. social media entries) are freely combined is dangerous. This is not only because the quality of much of the data is bound to be poor and questionable, but also because it erases the human, context-specific elements that shape our health. Worse still, if eligibility decisions should be based purely on data, this could further marginalise those who lack the skills, literacy and knowledge to lead healthy lives. Ultimately, individualism would reign over collective interventions such as prevention and health promotion.

We cannot let this happen and must be extra vigilant: advocating and defending a public health vision will become more important than ever and we must
become part of conversations we might not be comfortable with, such as the digitalisation of society at large, climate change, and new trade agreements. Health is deeply personal and the public health community must defend human rights and values.

Luckily, 2019 will give us an opportunity to turn the page and bring these views to the new European Parliament and European Commission officials. That we are slowly but surely moving in the right direction is reflected by the fact that health was mentioned for the first time in the new CAP proposal released in 2018, while EPHA continued to highlight that what and how we consume food exerts an important influence on its production. We also set up a new Marketing Alliance to protect children from the advertising of unhealthy foods. There are many other examples that highlight our success: EPHA’s annual Access to Medicines Forum, “Trailblazers: routes to better and affordable medicines by 2025,” created a dialogue between policymakers, academia, industry, regulators, payers and civil society, and our HTA paper provided a valuable contribution to the ongoing discussion from the patients’ perspective. Our “Joining the Dots” event, held at the European Parliament, emphasised the links between policies for tackling AMR and pharmaceuticals in the environment. EPHA’s paper on the “Roma life expectancy gap” uncovered vital evidence that highlights the urgent need to improve the post-2020 EU Roma Framework as part of a renewed effort to reduce the health inequalities experienced by marginalised groups. EPHA presented its vision for inclusive digital health at three national conferences, and our #EU4Health partnership campaign went from strength to strength, with presentations held at the European Health Forum Gastein and the EUPHA conference in Ljubljana.

We must seize the opportunity to create a more health-friendly Europe now – we owe it to the younger generation that boldly stands up to claim its rights.

FIONA GODFREY
Secretary General
Brussels, January 2019
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Our Year in Numbers

- 2 new members
- 150mln people reached online & offline
- 1000 people attended over 10 events
- 16500+ followers (Twitter, FB, Linkedin)
- 18 briefings, position papers and reports
- 36 letters, statements & press releases
Our Members

**PAN EUROPEAN ORGANISATIONS:** Active - Sobriety, Friendship and Peace (ACTIVE), AGE Platform Europe (AGE), Association for Natural Medicine in Europe (ANME), Association of European Cancer Leagues (ECL), Eurochild, European Academy of Paediatrics (EAP UEMS SP), European AIDS Treatment Group (EATG), European Alcohol Policy Alliance (Eurocare), European Association for Pulmonary Hypertension (PHA Europe), European Association for the Study of the Liver (EASL), European Association of Hospital Pharmacists (EAHP), European Association of Senior Hospital Physicians (AEMH), European CanCer Organisation (ECCO), European Central Council of Homeopaths (ECCH), European Chiropractors’ Union (ECU), European Committee for Homeopathy (ECO), European Council of Doctors for Plurality in Medicine (ECPM), European Council of Optometry and Optics (ECOO), European Federation of Homeopathic Patients’ Associations (EFHPA), European Federation of National Organisations working with the Homeless (FEANTSA), European Federation of Patients’ Associations for Anthroposophic Medicine (EFPAM), European Heart Network (EHN), European Hematology Association (EHA), European Institute of Women’s Health (EIWH), European Medical Students’ Association (EMS), European Network for Smoking Prevention (ENSP), European Network of Medical Residents in Public Health (Euronet MRPH), European Pharmaceutical Students’ Association (EPSA), European Region of the World Confederation for Physical Therapy (ER-WCPT), European Respiratory Society (ERS), European Scientific Working Group on Influenza (ESW), European Shiatsu Federation (ESF), European Society of Intensive Care Medicine (EICM), European Specialist Nurses’ Organisation (ESNO), Federation Europeenne des Medecins Salarieé / European Federation of Salaried Doctors (FEMS), Health Action International – Europe (HAI), International Council of Medical Acupuncture and Related Techniques (ICMART), International Diabetes Federation – European Region (IDF Europe), International Federation of Anthroposophical Medical Associations (IVAA Liaison Office), International Federation of Medical Students’ Associations (IFMS), Medecins du Monde – Doctors of the World International Network Head Office (MdM), Mental Health Europe-Santé Mentale Europe (MHE-SME), Safe Food Advocacy Europe (SAFE), Smoke Free Partnership (SFP), The Association of School of Public Health in the European Region (ASPER), Universal Education Foundation (UEF)

**NATIONAL LEVEL:** **BULGARIA:** Bulgarian Association for Patients’ Rights Defence (BAZP (BAPRD)). **CROATIA:** Life Quality Improvement Organisation (Flight/LET). **CYPRUS:** Cyprus Turkish Medical Association (CTMA). **DENMARK:** International Medical Cooperation Committee Denmark (IMCC Denmark). **ESTONIA:** Tallinn Children’s Hospital Foundation (Tallinn CHF). **FINLAND:** Suomen ASH. **FRANCE:** Association Nationale de Prévention de l’Alcoolisme et Addictologie (ANPAA), France Assoc Santé. **GREECE:** Programmes of Development of Social Support and Medical Co-Operation (PRAKSI). **HUNGARY:** Hungarian Alliance
of Patient Organizations (BEMOSZ-HAPO). **IRELAND:** Alcohol Action Ireland (AAI). **ITALY:** Associazione Italiana Chiropractici (AIC). **LITHUANIA:** Union of Lithuanian Health Psychologists (ULHP). **MALTA:** Malta Health Network (MHN). **POLAND:** Polish Society for Health Programs (PSHP-PTPZ). **PORTUGAL:** Associação Nacional dos Médicos de Saúde Pública (AMSP). **ROMANIA:** Romanian Health Observatory (RHO); Romtens Foundation (ROMTENS). **SLOVAKIA:** Platform for Support of Health of Disadvantaged Groups (PPZZG). **SLOVENIA:** Center za zdrave in Razvoj Murska Sobota (CZR Murska Sobota); No Excuse Slovenia/Brez izgovora Slovenija. **SPAIN:** Fundación de Ciencias del Medicamento y productos sanitarios (FUNDAMED). **SWEDEN:** IOGT-NTO. **THE NETHERLANDS:** Wemos Foundation (WEMOS). **UNITED KINGDOM:** British Heart Foundation Centre on Population Approaches for Non-Communicable Disease Prevention (BHFCPNP); Cancer Research UK; Faculty of Public Health (FPH); Health Equities Group (HEG); Royal College of Nursing (RCN); Royal College of Physicians of London (RCP); Scottish Health Action on Alcohol Problems (SHAAP); The Health and Europe Centre, UK.

**WHO EUROPEAN REGION – NON EU:** **azerbaijan:** Center Women and Modern World (CWMW). **pyro macedonia:** Center for Regional Policy Research and Cooperation. **GEORGIA:** The Genesis Association (GENESIS). **ISRAEL:** Patient Fertility Association (CHEN). **SERBIA:** National Health Alliance of Serbia and National Association of Emergency Medical Service Staff (NAZS and NAZHMP). **SWITZERLAND:** Dachverband Komplementärmedizin. **TURKEY:** Turkish Pharmacists’ Association (TEB). **UKRAINE:** SALUS Charitable Foundation (SALUS).

### New Members in 2018

**Eurocam**

**VAS—Vascular-Independent Research and Education**

### Affiliations

EPHA is a member of: DG Agriculture Civil Dialogue Group; EU Alliance for Investing in Children, European Alliance for Responsible R&D and Affordable Medicines; European Commission Expert Group on EU Trade Agreements, European Commission Multi-Stakeholder platform on SDGs; Health and Environment Alliance; Social Platform; Trans-Atlantic Consumer Dialogue; SDGWatch and is in official relations (check the proper term) with WHO Europe.
EPHA is committed to growing and nurturing a strong network of members and partners, fostering knowledge-sharing and empowering advocates and future public health professionals with the aim to deliver equitable solutions to European public health challenges, to improve health and reduce health inequalities.

**EPHA Membership: a thriving network**

Members support is at the heart of key EPHA activities. Members can benefit from opportunities to build their organisation’s capacity, make their voice heard and establish effective new connections. This is achieved through regular Policy Coordination Meetings (PCMs) and working group meetings on specific issues, thematic trainings at Brussels and national level and by providing regular policy updates on a range of public health policy areas via our monthly newsletter, news feeds, briefings and position papers or workshops and seminars.

**Empowering future public health professionals**

EPHA offers students interested in finding out more about public health advocacy and communication the opportunity to spend time with the Secretariat and get involved with different aspects of our campaigns. Young volunteers can also gain first-hand experience through our European Solidarity Corps placements.

**Our Interns**

EPHA offers students interested in finding out more about public health the opportunity to spend time with the Secretariat and get involved with different aspects of our campaigns. Our 2018 interns were:

- Cecilia Laura Kolding Andersen - Denmark
- Ellen Bloomer - United Kingdom
- Leonie Eilers - Germany
- Roberta Sadauskaite - Lithuania
- Amund Siebke - United Kingdom
- Alice Walker - United Kingdom

**Our 2018 European Solidarity Corps volunteers**

- Vladimir Kolev - Bulgaria
- Daniela Pereira - Portugal
EPHA is committed to growing and nurturing a strong network of members and partners, fostering knowledge-sharing and empowering advocates and future public health professionals with the aim to deliver equitable solutions to European public health challenges, to improve health and reduce health inequalities.

Our Roma Fellows

As part of our work on health inequalities, EPHA has focused on the particular health needs of Roma people. Our Roma Health Fellowship programme for Roma health advocates and traineeships for students of public and global health, supported by Open Society Foundations, aims to support them to develop the necessary tools to engage with European policy makers and to increase the capacity of the Roma community to become leaders on Roma health at EU, national and local level.

Roma Fellows during 2018

Marcela Adamová - *Early Childhood Development Fellow*
József Rostás - *Roma Fellow*
Edvin Saliov - *Roma Fellow*

“I am much more involved in promoting access to health services at local level, I understand the role of NGOs and which steps need to be followed in advocating policies at both national and EU level.”

- Florin Nasture
Former EPHA-OSF Roma Fellow, 2nd Roma Health Fellowship Programme (2015-2016)
On 28 June 2018, EPHA celebrated its 25th anniversary in a festive gathering that brought together EPHA member organisations, policymakers as well as many of the partners and faces from many sectors that helped shape the Alliance over the last quarter of a century. The event provided an opportunity to reminisce about past challenges and achievements, but it was also a chance to take a firm look into the future given the ongoing problems posed for public health by ageing and demographic change, the need to use public finances as effectively as possible, growing health and income inequalities and threats to healthcare related to globalisation.

EPHA co-founder Andrew Hayes recalled that EPHA had been established before Europe’s competence in public health was defined.

EPHA President Emeritus Archie Turnbull, who has had a close relationship with the Alliance since its inception, recalled that EPHA has always put the health of people first, noting that its roots lay in the European Citizens Action Service.

EPHA’s diverse membership has been its greatest strength, and EPHA’s members have relentlessly risen to the task of working to ensure better health for all in Europe, often in the face of opposition and adversity.
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Context

The inclusion of health as a new policy objective in the proposal for the reform of the Common Agricultural Policy objective was a key milestone in EPHA’s advocacy. Ensuring this becomes reality will be a focus for EPHA, as is campaigning to ensure that the issue of food systems more generally, with an important emphasis on health, is put on the EU policy agenda. Through its participation in a large Horizon 2020 project, EPHA is supporting efforts to identify the best policies to tackle the rising epidemic of childhood obesity in Europe.

Food systems and Non Communicable Diseases (NCDs)
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<tr>
<th>Month</th>
<th>Event/Statement/Partnership/Study</th>
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<tr>
<td>FEB</td>
<td><strong>JOINT LETTER:</strong> The CAP should step up its role in promoting vegetables &amp; fruit</td>
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| MAR   | **JOINT STATEMENT:** We deserve better: reaction to alcohol industry self-regulatory proposal for labelling  
**JOINT LETTER:** Less and better: Call for policy action on animal farming |
| APR   | **EVENT:** Lethal but legal: in conversation with Prof Nicholas Freudenberg |
| MAY   | **PARTNERSHIP:** IPES Food EU3F Food & Farming Forum: partner in participative process towards a Common Food Policy for the EU  
**CO-FINANCED STUDY:** A transition towards sustainable food systems in Europe: Food policy blue print scoping study |
| JUN   | **JOINT STATEMENT:** Recommendations for EU action on NCDs towards the UN High Level Meeting  
**PROJECT:** Kick-off STOP Horizon 2020  
**EVENT:** Leveraging Healthy and Sustainable Diets Through Agricultural Policy Reform |
| SEP   | **CAMPAIGN:** Tackling NCDs Our Health Our Right Right Now  
Joint campaign with European Chronic Disease Alliance (ECDA) ahead of the UN High-Level Meeting on Non-communicable Diseases (NCDs) |
| OCT   | **BRIEFING:** CAP: 11 ways to deliver for better health  
**JOINT STATEMENT:** Public health community welcomes Irish Alcohol Bill |
| DEC   | **BRIEFING:** Eliminating trans fats in the European Union |
Impact

EPHA publication of paper “CAP: 11 Ways to Deliver for Health” sets out comprehensively for the first time, how the EU Common Agricultural Policy can contribute to better health. This paper forms the foundation for further public health advocacy on the CAP, and together with the online CAP4Health portal confirms EPHA’s position as a thought leader on integrating health priorities into the CAP.

EPHA strongly defended the space to implement national public health policies within the EU internal market, at the High Level Forum for a Better Functioning Food Supply Chain. EPHA also collaborated with IPES Food and many other civil society organisations to establish health as a pillar of a sustainable food system and proposed key policies for a coherent EU food policy.

As part of our goal to free European youth from the effects of health-harmful marketing, EPHA has also established an informal ‘healthy marketing alliance’ to tackle child exposure to marketing of unhealthy food and alcohol.

Priorities for 2019

- The CAP: important part of the negotiations and votes will be held in 2019. Advocate for stronger public health focus and mobilising health community to engage on CAP reform.

- Contribute to putting sustainable food systems high-up on the policy agenda as part of a wide civil society collaboration and further elaborate concrete policy pathways to advance a food system transformation while achieving co-benefits.

- Propose outline for an EU-wide approach to limit the exposure of children to health-harmful marketing

- Propose principles, priorities and actions for a new EU strategic framework for the prevention of NCDs

“Childhood Obesity, is it the problem or is it the manifestation of many other problems that need to be solved?” - @EPHA_EU
Nikolai Pushkarev #EU3F #CommonFoodPolicy

International Panel of Experts on Sustainable Food Systems (IPES-Food)
Context

EPHA’s Universal Access and Affordable Medicines campaign promotes transparency, accountability and the public interest in the field of pharmaceuticals in line with our members’ priorities. We work for better and affordable medicines for Europe by questioning and calling for reforms to the current pharmaceutical business model to ensure better access to medicines for all. Developed in response to the growing risk to patients and healthcare systems from the increasing costs of medicines, our advocacy is driven by our members’ interests, complimenting their work at local, national and European level.

Universal Access and Affordable Medicines
LONG READ: The top 5 issues in medicines policy in 2018

JOINT STATEMENT: Ensuring Public Accountability and Societal Impact (FP9)

JOINT STATEMENT: Ensuring EU funded medical R&I delivers for EU citizens and beyond

JOINT STATEMENT: Civil society’s proposal for Horizon Europe, the next EU research framework programme

EVENT: How Good are our Medicines?
At the European Health Forum Gastein
Organised by Open Society Foundations (OSF) in cooperation with European Public Health Alliance (EPHA) and the European Alliance for Responsible R&D and Affordable

EVENT: Trailblazers: Routes to Better and Affordable Medicines by 2025
3rd EPHA Universal Access and Affordable Medicines Forum

JOINT LETTER: Civil society reaction to the European Parliament’s position on Horizon Europe
Impact

Throughout 2018, EPHA developed further its collaboration with several governments in Europe to drive the access to medicines debate forward and to ensure that all voices, including those of patients, are heard. In particular, EPHA stepped up its cooperation with the Bulgarian and Austrian Presidencies of the EU and was invited to contribute to the shaping of their priorities and work programmes. Moreover, on the intergovernmental front, EPHA was the only organisation to attend the roundtable discussion between the heads of pharmaceutical companies in Europe and Ministers of Health. The EPHA A2M Policy Manager is a member of the small high level expert group tasked to prepare upcoming roundtable discussions between pharma and health Ministers.

The fourth edition of EPHA’s Universal Access and Affordable Medicines Forum, “Trailblazers: Routes to better and affordable medicines in Europe” took place in Brussels in November 2018, bringing key people and influencers together for an honest discussion around the hottest topics in pharmaceutical policy. EPHA is a long-standing partner of the European Health Forum Gastein (EHFG), joining forces with Open Society Foundations and the European Alliance for Responsible R&D and Affordable Medicines in 2018 to host yet another agenda-setting session titled: “How good are our medicines?”. During the year, EPHA and its members most active on access to medicines priorities continued to contribute to the debate with evidence and published an analysis and recommendations on the European Commission’s proposed regulation on promoting Health Technology Assessment (HTA) collaboration in Europe.

Finally, EPHA is a founding member and hosts the secretariat of the European Alliance for Responsible R&D and Affordable Medicines, an informal coalition of more than 80 European and national organisations working exclusively on access to medicines issues.

Priorities for 2019

- Contribute at the highest levels of decision-making to development of pharmaceutical policy in the EU
- Provide operational recommendations to amend the incentives EU eco-system in order to guarantee better and affordable treatments for all patients
- Shape the new European Commission’s priorities around the pharmaceutical agenda for the benefit of the public interest and patients
Context

Antimicrobial resistance continues to pose an urgent threat to Europe’s health systems as well as to population health. The danger is so complex that only a multi-stakeholder effort involving policymakers at all levels and stakeholders active in all One Health domains (human health, veterinary medicine, environment, research & development, global health, etc.) can bring about the desired effects to reduce the prevalence of AMR and encourage prudent use of antibiotics.

The European Commission’s second One Health Action Plan against AMR, released in 2017, remains the guiding document at EU level which urges Member States to develop and implement their own National Action Plans (NAPs). However, while the EU provides guidance, expertise and coordination, there is little additional funding available for Member States to develop comprehensive plans, and the EU Action Plan does not include an evaluation process. Given the massive costs to health systems that could be incurred by the spread of multi-drug resistant bacteria and the potential effects on essential health interventions and treatments, it is important to advocate for resources that will match the political commitment. Moreover, the increased presence of pharmaceuticals in the environment highlights the need to exercise care along the life-cycle of medicines - from production to consumption to disposal - given that bacteria know no boundaries.
2018 at a glance...

**JAN**

**EVENT:** Joining the Dots: Tackling Pharmaceuticals in the Environment and AMR in Europe

**MAY**

**JOINT STATEMENT:** Europe must align policies to tackle Pharmaceuticals in the Environment and Antimicrobial Resistance AMR

**JUL**

**VIDEO FEATURE:** In the Red Zone featured in Friends of the Earth video series Protect and Resist on need for greater EU action on AMR

**AUG**

**REPORT:** Indicators for the surveillance of AMR and antimicrobial consumption

**NOV**

**STATEMENT:** Statement on European Antibiotic Awareness Day (EAAD), calling for more civil society engagement in EU initiatives addressing AMR

**DEC**

**STUDY:** Translating Political Commitments into Action: the development and implementation of National Action Plans on antimicrobial resistance in Europe

**MEETING:** AMR stakeholder network meeting with national members of the network, EPHA members and partners, 11 December

**CAMPAIGNING:** Discussions with the upcoming Romanian Presidency in its work on AMR, including its Ministerial Conference and proposed Council Conclusions on AMR
Impact

EPHA’s in-depth analysis of NAPs in EU and EFTA countries, released at the end of 2018, is one of the most comprehensive resources for policymakers to assess the comprehensiveness and orientation of existing AMR plans and strategies. It has been well received by key AMR policy stakeholders at EU and national level, including the ECDC.

EPHA’s event “Joining the Dots” in early 2018 at the European Parliament hosted by MEP Annie Schreijer-Pierik (EPP, NL) brought together representatives of the healthcare, environmental, pharmaceutical and water sectors, as well as government representatives and academia, to discuss joint solutions and push for the release of a long-awaited Strategy on Pharmaceuticals in the Environment.

The Call to Action and Joint Statement launched by EPHA at the European Commission’s Health Policy Platform was endorsed by over 30 organisations and led to the expansion of the Stakeholder Network on AMR, which includes many national and regional experts in addition to civil society platforms based in Brussels.

Priorities for 2019

• Support the Romanian Presidency’s work on driving forward the implementation of the NAPs at national level, resulting in Council conclusions on AMR.

• Revitalise the EU Health Policy Platform AMR Stakeholder Network to develop new key messages and involve the different stakeholders in our advocacy work.

• Raise awareness about the severity and urgency of the threat of AMR to public health amongst newly-elected Members of the European Parliament and newly appointed elected officials.

• Focus on ensuring that sustainable funding is available and accessible for governments to support and step up their efforts in tackling AMR and effectively implement AMR actions nationally, regionally and locally.

Who should bear the costs of preventing #pharmapollution? Nina Renshaw from @EPHA_EU highlights that it should always be those producing pharmaceuticals that pay – in line with the polluter pays principle – an underlying principle of EU #envi policy! #AMR

Friends of the Earth Europe
Context

Breathing is the most basic human function to sustain life. And yet, air pollution remains the largest environmental health risk in Europe, despite increasing awareness and rising concern about the health impacts of air pollution. EPHA’s #CleanAir4Health campaign aims to highlight the health impacts and costs of air pollution, particularly diesel emissions, calling for strong action at international, European, national and local level to protect our right to breathe clean air.
2018 at a glance...

**APR**
- **OPEN LETTER:** EU must support tackling vested interests at UN climate talks

**SEP**
- **VIDEO:** Launch of video on effects of diesel pollution on health
- **STATEMENT:** EPHA calls on MEPs to protect public health from transport-related air pollution

**OCT**
- **OPEN LETTER:** EU Environment Ministers: support the European Parliament decision on CO2 targets
- **CAMPAIGNING:** Global WHO conference on air pollution and health

**NOV**
- **EVENT:** European Diesel Summit
- **EVENT:** Paying to breathe - the hidden health costs of diesel
Impact

Responding to rising concern about the public health impact of increased levels of air pollution, #CleanAir4Health was launched in June this year. EPHA joined forces with Eurocities and Transport and Environment to hold the first ever summit on diesel pollution to bring together EU policy-makers, national governments, representatives from cities, industry, academia and civil society to discuss and launch a Declaration which presented concrete solutions to tackle the fleet of grossly-polluting diesel cars and vans on Europe’s roads.

At the end of November, EPHA published a study by CE Delft on the health impacts and health costs of diesel emissions in the EU, highlighting its effects in nine European cities, which received widespread coverage in the European media, including The Guardian, Le Monde and La Vanguardia. Our video which has been described as “mesmerizing” and “compelling” highlighting the effects of air pollution on human health, and helped bring home the individual cost of the polluted air we breathe, has received xxxxxxxx views across Europe. It played a powerful role in our advocacy towards the European Parliament and the Council, calling for stronger CO2 limits when they debated the legislation in September.

Priorities for 2019

- Continue to raise awareness about the human costs to health from air pollution, especially for those living in cities, and in marginalized and disadvantaged communities
- Campaign for stricter emission standards and air pollution limits in upcoming EU legislation

Macabre and mesmerizing video on effects of #diesel pollution on Europe’s city dwellers from @EPHA_EU. #cleanair4health

James Kanter, Journalist
Context

70% of Europeans want more EU action on health according to a recent Eurobarometer survey - yet as negotiations began on the next EU Budget, would the European Institutions continue to guarantee health protection and promotion? Started as a reaction to European Commission’s Future of Europe paper, the EU4Health campaign aims to ensure that EU action on health remains strong after 2020.

While health still remains a separate programme, within the new ESF+ funding stream, the final negotiations on the amount of funding allocated, and health’s place in the next Commission are areas of concern. European integration and collaboration has brought great benefits for our health and provides vital resources for our health services. EU4Health brings together a number of organisations who share a vision of Europe where all people are as healthy as they can be throughout their lives.

Europe, let’s do more for health!
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<td>APR</td>
<td>JOINT STATEMENT: The Post-2020 MFF must invest in children and aim to end child poverty&lt;br&gt;JOINT POSITION: Europe, Let’s Do More for Health</td>
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<tr>
<td>MAY</td>
<td>JOINT STATEMENT: Health deserves more, not less spending!</td>
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<tr>
<td>JUL</td>
<td>Timmermans ‘Doing less’ taskforce identifies no area where EU competence shall be repatriated &amp; mentions the EU4Health contribution Subsidiarity and Proportionality: Task Force presents recommendations on a new way of working to President Juncker</td>
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<td>OCT</td>
<td>CAMPAIGN PRESENTATION: Presenting the EU4Health campaign at the European Health Forum Gastein</td>
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<tr>
<td>NOV</td>
<td>CAMPAIGNING: ENVI vote about the European Structural Funds Plus (ESF+) including the Health Strand&lt;br&gt;CAMPAIGN PRESENTATION: EUPHA conference - presenting the EU4Health campaign</td>
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<tr>
<td>DEC</td>
<td>CAMPAIGNING: EMPL vote about the European Structural Funds Plus (ESF+) including the Health Strand</td>
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</table>
Impact

EPHA and its campaign partners made several key interventions during 2018. When the new EU Budget proposals were announced in May 2018, while the fact that the European Commission was planning for continued investment in health was welcomed, EPHA, as part of the EU4Health campaign, expressed concern about the levels of funding, given the challenges which Europe faces - epidemic levels of chronic diseases, the global threat from antimicrobial resistance and increasing health inequalities.

The campaign identified 7 key priorities for the next European Commission, calling for a dedicated Health Commissioner; EU level actions to prevent diseases and promote healthy lifestyles; a new framework for tackling non-communicable diseases; and strong leadership with a European Global Health Strategy. EU4Health’s contribution to the Task Force on Subsidiarity, Proportionality and “Doing Less More Efficiently” was recognised in its report.

Priorities for 2018

• Ensure that health is high on the political agenda during the European Parliament elections

• Advocate for a dedicated Health Commissioner in the next European Commission, which puts health at the heart of EU policy.

“The EU needs more visibility for those policies that bring direct benefits to people: health policy is among them. Today’s discussion highlighted those areas where co-operation at European level can bring added value. We also outlined a framework for future action: health care policy driven by Member States, focused on a framework that benefits people and guarantees the quality of life on our continent.”

Kiril Ananiev, Bulgarian Minister of Health, Presidency of the Council of the EU, 22 June 2018
Context

Building public health capacity to ensure that all Europeans, particularly those living in poverty and isolation; those from disadvantaged and marginalised groups; or those facing discrimination and prejudice, have equal access to healthcare and to live healthy lives, is at the heart of EPHA’s mission and vision. In response to the digital transformation of health and care, EPHA works to ensure a holistic and socially-inclusive approach, where new technology is integrated into current health systems, rather than being used to replace them. Our work on rights for health also has a global context, guided by a strong commitment to ensuring the implementation of the Sustainable Development Goals.

Rights for Health
<table>
<thead>
<tr>
<th>MONTH</th>
<th>EVENT</th>
<th>CONSULTATION</th>
<th>WRITTEN STATEMENT</th>
<th>POSITION PAPER</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAR</td>
<td>Roma contribution to a healthy Europe</td>
<td>Contribution to the public consultation on strengthened cooperation against vaccine preventable diseases</td>
<td>Contribution to the public consultation on Cohesion</td>
<td></td>
</tr>
<tr>
<td>SEP</td>
<td>Intra-eu mobility of European Roma citizens: free movement for all</td>
<td>‘Advancing public health for sustainable development in the WHO European Region’ – agenda point of the 68th session of the World Health Organization (WHO) Regional Committee for</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DEC</td>
<td>Influencing policies to better deliver for Roma and other vulnerable groups</td>
<td>Digital health for all?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2018 at a glance...
Impact

In 2018, EPHA continued its strong focus on advocating for better Roma Health, thanks to the ongoing support of OSF. A number of events organised in Brussels and Romania identified and highlighted Roma communities’ real health needs and the obstacles, including institutionalised racism, they are facing.

EPHA was invited to share its views on digital health at three national conferences in Poland, Portugal and Finland where we reminded policymakers of the need to involve end users - whether patients, healthcare professionals or members of disadvantaged groups - in the design, implementation and evaluation of digital solutions. In order to build up trust, skills and confidence in digital health, it is crucial to work in partnership and not shy away from spelling out what could go wrong: the threats of data theft and misuse, cyberbullying and privacy violations is all the more dangerous in the highly personal health sphere. A number of leading digital countries, including Estonia, are receptive to EPHA’s “public health vision” for the digital transformation of healthcare and it is encouraging that they view patient empowerment and inclusion as important features.

Priorities for 2018

- and many other - determinants of health and how they intersect, with a view to updating EPHA’s narrative on reducing health inequalities and striving for health equity. This will also allow us to integrate the Roma health work stream into EPHA’s broader work and to explore the commonalities and differences experienced by different disadvantaged groups, including barriers to accessing healthcare. The results of projects EPHA has been involved in (e.g. VulnerABLE, MEM-TP, work on migrants’ health status) will also be valuable in this context. As part of a new coalition on early childhood development (ECD), EPHA will be working with members Eurochild and other partners to scale up ECD in European and national policies.

- As part of EPHA’s work on digital health, EPHA will continue to work with international (e.g. WHO, OECD), European and national policymakers to ensure that a good balance can be found between the needs of end users, health systems and the developers of new technology, while bearing in mind that digital health is a double-edged sword that holds immense potential to improve care but also huge risks for individuals and society at large, not least as Big Data and Artificial Intelligence are adding a new layer of complexity that is not easily grasped by health stakeholders.
Trade for Health

Context

EPHA’s work to ensure healthy trade focuses on the public health impacts of trade agreements negotiated by the EU. EPHA campaigns for an EU international trade policy which protects and promotes public health.
2018 at a glance...

FEB
MEETING: Trade AG meeting

MAR
JOINT LETTER: The impact of Brexit on patients and public health should be prioritised in second phase of negotiations

APR
MEETING: Trade AG meeting

MAY
DISCUSSION PAPER: Unhealthy Trades: the side-effects of the European Union’s Latin American trade agreements
JOINT LETTER: Global health NGOs call on Commissioner Malmström to put health first in trade negotiations with Latin America

JUL
MEETING: Trade AG meeting
Targeted presentation about the Risk Register on EU-Latin America Trade Agreements

SEP
REPORT: Protecting public health in EU and post-Brexit trade agreements
MEETING: Trade AG meeting

SEP
MEETING: Trade AG meeting
Impact

Two key publications in 2018 highlighted the impact of public health on ongoing and potential EU trade negotiations. In May EPHA published Unhealthy Trades: the side-effects of the European Union’s Latin American trade agreements, which focused on new or renegotiated EU trade deals with Mexico, Mercosur (Brazil, Argentina, Uruguay and Paraguay) and Chile, looking at the deals’ effects on consumption of tobacco, unhealthy food, and alcohol; labelling schemes and regulatory cooperation; antimicrobial resistance and animal health; Intellectual property rights and access to medicines; and government procurement. The report uncovered that tobacco was explicitly identified as an EU offensive interest in its negotiations with Mercosur, prompting a joint letter from EPHA and four other global health organisations to Commissioner Malmström requesting that this be dropped and tobacco excluded from all future trade negotiations.

The second publication looked forward to the future trade negotiations between the EU and the UK, following the latter’s proposed departure from the EU. “Trade, Investment and Public Health” provided an introduction for public health professionals to trade and investment policy and its relevance for public health, as well as a tool for them to assess the risk level for public health arising from trade agreements.

EPHA continued to put forward the need for a public health perspective at regular meetings of the European Commission’s Trade Advisory Group, which was established last year to increase transparency and inclusiveness in the development of EU trade policy.

Priorities for 2019

- Highlight the impact on affordability and access to medicines in the upcoming EU-US trade negotiations

- Publish a “model” trade chapter to suggest provisions and references which could be added to the EU’s trade deals to optimise the coherence between trade and public health objectives.
Our Board - 2018

Archie Turnbull
Smoke Free Partnership
President - President Emeritus 2016 - 2018

Freek Spinnewijn
European Federation of National Organisations working with the Homeless
Vice President - President 2016 - 2018

Catherine Hartmann
European COPD Coalition
Vice-President 2016 - 2018

Yves Brand
Mental Health Europe
Vice President - Treasurer 2017 - 2019

Alice Chapman-Hatchett
Health and Europe Centre
Board Member 2017 - 2019

Christine Saahs
International Federation of Anthroposophic Medical Associations
Board Member 2017 - 2019

Vanessa Moore
European Institute of Women’s Health
Board Member 2017 - 2019

Sandra Brsec Rolih
International Diabetes Federation Europe
Board Member 2018 - 2020

Ber Oomen
European Specialist Nurses Organisation
Treasurer 2018 - 2020

Our Team - 2018

Nina Renshaw
Secretary General

Sascha Marshang
Director of Operations & Membership

Nikolai Pushkarev
Policy Coordinator for Food Drink & Agriculture

Zoltán Massay-Kosubek
Policy Manager for Health Policy Coherence

Yannis Natsis
Policy Manager Universal Access & Affordable Medicines

Masha Smirnova
Policy Coordinator for Healthy Economics, FRESHER Project Manager

George Thurley
Policy Officer Healthy Trade & Food, Drink & Agriculture

Marius Tudor
Roma Health Project Manager

Giulia Vettore
Communications Manager

Rosemary Hindle
Communications Officer

Agata Petcov
Finance & Administration Manager

Laura Rahoveanu
Administration Assistant

Chris Russ
Assistant to the Secretary General & Admin. Assistant

Viviana Galli
Coordinator - European Alliance for Responsible R&D and Affordable Medicines

Ann-Marie Borg
Policy Coordinator
SCIENTIFIC ADVISORS

SCIENTIFIC ADVISOR ON EU INTERNAL MARKET LAW & POLICY:  
Professor Amandine Garde  
- University of Liverpool

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- Professional Lead Infection Prevention & Control, Royal College of Nursing (UK)

SCIENTIFIC ADVISOR ON ALCOHOL:  Prof. Nick Sheron  
- Royal College of Physicians (UK) and Head of Population Hepatology, University of Southampton

SCIENTIFIC ADVISOR ON TOBACCO POLICY:  Prof. John Britton  
- Professor of Epidemiology; Director, UK Centre for Tobacco & Alcohol Studies, Faculty of Medicine & Health Sciences, University of Nottingham

SCIENTIFIC ADVISOR ON NUTRITION:  Dr. Aileen Robertson  
- Metropolitan University College (Copenhagen), Public Health Nutritionist and former Regional Adviser for Nutrition Policy and Food Security at WHO EURO (1990-2004)

SCIENTIFIC ADVISOR ON TRADE:  Dr Gabriel Siles-Brügge  
- Associate Professor, Department of Politics and International Studies, University of Warwick

SCIENTIFIC ADVISOR ON TRADE:  Dr Nicolette Butler  
- Lecturer in Law, University of Manchester

SCIENTIFIC ADVISOR ON ECONOMICS AND HEALTH GOVERNANCE:  
Dr Eleanor Brooks - Career Development fellow, The Global Health Policy Unit, University of Edinburgh

SCIENTIFIC ADVISOR ON DIGITAL HEALTH:  Dr Stefan Buttigieg, MSc  
- Specialist Trainee in Public Health Medicine at the Ministry of Health, Malta
Financial Information

EPHA Financial information 2018

EPHA is an independent non-profit organisation, registered under Belgian law as an AISBL (Association internationale sans but lucratif) under Registration Number 451 133 736.

Operational Budget

In 2018, the total income of EPHA was €1,413,400.

The operational budget is devoted to our core activities to improve health and strengthen the voice of public health in Europe.

Our biggest contributor is the Operating Grant received from the European Commission. In 2018 their contribution represented 41.2% of EPHA's total income.

In 2018, the total contribution of the membership fees represented 6.4% of the total income.

Projects

In addition to the Operational budget, EPHA is a partner in EU health research projects.

Other projects and grants from foundations represented the remainder of our income.

<table>
<thead>
<tr>
<th>Total income</th>
<th>2018</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>EU-Operating grant</td>
<td>€ 582,302</td>
<td>41.2%</td>
</tr>
<tr>
<td>Membership fees</td>
<td>€ 90,350</td>
<td>6.4%</td>
</tr>
<tr>
<td>OSF – Roma fellows</td>
<td>€ 88,289</td>
<td>6.2%</td>
</tr>
<tr>
<td>GSK work for Roma</td>
<td>€ 2,570</td>
<td>0.2%</td>
</tr>
<tr>
<td>Open Society Fdn – A2M &amp; Alliance</td>
<td>€ 158,554</td>
<td>11.1%</td>
</tr>
<tr>
<td>Changing Markets Foundation</td>
<td>€ 58,250</td>
<td>4.1%</td>
</tr>
<tr>
<td>ICF – Nutrition</td>
<td>€ 16,720</td>
<td>1.2%</td>
</tr>
<tr>
<td>Carasso – IPES food</td>
<td>€ 25,000</td>
<td>1.8%</td>
</tr>
<tr>
<td>European Climate Foundation – Diesel</td>
<td>€ 296,623</td>
<td>21.0%</td>
</tr>
<tr>
<td>Perls foundation - A2M</td>
<td>€ 11,807</td>
<td>0.8%</td>
</tr>
<tr>
<td>H2020 - Childhood obesity</td>
<td>€ 6,376</td>
<td>0.5%</td>
</tr>
<tr>
<td>OSF - Migrants Mental Health</td>
<td>€ 52,252</td>
<td>3.7%</td>
</tr>
<tr>
<td>Cancer Research UK - trade / Brexit</td>
<td>€ 16,341</td>
<td>1.2%</td>
</tr>
<tr>
<td>Other income (small grants + reimb travel)</td>
<td>€ 7,964</td>
<td>0.6%</td>
</tr>
<tr>
<td>Total</td>
<td>€ 1,413,400</td>
<td>100%</td>
</tr>
</tbody>
</table>