A NEW VISION FOR HEALTH IN EUROPE?

EPHA ANALYSIS OF PRESIDENT VON DER LEYEN’S SPEECH ON THE STATE OF THE EUROPEAN UNION 2020
About EPHA

EPHA is a change agent – Europe’s leading NGO alliance advocating for better health. We are a dynamic member-led organisation, made up of public health civil society, patient groups, health professionals, and disease groups working together to improve health and strengthen the voice of public health in Europe.
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“For me, it is crystal clear – we need to build a stronger European Health Union. And to start making this a reality, we must now draw the first lessons from the health crisis.”

Health was never before as present as it was in Ursula von der Leyen’s first State of the European Union speech, less than a year from becoming President of the European Commission.

She was both inspiring and ambitious, but as reflected in many of the reactions of Members of the European Parliament, it also raised many questions about the Member States’ willingness to actually follow through on her proposals.

“We need to make our new EU4Health programme future proof. This is why I had proposed to increase funding and I am grateful that this Parliament is ready to fight for more funding and remedy the cuts made by the European Council.”

The COVID-19 crisis has brought to the fore the tension between the new Commission’s good intentions and the enduring resistance of national capitals to cede further powers on public health coordination to Brussels. At the same time, even the strongest critics of closer health cooperation might have realised by now that “going it alone” creates a very messy situation for everybody and adds to the already overwhelming sense of economic and social anxiety most people in Europe are feeling today.

“…it is clearer than ever that we must discuss the question of health competences. And I think this is a noble and urgent task for the Conference on the Future of Europe.

And because this was a global crisis we need to learn the global lessons. This is why, along with Prime Minister Conte and the Italian G20 Presidency, I will convene a Global Health Summit next year in Italy.”

Unsurprisingly, given the ongoing pandemic, public health occupied a prominent position in her speech. However, the Commission President was careful not to divulge much detail about two of the most essential elements for public health. Firstly, she spoke in favour of building a stronger “European Health Union”, an idea with roots in Robert Schuman’s plan for a “European Health Community” and recently revived by MEPs in the European Parliament. Even more significantly, she emphasised that it was time to reconsider the Union’s health competencies in the context of the Future of Europe conference. The potential treaty change which this entails has been a ‘hot potato’ for many years, but in light of the increasingly complex, cross-border challenges posed by global threats to health
and society - COVID19 being merely the latest problem alongside other endur-
ing threats like antimicrobial resistance, toxic air pollution, the biodiversity cri-
- sis, and the climate emergency – increasingly seen as a way to strengthen and
increase the resilience of health systems across Europe. It will be important for
civil society to play an active role in the process to ensure that whatever comes
of the proposal, it will correspond to Europeans’ real needs and concerns.

In her comprehensive speech, von der Leyen urged EU national leaders to wake
up and join forces to fight the pandemic and demonstrate Europe’s power to
act in solidarity and ensure that no-one is left behind in the ongoing manage-
ment of the crisis and Europe’s eventual recovery. Despite the substantial cuts
made to the EU4Health programme by national leaders, von der Leyen cited
the well-endowed EU recovery fund as a shining example of Europe’s ability to
act together in times of crisis.

She emphasised the important difference EU cooperation had made for people
and goods, from enabling the safe return of stranded tourists to the smooth
functioning of international distribution chains. She also praised the sacrifice,
empathy and relentless exertions of front-line health and care workers, noting
that COVID-19 had exposed the weaknesses of health systems and the limits
of an economic model disconnected from planetary developments that have
turned our world into an increasingly fragile place. In this light the crisis caused
by the pandemic also presented a huge opportunity to “make change happen
by design” and rebuild common values and trust.

Reinforcing the Public Health Executive Agencies

“As a first step, we will propose to reinforce and empower the European Med-
- icines Agency and ECDC – our centre for disease prevention and control.”

Another crucial announcement concerned the expansion of the roles of the
European Medicines Agency (EMA) and the European Centre for Disease Pre-
vention and Control (ECDC). EPHA has long called to extend the remit and com-
petences of the ECDC in particular, which, among other responsibilities, also
deals with tackling antimicrobial resistance and healthcare-associated infec-
tions, as well for an increase in its budget.

The public health community has also made many calls for Non-Communica-
able Diseases to be put at the heart of EU priorities given their implications on
our health and the burden on the healthcare system they cause. ‘More power’
for the ECDC should therefore go hand-in-hand with an extension of its compet-
tences to cover NCDs as well. Such an extended mandate could complement
the relevant actions from the World Health Organization (WHO) in this field -
the importance of WHO was another key element of her speech. Accepting the
reality and taking the EU lead by providing a comprehensive and overarching
European NCD Framework for NCD prevention and health promotion based on
the WHO “Best Buys” policies would certainly bring significant public health
benefits.

“As a second step, we will build a European BARDA – an agency for biomedical
advanced research and development. This new agency will support our
capacity and readiness to respond to cross-border threats and emergencies
– whether of natural or deliberate origin. We need strategic stockpiling to
address supply chain dependencies, notably for pharmaceutical products.”

Boosting the resources and capacities of the public health Executive Agencies
A new BARDA-like agency for the EU should prioritise public health needs and guarantee the affordability and availability of all end products.

Crisis supplies and vaccination

“An accessible, affordable and safe vaccine is the world’s most promising way to do that.

At the beginning of the pandemic, there was no funding, no global framework for a COVID vaccine – just the rush to be the first to get one.

This is the moment the EU stepped up to lead the global response. With civil society, the G20, WHO and others we brought more than 40 countries together to raise 16 billion euro to finance research on vaccines, tests and treatments for the whole world. This is the EU’s unmatched convening power in action.

But it is not enough to find a vaccine. We need to make sure that European citizens and those around the world have access to it.

Just this month, the EU joined the COVAX global facility and contributed 400 million euro to help ensure that safe vaccines are available not only for those who can afford it – but for everyone who needs it.

Vaccine nationalism puts lives at risk. Vaccine cooperation saves them”

Stressing that safety for all is paramount, Von der Leyen highlighted the role that European planes played in delivering protective equipment around the world.

She issued a strong warning against vaccine nationalism and cited the EU’s effort to lead the global response to develop a COVID vaccine as an example of its “unmatched convening power”, with 16 billion EUR raised to finance research on vaccines, tests and treatments. Europe has also joined the COVAX facility and contributed 400 million euro to make safe vaccines available for all people.

At this crucial stage in the development of one of the main elements of the EU’s response to COVID-19, trust and accountability need to be upheld in order to safeguard and promote public health, the quality of healthcare systems, patient and consumer safety and EPHA is one of several health organisations calling for more transparency in the process.
Health cost savings can accelerate the European Green Deal

“The European Green Deal is our blueprint to make that transformation. At the heart of it is our mission to become the first climate-neutral continent by 2050.

But we will not get there with the status quo – we need to go faster and do things better.

We looked in-depth at every sector to see how fast we could go and how to do it in a responsible, evidence-based way.

We held a wide public consultation and conducted an extensive impact assessment.

On this basis, the European Commission is proposing to increase the 2030 target for emission reduction to at least 55%.

I recognise that this increase from 40 to 55 is too much for some, and not enough for others.

But our impact assessment clearly shows that our economy and industry can manage this.

And they want it too. Just yesterday, 170 business leaders and investors – from SME’s to some of the world’s biggest companies - wrote to me calling on Europe to set a target of at least 55%

Our impact assessment clearly shows that meeting this target would put the EU firmly on track for climate neutrality by 2050 and for meeting our Paris Agreement obligations.

And if others follow our lead, the world will be able to keep warming below 1.5 degrees Celsius.”

Fortunately, von der Leyen is well aware of the growing pressures her administration is facing, and she announced that the emission reduction target will be raised from 40 to at least 55% by 2030 to ensure that Europe will be able to meet its Green Deal ambition of becoming the first climate-neutral continent by 2050.

It was a timely announcement just before the 5th Anniversary of Dieselgate, whose most lethal legacy has been its effect on public health. 37% of Next Generation EU will be spent on the EU Green Deal objectives and green financing will be “taken to the next level”, e.g. via green bonds.

Here, clearly much will depend on industry’s readiness to rapidly adapt, from construction to steel production to motor vehicles’ production. For example, the car industry will need to speed up its effort to develop zero and low-emission alternatives to the internal combustion engine-powered, polluting vehicles. These reductions will involve a major transformation of production methods while ensuring that workers can be reskilled in new processes so no one is a “loser” from innovation.

Health costs savings may be the reward for making a sustainable investment in our economies. The European Commission’s own recent impact assessment on the revised 2030 Climate targets finds that a 60% reduction in air pollution by
2030 would result in over 5000 premature deaths as a result of lower CO2 and PM2 emissions. There would be less people suffering asthma, chronic bronchitis, hospital admissions, restricted activity days and less need for medication. Lower emissions would also lead to reductions of €5-10 billion in costs from pollution-related health damage, together with €110 billion savings in healthcare costs by 2030.

Europe’s digital decade

“A world where we use digital technologies to build a healthier, greener society.”

Von der Leyen also confirmed her strong commitment to accelerating the digital transformation of society, inter alia by allocating an additional 8 billion Euros from the Next Generation EU fund to upgrade Europe’s supercomputing capacity. Europe needs a “common plan (…) with clearly defined goals for 2030” regarding e.g. digital skills, connectivity and digital public services. At the same time – and in line with the European Commission’s current work – Europe needs to safeguard the right to access, privacy, freedom of speech, and enable the free flow of data and cybersecurity.

The Commission will propose “a secure European e-identity ... one that we trust and that any citizen can use anywhere in Europe to do anything from paying your taxes to renting a bicycle.”

For public health, the prospect of having more ubiquitous, reliable and meaningful data at its disposal can undoubtedly contribute to offering more tailored solutions that meet people’s needs, as well as to strengthening health systems in the face of global health crises. With so much funding going towards digital across the EU’s many programmes and services, it will be important to develop a vision that mainstreams public health just as in the “analogue” policy realm.

The Commission also needs to be aware that exploiting “common data” and protecting privacy can create tensions – no more so than in the healthcare domain - especially when policymakers rely on large multinationals to provide expertise, tools and products (infrastructures, technologies and algorithms) which are neither adapted to the specific problems of the healthcare sector nor taking into account the diversity of European society. In addition, there is a growing danger that commercial interests could be increasingly linked to data use in public health, which rings all kinds of alarm bells for universal access, compromising the health of vulnerable groups and people’s fundamental rights.

A strong people-centred public debate (and civil society groups representing public interests) must be instigated to safeguard that the many complex issues surrounding the creation of a European Health Data Space; the increased deployment of Artificial Intelligence in health and other spheres of life; and the digital literacy skills that go hand-in-hand with exploiting data to their fullest potential do not bypass the capacity of individuals to understand what the “digital revolution” can do for them.
Fighting racism

“Because in this Union, fighting racism will never be optional. We will improve education and knowledge on the historical, cultural causes of racism.

We will tackle unconscious bias that exists in people, institutions and even in algorithms.

And we will appoint the Commission’s first-ever anti-racism coordinator to keep this at the top of our agenda and to work directly with people, civil society and institutions”

Perhaps one of the most emotional moments of her speech was von der Leyen’s objective to take firm action against racism and discrimination. She stated that a new anti-racism action plan would be proposed, and she also strongly rejected continued discrimination based on sexual orientation, which remains a reality in parts of Eastern Europe and elsewhere. Importantly, Europe must not tolerate “humanity-free zones” and everybody should have the right to express their identity without fear in a Union of equality. The decision of the Commission to appoint a coordinator on anti-racism demonstrates a growing awareness about racism and its different forms of manifestation in society. Despite existing policy and legal framework providing guarantees for individuals’ and communities protection against discrimination, this issue persists in society and negatively impacts social cohesion, human rights and the values on which the European Union is based, as well as their access to healthcare. Moreover, it represents a significant threat for democracy across Europe and the future of the Union, affecting entire communities, causing their exclusion from society; social and economic vulnerability as well as lower political and social participation.

Therefore, the action plan becomes a strategic step for guaranteeing the rights of European populations and strengthening the principles of equality and non-discrimination. It acknowledges the systemic character of the issue as well as the responsibilities of policy makers to provide efficient policy measures and strong legal framework for combating racism and its manifestation in society, policies and institutions. However, ensuring the equal participation in society and economy of those who have experienced social exclusion for years remains a significant challenge within the political context influenced by growing populism across EU Member States.

A framework for minimum wages

Noting a 12% GDP drop in the second quarter of 2020, von der Leyen stated that the EU had done an enormous effort in protecting economic stability and upholding the dignity of work, not least through the fast agreement on NextGenerationEU but also through the SURE programme which will further help to avoid mass unemployment by creating short-time work schemes for many workers and companies affected by the crisis.

In addition, the Commission President affirmed that “Everyone must have access to minimum wages either through collective agreements or through statutory minimum wages” which she views as critical at a time when “work no longer pays” for many people. Creating a European framework for minimum wages would be a central factor for securing jobs, promoting good working conditions
for all and contributing to achieve social justice for workers and companies alike by reducing inequalities between socio-economic groups. This framework must advance gender equality by providing strong guarantees for equal access to quality jobs and opportunities for career development as well as fair wages for all, regardless of their gender.

A new EU migration regime?

In the face of acute resistance by the Member States to even accommodate a few thousand refugees to alleviate the pressure on the Greek islands, the EC President could, however, do little more than appeal to national leaders’ consciences to uphold human rights and dignity, urging them to reach finally find a solution for overhauling Europe’s ill-functioning migration and asylum system, which leaves migrants in limbo for years and wears out their health and psychological resilience in the meantime. For too many newcomers across Europe, “integration” remains a distant pipe dream.

Describing migration as a “European challenge” and giving examples of the successes of a handful of highly educated refugees now thriving in their adopted home countries is unlikely, though, to do the trick. The Dublin Regulation has been an ineffective and costly nightmare, which has not only created the massive administrative and financial responsibility currently carried by Greece, Italy and Spain as first countries of entry responsible for processing hundreds of thousands of asylum claims, but for migrants who, in order to avoid registration in these countries, rely on unscrupulous people smugglers to reach their final destinations, putting their lives at risk and even mutilating themselves (e.g. burning their fingertips) to avoid detection. Others are being sent back-and-forth between EU countries unwilling to assume responsibility for processing their asylum claims. Ultimately, Dublin has probably also contributed to many migrants not applying for asylum at all as they need to pay off family debts by working in the “shadow economy”, which is often not possible while eligibility and legal claims are being processed.

The Dublin system is to be replaced by a new EU-wide migration governance system. The new Migration Pact, announced after the SOEU speech, proposes a number of “solidarity” options for governments to get paid for hosting refugees and economic migrants unable to be returned home, as well as for relocating them. At the same time, there will be an even stronger focus on returns and working with countries of origin. But given that Europe has stalled on migration for over two decades, will it improve the situation for asylum-seekers and refugees, will it ever become a reality and if yes, who will benefit?

A values-based European trade policy

“We will continue to believe in open and fair trade across the world. Not as an end in itself – but as a way to deliver prosperity at home and promote our values and standards.”

On trade, President von der Leyen had a strong message to the U.K., warning London not to violate the Brexit Withdrawal Agreement.

Von der Leyen also used her speech to send clear messages to many of the EU’s international partners, from China to the US. The U.K. government was urged not to break international law by violating the Brexit Withdrawal Agreement.
She also said that Member States should be courageous and finally move to qualified majority voting, “at least on human rights and sanctions implementation.” However, the concept of “healthy trade” was missing from an otherwise health-focused speech. This omission demonstrates that despite the increased salience of the link between health and trade in the wake of COVID-19, there is still a limited understanding of what this means in terms of supply chains for medical products. What is missing in trade policy debates is a more comprehensive consideration of the complex interactions that exist between trade, investment and public health. This must go beyond considering whether goods, services and capital move freely across borders or the nationality of an asset. International trade policy can have fundamental implications for public health that goes beyond the ability of supply chains to produce and distribute medical goods, for example, the impacts on nutrition through increased consumption of unhealthy foods and beverages as a result of the removal of tariff and non-tariff barriers; or restrictions in access to medicines as a result of cross-border flows of trade and investment and provisions in trade agreements on intellectual property rights; or investor-to-state dispute settlements (ISDS) and regulatory cooperation, which can constrain governments and public bodies seeking to implement measures to protect and promote public health.1

A value-based trade policy cannot be neutral. Trade should also contribute to wider societal and public health goals. A consistent and systematic public health risk register should be applied to current and future FTAs to ensure policy coherence with health. The scoring system could be used as either an independent assessment, by including it as a foundation for a Health Impact Assessment (HIA), or by using its analysis to further expand the current Sustainable Impact Assessment (SIA) to provide more analysis and consideration of public health risks.

Not much about preventing diseases and improving people’s health

The address ended by emphatically stressing the desire to live in a “healthier, stronger and more respectful” world. While it is impossible to expect every piece of the Commission’s agenda to be reflected in a grand speech like this, it is nonetheless surprising that the main barrier to good health - non-communicable diseases (NCDs) - received no mention. This, especially in light of the launch of Europe’s Beating Cancer Plan by the end of this year, which von der Leyen herself put lots of heart into when she announced the project in the European Parliament last February.

Likewise, food and agriculture were given little attention. While it was rightly stated that our patterns of consumption of raw materials and food are “unsustainable,” and that “we need to change how we treat nature, how we produce and consume (…) eat and heat, travel and transport,” her speech didn’t go much beyond these vague allusions. With the fate of the Common Agricultural Policy, the EU’s single largest budget item, soon to be decided, the President could have used this opportunity to stress that her Commission expects the Farm to Fork Strategy to be the EU’s guide towards sustainable food systems and the possibility for more Europeans to enjoy healthier diets.

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Next steps

Conference on the Future of Europe and the future of health in the EU

“As a third step, it is clearer than ever that we must discuss the question of health competences. And I think this is a noble and urgent task for the Conference on the Future of Europe.”

The speech marked the end of the side-lining of health from the list of main policy priorities. Discussions on the levels of EU competence on health are now openly on the table. While this will certainly be a lengthy process, which will be heavily debated by national governments; will have to be approved by many national parliaments; and potentially be the topic of many referendums - not engaging in this debate is not an option for the public health community.

How the new competence sharing between the EU and national capitals should look like, what is the added value of transferring some competences to the EU level for the common good and how civil society could meaningfully contribute to this debate are the very questions we need to start asking now, as these ambitions become concrete policy proposals.