

ANNUAL REVIEW



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REFLECTION ON 2020

2020 was not only a transitional year in terms of moving from 'old' to 'new' EU policy priorities (Green Deal, Pharma Policy, Farm to Fork, etc.) and building bridges between the two, it was first and foremost an emotional rollercoaster that turned out to be so much more challenging than even we, policy and advocacy professionals working at the heart of the European public health community, could have predicted. While we'd known for years that the threat of a major global pandemic was lurking around the corner, when COVID-19



struck and made its way across the continent it still felt as if nobody in Europe was actually prepared to face the reality of a world in which physical contacts and mobility had to be severely restricted to protect-risk groups from contracting the virus and health facilities from collapsing. Working from home, shop and border closures, large-scale unemployment, fear and uncertainty about the future marked us all in 2020 and took a heavy toll on our mental and physical health.

As a people-centred, highly diverse network of organisations working on different aspects of public health, EPHA was confronted with the urgent task of contributing to the evolving evidence base about the impacts of the COVID-19 crisis (among many other issues, we highlighted the exacerbation of health inequalities and fundamental rights infringements experienced by vulnerable populations) while advocating that no-one must be left behind. The memory of the economic crisis was still too fresh – some countries had barely managed to pull themselves out – and with Brexit being finalised in parallel, Europe needed to succeed in managing the pandemic and in communicating why certain measures were taken at a certain time in a certain place. Civil society played a major role in supporting this effort and in relaying information from the ground to the EU, WHO and others

2020 was also the year in which the European Commission laid the foundation for Europe's ongoing green and digital transitions. Suddenly, 'Health in All Policies' thinking was reflected in many of the key EU policy papers, but it is still unclear how joined-up thinking will be put into practice as new governance mechanisms may be required to face the complex, interconnected public health challenges of today. Through our forward-looking work on food systems, air pollution and climate change, medicines shortages and digital health (to name but a few relevant themes), some of which led directly by members via sub-coalitions, EPHA was in a front position to provide inputs into the European Commission's new objectives enshrined in the new EU4Health Programme including the preparation of the flagship Europe's Beating Cancer Plan.

If there was one positive development that came out of COVID-19, then it was the release of the new EU4Health Programme, which represented an important victory – EPHA having made the case for scaling up public health via its targeted campaigns for many years. Together with the members of the EU4Health Civil Society Group, we were delighted to see that, finally, public health was no longer lurking in the shadows of other policy areas. A well-funded, stand-alone programme would be addressing many of the gaps uncovered by the pandemic, coupled with vast amounts of health-related funding in other major EU funding instruments. Unfortunately, the extent to which civil society organisations are actually be able to benefit from the funding (and thereby contribute to the successful implementation of EU4Health) still remains unclear, but EPHA continues to make the case for European networks as crucial actors who provide policymakers with evidence on the real needs of ordinary people, patients, healthcare professionals and other members of the public health community, identify and disseminate best practices, and act as critical watchdogs to ensure transparency, protect fundamental rights and good governance.

EPHA's new Strategic Plan 2021-2025, adopted by the members at the Annual General Assembly in December, encapsulates our future approach as a highly competent and reliable partner. The new strategy emphasises both the creative and scientific contributions of the membership, and in light of COVID-19 it leaves more room for flexibility: rather than committing EPHA to a limited number of fixed campaigns for years to come, it offers a canvas to be filled with different colours over the coming years, enabling EPHA to be proactive where it counts and to be reactive in a much more timely way, which will be vital in the face of further cross-border health threats whether triggered by pandemics, climate change or other developments.

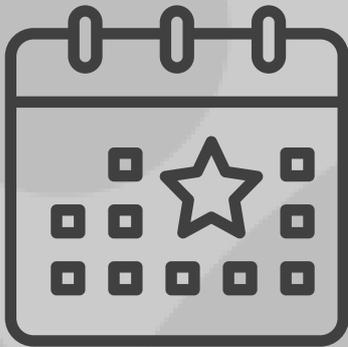
While physical meetings became impossible during most of 2020, EPHA's Board and Secretariat team were highly impressed by how smooth the transition to digital was. We are grateful to our members and partners who supported our effort to create an online community of like-minded advocates by participating in our webinars and meetings, contributing vital insights from the ground (e.g. through our COVID-19 resource centre) and pointing out any missing links. It's this sense of togetherness that made a very difficult year bearable, and that allowed EPHA to pull through, promote solidarity and public health values, and learn important new lessons.

Sascha Marschang

Deputy Director
EPHA

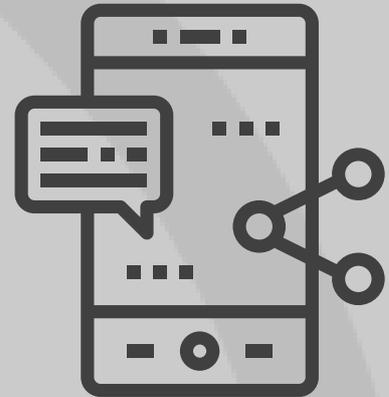


OUR YEAR IN NUMBERS



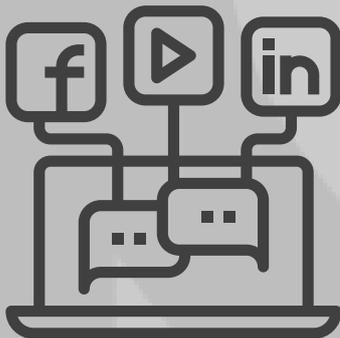
13

Events



1 036 553

People Reached



22, 154

Followers

Twitter | LinkedIn | Facebook



155

Online Articles

EPHA MEMBERSHIP: A THRIVING NETWORK

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 to deliver equitable solutions to European public health challenges, to improve health and reduce health inequalities.



IN 2020 WE WELCOMED THESE NEW MEMBERS:



LEADING THE WAY
IN ORGAN
TRANSPLANTATION



A large, light gray, stylized human figure icon is centered on the page. The figure has a circular head, a simple torso, and two arms raised in a 'V' shape. The entire figure is enclosed within a larger, thin gray circle. The background is a solid light gray color.

OUR ADVOCACY

**WORKING TOWARDS BETTER
HEALTH FOR ALL IN EUROPE**

ACTION ON ANTIMICROBIAL RESISTANCE

CONTEXT

Antimicrobial resistance is a serious cross-border threat to healthcare that can only be mitigated by ambitious, coordinated, and well-funded action and research at EU level.

Due to the overuse and misuse of antibiotics in human and veterinary medicine as well as in agriculture, AMR has been identified as one of the top ten global health threats by the WHO in 2019. A growing number of bacteria are now resistant to antibiotics meant to kill them, resulting in medical practices being less safe and effective.

The COVID-19 pandemic risks accelerating AMR due to high rates of antibiotics prescription,

even in cases where no associated secondary infections were detected in patients. The pandemic may also have an indirect negative impact through factors such as delayed diagnosis or interrupted treatments for non-communicable diseases. While many resources were reallocated at the beginning of the year to fight COVID-19, EPHA has continued to monitor the situation and advocate to ensure AMR remains high on the public and political agenda.



ACHIEVEMENTS IN 2020

- Formal launch of the MEP Interest Group in the European Parliament, bringing together key European, national and international AMR stakeholders and civil society representatives;
- Supporting the AMR Interest Group on AMR to organise 3 online events during World Antibiotic Awareness Week reflecting the need to take a One Health approach
- Development of the AMR Stakeholder Network, hosted by EPHA

PRIORITIES FOR 2021

- Strengthen and consolidate the AMR Stakeholder Network
- Provide support, together with Health Care Without Harm, for the activities of the MEP Interest Group
- Monitor the interplay between COVID-19 and AMR

2020 AT A GLANCE

FEBRUARY

Analysis | What to expect on Antimicrobial Resistance in 2020

Official launch of the MEP Interest Group on AMR

MEPs join forces to boost European Parliament actions to tackle antimicrobial resistance (AMR)

SEPTEMBER

Joint Letter | Time to fight AMR and improve transparency in the pharmaceutical industries

NOVEMBER

Online Discussion | AMR in the environment: From monitoring to action

Online Discussion | Tackling the dependence of EU food systems on antimicrobials

Online Discussion | Fixing the antibiotic innovation pipeline

AMR Stakeholder Network: Call for good practices to tackle antimicrobial resistance

MARCH

Re-organisation and consolidation of the AMR Stakeholder Network

JULY

Consultation Response | EPHA calls for a One Health Approach in evaluation of EU animal welfare legislation

OCTOBER

Letter | The Pharmaceutical Strategy is a chance to tackle antimicrobial resistance that Europe cannot miss says the MEP Interest Group on AMR

DECEMBER

Position Paper | Looking for the path of least resistance for One Health: Stepping Up the Fight Against Antimicrobial Resistance (AMR)

Tackling Antimicrobial Resistance: Selected Resources produced by the Joint Action on Antimicrobial Resistance and Healthcare-related infections (EU-JAMRAI)

CLEAN AIR

CONTEXT

Breathing is the most basic human function to sustain life, and yet, air pollution remains the largest environmental health risk in Europe.

During 2020, EPHA has continued to call on policy-makers to tackle air pollution building its advocacy on three pillars: the Clean Air Healthy Cities project; the Medics for Clean Air campaign; and the European Green Deal proposals from the European Commission, including the Zero Pollution Action Plan and the new Euro 7 standards. Data-driven and built on science, EPHA works in close cooperation with its members and partners, thus producing reports used to advocate for health-driven policies in the transport sector so everyone can breathe clean air.



ACHIEVEMENTS IN 2020

- Clean Air Healthy Cities Project: study released in October 2020 linking transport to the health costs of air pollution in 432 European cities
- Launch of Medics4CleanAir, a European coalition of doctors, nurses, researchers, medical students, and other health professionals who have signed a Manifesto for urgent and sustainable actions to tackle air pollution and to protect their patients and our environment
- Air pollution and COVID-19: air pollution worsens the severity of COVID-19 on people's health
- Debate on the impact of Dieselgate - 5 years on, what lessons have we learned?

PRIORITIES FOR 2021

- Advocate for the adoption of ambitious EU legislation for clean air and climate (European Green Deal, Fit for 55, etc.)
- Highlight the health costs of air pollution caused by heating and transport in Europe
- Highlight the link between viruses, epidemics, and air pollution

2020 AT A GLANCE

JANUARY

Why “clean” diesel cars still emit health-harmful particle pollution

Clean Air Actions under the 2020 Work Programme of the European Commission

APRIL

Air pollution and damages to immunity

Air pollution caused conditions: the risk of co-morbidities

JUNE

New Euro 7 standards: the final nail in the coffin for polluting vehicles?

No going back to pre-Covid air pollution levels – opinion poll finds

SEPTEMBER

NGOs call on the European Commission to set 2035 as the EU-wide end date for sales of petrol and diesel cars and vans

Dieselgate 5 years on: what lessons have we learned ?

DECEMBER

Make walking, cycling and public transport the primary modes in functional urban areas by 2030

FEBRUARY

How can we improve the air we breathe in 2020?

MARCH

Coronavirus threat greater for polluted cities

Air pollution clears in cities globally – new maps

MAY

EPHA supports international calls from over 40 million health professionals in support of a healthy recovery.

JULY

A Healthy European Green Deal?

A new prescription from medical professionals across Europe to tackle air pollution

OCTOBER

How much is air pollution costing our health?

NOVEMBER

The ambition for zero pollution: what footprint will Europe leave on our environment?

Scrap the conformity factor to protect our health

DIGITAL HEALTH

Digitalisation in health and care became real for many Europeans in 2020. Triggered by the COVID-19 pandemic, many health providers and patients alike experimented with digital health technologies for the first time and put aside their reservations in the process, especially regarding telemedicine and other forms of telehealth services. In public health as well, Europeans were gradually introduced to contact tracing apps that sent alerts to help avoid the spreading of the coronavirus.

Let's be honest, the introduction of these data-driven solutions - especially the contact tracing apps - wasn't easy, and there were many issues regarding their reliability, interoperability and the quality of the data, and even greater concerns about the increased need to share potentially sensitive data. Many other new technologies rely on

vast amounts of personal health data, often powered by Artificial Intelligence (A.I.), the subject of a White Paper consultation to which EPHA responded. All of a sudden, it seemed, the 'brave new world' had reached the healthcare domain, with further discussions around the Digital Services Act and the role of online marketing.

The public health community was faced with the necessity to better understand some of the technical aspects behind these technologies: How do algorithms work and how do you remove bias? How can data security, privacy and fundamental rights be safeguarded in a world where more and more personal data are accessed, shared, processed, analysed and stored? Who has the right to access what data exactly, and how can individuals control the use of their own data?



These questions drove most of EPHA's work on digital in 2020, and the findings of a study we commissioned at the end of the year confirmed that the public health community has some catching up to do: it recommended that lessons can and must be learned from digital rights organisations familiar with the introduction of data-driven solutions in other sectors. But while the threat of data abuse is genuine, it must not dominate our thinking about digital health or stifle the introduction of ground-breaking technologies that offer improvements to patients, healthcare professionals, health system managers, researchers, regulators, drug developers and ordinary people. Instead, we need to advocate for the most appropriate safeguards under the emerging European Health Data Space and remind policymakers and developers that digital health remains a complement to in-person care: it can facilitate many things (e.g. remote monitoring, reminders to undertake routine tasks, ePrescriptions, teleconsultations and direct communication, collection of relevant health data) to improve prevention and treatment - and should be fully integrated into modern health service delivery - but in the end, health is the result of intricate personal histories which sometimes defy accurate data capture and interpretation. Therefore, first and foremost EPHA continued its advocacy to ensure that digital health solutions address the real needs of their end-users and reminded policymakers that these needs can only be adequately addressed by involving civil society in the planning, implementation and evaluation of digital health. The Polish eHealth Forum provided a welcome opportunity to share our thinking around an inclusive eHealth ecosystem that promotes innovation yet also protects public health values.



2020 AT A GLANCE

MARCH

Analysis | Why we need to adapt existing EU laws to Artificial Intelligence

MAY

Digitalisation to support an effective public health response to the COVID-19 emergency.

JULY

Latest Developments | What lies ahead for health under the German Presidency?

Analysis | Harnessing data in the COVID-19 aftermath: Track and trace, brace or embrace?

DECEMBER

Analysis | What are the ingredients for a sustainable digital health ecosystem?

Reflection Paper | Why the public health community must insist on values in the digital transformation

APRIL

Analysis | Involving healthcare workers in the ehealth revolution

JUNE

Public Consultation Response | EPHA's response to the White Paper on Artificial Intelligence - A European Approach

SEPTEMBER

Public Consultation Response | Ensure a high level of health protection, especially for children and young people in upcoming digital services legislation, says EPHA

EU4HEALTH CIVIL SOCIETY ALLIANCE

EPHA continued to play a leading role in the EU4Health Civil Society Alliance, which outlined a vision for a post-COVID-19 EU health policy after 2020, in response to the effects of the pandemic. We supported the unprecedented budget rise of the re-established EU4Health Programme, which paid the highest compliment by adopting the name of our long campaign to ensure health remains high on the EU's agenda. We advocated against the cuts in its funding proposed by European leaders and supported the European Parliament's call for more civil society engagement. The EU4Health CSA work was recognised by the Commissioner for Health and her cabinet, by DG SANTÉ and reported in the EU media.



IMPACT

- Influencing the development of the EU4health programme to reflect the needs of all Europeans and ensure better health for all
- Mobilising the health community and EU politicians to support an ambitious level of EU4Health programme funding
- Health Commissioner Kyriakides in her speech at the EPHA AGA highlighted EPHA's work within the EU4health Civil society alliance as an excellent support to EU health policy.

PRIORITIES FOR 2021

- Monitoring EU4Health programme implementation
- Ensuring meaningful involvement and support of civil society
- European Health Union Manifesto initiative asking for an EU Treaty Change on Health competence as part of the Conference of the Future of Europe

2020 AT A GLANCE

MARCH

Analysis | EPHA: How the EU can do more for our health

EPHA: COVID-19 reveals urgent need for a common European public health approach

JULY

A public health view of the EU4Health Programme

What lies ahead for health under the German Presidency?

OCTOBER

Dear EU Health Ministers, Downgrading EU health action is the wrong answer to the coronavirus crisis

DECEMBER

An inclusive EU4Health Programme to better meet the needs of people in Europe

Focus on primary prevention paves the way for a less unequal Europe in the new EU4Health programme

MAY

COVID-19 has shown EU action on health is more urgently needed than ever

EU4Health Members' response to COVID-19

SEPTEMBER

EPHA analysis of President von der Leyen's State of the European Union speech 2020

How to harvest long-term health benefits of the EU4Health programme?

NOVEMBER

No dreams for a European Health Union without a triple WWW EU4Health Programme

FOOD SYSTEMS AND NON-COMMUNICABLE DISEASES (NCDs) PREVENTION

CONTEXT

One of EPHA's main aims is to advance enabling environments for the prevention of non-communicable diseases (NCDs) and the uptake of healthy and sustainable diets.

EPHA has continued to argue for a strong focus on prevention in the EU's Beating Cancer Plan, seeing it as a first step towards a wider EU strategic approach to the prevention of NCDs, Europe's foremost health issue.

Together with a range of partners EPHA has been at the forefront of advocating for a transformative Farm to Fork Strategy to kick-off the transition to sustainable food systems with health as a key pillar.



IMPACT

- The concept of 'food environment' is embedded in the Farm to Fork Strategy.
- An elaborate prevention pillar in Europe's Beating Cancer Plan with actions to tackle key disease risk factors.
- Successful launch of the EU Food Policy Coalition.

PRIORITIES FOR 2021

- Ensuring ambitious implementation of the actions under the Farm to Fork Strategy and Europe's Beating Cancer Plan
- Mobilise the engagement of health actors for sustainable food systems
- Deepen the connections between public health, food systems and planetary health, with a view of tackling multiple interrelated crises, including climate, AMR and NCDs

2020 AT A GLANCE

FEBRUARY

Joint Statement | Prevention at the heart of Europe's Beating Cancer Plan

APRIL

Joint letter | No further delay of the EU Farm to Fork Strategy.

JUNE

Discussion EPHA - Commissioner Kyriakides on Farm to Fork Strategy

SEPTEMBER

Joint letter | EU agricultural policy should support nutrition-oriented supply chains

NOVEMBER

STOP Project: New review | Policies to tackle obesogenic environments are equitable, acceptable and cheap to implement

MARCH

EPHA's Response to the Roadmap for Europe's Beating Cancer Plan

EPHA Consultation Response | A Farm to Fork Strategy for sustainable food systems

MAY

Webinar: New opportunities for health in European food & agricultural policies

Publication Farm to Fork Strategy and EPHA reaction

JULY

Public launch EU Food Policy Coalition

OCTOBER

Joint event at World Public Health Congress 2020: Transforming food and agricultural systems and addressing food insecurity in Europe

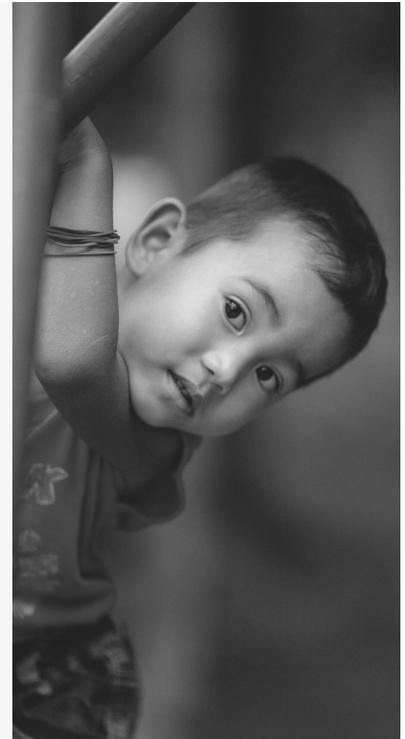
CAP for health: Voting recommendations for a human and planetary healthy EU agricultural policy

HEALTH INEQUALITIES

CONTEXT

Providing equitable solutions and improving public health systems is at the heart of EPHA's mission and vision, therefore, EPHA's advocacy addresses health inequalities, with particular focus on children, Roma, and the effects of these inequalities on people's health and our wider community.

Under EPHA's leadership, the Roma Health Network, which aims to engage with the community and policy makers, and create Roma inclusive policies on health, housing, and education, was launched in October 2020.



IMPACT

The previous year EPHA focused on identifying, articulating, and working towards effective policy solutions to long-standing inequalities affecting vulnerable groups, achieving positive outcomes in strategic policy areas. By facilitating a broader network composed of public health organisations, the Roma Health Network, European and national civil society partners, policy and decision makers and other allies, EPHA pressed for holistic, integrated, and sustainable policies and adequate funding to tackle the demographic, social and economic aspects of health inequalities in their different dimensions (e.g gender, age). The milestones reached in the previous year are the results of significant investment in building capacities of civil society organisations at EU and national level as well as mobilising key stakeholders such as policy makers to strengthen policy commitment to ensuring equal access to essential rights and services such as healthcare and prevention. Specific attention has also been paid to systemic inequalities that vulnerable groups experience in many European countries.

PRIORITIES FOR 2021

Through its multiple activities, including conferences, policy dialogues and capacity building, EPHA aims to increase knowledge about the health determinants of various vulnerable groups and provide concrete evidence of health inequalities in post-COVID context compiling resources produced by strategic stakeholders. EPHA seeks to promote the principles of health equity among national civil society and mainstream health in relevant policies at all levels whilst mobilising policy makers to advance sustainable policy solutions to health disparities.

EPHA's large membership and partnership represents an added value for reaching such objectives and providing key support to policy makers by identifying, proposing and implementing purposeful public health actions in line with the needs of the most vulnerable.



2020 AT A GLANCE

FEBRUARY

Joint statement on the Child Guarantee Council Recommendation

APRIL

Joint statement on access to education for Roma children in COVID-19

Joint statement: Protecting children and their families during and after the COVID19 crisis

JUNE

Joint statement :
We need a comprehensive, sustainable Europe 2030 strategy with a strong social dimension

AUGUST

Policy Recommendations:
Healthy from the beginning: ensuring a good start in life for all Roma children

NOVEMBER

EPHA response to the public consultation on the EPSR action plan

MARCH

Joint response to the roadmap consultation on post-2020 Roma Equality, Inclusion, and Participation (EPHA, Roma Education Fund)

Joint response on the roadmap consultation on post-2020 EU Roma Framework on behalf of First Years First Priorities campaign

MAY

Joint statement: Time to re-think our societies and economies - Why we need to prioritise early childhood development

Webinar: Staff mental health protection in time of pandemic

Joint statement on prioritisation of Roma and Traveller children in national COVID-19 responses

OCTOBER

Official launch of the Roma Health Network

EPHA response to the public consultation on the EU Child Guarantee: Tackle child poverty by expanding the scope of the EU Child Guarantee

DECEMBER

Launch of the revised European Charter for Health Equity

Official launch of the First Years First Priorities Campaign

UNIVERSAL ACCESS AND AFFORDABLE MEDICINES

Since 2016, the European Public Health Alliance's advocacy has highlighted the problems caused by excessive medicines' prices for patients and health care systems, together with the questionable quality of innovation. EPHA has prioritized the need for transparency in pharmaceutical systems in Europe; for affordable prices; and pushed for a healthy realignment of IP incentives with appropriate rewards for industry, balanced with equitable access to effective and affordable medicines for patients.

The start of the COVID-19 pandemic brought pharmaceutical issues to the forefront as governments turned to companies for therapeutics (vaccines & treatments) against the novel coronavirus. EPHA led and coordinated the push for transparency in the negotiations between pharmaceutical companies and the EU on the procurement

of COVID-19 vaccines. This resulted in the unprecedented release of a redacted version of the contract with the pharmaceutical company Curevac, followed by the publication of additional deals albeit redacted. The release of redacted versions of the contracts signed between the EU and individual pharmaceutical companies sets an important precedent in the secretive world of pharmaceutical procurement.

Throughout 2020, EPHA and its members highlighted the need for affordable vaccines and medicines against the pandemic and beyond. Many of these messages were echoed in the European Commission's landmark pharmaceutical strategy which was published in November.

In October 2020, EPHA launched the EPHA #A2MDialogues - a flagship series of online discussions bringing together leading thought leaders and policy-makers, academics, industry representatives and NGOs, for a frank discussion of European pharmaceutical policies; on issues such as regulatory reform; IP; COVID-19 vaccines negotiations;



and the role of the new European Health Preparedness and Emergency Response Authority (HERA).

Moreover, EPHA's members have proven to be reliable partners in tackling the growing problem of medicine shortages. Our contribution is valued by the European Commission and we are one of the key stakeholders to be continuously consulted during the current and previous mandate. Our asks are reflected in the Parliament's positions on shortages as well as on the ongoing negotiations for the extended EMA mandate.



2020 AT A GLANCE

FEBRUARY

The Top 4 Issues in Medicines Policy for 2020

APRIL

Patients can't wait any longer for action on medicine shortages

Will pharma commit to delivering affordable therapeutics against COVID-19?

JUNE

Ensure equitable global access for treatments, vaccines and diagnostics resulting from the ACT Accelerator, over 70 organisations ask

Getting it right: COVID19 vaccines procurement

SEPTEMBER

Transparency is needed to reap the full benefits of the EU's investment in its Vaccines Strategy, say health NGOs

MEPs vote for action on medicines shortages - what should be the next steps?

NOVEMBER

The European Pharmaceutical Strategy: An inventory for action for Europe

Webinar | Pharma & COVID-19: Winners, losers, prospects

MARCH

Against COVID-19, let's make public investments count for people

MAY

EPHA joins calls for concrete actions to ensure access for all as pledges made to tackle COVID-19

JULY

EPHA joins calls to bring fairer medicine prices to Europe

Public health must be the leading priority of Europe's pharmaceutical sector

OCTOBER

Webinar | Unleashing meaningful innovation through regulatory reform

Webinar | The EU's IP strategy: Enabler or barrier?

DECEMBER

Transparency is a fundamental pillar for the success of the EU Vaccines Strategy.

TRADE FOR HEALTH

The COVID-19 pandemic slowed down relevant developments pertaining to many of the international Free Trade Agreements (FTAs) the EU is currently negotiating with partners around the world.

However, as the implementation of Brexit began to reach its conclusion with the end of the transition period, EPHA monitored the creation of the EU-UK Trade and Cooperation Agreement (TCA) together with our partners based in Brussels and in the UK, with a briefing to be released in 2021 and membership of the PETRA group.

The main focus of EPHA's trade work - given the discontinuation of the European Commission's Trade Advisory Group - focused on analysing the Commission's adherence to article 5.3 of the WHO Framework Convention on Tobacco Control

(WHO FCTC) in terms of the transparent reporting of all contacts and meetings between EU policymakers and tobacco industry lobbyists.

Together with our partners of the STOP Tobacco project consortium led by the University of Bath, we found large discrepancies between different European Commission services and reminded senior officials of the good practices followed by DG SANTE and some national governments to protect tobacco control policies from the harmful influence of industry representatives. Compliance with article 5.3 FCTC will be particularly crucial in light of the revision of the Tobacco Products Directive and the implementation of Europe's Beating Cancer Plan, which are bound to trigger even more intense lobbying activities by Big Tobacco and their front groups.



Whilst EPHA continued to be present in relevant civil society consultation meetings about EU-US, EU-Canada and other trade deals, continued to monitor the negotiations on the controversial EU-Mercosur trade agreement and the impact of COVID-19 on trade, the primary opportunity to shape the EU's future trade policy was presented by the European Commission's public consultation on a renewed trade policy for Europe, a timely vehicle to reiterate many of EPHA's key messages around the role of public health and the need to ensure that important public health measures do not get dismantled by economically-driven trade interests.

ACHIEVEMENTS IN 2020

- Emphasised the relevance of Public Health in the European Commission's consultation on "A renewed trade policy for a stronger Europe".
- Together with STOP and partners submitted a response particularly highlighting the role of EU trade policy in promoting tobacco control.
- EU-Mercosur: deforestation's toll on public health
- Called, together with partner organisations, for the renewal of the free trade agreement expert group, of which EPHA was a member
- Brexit: Trade remains impervious to importance of public health on both sides of La Manche



THE EPHA BOARD



**ALICE CHAPMAN-
HATCHETT**
PRESIDENT



FREEK SPINNEWIJN
VICE-PRESIDENT



JEAN-PAUL ZERBIB
TREASURER



**JOSÉ MANUEL
BOAVIDA**
BOARD MEMBER



**VANESSA
MOORE**
BOARD MEMBER



**JAUME
COSTA**
BOARD MEMBER



**ANN-ISABELLE VON
LINGEN**
BOARD MEMBER

Members of the Board are elected for a 2 year mandate. The role of the Board is to support the EPHA Secretariat and its staff, set out the annual work programme of the organisation, set priorities and targets, review EPHA financial management and scrutiny of annual accounts and to appoint the appropriate staff.

FINANCIAL OVERVIEW



EPHA is an independent non-profit organisation, registered under Belgian law as an AISBL (Association Internationale Sans but Lucratif) under number 451 133 736.

THE OPERATIONAL BUDGET

In 2020, the total income of EPHA was 1.237.149 €.

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

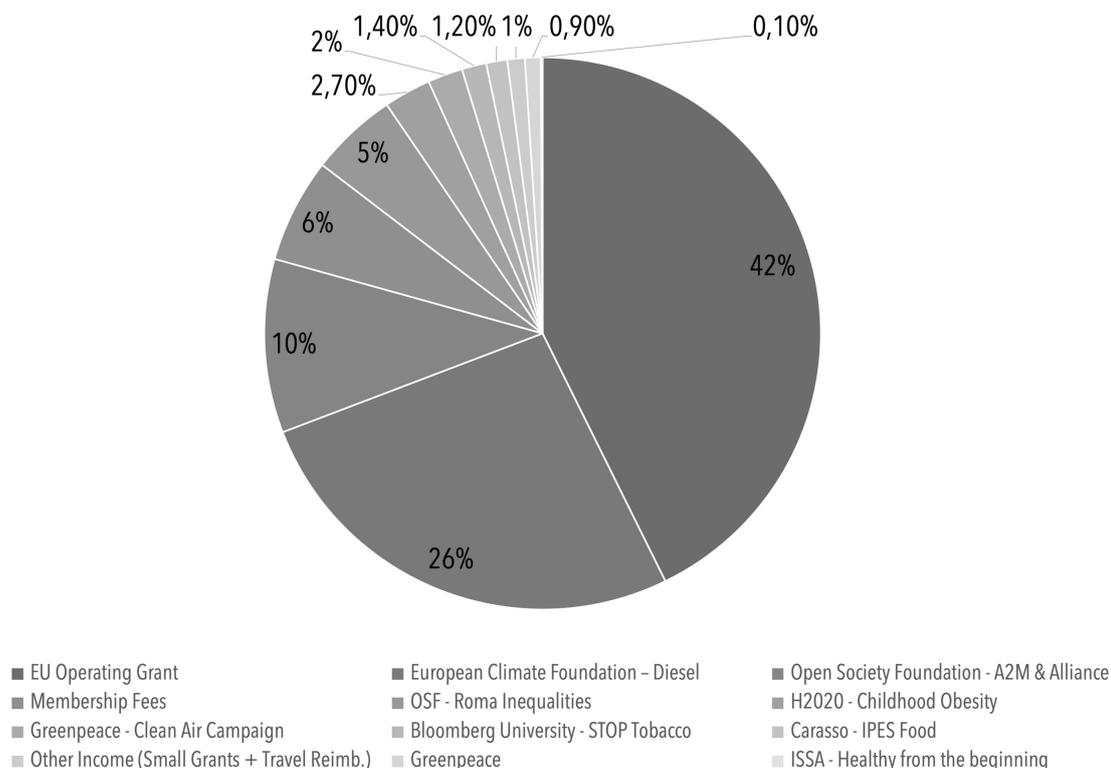
Our biggest contributor is the Operating Grant received from the European Commission. In 2020 their contribution represented 42.70% of EPHA's total income. In 2020, the total contribution of the membership fees represented 6.03% of the total income.

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.

EPHA BUDGET 2020

EU Operating Grant	€528.313
European Climate Foundation - Diesel	€330.885
Open Society Foundation - A2M & Alliance	€ 127.048
Membership Fees	€74.578
OSF - Roma Inequalities	€60.962
Carasso - IPES Food	€11.345
H2020 - Childhood Obesity	€33.326
Greenpeace - Clean Air Campaign	€24.200
Bloomberg University - STOP Tobacco	€17.332
Carasso - IPES Food	€15.333
Other Income (Small Grants + Travel Reimb.)	€12.296
ISSA - Healthy from the beginning	€1.526
Total	€1.237.149





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