



Priority 2:

Providing the means for an ambitious EU health policy

Secure an ambitious budget for health. Delivering ambitious EU objectives at the EU and global levels requires that health be viewed as an investment rather than a cost. Investing in health systems and addressing health workforce shortages across the EU, and in parallel investing in disease prevention and health promotion policies, is the only way to secure social cohesion, equity, wellbeing and productivity across the EU.

To make sure that health is a priority on the political agenda and remains so, investments are needed in supporting disease prevention, health promotion, health-enabling environments and health systems. These investments should focus on ensuring the health and wellbeing of all, and address the current crises that health systems are going through.

An ambitious budget that gives priority to health

The ambition to develop the European Health Union, foster disease prevention and health promotion, secure social cohesion, equity and wellbeing across the EU, should go hand in hand with an ambitious budget:

- Following an **Economy of Wellbeing** approach, investments in public health and health systems should be prioritised. Health is an investment, not a cost. Preventing ill health through health protection, health-enabling environments, and primary care, will develop healthier and more resilient societies and economies. For instance, the European Commission has estimated that the impact of air pollution on society, governments, health systems, agriculture and infrastructure amounts to [EUR 853 billion](#) annually in the EU, which could be reduced with the right investments supporting health and disease prevention.
- The EU should provide a **substantive budget** for public health policy formulated on strong **evidence-based assessments**. This budget should focus particularly on disease prevention, health promotion, and environmental exposure, through an ambitious and dedicated budget for the EU4Health programme. Furthermore, following a Health in All Policies approach, the budget should invest across the areas that impact the social, economic, environmental, and commercial determinants of health.
- This budget should be implemented to deliver on the pressing **health and healthcare systems' needs**. More accountability and transparency are needed on the management of the EU4Health budget. Furthermore, the co-funding mechanisms in the EU4Health budget should be improved.
- Health promotion and disease prevention should be allocated a specific share in the **multiannual financial framework (MFF)**. This would ensure that the health budget is consistent over several years, providing stability and predictability for long-term health initiatives and projects.
- **Civil society** should be consulted in a more substantive and meaningful manner regarding the drafting of the EU4Health budget and programmes, beyond tick box exercises. This collaborative approach can ensure that the budget aligns with the most pressing health needs and priorities.

- The social determinants of health mean that not everybody may benefit equally from health investments. Policymakers must take an **inclusive approach** when drafting the budget and designing policy, preferably by also including marginalised groups in the policy process. Additionally, budget should be allocated to addressing health inequities and fostering health literacy, and equitable access to healthcare.

Crucial investments in health systems

Health systems are in crisis. According to the Organisation for Economic Co-operation and Development (OECD), health systems are “underprepared and understaffed and [face] underinvestment”. Strong and ambitious investments are needed to make the systems resilient:

- Investments allocated to the health systems should **reach and impact positively all patients and public health**, and participate in upgrading and expanding healthcare infrastructure across Member States. This includes the promotion of health systems sustainability and decarbonisation.
- A dedicated **Health Infrastructure Investment Fund** that Member States can access to improve their healthcare facilities, technology, and equipment should be created. This fund can be used to modernise existing hospitals, build new medical facilities, and ensure access to state-of-the-art healthcare services.
- A share of the health budget should be dedicated to **global health initiatives** supporting healthcare infrastructure and capacity-building in low-income countries, through collaboration with civil society.

Addressing the health workforce crisis

All countries in the EU face severe health care [workforce challenges](#). Many of these are not new, but the COVID-19 pandemic has exacerbated problems and created some of its own. Furthermore, the current economic situation and cost-of-living crisis has had an impact in relation to pay, attrition rates and the attractiveness of certain health professions to potential recruits.

- The pressing issue of **health workforce shortages**, as well as medical deserts (areas where the population has insufficient access to health care workers or health services), should be addressed. These issues should be a priority in the next EU Commission mandate.
- Addressing health workforce shortages is essential in crisis preparedness and for strengthening European health systems in the long-term. This should include **long-term planning, improving working conditions and support** for health workers’ own physical and mental health.
- Investments should be made in **education, training, and continuous professional development** for health workers, to enable them to deliver better patient care. This would help keep existing health workers up to date with new knowledge, as well as prepare new recruits for likely challenges and trends (e.g., digitalisation, sustainability). Further information about existing European funding opportunities in these areas should be disseminated by the EU institutions.
- **Investments** should be made for the health workforce, particularly to provide them with better salaries and working conditions. In addition, clear career pathways should be developed for different specialisations.
- Guidelines on the **free movement of the health workforce** should be provided. Enabling the health workforce to move between countries is essential to fill the gaps where there are more acute shortages of the workforce. However, these guidelines should be mindful that the mobility should not further create an imbalance at the European level and globally, between countries that mainly see health workers leave and countries that receive workers, thus further deepening the shortages in some areas. EU countries in particular recruit much of their workforce from non-EU countries. This should be addressed, including as part of the Global Health Strategy.



EUROPEAN PUBLIC HEALTH ALLIANCE (EPHA)

Rue de Trèves 49-51 | 1040 Brussels (BELGIUM) | +32 (0) 2 230 30 56

www.ephah.org | ephah@ephah.org



Co-funded by
the Health Programme
of the European Union

The European Public Health Alliance has received funding under an operating grant from the European Union's EU4Health Programme (2021-2027). The content of this document represents the views of the authors only and is their sole responsibility; it cannot be considered to reflect the views of the European Commission and/or the European Health and Digital Executive Agency (HaDEA) or any other body of the European Union. The European Commission and the Agency do not accept any responsibility for use that may be made of the information it contains.

Transparency Register Number: 18941013532-08