

Priority 3.2: Addressing inequities in access to medicines and care

Promote health equity, social justice and social rights. Access to health is unequal in Europe, which is in stark contrast to the EU's pledge to be "a Union of Equality". This requires inequities in health access to be addressed, especially for marginalised groups. The next Parliament should commit to:

 3.2. Ensuring equal access to medicines, supporting tools, supplies and technologies, and healthcare across the EU and globally, especially by securing transparency and accountability in the implementation of the EU Pharmaceutical Strategy and the EU Global Health Strategy;

Access to care can be a source of inequities, be it due to medical deserts, lack of facilities and medicines, or due to social and economic determinants of health. It is essential for the EU to promote equal access to care, address shortages of medicines, and cooperate with all levels of governance to do so.

Equal access to care and medicines

Access to health care and access to medicines for all should be a priority of the EU, particularly in the context of shortages of both medicines and health workers.

- Measures to ensure the equitable availability and distribution of medicines, medical supplies, and technologies across Member States should be implemented, taking into account population needs, disease prevalence, and socioeconomic factors. In that regard, measures addressing medical deserts should be urgently developed.
- **Medicines shortages** must be addressed. The revision of the EU pharmaceutical legislation provides a first step, by moving from a reactive towards a preventive approach to addressing these shortages.
- To avoid undue influence from the pharmaceutical industry, companies should be required to provide **transparent information** on pricing, research and development (R&D) costs, and production costs for essential medicines. This transparency will help fair pricing and support more informed decision-making, for all sectors of health and care.
- A collaborative framework for health technology assessment should be set across the EU, allowing for
 consistent evaluation of new medicines and technologies. This can inform pricing decisions and ensure
 evidence-based access. Additionally, civil society organisations (CSOs), patient advocacy groups, and
 healthcare professionals should be involved in the monitoring and evaluation of access to medicines
 and healthcare.
- A strategic reserve of essential medical supplies, equipment, and technologies should be established, to be rapidly deployed during health crises. This reserve can help mitigate shortages and ensure timely access to critical resources.

- To ensure equitable **access to treatment** for rare diseases, there should be more investment in R&D to address the lack of approved treatments for these conditions and to foster manufacturing capabilities in the EU to ensure its strategic autonomy.
- Access to care and medicines should be ensured for **marginalised groups**. A European Reference Network (ERN) on access to health for marginalised communities should be considered.

Strengthening cooperation at all levels of governance

In a context of multiple crises, cooperation at the European and global levels is essential to tackle the growing issues of access to medicines, vaccines and care, particularly in the implementation of the EU Pharmaceutical Strategy and the EU Global Health Strategy. In this respect, it is recommended that:

- The revision of the **EU pharmaceutical legislation** should address shortages, encourage innovation and research and help eliminate duplicating efforts.
- The importance of **universal health coverage (UHC**) both within the EU and globally should be promoted.
- Support for the ACT-Accelerator initiative, a global collaboration to ensure equitable access to COVID-19
 vaccines, treatments, and diagnostics should be strengthened, with funding guaranteed. Furthermore,
 technology transfer, allowing the dissemination of a technology from its owner to other organisations,
 should be facilitated, to enhance production capacity.
- There should be meaningful and respectful collaboration with low-income countries to support the
 building of their healthcare capacities, including training healthcare professionals, improving healthcare
 infrastructure, promoting and building resilience, and strengthening supply chains for medicines and
 medical technologies.
- Both the **EU Pharmaceutical and Global Health strategies** should consider that vulnerable or marginalised groups may have increased difficulty in accessing medicines, supplies or devices and that should be explicitly addressed.
- Regular reporting on the **implementation** of the EU Pharmaceutical Strategy and the EU Global Health
 Strategy should be mandated. These reports should highlight achievements, challenges, and areas
 requiring further action, fostering transparency and accountability. The EU Civil Society Forum from
 DG HERA and the EU Global Health Policy Forum should continue to engage with its members at least
 twice a year.



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