

Report

AHF Europe – Kangaroo Group Debate

“Enhancing health system resilience in the EU and globally: How can the EU lead by example?”

24 January 2023 – Brussels, Belgium.
European Parliament, Room A3F383, ASP-Building

Participants: total 60 people registered for event (11 from European Parliament and European Commission, 12 from pharma industry, 26 from non-government sector and other institutions, 11 from AHF).

Speakers:

- Michael Gahler MEP (EPP, Germany)
- Juozas Olekas MEP (S&D, Lithuania)
- Bartłomiej Kurcz, Acting Head of Unit, DG HERA, European Commission
- Jorge Saavedra, Executive Director, AHF Global Health Institute



Objectives of the meeting:

- To debate EU’s role in global health resilience as reflected in recently published *EU Global Health Strategy*
- To promote AHF main principles on global public health convention

Summary of the debate:

Michael Gahler MEP (EPP, Germany) opened the discussions by placing them in the context of the latest developments in EU health policy, in particular, the publication of the *EU Global Health Strategy* in November 2022. He expressed optimism that the discussions will be elaborated under the leadership of the Swedish presidency of the EU (the first six months of 2023), which is committed to making Europe more inclusive, more open to the outside world and more transversal. He underlined that Sweden has a long-standing multi-sectoral, people-centred health care system and supports Europe taking a leading role in global health.

Juozas Olekas MEP (S&D, Lithuania) is a medical doctor and a former minister for health and former minister of defence in Lithuania. He is a substitute member of the European Parliament's Special Committee on the COVID-19 pandemic, which is addressing lessons learned and making recommendations for the future.



Olekas opened by saying that the European Union and the European Parliament did not have many powers in the health domain. While the EU was lacking a strong legal basis for health policy, he pointed to several proposals that had been put forward as a result of the pandemic, broadening the scope for action, including: the European Health Union legal package; the Pharmaceutical Strategy for Europe; the European Beating Cancer Action Plan; and, a Communication on the Digital Transformation of Health and Care.

The Special Committee on COVID-19 has not yet finished its work, but Olekas said that there were clear messages emerging on the need for solidarity, inclusiveness, accessibility to medicines and contractual and pricing transparency of pharmaceuticals. He added that the European Parliament's discussions were always very open to different stakeholders, especially civil society.

Olekas pointed to the recently concluded 'Conference on the Future of Europe', where delegates identified health as one of the areas where they would like to see more action at an EU level, especially on better access to health services. Another outcome of the 'Conference on the Future of Europe' is that it became clear that the EU needs a Treaty change with regard to health and health crisis management. In addition, the European Parliament wants to go further and has just agreed (18 January) to establish a Sub-Committee on Public Health covering communicable and non-communicable diseases, cross-border issues, medicines, prevention and preparedness. Olekas said that MEPs will contribute to the EU's Global Health Strategy, saying there was a strong case for greater responsibility and joint responsibility (close cooperation with and between EU Member States) at an EU level.

Bartłomiej Kurcz, Acting Head of Unit, DG HERA (Health Emergency Preparedness and Response Authority), European Commission, also underlined the limited powers of the EU, limited to that of coordination. This means that HERA (established September 2021) would have difficulties meeting the expectations from some quarters. Kurcz said that health actions were to be found across the Commission's Directorate Generals (DGs) and in the work of the External Action Service, among others.

Kurcz emphasised that HERA's role was focused on the provision of medical countermeasures in the event of a serious cross-border threat to health and was not about health systems in general. He also pointed to the fact that HERA is currently much smaller than its US

counterpart BARDA (Biomedical Advance Research and Development Authority), which employs 500 people, compared to HERA's 100 staff members.

One of the top priorities is to have a medical countermeasures IT system that will be coordinated with the existing health security architecture, with the EMA (European Medicines Agency), ECDC (European Centre for Disease Prevention and Control) and EU Member States. This data space would maintain the information on the stockpiles of medical equipment on national territories and identify shortages. He described this as an ambitious project requiring a lot of information and facing many challenges, including confidentiality issues. During the question and answer session, he acknowledged that, currently, data was often difficult to collect, was not harmonised and might not be reliable, especially with regard to the harmonisation of data on COVID-19.

HERA will then work with DG Research on the development of medicines and with the European Investment Bank through a HERA financing facility to help with later development phase and production, if necessary.

Kurcz said global cooperation is an important part of HERA's role and, in this context, acknowledged that medical countermeasures do not exist in isolation to health systems. He argued that one of the priorities of global health strategy is to have the capacity not only to produce effective medicines, but to deploy them. This was a problem that during the roll-out of Covid-19 vaccines in Africa, largely because of logistical and mis/disinformation problems. During the question-and-answer session, he said that the vaccines had been oversupplied at a certain point, but delivery and adoption had been more problematic.



Jorge Saavedra, Executive Director, AHF Global Health Institute, explained how AHF grew from grassroots provision of hospice care and then developed healthcare services in the US. AHF adopted a more global perspective when they were invited to South Africa and started to provide support for treatment there. AHF set up a European base in Amsterdam in 2010. It operates beyond the EU, with projects in the UK, Ukraine and Georgia.

When Ebola broke out in Sierra Leone, the Foundation realised that they needed to get involved beyond their original remit of dealing with HIV/AIDS. At this point they started thinking about a global public health foundation. Referring to the governance of air traffic control, he said that a framework of this kind was needed for health.

AHF developed a global public health approach in 2019. The principles they developed were published in *The Lancet*, a weekly peer-reviewed medical journal. They outlined five main principles needed to address health matters: transparency; accountability; equity; international

cooperation and coordination; and the need for the full involvement of civil society at a grassroots level in the development of policies and at the decision-making level.

In Saavedra's view, the EU can take a leading role in calling for a global approach to be both transparent and accountable. Other countries might lead the way in calling for equity in terms of access to medicines. He argued that a global accord should be legally binding and not just another set of good intentions.

Saavedra pointed to the Global Fund to Fight AIDS, Tuberculosis and Malaria as a good model for cooperation that involved governments and civil society, also referring to its twenty years of experience that could be built on. Saavedra thinks that this could be revived as an idea alongside the World Bank pandemic fund.

In his opinion, it should also be possible to act at a regional level. Saavedra noted that, for a disease to be declared a public health emergency of international concern it has to be present in Europe or in the US. However, he pointed out that this resulted in widespread neglect of tropical diseases.

Question and answers

- One of the issues raised was the difficulty of collecting data and the reliability of that data, especially with regard to COVID-19 statistics. The Commission acknowledged that it was a challenge as the cases or deaths were measured in different ways in different countries. Gahler also raised concerns about the quality of data.
- The EU was criticised for its general failure to transfer vaccines to Africa and South America in an efficient way. Kurcz noted the problems of a lack of facilities and misinformation initially but, also, subsequently, that of oversupply of vaccines. Saavedra pointed to the fact that more people died of Covid in Mexico than in all of Africa, partly due to limited access to vaccines and that the same scenario has been developing with regard to the Mpox virus.
- The dangers faced by some civil society actors in non-democratic countries were also raised. This drew attention to how important it is to involve them as a more independent voice.
- There was also a question about the possibility of measuring the impact and the deliverables of the *EU's Global Health Strategy*, which may be addressed by developing a monitoring tool in 2023, funded by EU4Health.
- The final remarks included the need to communicate to citizens that efforts in this area are based on good intentions in the general interest and to establish a structured dialogue with civil society, instead of meeting just once a year.

Next steps for AHF Europe advocacy:

- Contributing to the Council conclusions under preparation by the Swedish Presidency
- Contributing to the Motion of Resolution to be issued by the European Parliament
- Face to face meetings with key stakeholders in EU Global health strategy: civil society, Member States and the European Commission to further promote AHF GPHC key principles
- Publish Debate information on AHF Europe web site: <https://ahfbetterhealth-eu.org> and in Brussels and EU media (Brussels Time (<https://www.brusselstimes.com/362981/enhancing-health-system-resilience-in-the-eu-and-globally-how-can-the-eu-lead-by-example>), Parliamentary magazine, others)

