

What Opportunities and Challenges Does the EU Global Health Strategy Present?

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[This document is part of a series of debate notes that tackle fundamental questions concerning global health. Its purpose is to bring scientific knowledge to the public conversation and the decision-making process. The articles have been based on the best available information and may be updated as such information evolves.]

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Photo: Central hall of the Europa building in Brussels / European Union.

On 30 November 2022, the European Commission published the [EU Global Health Strategy: Better Health For All in a Changing World](#) (hereinafter the Strategy). Health is positioned as an essential pillar of the European Union's external policy, a critical sector geopolitically and central to EU strategic autonomy¹. The Strategy presents **an ambitious proposal** for the EU as a whole to tackle global health challenges in a coordinated manner, deepening its leadership in a constantly changing and evolving international context. It is therefore presented as an external dimension of the European Health Union and an essential component of the Global Gateway programme, the strategy through which the EU is redefining its role as a global actor.

The Commission's proposal is built on **two fundamental sets of lessons lear-**

ned. Firstly, the lessons learned in the COVID-19 pandemic and the role that the EU played in the global response to it. Secondly, the lessons deriving from the implementation of the measures proposed in the predecessor to the current strategy, in 2010 ([The EU Role in Global Health](#)).

This document analyses the Commission's proposal, focusing particularly on three aspects: the role of science and research; the implications for international development associations; and the different levels of coordination that implementation of the Strategy requires. The main challenges of the proposal that will have to be tackled in forthcoming months are then identified, and the document concludes with a number of recommendations to guide action in Spain. As well as being a decisive period for the imple-

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¹ Strategic autonomy is a concept arising in relation to debates on the EU's defence and security policy which has widened to other areas such as the economy, technology or health which the EU itself has defined as: "The capacity to act autonomously whenever and wherever necessary, and with partners whenever possible." The paralysation of international trade due to COVID-19 brought to light the risk of depending on global supply chains to access basic protection and safety elements such as masks and PPE.

mentation of the Strategy, the **Presidency of the Council of the European Union**, which will correspond to **Spain** in the **second half of 2023**, provides an

opportunity to boost key aspects of our country's commitment to global health ●

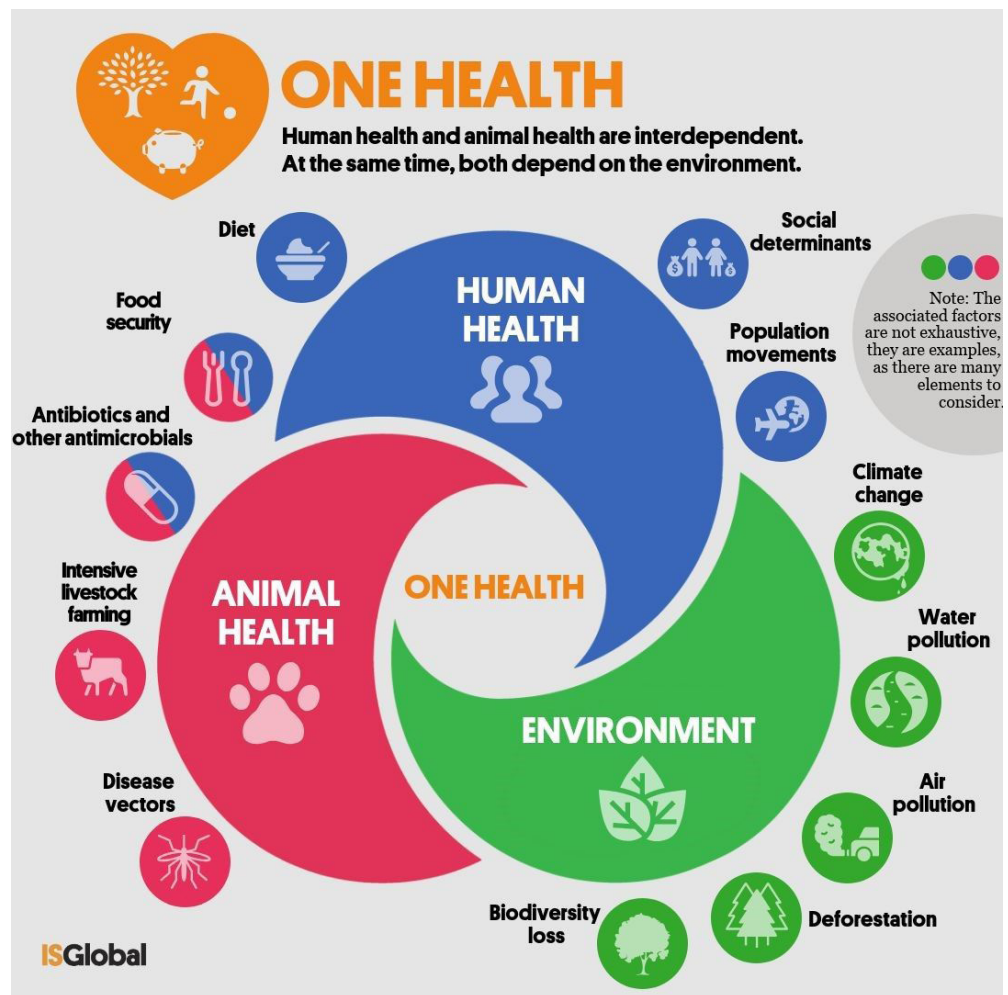
1. What Does the EU Global Health Strategy Propose?

“The Strategy puts forward three interrelated priorities rooted in the Sustainable Development Goals (SDG).”

The Strategy puts forward three interrelated priorities rooted in the **Sustainable Development Goals (SDG)** and the commitment to them made through the European Consensus on Development adopted in 2017. These three priorities are articulated around 20 guiding principles that are specified, in a somewhat unequal way, around a number of lines of action.

The **three priorities that the Strategy sets out** are:

1. Deliver better health and well-being of people across the life course.
2. Strengthen health systems and advance universal health coverage.
3. Prevent and combat health threats, including pandemics, applying the “One Health” approach.²



² The “One Health” approach sets out a holistic connection of approaches to the health of people, animals and the environment as the basis for tackling the threats to health posed by the three great planetary crises: climate change, biodiversity loss and pollution. For more information, see the ISGlobal blog: <https://www.isglobal.org/en/healthisglobal/-/custom-blog-portlet/one-health-una-sola-salud-o-como-lograr-a-la-vez-una-salud-optima-para-las-personas-los-animales-y-nuestro-planeta/90586/0>

The first two priorities are aligned with two fundamental aspects of the 2030 Agenda concerning health. The first of these places the focus on **the health of people** proposing that the determinants affecting it (economic, social and environmental) be tackled from a standpoint of rights that emphasises attention to women and girls. It also prioritises vulnerable populations, through a “health in all policies” approach. The lines of action are aimed at equitable access to the full range of health interventions and services. The Strategy specifically includes support and collaboration with the main multilateral initiatives that impact health (such as the Global Fund to Fight AIDS, Tuberculosis and Malaria; the Gavi Alliance, the UN Population Fund; or the European and Developing Countries Clinical Trials Partnership, EDCTP).

The second of the priorities addresses work on **health systems** with the aim of advancing towards universal health coverage. It places emphasis on improving primary healthcare and core public health capacities to meet the requirements of the International Health Regulations of the World Health Organization (WHO), currently under review. It identifies actions where efforts can be concentrated to improve and strengthen health systems around three core aspects: digitalisation, health research and health workforce (ensuring a sufficient number and adequate skills of the personnel who work in this sector).

The third priority, which is also contemplated in the SDG, concentrates on key aspects of the health security agenda. The pandemic served as the catalyst for a wide range of measures for the improvement and resilience of **systems of preparedness and response to health threats** throughout the EU. Notable among these measures is the creation of HERA (Health Emergency Preparedness and Response Authority), the first months of action of which are described in the [State of Health Preparedness Report](#), which was published in parallel to the Strategy. The lines of action on this matter are concerned in more depth with the added value recognised in the measures adopted in response to COVID-19 throughout the EU, and propose extrapolating them to other regional contexts or scaling them

up to the global level. Work is to be intensified at all levels on the threat posed by antimicrobial resistance.



The role of science and research

Boosting global health research to **develop the technologies and countermeasures which are necessary** to improve health appears as one of the Strategy’s 20 guiding principles, which recognises its fundamental role and offers as an example the research into COVID-19 vaccines. This guiding principle is articulated around the following lines of action:

- Extend **international cooperation** in research and innovation, making research data open, standardised and interoperable, and promoting the dissemination of results as a common good.
- Support the research process end-to-end, **from fundamental to clinical research**, in order to bridge the gap between the generation and implementation of knowledge and evidence.
- Make **research in low- and middle-income economies** relevant for local pharmaceutical and health technology production. Reinforce mutual capacity through joint undertakings and reinforce local production capacity through cooperation between public and private actors.
- Support **international processes that strengthen the scientific base** for policy action.

The European Global Health Research Institutes Network (EGHRIN), of which ISGlobal is a founding member, and the League of European Research Universities (LERU) pointed out in their feedback as part of the public consultation³ on the Strategy the need for an integral, multifaceted and scientific evidence-based approach. To do so, they identified as key elements the need to foster **academic cooperation** between different disciplines and recognise the **role of research centres**, especially in the design of interventions and countermeasures adapted to the local context. With regard to interaction between academic disciplines, the same actors consider it especially relevant for access to and equitable distribution of vaccines and for identifying the climate

³ European Commission (2022). Feedback from: League of European Research Universities and European Global Health Research Institutes Network. https://ec.europa.eu/info/law/better-regulation/have-your-say/initiatives/13506-Global-health-new-EU-strategy/F3343950_en

and environmental factors affecting global health.⁴ The Strategy also recognises the role of **transdisciplinary** action in the guiding principle concerning One Health, by considering the complexity and consequences of animal, environmental and human interactions, that call for a multisectorial, integrated and transdisciplinary approach.



Implications of international development associations

There are two notable aspects of the Strategy concerning international development cooperation. Firstly, it proposes greater depth and interrelation of cooperation for development as one of the distinctive traits of Europe's global presence. This Strategy is presented as a fundamental element of the Global Gateway programme, proposing **investment in key infrastructures in five areas** (digital, climate and energy, transport, health, and education and research) to reposition the EU's role in the world in light of the geopolitical changes unleashed by the successive crises of recent years. All of this goes beyond the traditional goals, tools and resources of Official Development Aid.

The second noteworthy aspect is the importance given to the Team Europe approach in addressing how to execute cooperation interventions and also those of the Global Gateway programme. This approach was implemented to channel and coordinate the EU's action in the global response to the pandemic. It is based on **joint action and pooling of resources, capacities and experience** of the EU institutions and those of the Member States. The aim is to maximise the efficiency and impact on the ground of the initiatives which, with this approach, identify key priorities in countries or regions, based on a common planning and implementation framework.



Coordination for impact and a single voice on health

The Strategy distinguishes two areas where coordination is essential and at the same time a challenge. Firstly, **within the EU institutions**, between the different areas where policies with a direct impact on health are addressed. The Strategy proposes governance based on the “**health in all policies**” approach mentioned above, which is based on mapping out roles, responsibilities, policies, tools and capabilities of all the EU policies, as well as EU delegations on the ground to identify how they can contribute to achieving the priorities. This includes, firstly, working to combat the three major planetary threats to health: climate change, biodiversity loss and pollution. It also propounds other areas to consider raising standards in health and safety at work, education for health or humanitarian assistance in emergency situations. Finally, it suggests specific lines of action that will contribute to global health in the spheres of finance, international trade and defence.

Secondly, coordination **between EU institutions and Member States**. As already stated when mentioning the Team Europe approach, what is primarily being sought is a greater impact of interventions. We have to add to this the importance the Strategy gives to the EU speaking with a single voice to maximise its influence and leadership in the emerging multilateral global health order. For this purpose, after specifying in detail actions that will facilitate coordination, Member States are invited to align with the guiding principles the Strategy uses to define the new system of multilateral health governance: strengthening the WHO, alignment and synergies with global health fora and initiatives and a larger and stronger presence of the EU in international bodies and institutions ●

⁴ EGHRIN (2022). Healthy People, Healthy Societies: An Integrated Approach. https://www.eghrin.eu/s/Final-LERU_EGHRIN-TH-Meeting-June-2022.pdf

2. Main Challenges of the Proposal

“Some published analyses identify critical aspects with regard to implementation that may limit the real scope of its ambition.”

The Strategy, which in general has been well-received, is **an ambitious proposal** by the Commission. It was drawn up jointly by the Directorates General of Health and International Associations of the European Commission, and offers a common vision of global health necessary to align the actions of the many and diverse actors it calls on. However, some published analyses identify critical aspects with regard to its implementation that may limit the real scope of this ambition.



Implementation

The Lancet published an expert assessment that considers that this Strategy is a step forward on which to build a shared vision of global health, its governance and challenges within and outside the EU, despite certain weaknesses.⁵ In particular, the unequal level of specification of the lines of action and the absence of an integral vision of how these lines of action are going to contribute to the attainment of the priorities. One of the aspects lacking in specific definition, according to the authors, would be the **connection of the Strategy with HERA**, a cornerstone of the European Health Union. Other experts quoted by Euractiv point out another weakness in the **lack of specific definition of the work on climate change** despite placing the “One Health” approach at the heart of the Strategy.⁶ All this highlights the need for greater depth and clearer specific definition of the range of actions that call for greater coordination between policy areas and with different actors of the EU and the Member States. It is necessary to define how these interactions are going to be facilitated in order to generate synergies and impact.

Another analysis by the think tank EDCPM identifies the keys for implementation of the Strategy that require special attention.

It points out, firstly, that to avoid the under-implementation of previous strategies, it is important to maintain the momentum of **global health in the agenda of priorities**.⁷ From this we can infer the need to maintain leadership at the highest level that will identify and drive the necessary economic and political commitments to carry out the planned actions. These efforts, within their respective competences, correspond to both the EU institutions and to the Member States.



Coordination

The relationship between EU institutions and between Member States represents an important challenge for the implementation of the Strategy. At the time of writing this document, **negotiations** are being held to approve the conclusions of the Council of the EU backing the Commission’s proposal. The Council is the body that expresses the will of the Member States, where the operational rule is unanimity. The first great challenge of this negotiation is anticipated to be in the area of **Women’s Sexual and Reproductive Health**, where the policies and reactionary discourse of some States are radically opposed to those of other States that work on gender equality as a priority (notably Spain). It is essential that building a consensus is not to the detriment of the EU’s commitment to gender equality.

The second challenge of the relationship between EU institutions and Member States involves reaching a common understanding on how responsibilities and leadership are distributed in the areas where joint actions are to be carried out or where it is required to speak with a single voice. Some EU states are important actors in the global health system where they have developed their own profile and have fundamental ca-

⁵ McKee, M., Field, S., Vella, S. et al, (2023): The EU has a global health strategy: the challenge will be in the implementation. *The Lancet*. [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)00328-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)00328-8/fulltext)

⁶ Holmgard Mersh, A. (2022): EU global health strategy lacks ambition on climate change, says expert. Euractiv.com. <https://www.euractiv.com/section/health-consumers/news/eu-global-health-strategy-lacks-ambition-on-climate-change-says-expert/>

⁷ Veron, p., Sergejeff, K., Apiko, P. (2022): The EU global health strategy: how to make it work. ECDPM. <https://ecdpm.org/work/eu-global-health-strategy-how-make-it-work>

capacities to influence the main international fora and bodies (for example, in the WHO, G7 or G20). Many of them have drawn up their own national strategies for global health that explicitly set out these commitments. The Strategy's proposal (made by the Commission) suggests aligning their priorities, capacities and resources with a joint action of added value and weight in the international system that is greater than the sum of its parts. This makes it necessary to have **a clear and transparent framework for determining roles and responsibilities** to facilitate the traceability and monitoring of all kind of contributions, from economic resources to matters such as leadership, experience or technical capacities. Strikingly, the Strategy's lines of action on this aspect are very specific and practical and may constitute a good starting point for tackling this challenge. However, an open debate is needed on how this is going to work, in which all the players involved, EU institutions and Member States, are in agreement.



Funding

A recurring criticism of the Strategy has been the **lack of estimate of the implementation costs and how they are to be distributed**. This lack of details on funding is particularly notable in the area of research, where the Strategy is expressly called on to coordinate with the Horizon Europe programme, without giving further details on how to do so. This programme is the framework for EU research and innovation policies for the period 2021-2027, which intends to mobilise more than 95.5 billion euros. Horizon Europe (and the programme that will succeed it after 2027) should be aligned with the terms of the Strategy and the role of universities and research centres in its implementation should be fully defined. It is necessary to specify how a synergic collaboration between different areas of the Commission is also going to occur with regard to funding programmes and how such programmes are to be complemented by contributions from Member States.



Other challenges

In the area of **international associations**, the Team Europe approach specifies the joint actions of EU institutions and Member States and coordinates them on the ground. Something that, as mentioned in some criticisms, has focused on the visibility of European cooperation and relations between its actors to the detriment of partner country ownership and greater involvement of local stakeholders.⁸ This bias needs to be corrected as more initiatives under this approach are consolidated, many of them specifically envisaged in the Strategy.

Furthermore, supporting the **development of scientific and research capacities** in medium-income countries is part of such associations and as such is reflected in the Strategy, almost always in relation to immunisation and digitalisation. However, despite express reference to the EDCTP programme as the principal instrument for strengthening joint research capacity in the guiding principle referring to research, its work programme for 2023 does not expressly mention the Strategy and is not totally aligned with its language.

The recovery of the Global Health Policy Forum is an important advance for **broad and plural participation** in monitoring the Strategy. However, it is important to leave room in it for greater involvement of the research fabric and academic world for a more organic implementation of the Strategy, valuing the current strengths and systematically identifying areas of common action (currently limited to vaccine development).

Finally, the elections in May 2024 will mark the **start of a new mandate** in the EU institutions with a new Parliament and Commission. It is important that the political and economic commitment to global health is maintained ●

⁸ Jones, A. and Sergejeff K. (2022), Half-time analysis: How is Team Europe doing? ECDPM. <https://ecdpm.org/work/half-time-analysis-how-team-europe-doing>

3. Recommendations for Spain

“In the second half of the year it will be Spain that holds Presidency of the Council of the EU, at a key moment to boost and guide implementation of many of the envisaged actions.”

The forthcoming months are fundamental for the implementation of the Strategy. Firstly, the conclusions of the Council are to be approved, which should express the commitment of the Member States to the proposal. The Swedish presidency is leading these negotiations at the time of writing. In the second half of the year, it will be Spain that holds this presidency at a key moment to boost and guide implementation of many of the envisaged actions. During this period, **Spain’s leaders-**

hip should reflect our country’s firm step forward and its commitments in fundamental areas for global health such as vaccination, international alliances, the defence and promotion of sexual and reproductive rights, child survival or specialist medical training, essential for strengthening health systems.

Faced with the important advances that have to be made, **Spain can act in several decisive areas:**

- ✓ Contribute to ensuring that the agreement reached by the Council on the Strategy preserves the fundamental commitment of the EU as a whole to the three priorities of the Strategy, and that it is not undermined by stances that seek to eliminate references to **gender equality**.
- ✓ Adopt a **Spanish Global Health Strategy** aligned with the principles and priorities of the strategy of the EU as a whole. Integrate in it the diverse range of public and private actors called on to make contributions from Spain, including regional and local administrations.
- ✓ Make a comprehensive effort to work on the basis of the lines of action of the **Strategy on Latin America**, one of the most notable priorities of the agenda of the Spanish presidency of the Council.
- ✓ Encourage **implementation of the Strategy** as a key element for contributing to Europe’s strategic autonomy in the area of health, and to that end, while holding the presidency of the Council and in collaboration with the European Commission, promote:
 - An open dialogue on the **distribution of roles and responsibilities** between the EU institutions and the Member States, seeking the greatest possible impact and influence of the contributions to global health.
 - **More specific** details of the aspects relating to funding and focusing on the impact of the actions, in the framework for monitoring and assessing the Strategy.
 - **Coordination** between EU institutions and Member States to exchange information and make it possible reach common positions in light of a new multilateral governance.
 - Advance in integrating the **“One Health” approach** in the actions for the implementation of the Strategy, promoting work to combat the threat of antimicrobial resistance.
 - Foster the **participation of civil society and the academic world** in the implementation of the Strategy, particularly within the Global Health Policy Forum.

TO FIND OUT MORE


- European Commission (2022). Questions and answers: EU Global Health Strategy. https://ec.europa.eu/commission/presscorner/detail/en/qanda_22_7126

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