

Public consultation on EU funds in the area of investment, research & innovation, SMEs and single market

EPHA contribution

The European Added value of EU funds for public health

Background – what is this public consultation¹ is all about?

The objective of the European Commission with this public consultation² is to collect views in order to prepare its proposal for a new EU budget which will be presented in May 2018. EPHA contributed to this public consultation by filling in the online questionnaire³. EPHA also uploaded a narrative part to complement our contribution.

EPHA answers to questions 27-41

Questions 27 *Please let us know whether you have experience with one or more of the following funds and programmes. at least 1 choice(s)

Horizon 2020

EU Health Programme

EU Food and Feed Programme

Questions 28 Please let us know to which of the following topics your replies to this questionnaire will refer.

EU support for Investment

EU support for research and innovation

EU support for SME and entrepreneurship

EU support for the Single Market

¹ https://ec.europa.eu/info/consultations/public-consultation-eu-funds-area-investment-research-innovation-smes-and-single-market_en

² There are six parallel public consultation about the new EU budget. In addition the current consultation on the Single market the other 5 are: Cohesion; Security; Migration and Asylum; Strategic Infrastructure; Values and Mobility. As the Health Programme is listed under the public consultation on the Single Market, contributing to this public consultation would make the most sense.

³ <https://ec.europa.eu/eusurvey/runner/MFFpost2020investment>

Question 29. The Commission has preliminarily identified a number of policy challenges which programmes/funds in this area of investment, research & innovation, SMEs and single market could address. How important are these policy challenges in your view?

- Foster research and innovation across the EU – **Very relevant**
- Ensure a clean and healthy environment and the protection of natural resources – **Very relevant**
- Ensure that existing rules are applied and enforced consistently across the EU – **Very relevant**
- Reduce unemployment and social disparities – **Very relevant**
- Promote and protect public health – **Very relevant**
- Promote a safe and sustainable food chain – **Very relevant**
- Support social investment and social innovation – **Very relevant**
- Ensure a high level of consumer protection and effective redress – **Very relevant**
- Provide reliable and comparable statistics – **Very relevant**
- **Other: Support policy implementation in the area of non-communicable diseases prevention.**

Question 30 - If you identified another policy challenge, please specify it here: 200 character(s) maximum with spaces

Funding should increasingly focus on research supporting policy implementation and new tools for policy evaluation, including assessment of health impacts of policy options (Health Impact Assessment).

Question 31. To what extent do the current policies successfully address these challenges?

- Foster research and innovation across the EU – **Addressed to some extent only**
- Ensure a clean and healthy environment and the protection of natural resources – **Addressed to some extent only**
- Ensure that existing rules are applied and enforced consistently across the EU – **Addressed to some extent only**
- Reduce unemployment and social disparities – **Addressed to some extent only**
- Promote and protect public health – **Addressed to some extent only**
- Promote a safe and sustainable food chain – **Addressed to some extent only**
- Support social investment and social innovation – **Addressed to some extent only**
- Ensure a high level of consumer protection and effective redress – **Fairly well addressed**
- Provide reliable and comparable statistics – **Fairly well addressed**
- **Other: Needs driven research and innovation agenda**

Question 32 - *If you identified another policy challenge, please specify it here: 200 character(s) maximum with spaces*

Ensuring a needs driven R&I agenda that balances the goal of competitiveness with support for areas where there is clear societal need, but a lack of private sector or market interest

Question 33 *To what extent do the current programmes/funds add value, compared to what Member States could achieve at national, regional and/or local levels?*

- **To a large extend**

Question 34. *Please specify how the current programmes/funds add value compared to what Member States could achieve at national, regional and/or local levels. Please clearly indicate to which policies, programmes and funds your answer refer. (1500 character(s) with spaces maximum)*

Our answer refers to health collaboration under the 3rd Health Programme 2014-2020 and EU public health policy. The EU has pursued activities to enable coordinated action by Member States to tackle the major risk factors of chronic diseases. These EU actions include reduction of alcohol related harm, promoting healthy eating habits, reducing tobacco use, and promoting physical activity. Moreover the EU has revised the Tobacco Products Directive (TPD), which had a clear smoking prevention focus.

In the field of health systems, EU level collaboration and support can bring a significant added value. Treatment or secondary prevention, actions to address cross-border health threats and antimicrobial resistance developing digital health tools across borders, regulation on medical devices, supporting national vaccination efforts, increasing cross-border cooperation on rare diseases through the European Reference Networks have shown the added value the EU can bring to its citizens.

Europe is facing important health threats. Our precious, life-saving antibiotics are declining in effectiveness. Antimicrobial resistance is taking hold more rapidly around the world than expected. Bacteria and drug resistance cannot be stopped by borders.

The recently published 2017 State of Health in the EU reinforces the Commission's commitment to, and the EU added value in, actions to reduce inequalities between and within EU countries.

No single country can tackle these challenges alone, as even wealthier countries will not be immune.

Question 35. *Is there a need to modify or add to the objectives of the programmes/funds in this policy area? If yes, which changes would be necessary or desirable? Please clearly indicate to which policies, programmes and funds your answer refer. (1500 character(s) with spaces maximum)*

Our answer refers to health collaboration under the 3rd Health Programme 2014-2020 and EU public health policy. Nearly 10% of EU GDP is spent on health systems, with chronic diseases accounting for 80% of total healthcare costs. Every euro invested in public health gives an average return of €14 to the economy. Every additional average year of life expectancy is worth a boost to GDP of up to 4%.

Prevention is cheaper than cure: the EU should add value to the European dimension of the efforts by Member States in the area of disease prevention. The EU should step up its efforts to address the main risk factors of Non-Communicable Diseases (tobacco use, unhealthy diets, physical inactivity, alcohol consumption, environmental factors), to promote the well-being of European citizens and reduce the burden on healthcare systems.

Pursuing the uptake of sustainable healthy diets is an area that can provide particular society-wide co-benefits and synergies. Research into the development of effective policies in this area is key.

A European strategy for patients' and citizens' empowerment with a meaningful action plan for improving health literacy, would contribute to improving health outcomes and increasing the wellbeing of European citizens people as required under the Treaties (TFEU 168).

Question 36 *The Commission has preliminarily identified a number of possible obstacles, which could prevent the current programmes/funds from achieving their objectives. To what extent do possible obstacles prevent the current programme/funds from achieving their objectives?*

- *Too complex procedures leading to high administrative burden and delays – to a large extent*
- *Insufficient administrative capacity to manage programmes – to a large extent*
- *Lack of flexibility to react to unforeseen circumstances – to a fairly large extent*
- *Insufficient synergies between the EU programmes/funds – to a large extent*
- *Difficulty of combining EU action with other public interventions and private finance – to a large extent*
- *Insufficient critical mass – to a fairly large extent*
- *Insufficient use of financial instruments – to some extent only*
- *Lack of information/communication – to a fairly large extent*
- *Insufficient scope – to a large extent*
- *Lack of EU standards and EU rules – to some extent only*
- *Inadequate facilities to support enhanced cooperation – to some extent only*
- *Out of date and inadequate IT capabilities – to some extent only*
- *Insufficient involvement of citizens – to a large extent*
- *Other (Please specify below) Insufficient monitoring of societal impact*

Question 37 - *If you have identified another obstacle, please specify it here: 1000 character(s) maximum with spaces*

Insufficient monitoring of societal impact constitutes an obstacle to the EU Health Programme and the EU Research Framework Programme achieving their objectives, in particular addressing societal challenges.

Indicators for societal impact must be developed for FP9, for example using the Sustainable Development Goals as benchmarks for progress on addressing societal challenges. Civil society should be included in the development of indicators, as well as in the monitoring and evaluation process where their experience and expertise can be harnessed.

Furthermore, upstream safeguards to ensure the accessibility, availability, affordability and quality of products that result from the EU R&I funding. In order to maximise return on public investments in biomedical R&I, we recommend the introduction of a new requirement in FP9 according to which beneficiaries of EU public funding for sensitive areas e.g. biomedical R&I, shall commit to access, effectiveness, affordability and availability principles.

Question 38 *The Commission has preliminarily identified a number of steps that could help to further simplify and reduce administrative burdens for beneficiaries under current programmes/funds. To what extent would these steps be helpful in your view?*

- *Alignment of rules between EU funds – to a large extent*
- *Fewer, clearer, shorter rules – to a large extent*
- *More reliance on national rules – to some extent only*
- *A stable but flexible framework between programming periods – to a large extent*
- *Extension of the single audit principle – to some extent only*
- *Better feedback to applicants – to a large extent*
- *More structured reporting – to some extent only*
- *User-friendly IT tools – to a large extent*
- *E-governance – to some extent only*
- *Adequate administrative capacity – to a fairly large extent*
- *Other (Please specify below)*

Question 39 *If you have identified another way to simplify and reduce burdens, please specify it here: 1000 character(s) maximum with spaces – Not applicable*

Question 40. *How could synergies among programmes/funds in this area be further strengthened to avoid possible overlaps/duplication? For example, would you consider grouping/merging some programmes? Please clearly indicate to which policies, programmes and funds your answer refer. (1500 character(s) with spaces maximum)*

Our answer refers to health collaboration under the 3rd Health Programme 2014-2020 and EU public health policy. An enhanced EU action in the field of health will brings the EU closer to its citizens, by preventing diseases, protecting patients and consumers and improving people's health. EU action on health that fosters cross-

country collaboration, integrates the action of Member States and helps them to address the unprecedented challenges we are facing is vital.

The lives of Roma people and refugees are expected to be 10 years shorter than national averages, and homeless women in Europe die on average at just 43 years of age because of the multiple health disadvantages they face.

Health in all policies requires strong leadership and coordination. Without a Commissioner and a dedicated Directorate General responsible for health governance and health in all policies, health would be marginalised and subordinated to economic considerations.

The EU must do systematic health impact assessment in other policies. EU funded actions and policies must not damage the health of Europeans. Health impact assessments in policies other than health but with an impact on health must therefore be developed.

In relation to the EU R&I funds, any merging or grouping of programmes should not dilute the focus on developing a public health needs driven R&I agenda that strengthens its focus on addressing societal challenges and achieving societal impact.

Question 41 *Please feel free to upload a concise document, such as a position paper. The maximum file size is 1MB. Please note that the uploaded document will be published alongside your response to the questionnaire which is the essential input to this public consultation. The document is optional and serves as additional background reading to better understand your position. – EPHA uploaded its narrative contribution separately*

Question 42 *If you wish to add further information — within the scope of this questionnaire — please feel free to do so here. 1500 character(s) maximum with spaces*

We are calling for the inclusion of a separate health programme as part of an investing in people and European values cluster as that would best reflect the importance of health, as a value, for European citizens and it would be a necessary pre-condition for the proper implementation of TFEU 168 that health should be included in all EU policies.

As the mid-term evaluation of the 3rd Health Programme revealed that it has a strong EU added value, we are calling for a significantly increased amount for the Health Programme. Such a stand-alone programme would enable and ensure the application of HIAP throughout the financial programme, keeping health relevant aspects of other policy areas, especially, but not limited to the following instruments:

- **Research and Innovation** eg Public health driven R&I priorities to address unmet needs
- **Strategic Infrastructure** eg to explore the potential in Digital Health solutions
- **Single Market** eg food safety, human, animal and plant health

- **Economic, Social and Territorial cohesion**– e.g. helping Member States to invest into health prevention
- **Agriculture and Fisheries** .eg Funding under the CAP should be made conditional on the achievement of measurable health objectives, such as contributing to air quality (methane emissions reduction), increasing fruit and vegetables consumption and reducing antibiotics use.
- **Environment** eg to tackle health relevant environmental challenges such as air pollution, dangerous chemicals and climate change