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PUBLIC HEALTH

Public health policy has recently taken centre stage in EU policymaking with the COVID-19 pandemic, Parliament's making cancer one of its areas of focus, and the push towards a stronger European Health Union. The European Health Union initiative addresses immediate and future health concerns, including the COVID-19 crisis, building resilience against cross-border health threats, implementing the Beating Cancer Plan, advancing the Pharmaceutical Strategy for Europe, and enhancing digital health.

LEGAL BASIS

Article 168 (protection of public health), Article 114 (single market) and Article 153 (social policy) of the Treaty on the Functioning of the European Union (TFEU).

OBJECTIVES

EU public health policy aims to:

— Protect and improve the health of EU citizens;

— Support the modernisation and digitalisation of health systems and infrastructure;

— Improve the resilience of Europe's health systems;

— Better equip EU countries to prevent and address future pandemics.

CONTEXT

The Maastricht Treaty of 1992 created a clear legal basis for the adoption of health policy measures. Subsequently, the Amsterdam Treaty of 1997 strengthened these provisions, enabling the EU to adopt measures ensuring a high level of human health protection.

The emergence of major health issues, coupled with the free movement of patients and health professionals within the EU, and the socio-economic consequences of health issues, mean that public health has attained an ever more prominent position on the EU agenda. The setting up of specialised agencies such as the European Medicines Agency (EMA) and the European Centre for Disease Prevention and Control (ECDC) underlined the EU's growing role in health policy. Agencies like the European Chemicals Agency (ECHA) and the European Food Safety Agency (EFSA) further contribute to strengthening European health policies. The EU4Health programme, established by Regulation (EU) 2021/522, provides funding in the area of health for

the period 2021-2027. The COVID-19 crisis intensified efforts, emphasising collective resilience and cross-border health security, driving the EU towards a robust European Health Union.

The general objectives of the European Health Union for 2021-2027 focus on immediate and enduring health concerns. These span from addressing the COVID-19 crisis, fortifying defences against cross-border health risks, implementing initiatives like Europe's Beating Cancer Plan, the Pharmaceutical Strategy for Europe, and advancing digital health. The EU will also persist in collaborating globally to tackle health challenges, including developing vaccines and tackling antimicrobial-resistant infections.

ACHIEVEMENTS AND CURRENT DEVELOPMENTS

A. Health in All Policies (HiAP)

The HIAP approach, formulated as a EU approach in 2006 and codified in the TFEU and the Charter of Fundamental Rights of the European Union (the Charter), responds to the cross-sectoral nature of public health issues and aims to integrate health aspects in all relevant policies (Articles 9 and 168(1) of the TFEU; Article 35 of the Charter). This approach systematically takes into account the health implications of decisions in all other policy fields in order to improve population health and health equity. For example, the 'Farm to Fork' strategy contributes to the production of not only sustainable, but also healthier food; the Zero pollution action plan creates a cleaner and also healthier living space; the EU4Health Programme (2021-2027), together with other funds and programmes, helps address health issues from different perspectives. Several policies aim to prevent the damage to health from climate change, such as the increasing number of deaths due to heatwaves and natural disasters, and changing patterns of infection for water-borne diseases and diseases transmitted by insects, snails or other cold-blooded animals. Furthermore, the 8th Environment Action Programme, which became effective in 2022, advocates for enhancing the connections between environmental policies, which encompass climate concerns, and health policies.

B. Disease prevention and health promotion

Prevention encompasses a wide range of areas, including initiatives against cancer, communicable and non-communicable diseases, vaccination, and combating antimicrobial resistance.

Cancer is the second leading cause of death in the EU. Its impact extends beyond personal and familial spheres, affecting healthcare systems, financial resources, and overall economic productivity. Cancer is addressed at European level through several initiatives. Parliament set up a dedicated Special Committee on Beating Cancer (BECA) (2020-2022), examining the measures that the EU can implement to combat cancer. Europe's beating cancer plan in 2021, covers prevention, early diagnosis, treatment and follow-up, and represents the EU's reaction to the increasing challenges in the field of cancer management. In September 2022 the Commission presented a new approach to support Member States' efforts to boost the uptake of cancer screening. The objective of the recommendation is to raise the participation rate in breast,

colorectal, and cervical cancer screenings, in line with Europe's Beating Cancer Plan goal of extending these screenings to 90 % of eligible individuals by 2025.

In December 2021, the Commission launched the 'Healthier together – EU non-communicable diseases initiative' to assist EU countries in reducing major NCD burdens and enhancing citizens' well-being. It is estimated that more than 84 million people in the EU are struggling with mental health problems. The EU Joint Action on Mental Health and Well-being ran from 2013 to 2018, and created the European Framework for Action on Mental Health and Wellbeing, which contributes to the promotion of mental health. With suicide being the second main cause of death in the 15-29 age group, prevention, awareness, non-stigmatisation and access to help when it comes to depression, self-harm and suicide remain of key importance. On 13 September 2022, in a resolution concerning the effects of COVID-19 on young people, Parliament called on the Commission to establish a European Year of Mental Health. The 2023 EU4Health Work Programme continues to offer support for mental health promotion and preventing mental health issues. Cardiovascular disease represents the biggest cause of death in the EU. Drugs, alcohol and tobacco use are lifestyle factors with a serious impact on human health, and cardiovascular disease, and the fight against them is a major issue in public health policy. The Tobacco Product Directive (Directive 2014/40/EU; applicable from 2016) and the Tobacco Tax Directive (Council Directive 2011/64/EU) were milestones in this fight. The use of drugs also generates costs for and harm to public health and safety. In December 2020, the Council approved the new 2021-2025 EU Drugs Strategy. The document establishes an overarching political framework and sets out strategic priorities for EU policy on illicit drugs under three main strands: drug supply reduction, drug demand reduction and addressing drug-related harm. Efforts to revise the 2006 EU Alcohol Strategy are currently stalled.

For communicable diseases and cross-border threats to health, the ECDC has put in place an Early Warning and Response System and the EU Health Security Committee coordinates the response to outbreaks and epidemics. Cooperation with the UN's World Health Organization (WHO) is pivotal in those cases, as was seen with the outbreak of the COVID-19 pandemic in early 2020. Many ad hoc measures were adopted under urgency procedures (see the dedicated EUR-Lex webpage and the Commission coronavirus response webpage) including:

— Regulation (EU) 2020/1043 of the European Parliament and of the Council of 15 July 2020 on the conduct of clinical trials with and supply of medicinal products for human use containing or consisting of genetically modified organisms intended to treat or prevent coronavirus disease (COVID-19);

— The Commission communications 'EU Strategy for COVID-19 vaccines' and 'Preparedness for COVID-19 vaccination strategies and vaccine deployment';

— The Council recommendation of 13 October 2020 established common criteria and a common framework on travel measures in response to the COVID-19 pandemic.

Throughout 2020, the Commission continued to take additional action to help build increased resilience across several areas in all Member States. Measures include

connecting national contact apps, broadening travel exemptions, more extensive testing and securing supplies for vaccines. The COVID-19 response package includes:

— Commission communication on additional COVID-19 response measures;

— Commission recommendation on COVID-19 testing strategies;

— Commission recommendation on the use of rapid antigen tests.

In 2022, the EMA's mandate was extended and a new regulation on serious cross-border health threats extended the ECDC's mandate and provided extra powers to the European Health Emergency Preparedness and Response Authority (HERA).

C. Societal changes, demographic transition

The 2023 Commission Report on Demographic Change explores challenges arising from ageing, population decline, and reduced numbers of working-age individuals. Addressing the EU's ageing population, ensuring a high quality of life in old age, and sustainable healthcare systems are key challenges. In 2020, the WHO launched the Decade of Healthy Ageing, and in this context, the Commission published a green paper on ageing in January 2021.

In response to the challenges posed by the migration crises, the Action Plan on the Integration of Third-Country Nationals was adopted in 2016. The action plan addresses, inter alia, health-related disadvantages experienced by migrants, including access to health services. In 2020, the Commission put forward the European Agenda for Migration and the New Pact on Migration and Asylum, which aim to further streamline European policies in this area.

Back in 2015, Parliament called for action to reduce childhood inequalities in areas such as health, and for the introduction of a Child Guarantee in the context of an EU plan to combat child poverty. In June 2021, the Commission's proposal to establish a European Child Guarantee was adopted by the Council. As a next step, Member States are developing national plans outlining how they will implement the Child Guarantee up until 2030.

D. Medicines (2.2.5)

A medicinal product (medicine) is a substance or combination of substances that is used for the treatment or prevention of diseases in human beings. Directive 2001/83/EC and Regulation (EC) No 726/2004 lay down the requirements and procedures for marketing authorisation, as well as the rules for monitoring authorised products. Regulation (EU) 2019/1243 brought changes to these regulations, implementing particular actions aimed at guaranteeing the accessibility of medications and handling shortages across the EU. Medicinal products may be authorised by national authorities through the decentralised procedure or by the Commission through the centralised procedure where EMA conducts the scientific assessments. EMA is also responsible for facilitating development of medicines, evaluating marketing authorisations, monitoring the safety of medicines, and providing information to healthcare professionals. Clinical trials investigate the effectiveness and safety of medicines in humans. Regulation (EU) No 536/2014, which took effect in January 2022, established harmonised rules for the authorisation and conduct of clinical trials.

The Commission presented its [Pharmaceutical Package](#) in April 2023, aiming to make medicines more available, accessible and affordable. At the same time it proposed a [Council Recommendation](#) to step up the fight against antimicrobial resistance (AMR). On 13 June 2023, the Council approved the [recommendation](#) to intensify EU actions against antimicrobial resistance through a One Health approach.

E.   eHealth

The EU is in the middle of transformative efforts to digitalise healthcare systems. The digitalisation of health refers to the integration of digital technologies and information management systems into various aspects of the healthcare industry. It involves the use of electronic health records (EHRs), telemedicine, wearable devices, mobile apps, data analytics, and other digital tools. In her speech to the 2023 Future of Health Summit, Commissioner Stella Kyriakides stated that 'digitalisation has the potential to increase quality, accessibility and resilience of healthcare.' The digitalisation of the healthcare sector forms part of the [EU's digital single market strategy](#), which aims at closer digital harmonisation between the EU Member States.

The eHealth Network is a voluntary network set up under Article 14 of [Directive 2011/24/EU](#) which provides a platform for Member States' competent authorities dealing with eHealth. The 2018 [Commission communication on the Digital Transformation of Health and Care in the Digital Single Market](#) identifies as priorities secure access by citizens to their health data, also across borders; personalised medicine through shared EU data infrastructure, allowing researchers and other health professionals to pool resources across the EU; and empowering citizens with digital tools for user feedback and person-centred care (mobile health solutions, personalised medicine). The [eHealth Digital Service Infrastructure](#) ensures the continuity of care for European citizens while they are travelling abroad in the EU. A legislative proposal for a [European health data space](#) was presented in May 2022 and seeks to empower EU citizens to control their health data, enabling cross-border use for research and innovation while ensuring data protection compliance.

F.   Health Technology Assessment (HTA)

HTA aims to offer evidence-based data on health technologies to ensure safe, effective, patient-focused, and cost-efficient health policies. National authorities also utilise HTA findings to guide decisions about which technologies should be reimbursed at the domestic level. HTA assesses the added value of health technologies including medicines, medical devices and diagnostic tools, surgical procedures, as well as measures for disease prevention, diagnosis or treatment. A [new regulation](#) for [assessing health technologies](#) was adopted in December 2021.

ROLE OF THE EUROPEAN PARLIAMENT

Parliament has consistently promoted the establishment of a consistent public health policy. It has also actively sought to strengthen and promote health policy through numerous opinions, studies, debates, written declarations and own-initiative reports on a wide range of health issues. At the start of the current legislative period, it moved into a more proactive agenda-setting role with its push to make beating cancer a top priority of EU health policy. During the COVID-19 crisis, Parliament took an active role

in promoting a coordinated European response and underlined the need to engage in far stronger cooperation in the area of health to create a European Health Union.

The Committee for Environment, Public Health, and Food Safety (ENVI) is Parliament's main actor on health matters. In early 2023, the ENVI Committee set up a new permanent Subcommittee on Public Health (SANT) that will reinforce Parliament's role in exercising scrutiny over EU health policies and promoting their development. Parliament also put the need for a more coordinated European approach to fighting cancer high on the political agenda in its current 9th legislative period, with the establishment of a Special Committee on Beating Cancer.

Parliament insisted on a standalone European health programme, securing support for EU4Health. It also scrutinises the implementation of the Recovery and Resilience Facility through dialogues, questions, studies, and internal research, emphasising health reforms' importance. Parliament has also consistently advocated for the advancement of mental well-being and prioritising mental health in EU policy formulation.

For more information on this topic, please see the websites of the Committee on the Environment, Public Health and Food Safety and the Subcommittee on Public Health.

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