

Statement by the European Public Health Association (EUPHA) Deliberative collaboration between sectors is needed

In November 2020, EUPHA responded to the European Commission call for feedback on the 3rd health programme. In its reaction, EUPHA emphasised the continued importance of intersectoral collaboration for ensuring that everyone in Europe can achieve the highest possible level of health, now and in the future.

It has been well-established that non-health sectors - i.e. agriculture, employment, economy, environment [i] - have a direct impact on public health, and therefore can also promote health and prevent diseases. Health in All Policies (HiAP) is a powerful tool to achieve this. The HiAP concept has been around for quite some time, yet we see that implementation in practice remains difficult. For HiAP to be sustainable over time, health and non-health sectors need to move away from working in silos and be deliberately collaborative. Therefore, EUPHA urges for continued efforts to make the HiAP approach standard practice. The internationally agreed Sustainable Development Goals (SDGs) provide an excellent policy framework for shaping intersectoral action and monitoring progress.

The COVID-19 pandemic is a clear example where intersectoral collaboration is urgently needed. COVID-19 management outbreak teams often only include infectious diseases specialists, such as virologists and epidemiologists, while the health effects of the pandemic and the measures that are taken to control it are much broader. These include e.g. mental health problems, increased inequalities (read our EUPHA statement on migrants and ethnic minorities and COVID-19), and economic problems that in turn affect people's health. A narrow focus on the direct effects of COVID-19 results in incomplete measurement and analysis of the impact of the pandemic on the health of the population, which in turn results in a suboptimal protection of EU citizens from serious health threats. The societal divides that have been deepened and vulnerabilities that have been increased by COVID-19 call for targeted action. Inclusion of non-usual suspects in these targeted actions, such as economists, representatives of the retail sector, and social and mental health experts, as well as the affected and vulnerable groups themselves, would lead to improved outcomes in reducing health inequalities.

The new president of the European Union, Dr Ursula von de Leyen, emphasized the need for a European health union in her first State of the Union speech on 16 September 2020[ii] "For me, it is crystal clear — we need to build a stronger European Health Union. And to start making this a reality, we must now draw the first lessons from the health crisis. We need to make our new EU4Health programme future proof. This is why I had proposed to increase funding and I am grateful that this Parliament is ready to fight for more funding and remedy the cuts made by the European Council." EUPHA wholeheartedly endorses such a stronger focus on health in the EU. Moreover, the reinforcement of the mandates of ECDC and EMA, sparked by the COVID-19 crisis, are welcome developments, as they will make the implementation of common monitoring indicators across

Europe mandatory. In addition, stronger legislation will make it possible to declare an emergency situation at the European level and trigger action mechanisms. This will strengthen the role of the EU as a central hub for health information and coordinated action.

Although this is a positive development, to tackle the massive current and future public health challenges we face, more is needed. Not only dealing with the aftermath of the COVID-19 crisis will take a lot of our efforts, we also need to address the health effects of climate change, ageing populations and in increase in chronic diseases, to name a few pressing examples. The mandates of the relevant institutions should not only be amended to be better equipped to address new outbreaks of infectious diseases, but also to support sufficient EU-level action for these challenges.

To develop and implement intersectoral action to address these challenges, sufficient budget is needed. EUPHA, as a member of the EU4HEalth Civil Society Alliance, therefore warmly welcomes the re-evaluation of the upcoming EU4Health budget. Without adequate budget, it will not be possible to guarantee that everyone in Europe can achieve the highest possible level of health. EUPHA will contribute to achieving this goal by providing independent and authoritative Analysis of the evidence, combined with targeted Advocacy to achieve coordinated Action by all key stakeholders. This 'Triple A' method, together with a deliberatively collaborative approach across the boundaries of public health, is at the heart of the new EUPHA strategy 2020-2025, which will be published early 2021.

i. Greer, S., 2019. Everything You Always Wanted To Know About European Union Health Policies But Were Afraid To Ask. 2nd ed.

https://apps.who.int/iris/bitstream/handle/10665/328267/9789289051767-eng.pdf?sequence=1&isAllowed=y

ii. https://ec.europa.eu/commission/presscorner/detail/en/SPEECH_20_1655 State of the Union address to the European Parliament, 16 September 2020

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For more information, please contact Dr Dineke Zeegers Paget, EUPHA executive director, office@eupha.org or Marie Guichardon, scientific officer, m.guichardon@euphaoffice.org

The European Public Health Association, or EUPHA in short, is an umbrella organisation for public health associations in Europe. Our network of national associations of public health represents around 20'000 public health professionals. Our mission is to facilitate and activate a strong voice of the public health network by enhancing visibility of the evidence and by strengthening the capacity of public health professionals. EUPHA contributes to the preservation and improvement of public health in the European region through capacity and knowledge building. We are committed to creating a more inclusive Europe, narrowing all health

inequalities among Europeans, by facilitating, activating, and disseminating strong evidence-based voices from the public health community and by strengthening the capacity of public health professionals to achieve evidence-based change.

EUPHA - European Public Health Association
E-mail office@eupha.org
Internet www.eupha.org
Twitter @EUPHActs



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