Global Gateway

EU GLOBAL HEALTH STRATEGY

Better Health For All in a Changing World

COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS

20 GUIDING PRINCIPLES

1. Prioritise tackling the root causes of ill health, paying particular attention to the rights of women and girls, and to vulnerable populations and disadvantaged groups.

2. Improve equitable access to a full range of essential health services from health promotion to disease prevention and affordable quality treatment, rehabilitation and palliative care to fight communicable and non-communicable diseases.

3. Improve primary healthcare with built-in surge capacity, and enhance core public health capacities to meet the requirements of the International Health Regulations.

4. Foster digitalisation as a fundamental enabler.

5. Boost global health research to develop the technologies and countermeasures which are necessary to improve health.

6. Address workforce imbalances and foster skills.

7. Strengthen capacities for prevention, preparedness and response and early detection of health threats globally.

8. Work towards a permanent global mechanism that fosters the development of and equitable access to vaccines and countermeasures for low- and middle-income countries.

9. Negotiate an effective legally binding pandemic agreement with a One Health approach and strengthened International Health Regulations.

10. Build a robust global collaborative surveillance network to better detect and act on pathogens.

11. Apply a comprehensive One Health approach and intensify the fight against antimicrobial resistance.

12. Link effectively all policies and measures that have an impact on global health within the Commission, EU agencies and EU financing institutions.

13. Better link and coordinate policies and measures of the EU and its Member States to speak with one voice and deliver effective action worldwide.

14. Support a stronger, effective and accountable WHO.

15. Steer the new global health governance by filling gaps and ensuring coherence of action.

16. Ensure a stronger EU role in international organisations and bodies.

17. Expand partnerships based on equal footing, co-ownership, mutual interest and strategic priorities.

18. Strengthen engagement with key global health stakeholders.

19. Enhance EU finance for global health with maximum impact.

20. Assess progress and ensure the accountability of the EU's global health action through permanent monitoring and assessment.

1. Introduction

The experience of recent years, particularly the COVID-19 pandemic, has highlighted as never before that **health has no borders**: it is a global common good. The well-being and lives of citizens, the prosperity and stability of societies and economies, and sustainable development in general, all depend on addressing health from this perspective. Global health is an essential pillar of EU external policy, a critical sector geopolitically and central to the EU's open strategic autonomy.

Since the EU's last 2010 Communication on the EU role in global health[1], health challenges are fast evolving—in an equally rapidly-changing **geopolitical** environment.

> ### *Global health is being impacted by the triple planetary crisis of climate change, biodiversity and pollution*

More than ever before global health is being impacted by the triple planetary crisis of climate change, biodiversity and pollution, with a particularly heavy burden on most vulnerable countries and people. At the same time, new opportunities linked to areas like **research** or **digitalisation** have arisen. A robust **Global Health Strategy** ("the strategy") is needed to provide a new, coherent, effective and focused policy world-wide.

As the world population has just moved past the 8 billion mark and life expectancy is rising globally, we should prioritise health and well-being for all throughout the life course.

This strategy represents the external dimension of the **European Health Union**, which protects the well-being of Europeans and the resilience of their health systems, and a key component of **Global Gateway[2],** which builds partnerships of equals with partner countries based on joint responsibility and co-ownership.

The EU's leading role in fighting the COVID-19 pandemic has shown that it can make a major contribution to global objectives with the Team Europe approach[3] (see box A). The main message of this strategy is that the EU intends to reassert **its responsibility** and **deepen its leadership** in the interest of the highest attainable standards of health based on **fundamental values,** such as solidarity and equity, and **the respect of human rights**.

> ### *The EU intends to **reassert its responsibility** and **deepen its leadership** in the interest of the highest attainable standards of health*

The challenges are significant. There is a **massive unfinished agenda** in global health, as progress *inter alia* towards the universal health targets enshrined in the **2030 Agenda for Sustainable Development and its Goals** (SDGs)[4] has reversed in many countries: collectively, countries have only achieved about a quarter of what is needed to reach the SDG health targets by 2030. Major infectious diseases represent a heavy burden on many countries and high infant and maternal mortality, and malnutrition remain matters of concern among others. At the same time, it is essential to address global health security swiftly and comprehensively, to better prevent and be more resilient to face pandemics. High-quality risk-preparedness in the health sector will show significant positive impacts on the resilience of other key sectors.

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1   COM(2010)128 final – 31.3.2010
2   https://ec.europa.eu/info/strategy/priorities-2019-2024/stronger-europe-world/global-gateway_en
3   "Team Europe approach" refers to action by EU institutions and some or all of its Member States, in line with respective competences.
4   https://www.un.org/sustainabledevelopment/development-agenda/

BOX A: EU RESPONSE TO COVID-19: LEADERSHIP THROUGH THE TEAM EUROPE APPROACH

The EU played a decisive role in the global response to the COVID-19 pandemic providing solidarity and effective support by acting in a **Team Europe** approach to help implement the global vaccination campaign and reaffirm the EU's commitment to multilateralism.

Leadership: The EU was a driving force behind the adoption of the G20 Rome Declaration[5]—the internationally agreed principles for action to fight, prepare for, prevent, and respond to pandemics. Alongside other key global stakeholders, the EU played a leading role in organizing the first Global Pledging Conference against COVID-19, and in setting up the Access to COVID-19 Tools Accelerator (ACT-A), a key tool supporting the development and equitable distribution of the tests, treatments, and vaccines to lower income countries. Together with EU Member States, the EU contributed over EUR 7 billion to ACT-A, including its vaccine pillar (COVAX).

Cooperation: The EU has been stepping up its cooperation, for example by setting-up the globally pioneering solution EU Digital COVID Certificate (EUDCC): by October 2022, 49 countries outside the EU were connected to the EUDCC Gateway, including seven from the African continent, making it the largest interconnected system of digital COVID certificates in the world. Thanks to EU solidarity, the Union Civil Protection Mechanism put into action several emergency medical teams and provided medical equipment and supplies[6] to third countries. The EU was a key founding member of COVAX and has increased its efforts to collaborate on therapeutics, diagnostics, through the ACT-Accelerator, international organisations and research institutions.

Resources: The EU combined its resources to maximise their impact on the COVID-19 pandemic response. Since the outbreak of the COVID-19 pandemic, the EU, EU Member States and European financial institutions, as Team Europe, have so far committed EUR 53.7 billion to support 140 countries, covering emergency response to humanitarian needs, strengthening of health, water and sanitation systems, and mitigation of the social and economic consequences of the pandemic. The Team Europe way of working proved effective and valuable and has been rolled out across other global priorities. The EU stepped up research, especially vaccine and medicine advancement, and created an enabling environment for manufacturing and distribution of four billion COVID-19 vaccine doses both in the EU and globally and supported additional rollout of vaccines[7]. The European Commission and EU Member States have also quickly set up a new European reserve of resources including a stockpile of medical items to respond to health emergencies[8].

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5   https://global-health-summit.europa.eu/rome-declaration_en

6   See key facts and figures under https://civil-protection-humanitarian-aid.ec.europa.eu/what/civil-protection/eu-civil-protection-mechanism_en#facts--figures.

7   See project 11 in Annex 1.

8   EU develops strategic reserves for chemical, biological and radio-nuclear emergencies (europa.eu)

To contribute to the delivery of better health for all in a changing world, a **different approach** is needed, starting with **what** must be done. To this end, the strategy focuses on **three core priorities.**

Going back to fundamentals: The first two essential priorities are: **investing in the well-being of all people and reaching universal health coverage with stronger health systems.**

> ### Investing in the well-being of all people and reaching universal health coverage with stronger health systems.

To achieve these two goals, we need to shift our focus, as the landscape is very different from 2010:

▶ In addition to traditional root causes of ill-health such as poverty and social inequalities, **other drivers of ill-health** must be addressed in an integrated manner, such as climate change, environmental degradation, humanitarian crises, or food insecurity, aggravated by crises like the Russian war of aggression against Ukraine. Therefore, it is essential to mobilise a wide number of policies to work on a global health agenda.

▶ **Rising challenges,** like antimicrobial resistance and mental health, or **evolving challenges** of health and care systems, including workforce imbalances and resources shortages must be prioritised, alongside maximising new opportunities for health offered by powerful enablers, like research and digitalisation, including the use of artificial intelligence.

The third core priority is **combatting current and future health threats** which also requires a new focus. It calls for enhanced equity in the access to vaccines and other countermeasures; for a "One Health approach"[9], which tackles the complex interconnection between humanity, climate, environment and animals; for a more effective disease surveillance worldwide; and for stronger international rules and cooperation mechanisms on health.

> ### Combatting current and future health threats

As we shift the focus on what to do, an **equally fundamental shift** must occur on **how** to do it. A new global health order is emerging —and the EU must contribute to shaping it through a more strategic and effective engagement.

The EU has a unique potential to drive international cooperation. **Expanding partnerships** with a wide range of relevant stakeholders is of the utmost importance—promoting **health sovereignty for more resilience and open strategic autonomy** supported by partners' political commitment and responsibility. Our relationship with international partners must be guided by common priorities in line with this strategy.

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9   A full definition of One Health is provided by OHHLEP under
https://www.who.int/news/item/01-12-2021-tripartite-and-unep-support-ohhlep-s-definition-of-one-health
In the context of the Consultation on the Future of Europe, citizens proposed a One Health Approach: "Adopt a holistic approach to health, addressing, beyond diseases and cures, health literacy and prevention, and fostering a shared understanding of the challenges faced by those who are ill or disabled, in line with the "One Health Approach", which should be emphasized as a horizontal and fundamental principle encompassing all EU policies".

To enhance the EU's role as a strong and effective player, the **Commission and Member States** will ensure synergy between national and EU global health strategies and work closer than ever in a **Team Europe approach**, with new mechanisms to better coordinate policies, actions and financial efforts to maximise impact—speaking and acting together.

The Commission and Member States will work closer than ever in a Team Europe approach —speaking and acting together.

Global governance will require a new focus to maintain a strong and responsive multilateral system, with a **World Health Organization (WHO)** at its core which is as sustainably financed as it is accountable and effective. Consensus should be built through deepened cooperation through G7, G20, and other global, regional and bilateral partners. The EU should drive the essential process of **filling the existing gaps** in global governance, avoiding duplication and ensuring coherence of action. This will need close cooperation with the private sector, philanthropic organisations, civil society and other stakeholders to support this strategy's objectives.

Global governance *will require a strong and responsive multilateral system, with* **WHO** *at its core*

Effective funding is another key element of the strategy. The EU and its Member States are collectively among the largest funders of global health – whether in terms of global goods (financing international organisations and global health initiatives), development aid, or humanitarian assistance[10]. This strategy's ambitions will require high political commitment globally, as well as an important commitment of resources.

The EU financial contribution will follow a new approach involving innovative finance, co-investment from partners and pooling with other international actors—and the EU's influence in shaping the agenda must match its financing support as a champion of global health.

Improving health preparedness and response at home as part of the European Health Union

Success will naturally depend on the **contribution of our partners**—but the EU will take its full **responsibility.**

This includes also improving health preparedness and response **at home** as part of the European Health Union, as health developments in the EU affect partners across the world and vice versa. In the EU, universal health coverage and a strong EU health security framework will continue to be developed by taking forward key initiatives under way or under preparation. These include the Europe's Beating Cancer Plan[11] the Pharmaceutical Strategy[12], and the planned European Health Data Space[13]. Combatting health threats more comprehensively will be possible with the implementation of the new cross-border health threats regulation[14], the reinforced mandates of the European Center for Disease Prevention and Control and the European Medicines Agency, the work of the new Health Emergency Preparedness and Response Authority to improve preparedness and response in medical countermeasures[15], and a One Health network to act against all pathogenic threats with integrated surveillance[16].

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10 According to data from the OECD Development Assistance Committee: https://www.oecd.org/dac/development-assistance-committee/

11 A cancer plan for Europe | European Commission (europa.eu). This is supported by the EU Mission on Cancer (EU Mission: Cancer | European Commission (europa.eu)).

12 https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020DC0761&from=EN

13 European Health Data Space (europa.eu)

14 https://www.consilium.europa.eu/en/press/press-releases/2022/06/23/provisional-agreement-on-new-eu-law-on-serious-cross-border-threats-to-health/

15 The Health Emergency Preparedness and Response Authority.

16 See financial project 2 in Annex 1.

Better healthcare delivery, open strategic autonomy in health-related value chains, and strong action on antimicrobial resistance will also all act as powerful foundations for a strong EU position worldwide. We will continue supporting Member States in implementing health reforms and investment under the Recovery and Resilience Facility. And we will implement the European Green Deal[17] and particularly the Zero Pollution Action Plan[18] and the Chemicals Strategy for Sustainability to fight root causes of ill health in the EU. All this work, together with the new strategy, will form a seamless continuum for health protection in the EU and worldwide.

The strategy offers an agenda leading up to **2030**. It sets **three policy priorities**, provides for **twenty guiding principles** to shape global health, makes concrete **lines of action** that operationalise those principles, and creates a new **monitoring framework** to assess effectiveness and impact of EU policies and funding. It outlines what the Commission will do and what it invites Member States to do, each strictly within their respective competences and institutional roles as provided for in the treaties[19]. To illustrate upcoming actions, Annex 1 lists some of the key projects which underpin this strategy at global, regional and national levels.

The strategy builds on the **important contribution** of the European Parliament, successive Presidencies of the Council, the civil society's 2020 shadow health strategy[20], and other key stakeholders—including the input received during a wide public consultation. This strategy should be read together with the first **State of Health Preparedness Report**, published in parallel with it[21].

2. The EU's global health priorities

The strategy reaffirms the commitment to the SDGs and the European Consensus on Development[22], and to act particularly in the areas that are cornerstones of good health. To ensure success in this endeavour, it suggests a new approach based on key priorities.

The Commission will therefore focus its efforts on three interrelated priorities[23], inviting Member States to do the same:

> **(1) Deliver better health and well-being of people across the life course;**
>
> **(2) Strengthen health systems and advance universal health coverage; and a**
>
> **(3) Prevent and Combat health threats, including pandemics, applying a One Health approach.**

2.1. Deliver better health and well-being of people across the life course

The EU will concentrate its collective strength and engage with countries to achieve the **ambitious health-related SDGs** globally, in particular Goal 3 (ensure healthy lives and promote well-being for all at all ages), Goal 5 (achieve gender equality) and Goal 10 (reduce inequality within and among countries).
To do so, the Commission will follow **guiding principles**, inviting Member States to do the same:

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17 A European Green Deal | European Commission (europa.eu)
18 Zero pollution action plan (europa.eu)
19 The relevant references to the EU throughout this document should be understood in this fashion. The same applies to the use of the terms "we" and "our".
20 https://www.ghadvocates.eu/wp-content/uploads/Global-Health-Strategy.pdf
21 https://health.ec.europa.eu/health-emergency-preparedness-and-response-hera/key-documents_en
22 european-consensus-on-development-final-20170626_en.pdf
23 These priorities largely correspond with the WHO's triple billion target agenda: https://www.who.int/about/what-we-do/thirteenth-general-programme-of-work-2019---2023

GUIDING PRINCIPLE 1.
Prioritise tackling the root causes of ill health, paying particular attention to the rights of women and girls, and to vulnerable populations and disadvantaged groups.

Efforts to deliver better health have traditionally focused on fighting specific diseases—a fight that must continue. However, without addressing the root causes of ill health, that make people prone to disease in the first place, it will continue to plague wide sections of the population, particularly the most vulnerable. Hence, as a novelty, the strategy **will prioritise addressing the economic, social and environmental root causes of health and disease**–including poverty and discrimination, age, nutrition and healthy diets, social protection, education, care, water, sanitation and hygiene, occupational health– and other areas such as healthy ecosystems pollution or contact with chemicals and waste and threats to security of energy supply. This will also require an integrated "health in all policies" approach (see section 3). An approach based on **human rights** leaving no one behind will be maintained throughout the implementation of this strategy. This also includes a particular focus on sexual and reproductive health and rights (SRHR).

> **Prioritise addressing the economic, social and environmental root causes of health and disease**

GUIDING PRINCIPLE 2.
Improve equitable access to a full range of essential health services from health promotion to disease prevention and affordable quality treatment, rehabilitation and palliative care to fight communicable and non-communicable diseases.

Resilient public health programmes are critical to disease control, especially of infectious and neglected tropical diseases, and in addressing underlying risks of non-communicable diseases. At the same time, increased prevention, expanded resources, and intensified research are needed to tackle the growing challenge of non-communicable diseases and other health disorders.

To develop these two guiding principles, the following **lines of action** will be prioritised:

▶ Prioritise addressing the economic, social and environmental **root causes of ill-health** through a "health in all policies" approach.

▶ Follow a **human-rights based approach** throughout the strategy, paying particular attention to the needs and the rights of **women, children and young people**, in line with the Gender Action Plan[24] III and Youth Action Plan[25], persons with disabilities in line with the UN Convention on the Rights of Persons with Disabilities[26], as well as to access to health by other vulnerable groups such as LGBTIQ people[27], older people, migrants, refugees and internally displaced people, also in the context of natural or man-made disasters and the impacts of climate change.

▶ **Continue to lead the fight against a range of communicable diseases, especially AIDS, tuberculosis, malaria, poliomyelitis, Ebola virus disease as well as neglected tropical diseases.** This includes investing with partner countries and through research and development alliances and global health initiatives, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria[28].

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24 EU Gender Action Plan (GAP) III : https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52020JC0017
25 EU Youth Action Plan: https://international-partnerships.ec.europa.eu/document/fe1bcd30-58da-4a37-ab2a-61848789da60_en
26 Publications catalogue - Employment, Social Affairs & Inclusion - European Commission (europa.eu)
27 LGBTIQ Equality Strategy 2020-2025 | European Commission (europa.eu)
28 See project 7 in Annex 1.

▶ **Help prevent and manage non-communicable diseases** which is increasingly important in an ageing world where over 65s and over 80s will represent ever larger proportions of the global population**.** We will support this via the WHO's Universal Health Coverage Partnership[29] and apply multisectoral approaches that address major risk factors such as substance abuse, diet, physical inactivity, and air pollution. This applies specially to cancer.

▶ **Support the expanded uptake of vaccines against childhood illnesses** and increasingly to support adult health including by continuing its strong support to Gavi[30], the Vaccine Alliance that helps increase equitable and sustainable use of vaccines.

▶ **Ensure that innovative vaccines, treatments, and diagnostics for new, prevalent, or neglected infectious and non-communicable diseases**, are developed and used, including through funding from Horizon Europe and the EU-Africa Global Health European and Developing Countries Clinical Trials Partnership (EDCTP3)[31] for research, capacity building and strengthening of the regulatory environment in sub-Saharan Africa.

▶ **Strengthen support for universal access to Sexual and Reproductive Health and Rights[32]** with a focus on women, girls, young people and people with disabilities including **through designing a Team Europe initiative on SRHR in Africa** and support to the United Nations Population Fund (UNFPA) Supplies Partnership[33]. This includes addressing gender-based violence, harmful practices, unmet needs for family planning, preventable maternal mortality and gender inequalities. The work relies on ensuring equitable access to quality services, products and information, including via health systems strengthening toward universal health coverage, and youth-friendly services.

▶ **Support health, nutrition, mental health, and psychosocial support for communities** during and after crisis situations (natural or man-made), delivered in ways that limit mortality, morbidity, disability, and disease associated with humanitarian crises[34].

2.2 Strengthen health systems and advance universal health coverage

Achieving **health systems that are effective, resilient and accessible** in all their fundamental aspects (service delivery, health workforce, health information systems, access to essential medicines, financing, and leadership/governance) is a core priority of the strategy.

> *Advancing **universal health coverage** in an equitable way will ensure access to quality essential healthcare services, medicines and vaccines.*

Advancing **universal health coverag**e in an equitable way will ensure access to quality essential healthcare services and safe, effective, quality and affordable essential medicines and vaccines.To do so, the Commission will follow **guiding principles**, inviting Member States to do the same:

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29 https://extranet.who.int/uhcpartnership/
30 See project 9 in Annex 1.
31 See project 18 in Annex 1.
32 Considering the European Consensus on Development (2017) https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A42017Y0630%2801%29
33 See project 6 in Annex 1.
34 Directorate-General for European Civil Protection and Humanitarian Aid Operations, Health: General Guidelines, 2014.

GUIDING PRINCIPLE 3.

Improve primary healthcare with built-in surge capacity[35], and enhance core public health capacities to meet the requirements of the International Health Regulations[36].

The pandemic has shown the importance of having proper available medical capacity to evaluate and care for a markedly increased volume of patients—one that challenges or exceeds normal operating of health systems. Prioritising this area in our work is a novel approach and will have an important added value: it is the first barrier against the spread of pandemics and other health threats. Support to primary healthcare will also help ensure the management of non-communicable diseases.

> *The pandemic highlighted the importance of available medical capacity*

To develop this guiding principle, the following **lines of action** will be prioritised:

▸ **Engage with partner countries to expand access to a basic package of health services** covering prevention and care with particular focus on poor and marginalised populations through bilateral and regional programmes[37]. The Universal Health Coverage Partnership under WHO enables targeted technical support in 119 countries, taking leadership in harmonising national efforts to achieve the national SDG3 targets.

▸ **Encourage investments in health systems by implementing targeted incentives and increasing accountability[38].**

▸ The EU should consider **improvement of health systems and public health as a core aspect of international cooperation** with partners, including financial support. **Strengthen social protection** systems through bilateral country programmes, particularly by supporting the creation of minimum social protection rules that include equitable access to essential healthcare.

> **Improvement of health systems and public health should be considered as a core aspect of international cooperation**

▸ **Foster international standards in pharmaceutical medical devices and technologies** through the Commission's participation in international organisations and bodies, and promote a high level of quality, effectiveness and safety standards, and training in regulatory matters, with the support of the European Medicines Agency and in collaboration with the WHO.

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35   This refers to a health system's ability to prepare for, and cope with, "surges" (sudden large-scale escalations) in treatment needs.

36   These are the internationally accepted characteristics that health systems must meet to "to prevent, protect against, control and provide a public health response to the international spread of disease". See International Health Regulations (2005) Third Edition (who.int)

37   See project 20 in Annex 1

38   See Kickbusch, Ilona, et al., https://urldefense.com/v3/__https://globalchallenges.org/wp-content/uploads/2021/12/A-new-understanding-of-global-heath-security-UPDATED.pdf__;!!DOxrgLBm!FfwKtCBNDEEFdv0Lhhm84mxHTFJ8hsQ0BQMCPJAfrez0deRI_jLni1swaTgq5XZ7EBHjoJF3f4CdHtU7soD0FII0igpx4g7IYurdHQ$. Donor funds and technical assistance will always play a role, but structures (aid, financial, political and geopolitical) must incentivize a clearly understood national responsibility.

GUIDING PRINCIPLE 4.
Foster digitalisation as a fundamental enabler.

To develop this guiding principle, a **digital action for global health** will display EU leadership and shape the ongoing digital transformation in an equitable way[39]:

▸ **Address underinvestment in digital health and care in low- and middle-income countries**, with a Team Europe initiative on digital health, building on the principles underpinning the planned European Health Data Space. This would focus on achieving a transformational impact for advancing universal health coverage, primary healthcare, pandemic preparedness and response, improved diagnosis and personalised medicine and continuum of care. A specific example is how providing digital health and care services may facilitate access to expertise even in geographically remote locations e.g. through m-health (mobile health) and telemedicine. The development and/or implementation of national and regional strategies such as the upcoming African Union/African CDC digital health strategies will be supported.

▸ **Build on the EU being pioneers in regulation of health data, digital certificates, using the cloud for data sharing, data protection and privacy.** The EU will leverage the potential of health data worldwide in line with the principles of the planned European Health Data Space and foster the use of new technologies including artificial intelligence to boost their potential to improve diagnosis and treatments worldwide.

> *Leveraging the potential of health data worldwid and fostering the use of new technologies*

▸ Contribute to **shaping the digital health ecosystem globally** (rules, norms, standards, interoperability), using European examples and best practice like the EU Digital Covid Certificate and **supporting international rules** that are compatible with the EU framework while facilitating person-centred health data governance and protection.

GUIDING PRINCIPLE 5.
Boost global health research to develop the technologies and countermeasures which are necessary to improve health.

Research is also a key enabler of better health. Leveraging research efforts worldwide can make a step change to advancements in diagnostics and treatments. Drawing on the success of COVID19 vaccines, a **research action for global health** will drive change to ensure research and innovation benefit people worldwide.

To develop this guiding principle, the following **lines of action** will be prioritised:

▸ **Extend international research and innovation cooperation**, making research data as open, standardised and interoperable as possible, and promoting the dissemination and exploitation of results as a common good. This is in line with the Commission Communication "The Global Approach to Research and Innovation" and the respective Council conclusions.

▸ **Support research end-to-end** by creating a conducive research environment, bolstering the entire value chain from fundamental to preclinical and clinical research, in order to bridge the gap between generating and implementing knowledge and evidence.

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39   See project 3 in Annex 1.

- ▶ **Support the design of regulation, production, procurement, and delivery,** so that research conducted in low- and middle-income economies is relevant for local pharmaceutical and health technology production.

- ▶ **Contribute to mutual capacity building** through Joint Undertakings, such as the Global Health European and Developing Countries Clinical Trials Partnership, to foster ever closer collaboration with low- and middle-income countries[40].

- ▶ **Leverage the industrial dimension** to reinforce local production capacity, ensuring effective cooperation between public and private actors.

- ▶ **Boost support of international processes that strengthen the scientific base** for policy action, including the creation of a Science-Policy Panel on Chemicals, Waste and Pollution.

GUIDING PRINCIPLE 6.
Address workforce imbalances and foster skills.

Through a **health workforce action**, this strategy will address both the necessary development of right skills and the challenge of personnel shortages. It requires a long-term, integrated approach with the involvement of social partners, collaboration across countries, and recognition that problems are more acute for the nursing and care segments – and disproportionately affect women:

- ▶ **Strengthen international cooperation and adherence to international commitments on recruitment, developing reliable monitoring and data collection on workforce and its flows.**

- ▶ **Foster mutually beneficial mobility arrangements** with partners in a context of health workforce shortages[41] promoting circular mobility and countering brain drain, including by drawing on the Skills and Talents package, in particular the forthcoming talent partnerships with partner countries.

- ▶ **Support partner countries in training, recruiting and putting into action healthcare workers and ensuring their professional development** through appropriate education as well as vocational training (VET) programmes for auxiliary staff in partnership with other donors, while respecting the need to support retention of skilled healthcare workers. The Opportunity Driven Vocational Training Team Europe initiative[42] will help analyse the need for technical profiles and help deliver the required training.

- ▶ **Support partnerships working through the Pact for Skills and Blueprint for sectoral skills** to increase understanding of specific skills needs in health and care and develop relevant training solutions

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40   See projects 12 and 19 in Annex 1.
41   Supported by project 4 in Annex 1.
42   See under https://europa.eu/capacity4dev/tei-jp-tracker/.

2.3 Prevent and combat health threats, including pandemics, applying a One Health approach

Combating health threats has become a top priority. The world is entering what may well be an age of pandemics[43] due to the interconnectedness of today's societies and our interplay with climate, the environment and animals. Health threats can be of different origins, including environmental pollution, and chemical, biological, radiological or nuclear (CBRN), which calls for a comprehensive all-hazards approach. In July 2022[44], the Commission established a list of top three cross-border health threats (e.g. pathogens with high pandemic potential, CBRN and anti-microbial resistance) to prepare against, which should guide both internal and external action.

The EU drew the early lessons of the pandemic, adopting a new Regulation on serious cross-border health threats and improving preparedness and response in the field of medical countermeasures notably with the creation of the Health Emergency Preparedness and Response Authority (HERA). Regarding such countermeasures, the State of Health Preparedness Report presented in parallel to the strategy outlines the robust action that has been taken including at the global level.

Efforts must continue because as stressed by the Independent Panel for Pandemic Preparedness and Response a lot of work remains to be done before the world is collectively ready for this task.[45] Therefore, the strategy will continue to tackle the ongoing COVID-19 pandemic and its aftermath and, building on lessons from the past three years, build a comprehensive approach to ensuring **global health security**.

> *The EU Global Health Strategy will continue to tackle the COVID-19 pandemic and its aftermath*

To lead these global efforts, the Commission will follow **guiding principles**, inviting Member States to do the same:

GUIDING PRINCIPLE 7.
Strengthen capacities for prevention, preparedness and response and early detection of health threats globally.

COVID-19 has shown the importance of robust preparedness and response capacities and adequate funding to save lives. The pandemic has also demonstrated that spending billions would have saved trillions.

> *COVID-19 has shown the importance of robust preparedness and response capacities and adequate funding to save lives.*

> *Spending billions would have saved trillions*

It will be essential to provide the WHO with sustainable financing and spearheading innovative ways to fill gaps such as the Pandemic Fund[46], which the Commission and some EU Member States co-founded as major contributors.

43   Professor Peter Piot, quoted in https://ec.europa.eu/research-and-innovation/en/horizon-magazine/how-we-prepare-age-pandemics.
44   https://ec.europa.eu/commission/presscorner/detail/en/IP_22_4474
45   The Independent Panel for Pandemic Preparedness and Response was established by the Director-General of WHO in response to World Health Assembly resolution WHA73.1: https://theindependentpanel.org/
46   https://www.worldbank.org/en/programs/financial-intermediary-fund-for-pandemic-prevention-preparedness-and-response-ppr-fif

A continued focus on improving biosafety and biosecurity

The EU should continue to focus on improving biosafety and biosecurity measures in relevant institutions, and on increasing public awareness and training staff.

To develop these guiding principles, the following **lines of action** will be prioritised:

▸ **Prioritise health security on the global health agenda**, including **by designing and implementing the Team Europe initiative with Africa**[47] on health security using a One Health approach to strengthen systems and capacities for sustainable and risk-informed prevention of, preparedness for, and response to infectious and non-infectious threats, including those stemming from environmental pollution and antimicrobial resistance (see below also under principle 11).

▸ **Support regional and country efforts to strengthen pharmaceutical systems and manufacturing capacity** for vaccines and other medical products and technologies to increase quality, safety, equitable access, and health sovereignty. To this end, boost the ongoing **Team Europe initiative on Manufacturing and Access to Vaccines, Medicines and Health Technologies in Africa**[48] and the EU and **Latin America and the Caribbean manufacturing and health partnership**[49]. The EU will invest in strengthening health commodity markets and supporting end-to-end procurement and supply chain management, including transparency and monitoring, using inter alia business support networks to favour matchmaking, facilitate marketplace exchanges and dialogue of industrial actors.

▸ **Diversify and build EU capacity of supply chains for critical equipment and countermeasures, diagnostics and therapeutics** with targeted action to avoid supply shortages and secure worldwide providers. This will enhance the EU's strategic resilience and, crucially, increase the global supply of countermeasures, thus enhancing access by partners to such goods and opening cooperation avenues.

▸ **Develop capacities for early detection, sound and sustainable management of hazardous** waste and **materials**[50], building on the work under the Union Civil Protection Mechanism and strengthening the legislative framework related to **biosafety and biosecurity measures** in all relevant institutions. Awareness raising and training of staff should be helped by the EU CBRN Risk Mitigation Centres of Excellence[51] and their activities in 63 partner countries.

▸ **Support the development of a comprehensive disease outbreak humanitarian response system** that also includes coverage for areas outside the EU, building on Union Civil Protection Mechanism (UCPM) and the European Humanitarian Response Capacity (EHRC).

▸ **Continue to support the implementation of Security Council Resolution 2286**[52] **on protection of civilians in armed conflict,** by advocating respect for international humanitarian law and supporting accountability for attacks against medical workers and infrastructure, and continuity of healthcare and access in armed conflicts.

▸ **Expand and strengthen European and global research partnerships** including clinical trial networks that can be pivoted to address new and emerging pathogens to ensure timely availability of effective medical countermeasures.

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47 See project 15 in Annex 1.
48 https://europa.eu/capacity4dev/tei-jp-tracker/tei/manufacturing-and-access-vaccines-medicines-and-health-technology-products-africa
49 https://ec.europa.eu/commission/presscorner/detail/en/ip_22_3890
50 Including those under waste shipments (europa.eu)
51 https://cbrn-risk-mitigation.network.europa.eu/index_en
52 http://unscr.com/en/resolutions/2286

GUIDING PRINCIPLE 8.

Work towards a permanent global mechanism that fosters the development of and equitable access to vaccines and countermeasures for low- and middle-income countries.

One of the key lessons of the COVID-19 pandemic is that equitable access to medical countermeasures is core to pandemic preparedness and response. This calls for a permanent solution, building on the Access to COVID-19 Tools Accelerator (ACT-A), the Pandemic Influenza Preparedness Framework[53] and other relevant experiences.

> *Equitable access is an important element of pandemic preparedness and response*

For effective medical countermeasures to become available quickly, effective surveillance needs to identify pathogens early, and **effective research platforms** need to be ready to produce the necessary evidence for quick development and rollout, supported by a conducive research environment with clinical trial platforms that can be quickly pivoted to new diseases, and an effective regulatory environment for the conduct of clinical trials.

GUIDING PRINCIPLE 9.

Negotiate an effective legally binding pandemic agreement with a One Health approach and strengthened International Health Regulations.

This fills the gaps in the international rulebook for pandemic preparedness and response, requiring countries and empowering the WHO to report and investigate pandemic threats rapidly[54]. The pandemic agreement should include concrete provisions on anti-microbial resistance[55].

GUIDING PRINCIPLE 10.

Build a robust global collaborative surveillance network to better detect and act on pathogens

The strategy supports the creation of a new reliable network that surveys and detects pathogens in key hotspots, and not only identifies threats but also advises on action to take. This work would be supported by EU Delegations on the ground and complement the G7 initiative connecting existing networks[56]. It will include digitalisation and integration of surveillance systems across the human, animal and environment spectrum, strengthening laboratory capacities and genomic sequencing capabilities, as well as workforce training.

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53   https://www.who.int/initiatives/pandemic-influenza-preparedness-framework
54   https://www.consilium.europa.eu/en/press/press-releases/2022/03/03/council-gives-green-light-to-start-negotiations-on-international-pandemic-treaty/
55   See below also under principle 11
56   G7 Pact for Pandemic Readiness: https://www.g7germany.de/resource/blob/974430/2042052/2d5b55bcdfc0f1aa46b979566288e9a5/2022-05-20-pact-for-pandemic-readiness-data.pdf?download=1

GUIDING PRINCIPLE 11.
Apply a comprehensive One Health approach and intensify the fight against antimicrobial resistance.

Two critical challenges have become more urgent in recent years. The first concerns the complexity and the consequences of **animal, environmental and human interactions calling for a multisectoral, integrated and transdisciplinary** "One Health" approach. This includes the increased risk of major pandemic outbreaks due to in particular to changes in land-use, environmental degradation, complex food production systems and intensified trade and travel, but also the burden in low- and middle- income economies of neglected pollution-related or endemic diseases, most of which can be zoonotic, air-, water or vector-borne.

The second is the silent pandemic of **antimicrobial resistance (AMR)**, which the WHO has identified as one of the top 10 current global health threats[57]. AMR is also an aggravating factor during pandemics. Moreover, antimicrobials pollute the environment and affect the biodiversity[58]. Countries, institutions and global stakeholders must collectively and comprehensively address these challenges as a priority.

To develop this guiding principle, the following **lines of action** will be prioritised:

- ▶ **Intensify work with the Quadripartite**, including WHO, the Food and Agriculture Organization of the United Nations (FAO), the World Organisation for Animal Health (WOAH), and the United Nations Environment Programme (UNEP) to implement its One Health Joint Plan of Action.

- ▶ **Seek 'deep prevention'[59]** – identifying and addressing threats before pathogens cross from animals to humans, not after human outbreaks have occurred and strengthen capacity to prevent pollution related health threats.

- ▶ The Commission will explore **existing international conventions** that affect the 'upstream' course of potential pandemics, to examine whether their provisions or implementation plans could be strengthened to support a One Health approach[60].

- ▶ Work towards the inclusion of concrete provisions on anti-microbial resistance in the **pandemic agreement.**

- ▶ **Support** the development of and access to **innovative medical countermeasures to address AMR,** including antimicrobials, vaccines, and diagnostics[61].

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57   https://www.who.int/news-room/fact-sheets/detail/antimicrobial-resistance

58   See Biodiversity Strategy (COM(2020) 380), Farm to Fork Strategy (COM(2020) 381) and Zero Pollution Action Plan (COM(2021) 400)

59   https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00948-X/fulltext

60   Including the United Nations Framework Convention on Climate Change; the Convention on Biological Diversity and its Nagoya Protocol on Access to Genetic Resources and the Fair and Equitable Sharing of Benefits Arising from their Utilization; the United Nations Convention to Combat Desertification in those Countries Experiencing Serious Drought and/or Desertification, Particularly in Africa; the Protocol on Water and Health to the Convention on the Protection and Use of Transboundary Watercourses and International Lakes; and the Convention on International Trade in Endangered Species of Wild Fauna and Flora.

61   See also under principles 7 and 9.

3. A new internal governance to tackle global health challenges

Achieving this strategy's goals requires a more joined-up way of working within the Commission and with Member States and partners. This is because global health is increasingly shaped by multiple policies (such as **climate, environment, energy, nutrition, food security, social protection, demography, education, research, humanitarian assistance, finance, trade, industrial policy or foreign and security policy**) that either affect health or enable the solution to health challenges, with various agencies and bodies at EU and national levels and different financial institutions actively involved. This calls for reinforced coordination to help achieve the priorities of this strategy and implement a true **'health in all policies'** governance—a novelty of this strategy.

> *Tackling global health challenges calls for a true 'health in all policies' governance*

GUIDING PRINCIPLE 12.

Link effectively all policies and measures that have an impact on global health within the Commission, EU agencies and EU financing institutions.

The Commission will fully integrate global health considerations into all EU policy areas that have an impact on global health by reinforcing internal coordination mapping roles and responsibilities, policies and tools, and how they will help achieve the priorities of this strategy.

This involves **lines of action** in the following key policy areas:

▸ **Pursue global climate neutrality by 2050**, increasing the capacity to adapt, strengthen resilience reducing vulnerability to climate change in accordance with the Paris Agreement.

▸ **Promote ambitious global action to tackle biodiversity loss, wildlife trafficking, air, water and soil pollution**, exposure to toxic substances. Fostering the One Health approach in the future Global Biodiversity Framework to be agreed at the UN Biodiversity Conference (COP15), and in global action to tackle wildlife trafficking to reduce the risk of zoonoses. Support soil biodiversity, the international pursuit of air pollution reduction and mitigation of global emissions, the promotion of key international instruments and a global mechanism for the management of chemicals and waste beyond 2020, the negotiation of a new, legally binding instrument to end plastic pollution, and ambitious outcomes on water and health at the upcoming 2023 UN Water Conference.

▸ **Promote effective health and safety standards worldwide,** by continuing to engage with the International Labour Organization (ILO) in supporting the integration of the right to safe and healthy working conditions into the ILO framework of fundamental principles and rights at work.

▸ **Step up humanitarian assistance and support to** regions and populations most affected by **food insecurity and high incidence of malnutrition**, track food prices and make stocks available to countries in need, as reflected in the March 2022 Commission Communication on Safeguarding food security and reinforcing the resilience of food systems[62] and the Communication on fertilisers. Adopt a systemic approach by accelerating the transition to a sustainable food system that can bring health, environmental and social benefits.

▸ **Leverage investment in education** to support health in the short and long term, as per the commitments taken at the Transforming Education Summit, while prioritising early childhood development, health education, SRHR, and school meals through its programmes with partner countries.

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62 https://eur-lex.europa.eu/resource.html?uri=cellar:5391557a-aaa2-11ec-83e1-01aa75ed71a1.0002.02/DOC_1&format=PDF

▶ **Strengthen humanitarian assistance and civil protection operations** related to global health in emergency and crisis settings through increasing operational, analytical, monitoring and communication capabilities of the Emergency Response Coordination Centre and the European Humanitarian Response Capacity –and placing more public health experts into action in crisis areas. Support disaster management capacity building with organisations such as the ASEAN Coordinating Centre for Humanitarian Assistance. Reinforce the availability of health-related response capacities under the **Union Civil Protection Mechanism**; develop new medical and CBRN related capacities under the European Civil Protection Pool and RescEU; and strengthen cooperation with WHO on emergency response and continue to support their work on standards development and classification processes for emergency medical teams deployable globally.

▶ **Make the behaviour of public and private stakeholders work for global health in a range of finance-related measures** by (i) promoting a pro-health behaviour by domestic and foreign companies by including health impacts in the EU Non-Financial Reporting Directive[63]; (ii) working with international financial institutions and rating agencies so that they embed the same health criteria in their decisions; and (iii) engaging with the International Monetary Fund (IMF) so that it includes health investment in its regular assessment of countries' macroeconomic stability – encouraging investment in public health.

▶ **Ensure that international trade policy** works for global health, so that international pharmaceutical supply chains are not broken, that partners benefit from medicines, medical devices and services – strengthening the resilience of health systems through the World Trade Organization (WTO) Trade and Health Initiative[64] and sharing experiences with WTO partners on trade facilitation. This includes annual stocktaking with WTO partners of lessons learned from the pandemic, and monitoring the implementation of the Ministerial Decision on the WTO Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS)[65] that makes it possible to authorise the manufacture and export of COVID-19 vaccines in a fast and simplified manner without the consent of the patent owner. We will discuss constructively whether to extend this mechanism to cover COVID-19 therapeutics and diagnostics, and support the scaling up of the production capacity of vaccines and other products in developing countries.

▶ **In supporting the High Representative, shape the common foreign and security policy and promote the full implementation of that policy** by including health in political dialogues with partners to facilitate international cooperation. External action can serve as a vector to promoting global health by such means as mapping external security threats. Global health should consolidate with other factors that affect health, like environment, migration, demography or food security. Future lines of action should include: (i) supporting the creation of pandemic surveillance mechanisms in non-EU countries; (ii) circulating mutual information about partners' plans to advance foreign policy and commercial goals through health; (iii) ensure in Geneva, New York and across the world cooperation with like-minded partners; and (iv) prevention of and response to foreign information manipulation and interference (FIMI), which can weaponise global health. Effective communication on EU health action has proven to be a very useful tool in this regard.

▶ **Ensure an active role of EU Delegations in implementing this strategy**. During the COVID-19 pandemic, the EU Delegations have proven to be an effective source, gathering health-related intelligence around the globe and communicating and reaching out on EU priorities, while raising political awareness. The role of the EU Delegations will need to be bolstered, ensuring specific expertise in health-related areas of geostrategic importance. Strengthening specific health expertise in Delegations, also through the secondment of experts, will be explored.

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63   DIRECTIVE 2014/95/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 22 October 2014 amending Directive 2013/34/EU as regards disclosure of non-financial and diversity information by certain large undertakings and groups (https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32014L0095&from=EN).

64   WTO | Ministerial conferences - Twelfth WTO Ministerial Conference - Geneva Switzerland

65   https://www.wto.org/english/tratop_e/trips_e/trips_e.htm

GUIDING PRINCIPLE 13.
Better link and coordinate policies and measures of the EU and its Member States to speak with one voice and deliver effective action worldwide

EU leadership has played a key role in the fight against the COVID-19 pandemic globally through the **Team Europe approach**, with the EU and Member States acting within their respective competences. **Strengthening this leadership is essential** to boost the impact of the EU contribution to global health and to shape a new global health order based on our fundamental values. There is wide consensus amongst EU Member States and stakeholders that this calls for closer coordination in practical ways, which would not only respect the specific competences, but facilitate the decision making that would take place through the established statutory channels.

Strengthening leadership is essential

Building on ideas from EU Member States, this strategy suggests defining practical ways to enhance coordination in 2023[66], with the following **lines of action**:

▸ **Ensure synergy between national and EU global health strategies.**

▸ **Facilitate information and intelligence sharing among the EU and Member States** in the many focal points dealing with global health (**Brussels, Member State capitals, Geneva and New York**), with increased health capacities and/or expertise in the latter two. This will build on an ongoing initiative of the Czech Presidency of the Council to address this need.

▸ **Collect views from Member States**, including by carrying out periodic surveys on specific topics, to facilitate the shaping of positions.

▸ **Undertake permanent mapping of key measures and financing efforts** of the EU and its Member States to better understand what actions are taking place and to allow for tying means to the strategy's priorities, considering when necessary, the help of **joint ministerial meetings** in the areas of health, finance, foreign affairs and development.

▸ **Strengthen upstream coordination with Member States**, particularly in fora in which not all Member States are directly participating (e.g. the **G7,** the **G20** and the **Organisation for Economic Co-operation and Development** (OECD)).

▸ Step-up EU coordination and building allies to **ensure due EU presence and decision-making role in international organizations.**

▸ **Strengthen external communication** catered to the strategy, so that efforts by the EU and its Member States receive adequate recognition, with 'Team Europe approach' as a trademark for EU effective action in health, in line with the Global Gateway strategy.

4. A new multilateral governance for the emerging global health order

Since the 2010 Communication, **a new global health order** is emerging: an ever-evolving system with a multiplicity of new stakeholders and initiatives that reshape global health relations against a complex geopolitical backdrop. The COVID-19 pandemic has been a litmus test of what is essential, what must change and what is missing to bring about effective global health governance. The Commission will follow guiding principles, inviting Member States to do the same:

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66   With the support of the EU4Health project 1 in Annex 1.

GUIDING PRINCIPLE 14.
Support a stronger, effective and accountable WHO.

All EU27 Member States are members of the WHO, and even though the EU is formally not a WHO member, the WHO has always received steadfast EU support, including at times when its role was at stake. The COVID-19 pandemic has demonstrated that **WHO is the indispensable cornerstone** of the multilateral health system – and at the same time it has also revealed areas of certain shortcomings. This strategy should aim at ensuring further strengthening of **WHO's leadership, effectiveness, efficiency, accountability** and **align** EU and WHO priorities

> **WHO is the indispensable cornerstone** *of the multilateral health system*

The following **lines of action** will be prioritised:

▸ **Seek formal EU observer status with full participation rights** as a first step towards full WHO membership.

▸ **Contribute to making the financing of WHO more sustainable** in line with the decisions of the 75th World Health Assembly[67] by 2030-2031.

▸ **Advance WHO reform to strengthen its governance, efficiency, accountability and enforcement** of rules, in accordance with its member-driven nature.

▸ **Strengthen WHO's focus on its normative role** in areas of global relevance, starting with strengthened International Health Regulations and a future pandemic agreement by 2024, and explore other areas like health data governance and workforce.

▸ **Enhance cooperation with the WHO,** at central and regional European level, using the aforementioned mapping mechanisms to ensure greater alignment of EU and WHO priorities. These common goals will guide **the EU's sizeable voluntary contribution to the WHO**. In 2020 and 2021, Commission voluntary contributions were the fourth largest overall, and the EU and its Member States accounted for more than 20% of the WHO budget, being the largest contributor[68].

GUIDING PRINCIPLE 15.
Steer the new global health governance by filling gaps and ensuring coherence of action

As shown again during the COVID-19 pandemic, the global health governance (the set of institutions, actors, rules, and financing strands in this field) needs strengthening to ensure (i) the necessary mechanisms are available to address health challenges; and (ii) the plurality of bodies active in global health are sufficiently aligned—avoiding duplication and fragmentation that make effective and efficient responses to health challenges more difficult.

In the short term, the United Nations system, the G7, the G20 and the OECD have provided important impetus to global action. The G7 Pact for Pandemic Readiness[69] is a good example – in the absence of a global pathogen surveillance network, it seeks to connect existing partial networks. Another good example is the G20-born Pandemic Fund[70] that fills immediate financing gaps at global, regional and national level.

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67   WHA75(8): https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75(8)-en.pdf
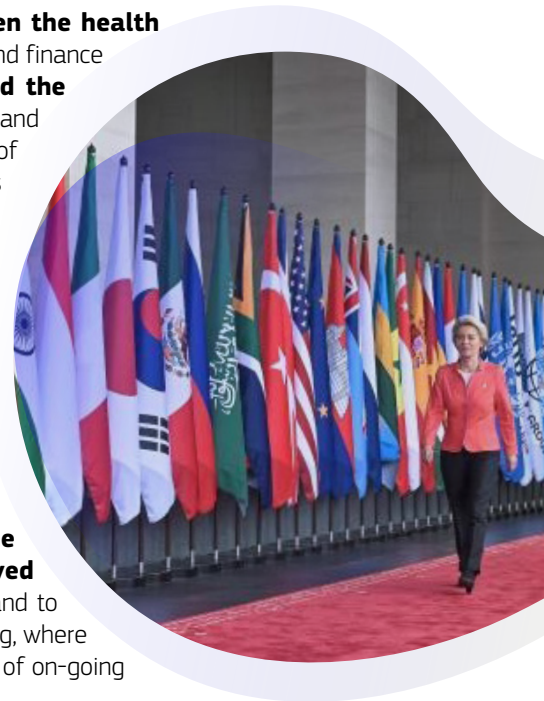68   Source: WHO | Programme Budget Web Portal. Consulted on 3 November 2022.
69   https://www.g7germany.de/resource/blob/974430/2042058/5651daa321517b089cdccfaffd1e37a1/2022-05-20-g7-health-ministers-communique-data.pdf
70   See project 10 in Annex 1.

In the longer term a robust global health governance requires to fill existing gaps and ensure coherence in addition to seeking a pandemic agreement (see section 2.3), the following **lines of action** will be prioritised:

▶ **Work towards permanent cooperation and synergies between the health and finance tracks**, with a standing arrangement between health and finance policies **to deal effectively with threats to global health and the global economy,** building on the work of the G20 Joint Health and Financing Task Force. This arrangement would assess economic impacts of global health threats and vulnerabilities, identifying what governments would need to do to be better prepared for a potential crisis. It would also **mobilise the necessary financial resources** after the WHO declares a pandemic emergency, so countries can better manage the resulting economic and social effects.

▶ **Strengthen alignment and coordination between global health initiatives** to ensure maximum efficiency and **explore permanent solutions**[71] which may combine or expand the operations of several existing health funds and continue to provide important funding to their core work[72].

▶ **Ensure that global health challenges stay at the top of the global agenda and that top leadership is structurally involved** to provide impetus to global health work, with the WHO at its core, and to take individual and collective responsibility. Support a structure involving, where required, **heads of state and government**, to do so, in the context of on-going multilateral discussions.

GUIDING PRINCIPLE 16.
Ensure a stronger EU role in international organisations and bodies.

The EU and its Member States make sizeable financial contributions in a Team Europe approach to all key international institutions and global health initiatives. Therefore, it is key to ensure that these financial contributions translate into commensurate decision-making powers to achieve the objectives of this strategy.

The following **lines of action** will be prioritised:

▶ **Ensure a level of participation and a decision-making role in all institutions and bodies that is commensurate** with EU and Member State contributions to increase our impact.

▶ **Monitor the EU financial contributions** to international organisations and agencies and to initiatives and how they support EU priorities.

▶ **Develop a plan to further increase the EU's influence within a reasonable timeframe** wherever EU impact in institutions and bodies is not commensurate with EU contributions, with the aim of ensuring alignment.

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71   As suggested by the Lancet Commission, see https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(22)01585-9/fulltext

72   For three financing windows: commodities for disease control, pandemic preparedness and response, and primary health system strengthening in low and middle income economies.

5. Expand the Union's strategic partnerships on health and reshape its engagement with different stakeholders

The wide challenges in global health across the world require an expansion of our partnerships, exploiting the EU's unique potential to drive international cooperation.

The Commission will follow **guiding principles**, inviting Member States to do the same:

GUIDING PRINCIPLE 17.
Expand partnerships based on equal footing, co-ownership, mutual interest and strategic priorities.

★ **Global Gateway**

The aim of the Global Gateway strategy is to deepen meaningful and mutually beneficial partnerships with a wide range of traditional and non-traditional partners and stakeholders. Health is a key pillar of this. The EU will continue developing partnerships to support improving health across the world, with a particular attention to countries with weaker health systems.

The EU's relations with partners must be based on ownership – with the **EU and our partners taking the responsibility** that is key to achieve **health sovereignty**.

The EU's relations with partners must be based on ownership

The EU's bilateral partnerships will build on the ongoing collaboration with a wide range of partners and counterparts including national health authorities, public health institutions, and other relevant bodies. In the spirit of meaningful partnership, the EU will encourage partner countries to make and meet ambitious commitments to prevent health threats, improve health and invest in health services for their whole population, increasing domestic resource commitment to health in the long term. This includes for instance advancing in Africa towards the target set in the 2001 African Union Abuja Declaration[73] to allocate 'at least 15% of [the] annual budget to the improvement of the health sector while taking account of the necessary fiscal space'.

The EU is expanding partnerships in health at regional level. Regionalism is important in global health, and regional stakeholders play an increasingly important role. Deepening health partnerships at regional level, including in **Africa, Latin America and the Caribbean, the Asia-Pacific region**, as well as supporting South-South cooperation will be essential.

The February 2022 EU-African Union summit strengthened the health partnership between the EU and Africa, which underpins five Team Europe initiatives with African partners[74]. The EU is also committed to the EU-Africa Global Health EDCTP3 3 Joint Undertaking that builds on the European and Developing Countries Clinical Trials Partnership bringing together 15 members from the EU with 21 members from Africa and other public and private actors, from industry, philanthropy, or non-EU, non-African countries.

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73   https://au.int/sites/default/files/pages/32894-file-2001-abuja-declaration.pdf
74   See projects 13, 14, 15, 16 and 17 in Annex 1.

A regional Team Europe initiative[75] is being developed in Latin America and the Caribbean focusing on 1) private sector engagement, 2) improved regional supply chains, trade integration and business environment, 3) regulatory strengthening, 4) demand consolidation and pooled procurement, 5) scientific cooperation, 6) pandemic preparedness and health security, and 7) other health-related areas (health data, digital and emerging technologies, non-communicable diseases, health systems, etc.). The partnership will support ongoing regional efforts, notably the Plan for self-sufficiency in health matters, endorsed by the Community of Latin American and Caribbean States (CELAC) in September 2021, which sets out action to strengthen capacities to produce vaccines and medicines in the region. A key partner will be the Pan American Health Organization (PAHO/WHO).

In line with its Strategy for Cooperation in the Indo-Pacific, the EU will continue working with Indo-Pacific partners to strengthen their capacities, health sovereignty and pandemic preparedness, in particular for the least-developed countries in the region. The EU will enhance collaborative research on communicable diseases in the context of the Horizon Europe research programme. In line with its Pharmaceutical Strategy, the EU will strengthen multilateral cooperation to secure safe and diverse pharmaceutical and health-related industrial supply chains, to facilitate access to quality medicines and health products. The EU will explore further EU-ASEAN cooperation enshrined within a "One health approach", promoting tighter connections between regional health capacities, such as the new ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED).

The EU will further prioritise health resilience in its neighbourhood. The EU is actively assisting its partners in the Western Balkans and the neighbourhood to raise their healthcare standards and reduce the likelihood of future border closures due to health emergencies. The EU supports **candidate countries and potential candidates, including Ukraine, Moldova and Georgia,** to align their health legislation with EU health law and to be able to implement it. This includes mobilising EU Agencies (ECDC and EMA) to support this, notably via the implementation of EU acquis on cross border health threats in line with EU standards, field epidemiology training programme for strengthening national public health workforce capacities across the neighbourhood and Western Balkans, advancement on One-Health approaches on antimicrobial resistance, strengthening surveillance systems and public health microbiology capacities, and regional cooperation in the field of epidemic intelligence, risk assessment, preparedness, response, and public health emergency.

The Western Balkan partners and Ukraine were invited to join the Health Security Committee as observers, and the Western Balkans are all signatories to the EU Joint Procurement Agreement for medical countermeasures.

The **United States** (US) is a key partner in global health as shown by 'U.S.-EU Agenda for Beating the Global Pandemic: Vaccinating the World, Saving Lives Now, and Building Back Better Health Security',[76] the administrative arrangement with the US Department of Health and Human Services on public health threats[77], the Transatlantic Taskforce on Antimicrobial Resistance[78], the EU and US joint task force addressing Covid-19 Manufacturing and Supply Chain challenges[79] and coordination with US Agency for International Development. The EU-US partnership should be expanded to cover a more comprehensive set of health issues, with an EU-US taskforce on health cooperation, encompassing health security, cancer policy, and global health governance. Close collaboration with like-minded partners and donors such as **Canada, Japan and the United Kingdom** amongst others on issues such as health system strengthening, equity and universal health coverage, will continue to be instrumental in building multilateral approaches to solving global challenges. The European Centre for Disease Prevention and Control collaborates with other centres for disease control in non-EU countries, including the US Centers for Disease Control and Prevention.

To develop this guiding principle, the following **lines of action** will be prioritised:

▸ **Focus**, in all regions, **on the partners most in need** and where r**esults on the ground can be achieved**, while taking into account specific challenges such as conflict settings, promoting cooperation where governments take responsibility and facilitate the effectiveness of support.

> **Focus on the partners most in need** *and where* **results can be achieved**

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75 See project 19 in Annex 1, https://ec.europa.eu/commission/presscorner/detail/en/ip_22_3890
76 https://ec.europa.eu/commission/presscorner/detail/en/statement_21_4846
77 https://ec.europa.eu/commission/presscorner/detail/en/STATEMENT_21_4846
78 This has subsequently turned into a plurilateral initiative including other partners (Canada, Norway and the United Kingdom).
79 CIPR - USA-EU Joint Statement on Covid-19 Manufacturing and Supply Chain Taskforce (europa.eu)

▶ **Further prioritise health in its neighbourhood and in support to candidate countries** and potential candidates; and stand with **Ukraine and Moldova**, whose health systems are under enormous strain due to Russia's war of aggression against Ukraine and give comprehensive support to post-war reconstruction efforts, modernising and re-building their health systems.

▶ **Deploy the EU's strengths with unique regional bodies** (like the European Centre for Disease Prevention and Control (ECDC) and the European Medicines Agency (EMA)) that can collaborate with other regional initiatives worldwide, sharing EU data, science and knowledge, and benefit from non-EU expertise. This would **strengthen collaboration with** bodies such as the Africa Centres for Disease Control and Prevention, the African Medicines Agency, and similar entities in the neighbourhood and programmes in Latin-America, and the Indo-Pacific (such as the South-East Asia Pandemic Response and Preparedness programme, supporting ASEAN countries in strengthening national capacity to control COVID-19).

GUIDING PRINCIPLE 18.
Strengthen engagement with key global health stakeholders

Some global **civil society** organisations, **philanthropic** organisations, **global health initiatives** (such as the Global Fund, Gavi, CEPI, and others), other UN bodies (including UNFPA, UNICEF, UNAIDS), multilateral development banks and private stakeholders have larger funding volumes than many donor countries provide on their own. Engagement with these stakeholders is key to ensure coordination and complementarity of efforts. Cooperation with all types of **civil society organisations** (including youth organisations), patients' organisations, social partners, parliaments, and communities more broadly, is fundamental in enabling the EU to express its support for solidarity and democracy, and its focus on open and transparent governance and human rights. Equally important is engagement with communities and localisation, which may support effectiveness of action. Finally, the role of the private sector is key in particular in the pharmaceutical, biotech or med-tech industries and for digital solutions, to help improve self-sufficiency.

To develop this guiding principle, the following **lines of action** will be prioritised:

▸ **Continue to build strong partnerships** with global health stakeholders (i) advancing common priorities; (ii) helping achieve public sector objectives; (iii) ensuring accountability; and (iv) avoiding fragmentation that may undermine the effectiveness of global health action. The EU will support efforts by these organisations to better coordinate their action, avoid duplication and maximise their effect on the ground. The EU will continue to advocate for strong collaboration and setting shared goals, for example under the Global Action Plan for Healthy Lives and Well-being for All[80].

▸ **Continue support to strengthen civil society** as partners of the strategy and the role and voice of people in securing their own health including by holding governments and health providers accountable. The EU will extend this support to cover community participation and engagement across health processes. Communities are key and localisation may support effectiveness of action.

▸ **Ensure that the private sector and health industries are appropriately considered** and involved in its various forms including production of commodities, service delivery and support.

6. Finance

The COVID-19 pandemic made the risks related to underfunded health systems more explicit than ever. It has led to an unprecedented mobilisation of funding for global health and has increased the awareness on the importance of preventive actions to fight pollution and protect nature. These financing efforts need to be sustained and ensure they duly contribute to better health and well-being of people, to stronger health systems, and to combatting health threats globally.

The Commission will follow **guiding principles**, inviting Member States to do the same:

GUIDING PRINCIPLE 19.
Enhance EU finance for global health with maximum impact

The EU and its Member States should invest in global health in a predictable and sustainable way commensurate with needs and ambitions. Importantly, results will depend not only on how much, but increasingly on how we finance so there is a need for closer monitoring of the impact of EU financial contribution overall. In addition, other funding sources need to be leveraged including partners' own contributions and also using novel finance instruments to match the high ambition set by the strategy.

> *Investing in global health in a predictable and sustainable way*

To develop this guiding principle, the following **lines of action** will be prioritised:

Predictable and sustainable investment in global health	▸ **Prioritise global health across all relevant EU budget financing programmes,** including the EU4Health programme, Horizon Europe, the NDICI-Global Europe, the Instrument for Pre-Accession Assistance and the Technical Assistance and Information Exchange instrument. Budget support will remain a key method, where appropriate, to steer national policies and reforms and ensure strong policy dialogue with partner countries.

▸ **Fulfil its commitment on financing for global health within the framework of the multi-annual financial framework**. The EU has committed itself to allocating at least 20% of its official development assistance to human development and social inclusion[81] under the Neighbourhood, Development and International Cooperation Instrument – Global Europe (NDICI-Global Europe). Under the NDICI-GE, in the 2021-2027 period, the EU has programmed so far over **EUR 4.4 billion**[82] in grants for global health at national, regional and global levels, which should duly unfold in line with this strategy.

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80 https://www.who.int/initiatives/sdg3-global-action-plan
81 european-consensus-on-development-final-20170626_en (5).pdf
82 Subject to availability of funds in the annual budget procedures.

- **Seek new ways to financing with an effective Team Europe approach** where EU and Member State resources can be pooled to achieve maximum impact. The EU will advocate for EU Member States to increase financing for global health in line with the priorities in the strategy.

- **Encourage the use of innovative financial instruments** and build on the European Fund for Sustainable Development Plus (EFSD+) that facilitates access to blended finance and budgetary guarantees. A **specific window on human development** under the EFSD+ open architecture provides opportunities to leverage further investment in health. Together with the **European Investment Bank and the European Bank for Reconstruction and Development**, the Commission intends to develop a framework for global health financing, aligned with our priorities and those of our partner countries and respective mandates of both banks. Encourage participation of **private investors** where relevant and in line with EU priorities.

- **Prioritise co-investment initiatives with local partners**, and **pooled financing** with other international stakeholders. The EU must shape the future of the various funds and initiatives by being at the heart of their governance and by influencing their priorities, financial flows and action. The EU will encourage and help **domestic resource mobilisation in partner countries and efficiency** as the most sustainable source of public financing.

- **Advocate for increased accessible finance for countries** through multilateral development bank lending and for increased sustainable finance, for example through special drawing rights on lending to contribute to the International Monetary Fund (IMF) Poverty Reduction and Growth Trust and the IMF Resilience and Sustainability Trust.

- Together with Member States, the EU will promote new financing methods, including **debt swaps or loan buy-downs** to convert debt into investment in health system reforms and new life-saving programmes. Such transactions could be facilitated by concessional loans and guarantees in partnership with development finance institutions to help make available government money and incentivise health system reforms. Increasing the amount of revenues raised through environmental taxation has the potential to reduce debt financing, and to mobilise resources for public health services. Countries should be encouraged to ensure whenever possible, polluters bear the costs of their pollution.

- **Diversify domestic health financing**, support health financing and system reforms both in countries and across global health initiatives, and strengthen public expenditure management.

- **Monitor health expenditures benefiting low and middle income countries (LMICs)**, notably Official Development Assistance (ODA), trends in domestic financing and other donors funding.

7. Way forward: accountability through monitoring and evaluation

Achieving the priorities of this strategy will require an inclusive and comprehensive process. It relies on sustained action carried out in a Team Europe approach and strong interaction with partners worldwide. Implementation of this strategy will be strengthened significantly by effective partnerships with Member States, partner countries, civil society including youth organisations, global and regional stakeholders, international financing institutions, academia, and the private sector.

To develop this guiding principle, the following **lines of action** will be prioritised:

▸ **Implementation of the strategy will be monitored using metrics and key indicators that** will be developed in 2023 with the help of an EU4Health project, starting to monitor actions carried out as of 2020. Metrics and indicators will be tied directly to actions and health outcomes that respond to EU priorities, and will be made publicly available[83]. The aim is to assess the impact of our actions and funding and be able to adjust as necessary to achieve the ambition set by the strategy and meet EU priorities more widely.

▸ **The Commission will carry out a mid-term review and also a final evaluation** of the strategy's implementation in 2030.

▸ **The Commission will keep the European Parliament, the Council and civil society closely informed** about financing and implementation progress by organising regular high-level exchanges and publication of a report in principle every two years. The EU will notably host a structured dialogue with stakeholders as part of the annual Global Health Policy Forum process, to discuss implementation and make necessary adjustments.

8. Conclusion

An ambitious global health strategy is crucial in a world where diseases have no borders – and where health is essential to protect the well-being of people, guarantee the stability of societies, and deliver sustainable development in a complex geopolitical landscape.

Rooted in equity, solidarity and human rights, powered by the spirit of partnership and fuelled by the determination to strengthen global governance, this strategy sets three policy priorities, provides 20 guiding principles and defines concrete lines of action to contribute to better health for all in a changing world.

Looking forward to 2030, this Strategy will strive to reverse the tide and **regain the lost ground as to universal health targets in the 2030 Sustainable Development Goals** by focusing our firepower on the fundamental issues (health systems strengthening, universal health coverage, primary health care, public health, health determinants), tackling workforce imbalances and paying particular attention to women, girls and vulnerable persons.

Digitalisation and research will be **key enablers** and shape the ongoing digital transformation and innovation potential in an equitable way.

A quantum leap in **health security** will be achieved with a **permanent mechanism** that enhances equity in development of and access to tools such as vaccines, a **global surveillance** network which fully embodies One Health principles, and **robust international rules**, including enhanced measures to tackle **anti-microbial resistance.**

The EU will continue showing leadership in global health and seek to shape the emerging new global health order with a more effective and accountable **WHO** at its core where the EU has **formal observer status**.

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83   See project 5 in Annex 1.

Fill existing gaps in global governance with a permanent link between global health and finance efforts, sustained attention by top political leadership, and effective funding will be novel ways forward. Harness the impetus of global health stakeholders and private initiatives to advance common objectives—**fighting duplication and ensuring coherence** of action in the multilateral health system will allow a step change to ensure better health security globally.

> ### *Our* international partnerships *expanded with a Global Gateway focus* based on co-ownership and co-responsibility

Our **international partnerships** will be expanded with the new Global Gateway focus **based on co-ownership and co-responsibility** by our partners to promote health sovereignty, more resilience and autonomy, allowing to target those most in need where our engagement can achieve highest impact, and to deliver on our health priorities, matching broader EU interests.

We will leverage the **Team Europe** approach with a genuinely **single and powerful voice,** assuring synergy between national and EU global health strategies, mobilising all policies (internal and external) to work for global health, and ensuring **close coordination with Member States** so political action and financial means are tied to the new priorities.

> ### Team Europe *approach with a* single and powerful voice

We will render our **important financial contribution** to global health even more impactful, through innovative finance, pooling of funding internationally, and co-investing by partner countries.

The establishment of a robust and transparent monitoring system that maps EU efforts and identifies impacts with the help of stakeholders, will ensure accountability of our action in the crucial area of global health and maximise EU support and influence capacity.

The Commission calls on Member States, the European Parliament, other European bodies, stakeholders and partners across the globe to join our efforts and turn this ambitious strategy into a reality, delivering better health for all in a changing world.

ANNEX 1: Key projects

The non-exhaustive list of projects presented in this annex support the lines of action mentioned throughout this strategy.

PROJECTS	INDICATIVE TIMEFRAME
GLOBAL PROJECTS	
1. **Set up a coordination system with EU Member States** to ensure a powerful EU voice and leadership in global health in a Team Europe approach. Support by EU4Health envisaged.	Second half of 2023
2. **Expand the existing European Antimicrobial Resistance Surveillance Network** into an integrated surveillance mechanism covering all pathogens. Supported by EU4Health.	2023-2024
3. **Leverage the potential of health data worldwide**. Supported by EU4Health.	2023-2024
4. **Foster mutually beneficial mobility arrangements with partners**, including by supporting partner countries in training, recruiting, putting into action and retaining healthcare workers and ensuring their professional development through education as well as vocational training programmes for auxiliary staff. Supported by the Neighbourhood, Development and International Cooperation Instrument – Global Europe (NDICI-Global Europe) and EU4Health.	2023-2025
5. **Follow up, monitoring and evaluation of the implementation of the EU global health strategy**, publishing a report in principle every two years, supporting continuous dialogue and involvement of key stakeholders. Support by EU4Health envisaged.	2023
6. **Support the United Nations Population Fund's Supplies Partnership** on reproductive health commodities, helping to end unmet needs for family planning and preventable maternal mortality. Supported by the NDICI- Global Europe (EUR 45 million pledged).	2023-2027
7. **Support the Global Fund against AIDS, tuberculosis and malaria**, and health system strengthening. Supported by the NDICI-Global Europe (EUR 715 million pledged).	2023-2025
8. **Support the Universal Health Coverage Partnership administered by the WHO to advance universal health coverage and strengthen health systems** in partner countries. Supported by the NDICI-Global Europe and the Emergency Support Instrument (EUR 125 million programmed).	2023-2027
9. **Support Gavi, the Vaccine Alliance to ensure the expanded uptake of vaccines** against childhood illnesses and increasingly to support adult health (for example by administering the human papillomavirus vaccine). Supported by the NDICI-Global Europe (EUR 300 million pledged).	2021-2025
10. **Support the Pandemic Fund**. Supported by the NDICI-Global Europe (EUR 427 million pledged).	2023-2027

11. **Support the roll-out of COVID-19 vaccines** in selected most under-vaccinated countries. Supported by the NDICI-Global Europe and the Emergency Support Instrument (EUR 375 million pledged).	2023
12. **Support research and development of vaccines against emerging infectious diseases,** including through the **Coalition for Epidemics Preparedness Innovations (CEPI).** Supported by Horizon Europe.	2021-2024
REGIONAL PROJECTS	
13. **Team Europe initiative on Manufacturing and Access to Vaccines, Medicines and Health Technologies in Africa** to strengthen pharmaceutical systems and, together with health industries, the regional manufacturing capacity. EU contribution supported by NDICI-GE and other instruments.	2021-2027
14. **Team Europe initiative to improve sexual and reproductive health and rights** in sub-Saharan Africa, particularly among adolescent girls and young women. EU contribution supported by NDICI-GE.	2022-2027
15. **Team Europe initiative on sustainable health security using a One Health approach** in Africa to strengthen systems and capacities for sustainable, risk-informed prevention, preparedness, and response to infectious threats and antimicrobial resistance. EU contribution supported by NDICI-GE.	2022
16. **Team Europe initiative for Africa-based public health capacity** through support to public health institutes in Africa, at national and regional levels and through partnerships between African Union and EU public health institutes. EU contribution supported by NDICI-GE.	2023
17. **Team Europe initiative on digital health** for health system strengthening and universal health coverage to support strong and digitally enabled health systems in Africa. EU contribution supported by NDICI-GE.	2023
18. **Support the Global Health EDCTP3 Joint Undertaking through a Team Europe** approach and Team Africa coming to drive forward new solutions to **reduce the burden of infectious diseases** in sub-Saharan Africa, also addressing the rising threat of **antimicrobial resistance** and **climate-crisis-related infectious disease** challenges. Supported by Horizon Europe (EUR 800 million programmed).	2021-2027
19. **EU-Latin America and Caribbean Partnership** on manufacturing vaccines, medicines and health technologies and strengthening health systems. EU contribution supported by NDICI-GE.	2022
BILATERAL PROJECTS	
20. **Health system support and health system strengthening in partner countries** to improve equitable access to essential care. List of countries where health is prioritised in the NDICI-GE multiannual indicative programmes: Egypt, Tunisia, Libya, Morocco, Democratic Republic of the Congo, Central African Republic, Burundi, Kenya, South Sudan, Sudan, Uganda, Madagascar, Ethiopia, Zambia, Zimbabwe, Nigeria, Mauritania, Guinea, Guinea-Bissau, Mali, Tajikistan, Laos, Afghanistan, Iran, Cuba, Palestine, Lebanon.	