

Conclusions

Third High Level Meeting

between the European Commission and the World Health Organization

6 May 2003, Brussels

The **Third High Level Meeting** took place on 6 May 2003 in Brussels. The following conclusions were agreed:

- **General co-operation:** Both Organizations agreed that the framework for co-operation established by the exchange of letters in December 2000 has provided the basis for a very productive partnership. The Commission took note that this was the last time Dr Brundtland would be attending the High Level Meeting in her capacity as WHO Director General and expressed deep appreciation for the strengthening of ties between both institutions that had taken place under her tenure. In this regard the Commission expressed the expectation that fruitful cooperation would continue to develop with her successor.
- **Communicable diseases:** Both Organizations agreed to continue their strong co-operation in the area of control of communicable diseases, including improvement of surveillance structures and capacities in accession countries, and continued support for the establishment of the European Centre for Disease Prevention and Control. The European Commission expressed its commitment to support the global effort to contain the SARS epidemic, including its participation in high level WHO consultations on the issue. It was agreed that the Commission would continue its close involvement in the revision process of the International Health Regulations. It was noted that the secondment of an official from WHO/Regional Office for Europe (EURO) to the Commission had proved very timely and effective, and it was agreed to initiate discussions on preparations for a reciprocal arrangement on the part of the Commission.
- **Tobacco:** WHO expressed its appreciation for the Commission's strong support in the finalization of the Framework Convention on Tobacco Control (FCTC) and took particular note of the successful High Level Round-table on Tobacco and Development in early 2003. WHO (both Headquarters and EURO) will strengthen cooperation with the European Commission in the area of tobacco, including the Community anti-smoking information campaign.
- **Global Strategy on Diet, Physical Activity and Health:** It was noted that the discussions at the Second Senior Officials meeting had played a useful role in clarifying the background and objectives of the global strategy. It was agreed that a

technical consultation will be organised in order to identify specific areas for collaboration in the development of the strategy within the EU. WHO expressed interest in supporting EC work on food labelling and health claims. It was noted that the new Public Health Action Programme included important work in the areas of nutrition and prevention of chronic diseases and it was agreed to discuss ways in which WHO (both Headquarters and EURO) work in these areas could be mutually supportive.

- **Health information:** Both organizations agreed to develop further their co-operation in the area of health information, with a focus on EURO involvement in implementation of Strand One of the Commission's new Public Health Action Programme. WHO's global efforts to promote comparability of data, and the generation of information for health evidence were noted, including the World Health Survey. It was agreed that it would be useful to strengthen the cooperation and exchange information on WHO and EC work in this area, with the active involvement of EUROSTAT.
- **Future priorities:** WHO and the Commission agreed that next year's collaborative work will be developed in the following priority areas: communicable disease control and surveillance, including health security; health information; risk reduction, including the prevention of tobacco use and the promotion of sound diet and physical activity; and the health aspects of EU enlargement and the Wider Europe.
- **Framework for enhanced cooperation:** In view of the fruitful partnership that has been achieved, both sides agreed to develop a framework and mechanisms for enhanced future cooperation. It was agreed that this should aim at increasing participation in respective European Commission and WHO policy forums; more systematic technical and political dialogue on emerging public health issues; and the identification of financial and other cooperation mechanisms. Both Organizations agreed to ask a group of officials to draw up the terms of reference, objectives and scope of the enhanced cooperation and to propose processes for its implementation.

TRADE AND HEALTH

- **Access to medicines:** Both Organizations confirmed their intention to continue to work together on improving access to medicines in the context of the joint implementation of the EC Programme for Action on Communicable Diseases. A final multilateral agreement in the WTO on paragraph 6 of the Doha Declaration on TRIPs and Public Health is needed as soon as possible. It was noted that WHO was ready to provide advice to countries with regard to public health issues in relation to implementing WTO agreements. This was welcomed by the Commission. It was agreed to explore ways of strengthening collaboration, particularly with regard to tiered pricing, anti-trade diversion, the possible elimination of tariffs on pharmaceuticals and strengthening production capacity in developing countries.
- **General Agreement on Trade in Services (GATS) and health:** WHO's preliminary analytical work was noted. It was agreed to convene a technical consultation to

explore the potential health implications of GATS and possible areas of EC/WHO collaboration in this area.

RESEARCH AND HEALTH

- **EDCTP:** Recent progress in the establishment of the Europe-Developing Country Clinical Trials Programme (EDCTP) was noted. The Commission expressed appreciation of WHO's technical advice in the development phase and participation in the panel for selection of the new Executive Director. It was agreed that WHO's participation in the Partnership Board would be valuable and that both sides would take steps to achieve this. It was further agreed that WHO would promote collaboration between research institutions in developing countries and the EDCTP.
- **Global Health Research:** Both sides agreed to collaborate in promoting priority oriented global health research. This will include consultations leading to the elaboration of the WHO's 2004 report on global health research, and other related global activities such as the Mexico Ministerial Meeting in November 2004.
- **WHO Advisory Committee on Health Research (ACHR):** The Commission expressed appreciation of WHO's invitation to take part in the ACHR as an observer.
- **Bioethics:** It was agreed to convene a consultation to explore possible future collaboration on ethical issues in health research.

DEVELOPMENT AND HEALTH

- **Strategic Partnership between EC and WHO in field of development:** Both sides reaffirmed the importance of establishing a strategic partnership in the field of development and health, in order to maximize opportunities for the reduction of poverty and the attainment of the Millennium Development Goals (MDGs). It has been agreed that the specific objectives of the partnership will be: (i) building capacity to enable developing countries to achieve the health-related MDGs; (ii) enhancing cross-sectoral work to improve health outcomes; (iii) increasing the production of global public goods relevant to the needs of developing countries; and (iv) strengthening the monitoring of progress in health in relation to the MDGs and in Poverty Reduction Strategy Papers (PRSPs). Recent developments in an overall EC/UN strategic partnership were noted, including the signature between Commissioner Nielson and the UN Secretariat of a renewed Financial and Administrative Framework Agreement on 29 April 2003. WHO was encouraged to accede to this agreement (as it did to the previous one) in order to reap the full benefits of this enhanced framework for co-operation.
- **EC/ACP/WHO programme on pharmaceutical policies:** WHO expressed appreciation for the steps taken by the Commission in providing €25 million from 9th EDF intra-ACP funds for support to the EC/ACP/WHO partnership on pharmaceutical policies. It was noted that ACP approval is awaited, and that the

programme features an innovative implementation framework that will be relevant for possible future co-financing under the strategic partnership.

- **WHO technical leadership:** The Commission expressed support for WHO's efforts to play a leading role in international efforts to attain the MDGs, especially at country level. This should be expected to result in stronger WHO involvement in PRSPs and sector wide approaches (SWAs). The Commission also expressed concern at the deteriorating international climate on reproductive health and the consequences for achieving the MDG on Maternal Health. It was agreed that strong technical support from WHO in this area is crucial, particularly in reducing maternal mortality.
- **Tobacco and Development Policies:** Both sides noted the successful high-level round table on Tobacco Control and Development Policy held in February 2003, and agreed that the main priority at present is to achieve adoption of the Framework Convention on Tobacco Control. It was also agreed to continue to explore ways to apply existing development cooperation instruments for tobacco control at country level.
- **Humanitarian Assistance:** Both sides expressed satisfaction at the successful outcome of the first annual strategic dialogue between ECHO and WHO in December 2002. It was agreed that WHO should provide increased policy and technical advice on public health aspects of the humanitarian assistance provided by EC and its partners. It was noted that WHO could also play a role in the forthcoming policy and strategy development with regard to linking relief, rehabilitation and development.

ENVIRONMENT AND HEALTH

- **New European Commission Environment and Health Strategy:** The Commission provided a briefing on the main aspects of the new strategy, including specific areas for WHO collaboration in implementation. It was agreed to convene a consultation to establish specific objectives and modalities for WHO's inputs.
- **WSSD and Global Alliance on Healthy Environments for Children:** Both sides agreed to strengthen their collaboration with regard to promoting healthy environments for children in the context of follow up to Johannesburg 2002. It was agreed that further cooperation will include the development of specific child-related environmental health indicators; the establishment of environmental standards and guidelines; and technical cooperation on issues such as dioxins, PCBs and endocrine disruptors.
- **Ministerial Meeting on Environment and Health 2004:** Both sides expressed satisfaction with the constructive EC/EURO collaboration in preparing for the 4th Ministerial Conference on Environment and Health to be held in Budapest in 2004. The Commission reiterated its support for "The Future for our Children" as the overarching theme for the Conference.