

The Nuffield Trust promotes independent analysis and informed debate on

UK health care policy through its extensive programme of activities, with

the aim of contributing to enabling the people of the United Kingdom

to enjoy better health and receive quality and effective health care.

Dear David

The Nuffield Trust Response: Enabling Good Health for All

We are delighted to respond to your lead in calling for health to be set at the heart of EU economic, social and foreign policy. We have worked with many different partners to produce this response, including at the European Policy Centre and the European Health Forum Gastein. Our contribution makes the case for an EU strategy for global health and a process to engage with European institutions, member state governments, international business interests, health professional bodies and civic society groups to develop policy and actions in support of global health, both because this represents the greatest moral challenge to our generation and because it threatens the health and security of our fellow Europeans.

We are consulting with our colleagues from the European Foundation Centre, which represents some 500 foundations across Europe, to create a European Council for Global Health to support this process – as called for by Ilona Kickbusch at Gastein. The Foundations are uniquely placed to support such a process since they can form bridges between action at EU level and action in member states and with developing countries and can bring together business interests and civil society to address the full range of the determinants of global health.

We recognise that the Commission has already made significant progress in respect of many issues relevant to global health, building on this we suggest the new EU Strategy for Health should seek to set out the strategic intent and direction for action on global health to define a distinctive European approach to such issues. Beyond this we seek to help build a partnership for global health to pursue detailed policy and actions by all sectors of society.

In the accompanying note we identify areas in which the EU can provide leadership on global health issues and propose the outline of a process for continuing engagement with these issues, recognising that these requires further consultation.

I hope you will find this helpful.

Yours truly

John Wyn Owen

John Wyn Owen CB Secretary to The Nuffield Trust Chair of the Europe in the World Initiative of the European Foundations Centre

Towards a European Strategy for Global Health

Background

The Nuffield Trust has undertaken a series of policy reviews of global health since 1998. We convened the first major UK conference on this theme, helped to fund the Centre on Global Change and Health at the London School of Hygiene and Tropical Medicine and established the UK Partnership for Global Health (see www.ukglobalhealth.org) which brings together international agencies, government departments, the private sector, NGOs and professional and academic representatives to raise awareness and stimulate action. This led to a number of further initiatives including those concerning:

- Making globalisation work for the poor (input to white paper)
- Global Health Award: Corporate social responsibility and global health
- Information and knowledge for global health
- Globalisation, women's development and health
- European Union foreign and health policy (Eurohealth 2002)
- Pathfinder UK strategy for global health
- International health as a global public good (UNDP paper)
- Support for global health networks across the EU and Commonwealth
- Global health and foreign and security policy

We define global health as those issues which pose health threats to populations, which transcend borders, cultures and /or generations. These threats may arise in developing or developed countries and include infectious diseases, such as HIV/AIDS, TB, Malaria, SARS, Influenza and the misuse of antibiotics as well as non communicable diseases such as depression, heart disease and cancer. We also take account of threats posed by chemical, nuclear and biological terrorism. Action to address such risks requires awareness and engagement by all levels in society, including international agencies, business interests, NGOs, health professionals and patient groups.

We have therefore taken steps together with our colleagues from the European Foundation Centre to develop dialogue on global health issues. At the European Foundation Conference in Athens earlier this year, foundations agreed to support the "Europe in the World" initiative to double aid contributions outside Europe and address global health issues. Meetings and networks have been established on "Health Research to meet the Millennium Development Goals", together with the Global Forum for Health Research and "How European foundations can help the fight against HIV/AIDS".

More recently we have supported the dialogue "European health policy an international perspective" with Robert Madeline and "European Responses to the HIV/AIDS pandemic: the role of foundations and civil society" with Commissioner Poul Nielson at the European Policy Centre. At the European Health Forum Gastein we organised the theme "Global Challenges: European approaches and responsibilities".

Our experience and consultations lead us to applaud Commissioner Byrne's call for a broad based EU strategy putting health at the centre of economic, social policy and foreign and built through partnerships. Our proposals are intended to take up this challenge in respect of global health and to offer our help in pursuing this goal.

An agenda for action on global health

Action on global health must address a broad range of factors which underlie current global health threats and opportunities. These include:

- Trade: The imbalance in terms of trade between European and developing countries is a factor which underlies the poverty and disadvantage which is the major determinant of poor health conditions since trade and investment flows are 7 times greater than aid. The EU has supported action through WTO to complete the Doha round of trade talks aimed at reducing the impact of agricultural subsidies and has pressed for and achieved agreement on trade related aspects of intellectual property rights (TRIPS) to provide access to generic versions of essential medicines. Europe has also led the way on the Framework Convention on Tobacco Control. These are substantial achievements but in all cases there is more to be done. Beyond this there is a need to apply Health Impact Assessment, as required for economic and social policies, to external trade policies.
- Aid: The EU and its member states is the source of 55% of total official development assistance (ODA) and 65% of grant ODA. Europe has increased its aid levels in recent years after two decades of decline and has also taken steps towards debt reduction. These represent considerable achievements but Europe is only half way towards meeting the target of 0.7% of GDP for ODA set in 1969 and there is a need to ensure that more aid is focussed on countries with greatest need. Currently less than 45% of European Development funds go to the poorest countries. It has been necessary to fill the gap left by the withdrawal of US funding from reproductive and women's health organisations and to attempt to support health systems as more and more funding is focussed on disease specific programmes such as HIV/AIDS. There is an urgent need to increase aid for health as a basic human right and a key determinant of economic development. It is also important to gain recognition for the fact that a great deal of investment in health in developing countries, for example to halt the spread of HIV/AIDS and TB, and to prevent the misuse of antibiotics represents a global public good which ultimately protects our health.
- Global governance for health: EU bodies make a substantial contribution to global health through engagement with surveillance networks, provision of expertise and advice and expanding cooperation with the WHO. Given the current crisis in global health caused by the HIV/AIDS pandemic and other factors it will be essential both to further strengthen the governance role of WHO and to establish the means to provide further support its functions, recognising that the WHO can lead with others but cannot by itself solve global health issues. It is also essential to ensure that WTO IMF and other agencies examine the potential impact of their actions on health. The development of the European Centre for Disease Prevention and Control, support for the International Health Regulations and the development of support networks are all urgent tasks for the EU Commission.
- Research and development for health: European based pharmaceutical companies, Universities and research centres, such as the Wellcome Trust are major sources of research and development for health. This represents a major opportunity to contribute to global health, yet only 10% of research and development is directed towards the health needs of developing countries. The EU has taken steps to provide funding for orphan drugs directed towards

uneconomic markets and the recent Priority Medicines programme may provide further support. Some EU countries also provide tax and other incentives for research on the diseases of the developing world and advance purchase funds and other market mechanisms may help. It would be useful to establish clear EU policy in this field to promote a positive investment environment for pharmaceutical companies while directing more research towards global health targets. The idea of a European Institute for Health along the lines of the US National Institute for Health, but probably as a network of existing bodies, is one we would endorse, we have recently called for the creation of such a body for the UK.

- Knowledge sharing for global health: Our review of this topic suggested that many bodies in Europe are very willing to share knowledge for health with developing countries. However, the key constraint lies in the lack of capacity to identify health knowledge and information needs from the recipient country perspective and lack of information and communications technology. The crisis in health systems in many developing countries requires both urgent research into new ways of delivering health and care services using health knowledge in non traditional ways. This requires support for a global network for research on health solutions which can be supported and partnered by European centres but must be led by the developing countries.
- Migration of health professionals: The crisis in developing country health
 systems stems from the loss of health professionals to developed countries,
 AIDS deaths and the demand placed on health systems by disease specific
 programmes. While some countries have attempted to introduce ethical
 codes to reduce recruitment in vulnerable countries but people with globally
 tradable skills will naturally be attracted to higher paying markets. At EU level
 it would be helpful to ensure that the EU as a whole trains enough health
 professionals to meet its needs, that where trained staff are drawn from other
 countries compensation is provided.
- Women's development: Globalisation is a major issue for women's development and health. There are 27 million jobs in export processing 90% taken by women and women are also the main workforce in most other industries outsourced to developing countries. While this creates opportunities it also creates problems in that women may be regarded as wage slaves with lack of rights at work or at home. Since women are also the prime providers of family health this may lead to breakdown in family health. This requires EU action to strengthen women's development for health.
- Corporate social responsibility for health: European based multinationals
 companies are major investors in developing countries through direct
 subsidiaries, joint ventures and in networks of local suppliers. This is
 beneficial in creating employment and prosperity. Such companies can also
 have a major impact on health through the treatment of their employees, the
 communities in which their operations are based and local customers. It
 would be helpful to recognise and support best practice while exposing worst
 excesses in much the same way that environmental policies are recognised
 by shareholders and customers.
- Health security: Global health challenges create shared EU concerns for health security arising from imported infections whether deliberate or accidental. There is an urgent need to review and standardise port health functions across the EU, and to share intelligence on possible threats. From a wider perspective the possibility of areas of Africa and Asia declining into ungovernable, failed states as a result of HIV/AIDS is the most serious threat to global security.

The case for a European strategy for global health

The EU has been at the forefront of many international actions on global health including the creation of the Global Fund for HIV/AIDS, TB and Malaria, resolution of the Doha agreement and provision of aid, particularly in relation to reproductive and women's health. Why then is it necessary to define a European strategy for global; health? We suggest 6 main reasons:

- A strategy for global health could help define and reflect European shared values for health: as a secular human right, including women's rights to reproductive health choice, as an issue of solidarity both within Europe and in the world and an issue on which human values transcend political divides. . A clear presentation of such values as the basis for a European strategy for global health would both provide moral leadership to the world and could prove a source of common identity for Europeans.
- While these may seem unexceptional values, they are distinctly different to those espoused by the current US administration, which has expressed its strategy for global health in the goals of the State Department, the global health strategy produced by CDC and in Millennium Challenge Account aid programmes and PEPFAR. Professor Sachs, while paying tribute to EU policies has suggested that the EU would "punch its weight" in the debate on such issues if it were to set out its own global health strategy.
- Global health is often seen as a cross cutting theme of other policies such as development aid, foreign policy, security or domestic health. This sometimes means that conflicting goals may have to be resolved. For example, there is an argument that aid should be focussed on the poorest countries, but many immediate threats to European health arise from health conditions in our near neighbours. Defining global health as a policy objective in its own right may help to resolve such issues particularly if the concept of global public goods is introduced as a mechanism for funding alongside development aid.
- While the EU has responded well to a succession of issues concerning global health, a strategy would provide an important point from which to look forward to foresee threats and opportunities. It would provide a basis for dialogue with developing countries on the factors which determine their health and the actions that can improve their health status.
- Many aspects of global health require local and national action as well as EU support and leadership, however, for the issues identified in the preceding section we suggest EU action is essential to enable a coordinated response. This is particularly important in trade related aspects of global health. We hope to see further developments of national programmes for global health stimulated by the leadership provided by the EU.
- Global health issues cannot be solved by the actions of international agencies and national governments alone, it is essential to engage with the private sector, health professionals the academic world and with civil society. Many such organisations are already committed to global health programmes, indeed a visit to any developing country will reveal a great array of different agencies at work. A European global health strategic planning process would help improve communications and coordination of effort, which is sorely needed.

European Council for Global Health

At the European Health Forum Gastein Professor Ilonal Kickbusch called for the formation of a European Council for Global Health to bring together national and international agencies across Europe to research and promote action on global health issues. We support this proposal and have called a meeting with our colleagues from the European Foundation Centre and Professor Kickbusch for the 3rd November to create the Council.

We suggest, subject to our consultations, that the Council could play an important role, working in partnership with the EU Commission. It could draw on a wider network of interested parties working through national level networks such as the UK Partnership for Global Health, the Irish Forum for Global Health, and similar groups in Germany the Netherlands and France, and other groups where they exist and with Europe wide representatives of patient organisations, business interests and professional groups.

The Council might also establish contact with regional or other organisations in developing countries concerning global health issues, some such groupings already exist for example the Commonwealth Health Minister's Meeting.

We suggest that the European Foundations Centre and the 500 European Foundations are in a unique position to support this development through its Europe in the World Programme, since they can form a bridge between the EU and civil society throughout the member countries and can dialogue with industry health professionals and international organisations.

As a first step the European Council for Global Health could work in partnership with the Commission to establish values and goals for a European strategy for global health. This would require widespread involvement and open engagement with all interested parties.

This might then stimulate a programme of research and action on current and future issues concerning global health. Thus our aim is not simply to produce a statement of strategic intent and direction but to build a programme of action with the Commission, national governments, the private sector, NGOs, health professionals academic centres and foundations.

At this stage we are consulting on the precise role, functions, organisation and operations of the Council, including its name. We welcome the chance to discuss this further with the incoming Commissioner for Health and Consumer Affairs.

Finally we would like to take the opportunity to thank the outgoing Commissioner David Byrne for the enthusiasm, energy and leadership he has shown on global health issues.

This paper represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumer Protection DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.