EPHA Position on Horizon 2020

June 2012

EPHA is the European Platform bringing together public health organisations representing health professionals, patients groups, health promotion and disease specific NGOs, academic groupings and other health associations. Our membership includes representatives at international, European, national, regional and local level.

EPHA's mission is to protect and promote public health in Europe. EPHA brings together organisations across the public health community, to share learning and information and to bring a public health perspective to European decision-making. We help build capacity in civil society participation across Europe in the health field, and work to empower the public health community in ensuring that the health of European citizens is protected and promoted by decision-makers. Our aim is to ensure health is at the heart of European policy and legislation.

Please see www.epha.org for more information.

Public health community welcomes commitment to citizens’ health and wellbeing.

In view of the on-going negotiations on the Horizon 2020 Programme, EPHA would like to share the views of our members on the future mechanism for EU Research and Innovation Policy. EPHA encourages the European Parliament and Council to support the European Commission’s initiative to continue action in the field of health research until 2020 as FP7 marked a new approach for the Commission in health research through acknowledging the health agenda and earmarking EUR 6.1 billion to health research.

Priorities for Health research

The health community applauds DG Research and Innovation for recognising the social and economic burden of chronic conditions such as cardiovascular disease (CVD), cancer, diabetes, neurological and mental health disorders, infectious and poverty related diseases, overweight and obesity, musculo-skeletal conditions, and DG Research’s indications that it will continue to address health inequalities.

As the negotiations on Horizon 2020 continue the public health community encourages EU and national decision makers to include a reference to respiratory disease, which is missing in the Commission proposal. The European Parliament adopted on 15 September 2011 its Resolution on the EU position and commitment in advance of the UN high-level meeting on the prevention and control of non-communicable diseases where it affirmed the importance of respiratory diseases that account for at least 17% of all deaths worldwide which includes lower respiratory infections, Chronic Obstructive Pulmonary Disease (COPD), asthma, TB and cancers of the lung and airways.

EPHA calls on EU Institutions to realign research priorities with the needs and challenges of people living in Europe and beyond. EPHA welcomes the approach of the “Innovation Union” that the objective of research and innovation should address the most pressing societal challenges benefiting all members of society and the allocation of €31.7 billion to ‘Societal Challenges’. Population ageing and health are some of our biggest societal challenges and must be addressed by Horizon 2020 to contribute to a healthier society now and in the future and meet Europe 2020 objectives.
Population ageing, a growing burden of chronic diseases and the related pressure on national health care systems are some of our biggest societal challenges and must be addressed by Horizon 2020 to contribute to a healthier society and meet Europe 2020 objectives.

EPHA and its members urge EU and national decision makers to endorse the priorities of the Health theme and stress that this must be done while ensuring the healthcare services are in line with values of universality, high quality, equity of access and solidarity involving all health stakeholders from the outset. The public health community particularly emphasises the importance of research with focus on prevention and health promotion strategies. EPHA in particular welcomes the explicit mention of the following themes:

- “Understanding the determinants of health, (including environmental and climate related factors)
- Improving health promotion and disease prevention.
- “Understanding disease and improving diagnosis”,
- “Treating disease (communicable, rare, major and chronic diseases)“,  
- “Better use of health data”
- “Improving scientific tools and methods to support policy making and regulatory needs”, and
- “Active ageing, independent and assisted living” are referenced
- “developing effective screening programmes and improving the assessment of disease susceptibility; surveillance and preparedness”
- “optimising the efficiency and effectiveness of healthcare systems and reducing inequalities by evidence based decision making and dissemination of best practice, and innovative technologies and approaches”.

Two factors fundamental to these are the effects of citizen choice of healthcare and the availability of patient centered care. These priorities will assist Ministries of Health and Research, Health authorities, health systems, the health research community as well as DG Health and Consumers and DG Research and Innovation, to proactively tackle disease burden in the EU by addressing the underlying risk, and lifestyle factors. Improved management of chronic diseases offers the most positive impact in terms of increased well-being of the people living in Europe, economic growth and in a reduction of the economic burden. These priorities could also facilitate a shift in the focus of healthcare delivery to the promotion and maintenance of good health and advanced health literacy which have the greatest potential of all to eliminate health inequalities.

Tackling the rising medical costs and loss of productivity in the future requires action now. Public health research is a key driver for competitiveness and growth in an ageing Europe. Investment in health delivers value for money for society and for citizens. A growing body of evidence shows that ‘health is wealth’ and – health is not only a by-product of economic growth, but one of its key components. 10% fewer deaths at working age due to cardiovascular diseases would give a 1% increase in GDP per capita. Health research not only provides significant solutions by ensuring a healthy and active population, but is also a source of employment. The Council Conclusions “Towards modern, responsive and sustainable health systems” recognised the contribution of the health sector to economic development. Europe needs to be promoted as a centre for health research innovation and to achieve this, better coordination, cross-talk and collaboration between all stakeholders involved in this field needs to be encouraged in Horizon 2020.

Adequate level of funding

To ensure that that the effectiveness of the health theme in Horizon 2020, the resources allocated should reflect the ambitious priorities. In the Commission proposal, EU funding for health research received 10% of the overall EU research funding budget (€8.5 billion out of €80 billion). This is regrettable because under FP7, health research received 12% of the overall funding (€6.1 billion out of €53.2 billion). Furthermore, the Commission proposal to allocate €80 billion to research and innovation represents an increase of €25 billion compared to spending from 2007-2013. €8.5 billion is relatively small compared to other countries leading in research, for example in the US, the National Institute of Health invests $31.2 billion (€21.5 billion or almost 3 times more than the EU) in health research.

What is health research?

The primary focus of public health research is to improve the health of the public and reduce inequalities in health. This includes research on population-level interventions – improving the social and environmental determinants of health, understanding health behaviours and practically promoting health enhancing
behaviours and the health education and intervention approaches needed to support them, promoting continuity of care, promoting innovative partnership in care with whole system holistic approaches, biomedical research, and increasing the quality in the organisation of health and social care. Real practice research, disseminating, translating and valorizing the results and learning from outcomes based research are crucial for health - both at the clinical level, at population level and in policy-making.

The value of a coordinated approach to health research has been demonstrated through added value of evidence for public health interventions on health inequalities and the wider determinants of health:

- Better public health interventions, i.e. improved understanding of the spread of epidemics,
- Improved understanding about the associations between diet, alcohol consumption, tobacco use, the environment with health,
- new models of care delivery for the management of chronic conditions,
- innovative ways of providing healthcare,
- technology to allow self-management,
- educational tools
- new therapeutic approaches for disease prevention and health promotion,
- the sharing of knowledge and best practices,
- improved health literacy

Epidemiological research is an important component that should be reflected in Horizon 2020. As you will know, epidemiology is the science and study of the factors determining and influencing the frequency and distribution of disease, injury, and other health-related events and their causes in a defined human population. Epidemiology is an integral part of public health, and is the fundamental first step in the sequence of prevention and plays a significant role in public health policy making.

In health, research is the key to identifying causes of disease and developing strategies for prevention, as well as diagnosis and treatment. However, to date health research collaborations had a poor framework to translate discoveries into clinical applications for the benefit of the patient. Indeed, there is currently a lack of coordination of research across all disciplines and between health stakeholders, which has led to duplication and fragmentation of research efforts, gaps in the health research continuum, and significant limitations on Europe’s overall progress to innovate.

Innovative solutions to tackle health are urgently required. Healthcare represents the biggest challenge to Europe’s national budgets after pensions, and will be the fastest growing item of government expenditure in the coming decades due to the ageing population. There is unanimous agreement currently that Europe is falling far behind its competitors in terms of innovative health research and recognition of the economic benefits of investing and co-ordinating in this field at EU and national level. Bottom-up strategic input from health stakeholders from the outset can greatly accelerate true innovation and help to achieve a healthier and prosperous environment for Europe’s citizens.

In addition EPHA would like to underline that EU research & innovation funding should be used to advance public sector interests such as public health. The scope of EU research should therefore benefit the entire population and the health system, particularly on reflection of the huge healthcare costs facing EU Member States. This would entail more public health research to understand how policies and practice, at local and national levels affect health determinants, and improve the effectiveness and efficiency of the healthcare system. Research should also be conducted on best practices for training and the retention of health professionals; as well as on the use of healthcare professionals currently working parallel to the mainstream. This could help improve both the quality of healthcare provision in Europe and patient safety.

To achieve these public health and research objectives, there must be investment in social as well as technological sciences and in university infrastructures as well as research institutes, non-profit organisations, health professional organisations and NGOs that work in the field of public health.

Creating an evidence base for health research

Evidence-based policymaking depends on the existence and availability of reliable evidence. In order to function properly, researchers and policymakers need to communicate effectively. Tackling the socio-economic challenges facing Europe requires that policy makers and the public are aware of research
results, and researchers are conscious of existing knowledge gaps and the needs of people living in Europe. Research can help understand societal problems more clearly and develop better strategies for dealing with them. Real world outcomes based research can make a particularly valuable contribution to both informing policy making and health system provision and delivery by combining the research based knowledge with analysis and testing of actual practice outcomes. This consultative capability makes research hugely valuable to the policymaking community. Without reliable evidence, political decisions are made on tradition or ideology.

**The health community calls on EU decision makers to ensure that EU health research complements other core funding instruments, such as the Health for Growth programme.** The health theme of Horizon 2020 will be instrumental in creating the necessary evidence base for population-level interventions as one of the main priorities of health research. “Horizon 2020”, could complement the “Health for Growth” programme by generating a reliable data set for the evolution of obesity, infectious diseases, chronic diseases, including cardiovascular diseases, cancer, diabetes, musculo-skeletal disorders and chronic respiratory diseases (such as Chronic Obstructive Pulmonary Disease and asthma) – whose prevalence are increasing in Europe and globally – and for generating innovative prevention and care approaches including approaches provided by complementary and alternative medicine.

**Cross-fertilisation of Expertise**

The health research community has traditionally worked independently of each other and there has been little cross-talk between different disciplines as there is presently no suitable instrument to do so. Yet diseases share similar mechanisms - nowhere is the interconnectiveness of diseases more apparent than in diseases of ageing, which together are likely to extract an increasingly heavy toll on European health budgets over the next decades. The health community often share similar technological and infrastructural resources. Moreover, there needs to be more collaboration not only between DG Health and Consumers and DG Research and Innovation but also national health and research ministries. In addition, links and collaboration with programmes at national and EU level need to be greatly improved. Thus a strategic approach across the entire health spectrum is needed that can encourage interaction between experts in all areas of health research and allow health experts to provide strategic input to reduce this fragmentation and wasteful duplication of research, in order to help to avoid fragmentation, exchange best practice and provide savings for health systems.

In essence, the EU does not have a sufficient data set for a number of diseases. In other cases, the research has been conducted but the collation and exchange of knowledge has been inadequate. More efforts need to be made to coordinate and consolidate research and allow health experts to provide strategic input to reduce this fragmentation and wasteful duplication of research, in order to implement the results for better evidence-based policy making and link it to current practice. **Research initiatives that prioritise excellence, multidisciplinarity and encourage cross-talk amongst health research and policy fields should be encouraged.**

**Sustainable, strategic planning**

EPHA encourages the EU to facilitate the sustainability of research projects, so that after the research has been conducted, it can effectively be applied to policy-making and continue to make an impact. The Innovation Cycle for health research is long – approx. 10 years – yet current health research opportunities in Europe tend to focus on short-term collaborative projects. With many phases, stakeholders and regulatory barriers at all stages, the complexity of this field requires strategic long-term planning with the involvement of all stakeholders, to ensure discoveries promote better health for citizens.

**Involving Civil Society in Horizons 2020**

Civil society has a vital role in bringing practical benefits from research results and making them applicable to the lives of people living in Europe. Civil society organizations (CSOs) conduct research, produce researchers and educate them, which enriches the research knowledge base. It is important to note that CSOs often act as brokers between politicians and researchers or academics. They help bring the results of researchers into politics, as well as assist researchers in navigating complex political systems. To accomplish this and increase the ownership of research results, CSOs and user organisations should be involved in the research set up and agenda-setting process and not only in validating results. This entails contributing to writing proposals, defining research questions, and participating in research activities. **Greater involvement of CSOs in Horizons 2020 will ensure that real needs and problems are**
addressed and the developed solutions will increase in acceptability when entering the market.

Measures to support small and medium sized enterprises (SMEs) are regularly included in research proposals, and EPHA would welcome similar measures to support research being undertaken by NGOs and academia. Often, this is research where that contributes to society and health, including research and innovation, but there may not appear to be (at least initially) a potential for profit.

**Design of project**

The public health community advocates for a balance of large-scale projects and smaller ones targeting specific issues, in particular projects on social issues involving citizens’ groups and projects to test new complementary approaches to current healthcare provision. Project planning would allow CSOs to “translate” projects outcomes into plain language to make it more accessible to the public at large, media and policy makers. Small scale projects are usually more effective that large-scale projects when it comes to impacting concretely on people’s lives. Participation of civil society in larger scale projects should be facilitated. For some CSOs, a lack of capacity to develop a large scale project and limited resources may represent a barrier to their participation in large scale projects.

**A different approach to Innovation**

EPHA calls for a broad definition of innovation in horizon 2020 and for innovation to be guided by criteria of public interest, such as improving the quality of life; maintaining good health and well-being; social inclusion, equality and equity regarding gender and diversity; as well as environmental concerns regarding climate change and preservation of natural resources. In the field of health, this must include non-technological and social and health innovation for the benefit of citizens. The public health community advocates for a bottom-up approach to innovation that starts at the local level. This should be a cornerstone for the Horizons 2020. The Commission should also ensure a user-friendly design approach and consider the issue of affordability of products and services.

**Access to data and open source**

Horizon 2020 offers an excellent opportunity for the EU to explore new models of innovation that ensure EU-funded medical research results in affordable and accessible medicines and in complementary and alternative medicines and services. EPHA encourages EU decision makers to earmark funding for research that explores de-linkage models that dissociate the medicines prices from the cost of R&D, as outlined in recent EU commitments in the Council Conclusions on Global Health, and the Innovation Union. This can be achieved through inducement prize funds and licensing conditions that ensure that the EU’s investments in health research help generate socially essential medical products at affordable prices. Such research models prevent socializing the risks of investment while privatizing the profits of innovation by ensuring the public receives return on its investment.

Socially responsible licensing (SRL) is especially relevant in the biomedical field. The rationale behind SRL is that grants are awarded to recipients on the condition that the latter accepts, among other provisions, to grant open or non-exclusive licenses, royalty-free licenses, or sell their final product under a tiered-pricing mechanism. This is to ensure public funds benefit the common good, avoid taxpayers from paying out of pocket twice, and ensure accessibility to knowledge both within and outside the EU. Ultimately, the Horizon 2020 should ensure equitable access to treatment in addition to generating knowledge.

For many CSOs that conduct or use research, having limited access to studies represents a barrier. It is a condition of funding that Horizon 2020 funded researchers deposit in an open access database or published an electronic copy of the author’s final version of papers accepted for publication. This should happen as soon as possible and no later than 6 months after publication. This requirement applies to research supported in whole, or in part, by Horizon 2020.

For optimal health outcomes, the EU should also encourage and support the release of unpublished data regarding clinical trials for medicines. Scrutinising negative results enhances scientific knowledge and prevents costly and inefficient duplicate research. This should be achieved by greater use of a publicly accessible database.

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