

IMPLEMENTING THE GLOBAL HEALTH RESILIENCE INITIATIVE



Recommendations
from Global
Health Civil
Society



Implementing the Global Health Resilience Initiative

In May 2026, the European Commission adopted the **Global Health Resilience Initiative (GHRI)**, setting out the EU's renewed approach to responding to global health challenges, strengthening health systems and supporting partners' health sovereignty.

The GHRI comes at a critical moment for global health. Health systems and communities around the world continue to face major pressures, while persistent inequalities affect people's ability to access essential health services and realise their right to health. **The EU's implementation of the GHRI should therefore contribute to building equitable, resilient and country-led health systems, while addressing unmet needs and the structural inequalities that shape health outcomes.**

The implementation of the GHRI should also complement the EU's existing **Global Health Strategy**, reinforcing existing commitments.

Against this background, as civil society organisations working to promote global health, we set out the following **recommendations on the implementation of the GHRI**:

1. Put communities and the principle of leaving no one behind at the heart of global health resilience

The EU should:

- **Make the principle of leaving no one behind a core objective of the GHRI's implementation**, ensuring that efforts to strengthen health resilience and health sovereignty explicitly address inequalities in access to health services and prioritise people and communities experiencing the greatest barriers to health.
- **Recognise community-led and community-based organisations as essential actors in resilient health systems.** A whole-of-society approach to global health resilience requires meaningful recognition of the role communities play in building trust, identifying unmet needs, reaching people underserved or excluded by formal health systems, delivering services and strengthening preparedness and societal resilience.

- **Prioritise populations facing marginalisation, discrimination and criminalisation**, including key populations, people living with disabilities, displaced persons, and other communities that face structural barriers to accessing health services.

- **Protect and adequately resource community-led responses**, including through accessible, flexible and sustainable funding for community-led organisations and networks.

2. Ensure the EU builds on effective existing partnerships

The EU should:

- **Build on the successes of effective partnerships and provide long-term, predictable funding** to effective and successful initiatives that contribute to the achievement of its objectives and commitments on global health.

- **Continue supporting initiatives such as the Global Fund to Fight AIDS, TB and Malaria; Gavi, the Vaccine Alliance; UNFPA and Unitaid, which represent key partnerships** contributing to improved health outcomes, promoting innovation, strengthening local manufacturing and access to essential health products, while also advancing gender equality.

3. Commit to providing ambitious and sustained funding for global health

Member States, as part of the next Multiannual Financial Framework (MFF), should commit to ambitiously funding global health, across domestic, external action and research instruments, including by:

- **Making global health and resilient health systems key priorities of the Global Europe Instrument (GEI),** with the inclusion of a human development benchmark of at least 20% of EU Official Development Assistance (ODA), and with a Heading 3 envelope that represents at least 10.8% of the total MFF.
- **Maintaining the overall ambition of the future research framework programme (FP10), and dedicating 10% of FP10's budget to health,** across the competitiveness and societal challenges parts of Pillar II, and ensuring that its international dimension remains strong, enabling European research and innovation to contribute to global health security and resilience.
- **Introducing a 10 billion EUR ring-fencing of funding for health within the Health, Biotech, Agriculture and Bioeconomy window of the European Competitiveness Fund,** including support for areas facing market failure, and maximising the synergies between FP10, the European Competitiveness Fund (ECF) and the GEI.

- **Securing a fourth iteration of the EDCTP joint undertaking** as part of the review of research partnerships, with a budget of at least 2 billion EUR, with an EU contribution of 1 billion EUR, with predictable investments across the next MFF 2028-2034 through FP10 and ECF. **Member countries should at a minimum sustain their 550 million EUR contribution,** and increase the share of cash contributions to fulfil the EDCTP's potential as a pooled funding mechanism.

4. Insist on ensuring a gender dimension to global health resilience

The EU should:

- **Integrate a gender dimension into global health resilience initiatives and responses.** Women and girls are disproportionately affected by health threats and shocks, while gender inequalities that shape poorer health outcomes and inadequate health services continue to persist globally.
- **Fully commit to promoting sexual and reproductive health and rights (SRHR)** as part of the implementation of the GHRI, and **increase funding to address the growing SRHR challenges globally.** Addressing women's unmet health needs and protecting universal access to SRHR should be an integral part of the EU's GHRI.
- **Advance intersectionality in health, including research and innovation (R&I),** paying attention to the role of factors such as sex and gender in health outcomes, in line with the EU's Global Health Strategy, and mandating the consideration of sex and gender in the design of R&I and disaggregated reporting.
- **Recognise nutrition as a cornerstone of global health resilience,** and address the disproportionate malnutrition burden faced by women and girls.

5. Promote genuine health sovereignty and equitable partnerships with partner countries

The EU should:

- **Ensure that all GHRI-supported interventions**, programming choices, and resource allocations **are directly informed by partner countries' priorities**, in particular their national health strategies, health sector plans, and locally identified needs.
- **Ensure that the GHRI and its provisions are adequately incorporated into future EU programmes**, as the GEI programming gets underway. Global health must be recognised as a priority sector for EU interventions in partner countries, as well as at regional and global levels.
- **Ensure that EU investments directly strengthen existing national health systems**, primary health care (PHC) networks, and universal health coverage (UHC) pathways, and avoid creating parallel management, reporting or delivery structures.
- Acknowledge that national ownership depends on domestic fiscal space, and **work through technical assistance to address structural barriers such as heavy debt burdens**, unfavourable financing terms, and limited domestic resource mobilisation.
- **Ensure that the involvement of EU private sector actors does not come at the expense of predictable public funding** to key areas of cooperation, and ensure their involvement is subject to clear conditions on equitable access, transparency and accountability.

6. Recognise Civil Society Organisations (CSOs) as strategic actors in global health resilience

The EU should:

- **Recognise CSOs not only as beneficiaries or implementing partners, but as strategic actors** in global health research, policy implementation and accountability. CSOs bring knowledge of community needs, reach populations that may be underserved by formal systems, and contribute to service delivery, advocacy and monitoring.
- **Ensure meaningful and sustained CSO engagement** throughout the implementation of the GHRI, including in programming, implementation, monitoring and accountability.
- **Provide adequate and flexible funding to community-based and community-led programmes**, especially for CSOs and communities working with groups in the most marginalised situations and addressing neglected needs.

7. Request the establishment of a clear monitoring and implementation framework

The European Commission should develop a clear roadmap for the implementation of the GHRI, including:

- Clear responsibilities across relevant Commission services.
- Key milestones and timelines for implementation.
- A robust monitoring and evaluation framework, setting out expected deliverables and indicators of success, and demonstrating complementarity with the EU Global Health Strategy.
- A clear indication of the funding that will be dedicated to implementation, including funding as part of the next MFF.

A transparent implementation and monitoring framework will be essential to ensure that the GHRI translates its commitments into concrete action and that progress can be effectively tracked.