

Brussels-based health NGOs submitted their joint contribution to the EU Global Health Strategy's consultation

The feedback for the European Commission's [public consultation about the renewal of its global health strategy](#) (GHS) is now closed. We have been following this process for a long time: in 2020, our organizations had written, published and shared [a shadow GHS](#) to encourage the European Union to review its outdated 2010 framework and to inspire and spur the EU towards a more comprehensive vision and role in global health. This year, we actively engaged in the organisation of the EU [Global Health Policy Forum](#) and with subsequent talks with DG INTPA and SANTE. Our goal is to enable the GHS to have the means of its ambitions, to be inclusive, and to leave no one behind. Our contribution highlights different aspects of what we believe to be essential for global health, in terms of funding, access, engagement with communities and stakeholders.

Here is a summary of the main points that we put forward:

1. Engagement with the communities and accountability.

The EU's global health policy must be informed by the experience and needs of the people on the ground. For this reason, we believe that the EU must hold regular and meaningful dialogue with a diverse range of CSOs and communities, including local, grassroots, youth- and women-led to allow for the monitoring of the quality of services, contribute to holding the EU and its Member-States accountable to their commitments, and to help course-correct where necessary.

It is essential that local CSOs and community-led organisations from partner countries have the opportunity to participate in the assessment of needs, and to implement and evaluate the initiatives from which they benefit. For example, we strongly recommend that the EU holds more regular and technical exchanges addressing thematic issues with its stakeholders. The EU should hold regular meetings, such as the Global Health Policy Forum, to present the main results of its global health policy to its stakeholders and relevant DGs, and engage in a discussion with them to assess its achievements and discuss potential improvements.

We also believe that this new global health strategy needs to be accompanied by an integrated and participatory monitoring, accountability and review framework, including measurable and relevant indicators that allow for consistent reporting on progress. It should also include a commitment to annual reporting on the implementation of the strategy, and the European Parliament should monitor the effectiveness of EU actions based on transparent reporting against the accountability framework and performance standards agreed during the planning stage.

2. Better funding global health

In the current context of multiplying and multi-faceted crises, the EU needs to align its short term political objectives with the longer term needs to be able to overcome the future challenges and ensure equitable resources based on needs. Since most epidemics occur in fragile contexts, ensuring access to basic health services and investing further in primary healthcare facilities is a priority that requires greater attention and coordination with other stakeholders. We thus encourage the EU to provide adequate funding for global health and to dedicate specific funding for populations at higher risk of exclusion from quality healthcare, so as to progress towards

Universal Health Coverage. Otherwise, low and unsustainable funding for global health weakens the impact, scope and credibility of global health policies.

Meeting these financial goals must nonetheless be achieved without pitting initiatives against each other: for this reason, allocating larger amounts of funding to global health will avoid competition between initiatives.

3. Improving access to medicines and increasing transparency

Improving partner countries' access to and control over pharmaceutical technologies and increasing their R&D and manufacturing capacities is the other fundamental condition to achieve UHC and must be championed by the EU. EU actions should be focused on capacity building in partner countries effectively empowering them and reducing their reliance on external aid.

Besides, the EU's mandate to boost competitiveness of its industry and the commitment to achieve global health goals can be at odds at times. For this reason, the EU must systematically promote, support and enforce principles of conditionality, transparency, accountability and access, including in its relations with its partners. And since the involvement of the private sector is indispensable, the EU must consider how global health, as a public good, does not always align with the private sector's interests. This has been demonstrated by the debate on the TRIPS waiver and the international failure of achieving vaccine equity in this global pandemic, or by the absence of transparent negotiations with the pharmaceutical industry which damaged the EU's credibility as an actor in global health. Collaboration of the EU with the private sector must thus come with safeguards to not compromise the EU's goals, avoid conflicts of interest and ensure we are not merely subsidising the private delivery of public goods.

4. A rights-based approach backed-up by a commitment to fairness.

A comprehensive rights-based approach to health is critical to ensure health equity. The EU must integrate how gender intersects with other drivers of inequities and marginalisation, having complex effects on health outcomes. Achieving gender equality and sexual and reproductive health and rights (SRHR), fighting stigma and all forms of discrimination, removing harmful laws and policies is critical to the realisation of the right to health for all.

This approach must be put into practice by the EU in the forums and initiatives in which it participates. We encourage the EU to address harmful power imbalances in the initiatives that are mostly donor-driven: these imbalances lead to inefficiency and hinder ownership, mutual accountability and alignment on national strategies. We call on the EU to favor initiatives and forums that meaningfully include partner countries, community groups and CSOs, and that have demonstrated their efficiency, accountability and capacity for implementation (eg. the Global Fund, UNFPA Supplies Partnership, etc.). With its ambition to be a driver for change, we call on the EU to use all available resources within these initiatives, including and especially its presence in their governing bodies, to support the meaningful participation of CSOs and communities in the development and implementation of their policies and strategies. The EU must also increasingly speak with one strong voice in relevant UN fora that have an impact on global health policies (eg. the Commission on Population and Development (CPD), the Commission on the Status of Women (CSW)...))