

Press release

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The European parliament voting for more transparency and stronger access conditions in the health R&I public-private partnership

The European Parliament's Committee on Industry, Research and Energy (ITRE) today backed a draft report on the establishment of the Joint Undertakings under Horizon Europe.

The vote on the horizontal issues passed with 68 in favor, 1 against, and 6 abstentions. Specific provisions (applying to all JUs) passed with 58 in favor, 1 against, and 16 abstentions.

The report, authored by **Portuguese MEP Maria da Graça Carvalho of EPP**, sets out the Parliament's opinion on future Council regulation. As the Council acts as a sole legislator for the partnerships, the European Parliament will not officially negotiate with other institutions (based on Article 187 TFEU). The overall public budget foreseen for this research funding is almost **€10 billion**. It should be matched by both financial and in-kind contributions from the private sector. Two partnerships are focused on health - the **Global Health EDCTP3** and the **Innovative Health Initiative**, an in-direct successor of the Innovative Medicines Initiative (IMI) and IMI2.

The ITRE Committee has addressed some of the most concerning provisions, related to the IHI, compared to the original text. These included a lack of strong transparency and accountability safeguards, almost non-existent independent scientific advice, and no binding commitments to the affordability of the final research products.

"The next generation of public private partnerships, especially in health research, must cease to be closed door clubs for industry players, subsidizing private research at the taxpayers' expense. We hope that the plenary session in September and then the Member States will duly consider the position of the Parliament and help ensure that the funds allocated to R&I primarily serve citizens and their needs, and not simply throw money at the health industry. We need public interest to guide innovation" - Marcin Rodzinka-Verhelle, EU Advocacy Officer at Global Health Advocates

Both IMI and IMI2 have been continuously criticized by the patients, consumers, doctors, payers, HTAs, and public interest organisations for not the lack of inclusivity in the choice of research priorities, the governance structures, and the dominance of large industry players. Official evaluations of the previous initiatives pointed to the imbalance in representation of stakeholders and very low transparency standards. The main findings of the civil society organisations report were that they failed to meet the goals that justified them, including overcoming market failure and improving the development and availability of health technologies for unmet medical needs.



The ITRE Committee raised the bar when it comes to transparency and accountability, involvement of public interest groups, uptake of scientific advice, and introduced access conditionalities attached to public R&I funding for future health innovations

Civil society now looks to the European Parliament's plenary session in September to confirm the ITRE Committee's decision. The Council should then adopt a text that gives due consideration to crucial elements of transparency, accountability and access whenever public funding for health technologies is involved.