



The existence of a European Commissioner for Health is essential for the health of Europeans

Note to the Elysée Palace, July 2019

The think tank Santé mondiale 2030 has been in existence since October 2016. It brings together personalities involved in global health, such as Françoise Barré-Sinoussi, Paul Benkimoun, Michel Cot, Sana de Courcelles, François Dabis, Annabel Desgrées du Lou, Jean-François Delfraissy, Frédéric Goyet, Mathieu Lamiaux, Michel Kazatchkine, Marie-Paule Kiény, Lelio Marmora, Benoît Miribel, Olivier Nay, Louis Pizarro, Anna-Laura Ross, Benoît Vallet. Stéphanie Tchiombiano is the coordinator.

The members of the group are acting in their individual capacity and not on behalf of their respective organizations. This document is the result of a collective effort within the group. It does not in any way commit or reflect the individual opinions of any of the members.

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While the organisation of medical services and care remains the responsibility of Member States, the European Union has a key role to play in the field of health, to reinforce the efforts made by EU countries, propose legislation, facilitate the exchange of good practice, pursue common policies to promote health and raise Europe's voice on the international stage.

A Commissioner for Health to coordinate public health policies

Europeans, and the French in particular, are waiting for a Europe that protects their health, that is more transparent, more regulatory and more coercive towards the pharmaceutical industry¹.

While the overall health status of the European population has improved over the last 15 years, there are **many important health challenges that require a coordinated approach by Member States** and where concrete results can be achieved in the short term:

- Putting in place coordinated policies to limit the effects of **climate change and pollution** on health. In particular, it is essential to strengthen health safety and monitoring of the impact on health of the various chemical or physical toxic substances (endocrine disruptors, pesticides, pollutants linked to cars, etc.).
- Put in place comprehensive and coherent strategies to combat the **behavioural risk factors** that lead to chronic diseases and premature death².
 - The fight against **tobacco** is a priority: one third of Europeans still smoke (and smoking rates in Europe are the highest in the world) and there are many issues at stake at the community level: traceability, neutral packages, tax harmonisation and reduction of price differentials to avoid cross-border purchases of tobacco products.
 - In thirty years, the prevalence of **obesity** has tripled in many European countries and the fight against childhood obesity, in particular, requires strict application of European directives on food marketing on television.
- Strengthen cooperation between Member States on **vaccination coverage**³. While the number of children vaccinated against measles, for example, is at an all-time high in Europe, progress has been very uneven across countries, leaving an increasing number of susceptible individuals unprotected and causing a record number of people to become infected with the virus in 2018. The lack of harmonisation of vaccination schedules, in a context of increasing circulation within the European Union, inevitably weakens national vaccination policies, however effective they may be.
- Ensuring the European regulatory system for medicinal products to ensure that EU patients have access to effective, safe and quality medicines. The pharmaceutical companies' lobby has never been so important⁴ and the Health Commissioner must ensure that the defence of private interests never takes precedence over public health objectives and the interests of patients.
- Put in place European policies to better manage **health human resources** at the European level (e.g. the large number of doctors and nurses who leave Hungary, Romania or Lithuania each year for other European countries to improve their living and working conditions). The implementation of effective public policies at the level

¹ CSA survey for France Assos Santé, available here.

² It is important to remember that, according to the WHO, the European trend is upwards for overload weight and obesity, that smoking rates in Europe are the highest in the world and that, while the rates of alcohol consumption are falling in Europe, they remain among the highest in the world.

³ Childhood vaccination rates are generally improving across Europe. However, outbreaks of measles and rubella in some countries compromise the region's ability to eliminate these diseases.

⁴ As a reminder, the pharmaceutical and chemical sectors are among the most represented lobbies in Brussels, and are explicitly and implicitly acting to abolish this Commission.

of the Member States must, for example, be thought out on the basis of a real census of health professionals trained at European level.

- Monitoring and combating infectious diseases. The world is more interconnected than ever before and infectious disease outbreaks can spread from one end of the globe to the other at an unprecedented speed. In particular, it is essential to coordinate efforts to combat antimicrobial resistance (especially with regards to tuberculosis).
- Tackling health inequalities that undermine social cohesion must remain a central objective. It is not only essential to guarantee access to innovative care and treatment for the greatest number of people, but also to develop specific guarantees at European level for certain particularly vulnerable populations, such as migrants.

While health issues must obviously be integrated into all sectoral policies (advertising regulations, transport, energy, climate, education, etc.), **Europe cannot do without a dedicated health commissioner**. This commission would also maintain its scope adapted to French positions ("one health") through issues of (i) public health, (ii) food safety, (iii) animal health.

A health commissioner more involved in global health

In addition to supporting the efforts made by the countries of the Union to protect and improve the health of their citizens and to ensure the accessibility, effectiveness and resilience of their health systems, we believe that the committee could also play a greater role on the international stage. It would be naïve to think that health problems stop at Europe's doorstep, and it is now necessary to have a global vision on these issues.

Today's international environment is uncertain (US, Brazil, rising populism and questioning of multilateralism) and it is important for Europe to bring the values and priorities of the European Union on global health more to the international scenes.

Not only must global health become a more important issue at European level, but it is important to make this voice heard in the governing bodies of international organisations, where the Union is sometimes a member (e.g. WTO, Global Fund to Fight AIDS, Tuberculosis and Malaria or GAVI), sometimes only an observer as in United Nations bodies (e.g. WHO). The European Commissioner for Health should be given a broader mandate to develop and disseminate the EU position, in close cooperation with the Commissioner for International Cooperation and Development and the Commissioner for Research, Science and Innovation.

⁵ These three priorities are to strengthen universal health coverage, ensure democratic and inclusive global health governance, and invest in research that benefits all.

APPENDIX 1: Presentation of Santé mondiale 2030

Santé mondiale 2030 is an independent think tank that has been bringing together personalities with a long history of involvement in global health issues since 2016. It places its reflections within the framework of the Sustainable Development Goals.

OUR COMMITMENT

France is one of the largest providers of international health funding, but its influence in international bodies and health partnership platforms remains limited.

We are convinced that France can only be heard and listened to in the international arenas of global health when its actors succeed in conveying a strong and coherent message, structured around clear and stable objectives, supported by values that are attached to the history of health in France.

Our objective is to **formulate recommendations on France's global health policy and to mobilize all stakeholders** so that health issues become a strategic focus of French international aid.

OUR PREVIOUS NOTES

- 1- [White Paper on Global Health](#)
- 2- [Our vision of Global Health](#)
- 3- [Health is a priority for the Sahel](#)
- 4- [Breathing new life into the fight against tuberculosis](#)
- 5- [Malaria Business](#)
- 6- [Contribution to the preparation of the next Global Fund Replenishment conference](#)

OUR MEMBERS

Santé mondiale 2030 brings together personalities who have long been involved in global health, such as Françoise Barré-Sinoussi, Paul Benkimoun, Michel Cot, Sana de Courcelles, François Dabis, Annabel Desgrées du Lou, Jean-François Delfraissy, Éric Fleutelot, Frédéric Goyet, Mathieu Lamiaux, Michel Kazatchkine, Marie-Paule Kieny, Lélío Marmora, Benoît Miribel, Olivier Nay, Louis Pizarro, Anna-Laura Ross, Benoît Vallet. Stéphanie Tchiombiano is the coordinator.

Our vision of Global health

Global health is a fundamental human right. It is also a global common good. Universal access to health and the construction of sustainable health systems are central to human development, the economy and the fight against poverty, as well as security. They therefore make a decisive contribution to the inclusive development of societies and to peace.

Health issues are complex and require long-term strategic visions to address the challenges posed by globalization, increased human trade, demographic transitions or climate change.

