

EUROPEAN SOLIDARITY IN PUBLIC HEALTH EMERGENCIES

Fact sheet accompanying the Opinion by the Expert Panel on effective ways of investing in health (EXPH)

SOLIDARITY DURING THE COVID-19 PANDEMIC

The concept of European transnational solidarity requires further development to become of practical reference in health emergency situations. There are positive examples how the EU and Member States demonstrated solidarity during the COVID-19 pandemic.

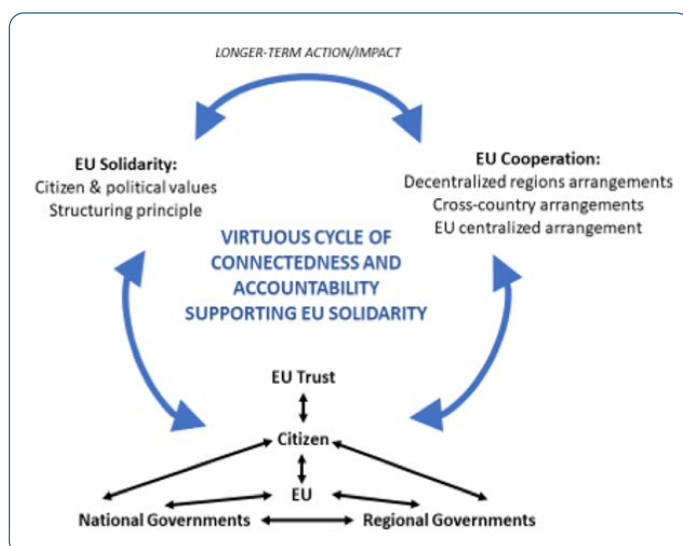
Some existing EU mechanisms, as for example the [Union Civil Protection Mechanism \(UCPM\)](#), the [EU Solidarity Fund](#) and the [Emergency Support Instrument](#), were used and in some cases adapted (e.g. introducing [rescEU](#) as a new element of UCPM), to assist Member States in national response measures. Additional funding was made available through the [Coronavirus Response Investment Initiatives \(CRII and CRII+\)](#) and the [European instrument for temporary Support to mitigate Unemployment Risks in an Emergency \(SURE\)](#). New programmes such as [REACT-EU](#), the [EU4Health 2021-2027 Programme](#) and the [Recovery and Resilience Facility](#), part of the [NextGenerationEU](#) plan offer further support.

However, the pandemic revealed gaps in current crisis response mechanisms that are based on the solidarity principle. These gaps are addressed in the proposals of the European Health Union to strengthen the EU's health security framework, its resilience and strategic preparedness for cross-border health threats.

SOLIDARITY IN EU TREATIES AND POLICIES

The EU Treaties explicitly refer to solidarity in several provisions, including the values and objectives of the Union: solidarity 'between generations' (intergenerational) and 'among Member States' (transnational). There are policies where the 'principle' or 'spirit' of solidarity is to be applied. European solidarity can be seen as both a pre-condition and an outcome or by-product of agreements between EU countries, which are globally balanced and acceptable, and, therefore, legitimate.

TRUST, COOPERATION AND SOLIDARITY: A VIRTUOUS CYCLE OF CONNECTEDNESS AND ACCOUNTABILITY



Since public health is a national competence in the EU, public support and political willingness are crucial to invest in solidarity. Public opinion surveys show that most European citizens support the principle of solidarity. Yet, there are questions about the way this principle may be implemented. Thus, a commitment to solidarity and clear recognition of its practical value are key challenges in national policymaking.

The EXPH developed a concept framework for solidarity in the EU, both as a value, as well as a structuring principle for practices, regulations, and institutions. Such an approach can help increase social justice, creating the political and economic circumstances that allow societies to operationalise solidarity.

European solidarity, in this Opinion, is defined as part of a virtuous cycle of connectedness and accountability that involves two additional key components: cooperation and trust.

RECOMMENDATIONS

BROADEN EU COMPETENCIES AND JOINT EFFORTS IN THE FIELD OF HEALTH AND WELLBEING.

THIS REQUIRES:

- Ensuring that vulnerable people are not left behind;
- Guaranteeing a minimum safety level for the citizens and for the European community as a whole;
- Establishing efficient and effective response to global public health threats;
- Countering activities that seek to undermine European solidarity;
- Taking actions that make the EU's contributions to solidarity more visible across the globe.

INVEST MORE IN STRONG PRIMARY HEALTH CARE INTEGRATED WITH PUBLIC HEALTH, SOCIAL CARE AND MENTAL HEALTH SUPPORT SYSTEMS.

THIS REQUIRES:

- Recognising the role of primary health care in early detection, testing, contact-tracing, support for isolation and quarantine, and implementation of vaccination-strategy.
- Improving solidarity actions targeted at groups such as the elderly, those living in nursing homes, the homeless, the poor, and undocumented people, who may well require special attention and specific outreach strategies.
- Invest more in strengthening integrated people-centred primary care, including availability of interdisciplinary work, information and communication capacity and technology, prevention, health promotion and management of chronic care and vulnerability, and as well as health care of socially isolated groups.

EXTEND EU SOLIDARITY BY TAKING A LEADING ROLE IN A NEW DIALOGUE WITH LOW- AND MIDDLE INCOME COUNTRIES.

THIS REQUIRES:

- Development aid;
- Multilateral dialogue on the proposed international treaty on pandemics;
- Innovative R&D solutions and sustainable solutions at the level of capacity building;
- A concerted effort to assess the global burden of the emerging infodemic and to combat misinformation and fake news.

IMPROVE ALIGNMENT, COORDINATION AND RESPONSIVENESS AT THE EU-LEVEL TO IMPROVE HEALTH SYSTEMS' ABILITY TO PREPARE FOR, AND COPE WITH, "SURGES" OF NEED OR DEMAND.

THIS REQUIRES:

- The collection of EU public health data on systems' capacities;
- Coordinated responses targeting the organisation of staff and supplies to create surge capacity when needed;
- The introduction of minimum standards could also be considered to guarantee minimum levels of access to health and social care to EU citizens, also at times of crisis;
- An appropriate mix of operational cross-border arrangements, including centralised and decentralised approaches, complementing one another.

TRANSFORM AND FOSTER TRANSPARENT AND ACCOUNTABLE GOVERNANCE OF PUBLIC AND PRIVATE SECTOR DATA.

THIS REQUIRES:

- Implementation of safeguards to protect privacy;
- Commitment to public dialogue and global cooperation for reciprocity in privacy-enhanced data sharing and improving data solidarity;
- Harmonisation of data across health and social care sectors, making data systems more integrated and ready for secondary uses;
- Facilitation of interdisciplinary research by allowing cross-border data transfer.

STRENGTHEN CRISIS PREPAREDNESS.

THIS REQUIRES:

- Using insights from what happened in cross-border settings during the COVID-19 crisis;
- Moving beyond the lessons learned and nurturing bottom-up good practices;
- Implementing the measures contained in preparedness plans;
- Making preparedness plans readily available in crises.

MONITOR INTERPLAY BETWEEN TRUST AND SOLIDARITY.

THIS REQUIRES:

- Developing the methodology to assess the effect of implementation of solidarity mechanisms on trust at several levels;
- Measurement to identify those mechanisms/actions that strengthen solidarity and have the greatest impact on nurturing trust.

REGULATIONS, INSTITUTIONS, AND PRACTICES SHOULD INCLUDE SOLIDARITY AS A GUIDING PRINCIPLE.

THIS REQUIRES:

- The development of guidance on the practical implementation of solidarity;
- The development of methodology to evaluate the inclusion of solidarity in regulations, institutions and practices;
- Assessing existing relevant regulations and the current institutions and practices on how they include and implement solidarity and develop plans to reinforce the solidarity principle.



About the Expert Panel on effective ways of investing in health: The Expert Panel's mission is to provide sound and independent advice in the form of opinions in response to questions (mandates) submitted by the Commission on matters related to health care. The opinions of the Expert Panel present the views of the independent scientists who are members of the Expert Panel. They do not necessarily reflect the views of the European Commission. For more information and to read the opinions in full: [Opinions | Public Health \(europa.eu\)](https://ec.europa.eu/health/expert-panel/)