

Improving health equity in Europe Priorities for the 2024-2029 EU policy landscape

EuroHealthNet launches its priorities for the European Union (EU) to improve health equity and wellbeing in Europe by 2030 through action on the determinants of health – underlying conditions in which people are born, grow up, live, learn and work, and age.

The proposed priorities take forward the aims of the EU Treaties to promote peace and European values, namely human dignity, freedom, equality and solidarity, and the wellbeing of its peoples (Art.3 of the Treaty on the Functioning of the EU (TFEU)). The EU's objective to protect health across all EU policies (Art.168 of TFEU) provides the legal base for the EU and its Member States to accelerate policy action for health equity, especially in areas traditionally considered 'out of the health policy remit' such as employment, education, environment, agriculture, trade or economy.

“EuroHealthNet’s aim is to reduce health inequalities in Europe. There is still a difference of 9 years in life expectancy between countries in the EU and the gap in healthy life expectancy is even bigger – up to 18 years. Inequalities lead to social unrest and lack of trust in institutions. They are primarily a result of our policy actions and how we shape our societies. Reducing inequalities should therefore be a key priority for the EU.”

Overview of EuroHealthNet’s post-2024 priorities

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- I. EuroHealthNet’s overarching vision is to achieve a [Wellbeing Economy](#) in the EU, which benefits people and planet, and ensures peace, human dignity, equal opportunities, and fairness.
 - II. European Institutions should strengthen and uphold the EU’s social objectives and act on the [European Pillar of Social Rights](#) (EPSR) as a tool for achieving health equity and a Wellbeing Economy.
 - III. The European Health Union should be broadened to encompass other health priorities.

I. **EuroHealthNet’s overarching vision is to achieve a Wellbeing Economy in the EU, which benefits people and planet, and ensures peace, human dignity, equal opportunities, and fairness.**

Europe faces multiple, overlapping, escalating crises, and armed conflicts, fuelled by social, political, ecological, and economic pressures. These crises are causing preventable health inequalities to rise between and within European countries.

Siloed, reactionary, and disconnected responses cannot overcome these complex challenges; they require a common, overarching, and visionary response. This response must be transversal across all EU and European-level government actors as well as across sectors, and it must be based on engaging the whole of society.

A **Wellbeing Economy** is an alternative economic model which revolves around investing in all people, reducing inequities, and aligning production and consumption with planetary boundaries. It is about ensuring our economies are reoriented to better deliver on the Sustainable Development Goals and go beyond, valuing not just economic, but also human, social, natural, and cultural capital equally.

All actors have a role to play in supporting this reorientation. EU institutions, Member State authorities, civil society, communities and citizens, social enterprises, corporations, and businesses: all must be made aware, encouraged, and enabled to contribute to this vision. Robust and transparent EU governance structures that support peaceful coexistence and meet basic human needs are key, as is empowering people and giving them a voice and a platform.

To ensure high-level attention to and coordination of efforts across the whole of the European Commission, EuroHealthNet recommends that a [new Commission Vice-President for a Wellbeing Economy](#) is appointed, in addition to the Commissioner for Health and Food.

EU governance for health equity and a Wellbeing Economy

A “Wellbeing Economy” aims to put the wellbeing of people and planet at the centre of policy- and decision-making. This requires governments to reduce their traditional reliance on economic capital as a marker of progress and to enhance and measure social, human, and natural capital.

A Wellbeing Economy also supports peaceful co-existence and values accountability, transparency, participation, inclusion and cross-sectoral cooperation, as well as evidence-based decision-making.

EuroHealthNet therefore suggests the following actions:

- a. Appoint a new **Commission Vice-President for a Wellbeing Economy** and a dedicated Commissioner for Health and Food.
- b. Health is becoming an ever more critical element in foreign policy, security policy, development strategies and trade agreements. **The EU institutions should invest in (global) health diplomacy** among their staff and that of national servants, to promote such a Wellbeing Economy, with a focus on future generations. Peace and security are among the most fundamental determinants of health and wellbeing in the EU, in the region, and globally.
- c. Pro-actively deal with the lack of **trust** in governance for health and related misinformation through **debate and co-creation with citizens, fostering transparency and accountability, leadership, and reliable communication**.
- d. Develop an **EU civil society strategy** to ensure effective civil dialogue in policy processes, from design to implementation and evaluation. Capacity-building, legal protection and sustainable funding for civil society organisations must be guaranteed, for instance through multi-annual operating funding grants.

- e. Dedicate one meeting a year for a **jumbo EPSCO Council** of Ministers of Employment, Social Policy, together with Health, and Consumer Affairs focusing on key social determinants of health. In addition, organise regular joint meetings of the EPSCO Council and the Economic and Financial Affairs Council (ECOFIN) on topics such as the European Semester, the Wellbeing Economy and monitoring framework, EU funding, taxation, and investments for health and social inclusion.
- f. Set up a stand-alone **European Parliament Public Health Committee**, with health equity at the core of its work and granted powers to draw up, amend and adapt legislative proposals, as well as develop own-initiative reports.
- g. Incorporate Health Equity Impact Assessments and distributional impacts of policies as well as Wellbeing Economy principles into the **EU Better Regulation agenda**.

- b. Build on the idea of a social imbalance procedure proposed by Belgium and Spain and work towards a **Wellbeing Alert Mechanism in the European Semester**. This Wellbeing Alert Mechanism would be embedded in an updated Social Scoreboard with additional social, health and environmental indicators to help identify, prevent and address imbalances.
- c. Operationalise a **Wellbeing monitoring framework** as part of the European Commission's annual strategic foresight process.
- d. Use the European Semester as a catalyst to act on the pressure points **for the transformation of health systems**. This includes recommendations to reduce overtreatment and ensure quality care for all; change the economic and commercial incentives in the system; address waste and low-value in health care; build inclusive, intersectoral (and net-zero carbon) community health approaches; and strengthen health promotion and disease prevention.
- e. Set up an **European Parliament Intergroup on a Wellbeing Economy** (and beyond-GDP growth).
- f. Exclude green, health and social investments from EU national debt rules (the so-called '**golden rule**').
- g. Encourage **public procurement** procedures that aim at achieving sustainable development, social, health and environmental objectives. Bids should be evaluated on the basis of the so-called "**Best Price-Quality Ratio**" in accordance with Art. 76 of the Directive (2014/24/EU) allowing contracting authorities to take into account criteria such as quality, accessibility, affordability, availability or specific needs of users, including disadvantaged and vulnerable groups.
- h. Continue strong partnership with Civil Society Organisations around social, health and environmental aspects of the European Semester through **facilitated strategic dialogues with the country desk officers' network and relevant European Commission DGs** (SANTE, EMPL, REGIO, REFORM).

EuroHealthNet also proposes using the [European Semester](#) as a key steering instrument to implement the Wellbeing Economy vision, guided by an upgraded Social Scoreboard containing additional social, environmental and wellbeing indicators and a Wellbeing Alert Mechanism for policy action.

Support the achievement of a Wellbeing Economy through the European Semester

The European Semester was designed as a policy mechanism to coordinate the EU's economic and fiscal policies and reforms to ensure market and thereby social stability. The mechanism has been adapted to incorporate environmental and social considerations.

However, just as a Wellbeing Economy requires greater emphasis on human, social and natural capital, this mechanism could go further beyond economic coordination to address the reforms needed.

- a. Ensure that the **European Semester process** takes a stronger Wellbeing Economy-oriented approach to weigh, in a more balanced way, economic, social and environmental assets and opportunities for reform.

II. European Institutions should strengthen and uphold the EU's social objectives and act on the [European Pillar of Social Rights \(EPSR\)](#) as a tool for achieving health equity and a Wellbeing Economy.

The **European Pillar of Social Rights**, which sets out essential principles to build a fairer Europe, should be considered a "[Pillar for Health Equity](#)." All 20 principles and rights constitute essential conditions for ensuring that everyone attains their full potential for health and wellbeing. Quality and adequately paid work, social protection, and public services need to be guaranteed for all groups in society, in particular those that face disadvantage.

Specific action must be taken to realise **Principle 16 on equitable and affordable access to timely (preventative) health services of good quality within and between Member States**.

A Wellbeing Economy approach offers a wider complementary framework for implementing the EPSR Action Plan by 2030, guided by an EU-wide anti-poverty strategy.

Use the European Pillar of Social Rights as a Pillar for Health and reduce health inequalities

The EPSR sets the aspiration and implementation priorities for a more social Europe for all. A more social Europe paves the way for a healthier Europe.

The EU and its Member States need to advance on the implementation of all 20 principles, while making progress on review-informed new Action Plan beyond 2025 with SANTE's clear commitments to each of the principles.

EuroHealthNet suggests the following actions:

- a. Principle 16 on the right to timely access to **affordable, preventive, and curative health care of good quality**. The shift from hospital centric to primary care-based health systems with a strong prevention and health promotion basis leads to universal health coverage.

- b. The benefits of **digitisation in health** (e.g., artificial intelligence, European Health Data Space) must be inclusive for all, or they threaten to widen current inequalities. We recommend mandatory digital inclusion audits across proposed actions, assessing benefits of digitally-delivered services, and population-wide investments in digital health literacy and skills.
- c. Principles 6 and 14 on **adequate minimum wages and minimum income**. The 2022 EU Directive on adequate minimum wages and 2023 Council recommendations on adequate minimum income must be further implemented and evaluated.

A **social investment approach** will help mitigate the negative consequences of the rising costs of living and current structural barriers on wider determinants of health.

In order to achieve agreed goals such as reducing the number of people at risk of poverty or social exclusion by 15.6 million by 2030, EuroHealthNet recommends a new **EU-wide anti-poverty strategy** with binding targets and further measures.

- d. Principles 11 and 18 on **healthy early years and healthy ageing**, and ensuring long-term care in light of demographic ageing of Europe. EuroHealthNet calls for proposals to tackle loneliness, [psychosocial risks for older workers](#), expanding care infrastructure and health-promoting nature of caring communities, providing **social innovation of home support** and care for carers linked to the European Care Strategy.

Facing an uncertain future, we must foster convergence, solidarity, trust and resilience across Europe. Demographic change and the digital and green transitions require strong and visionary governance and adaptable public services to ensure all populations benefit.

In particular, we must ensure that **the next generation benefits from essential social rights** so that it can develop under conditions that promote their health and wellbeing and build essential skills to inherit a rapidly changing world. Policy measures to ensure wellbeing of children and young people across all groups must therefore be prioritised.

Take care of the health of our children and young people

The quality of our future depends on the quality of our investments in today's children and youth. Conflict, the climate crisis, and other current challenges will have physical and mental health repercussions for many children and young people across their lives.

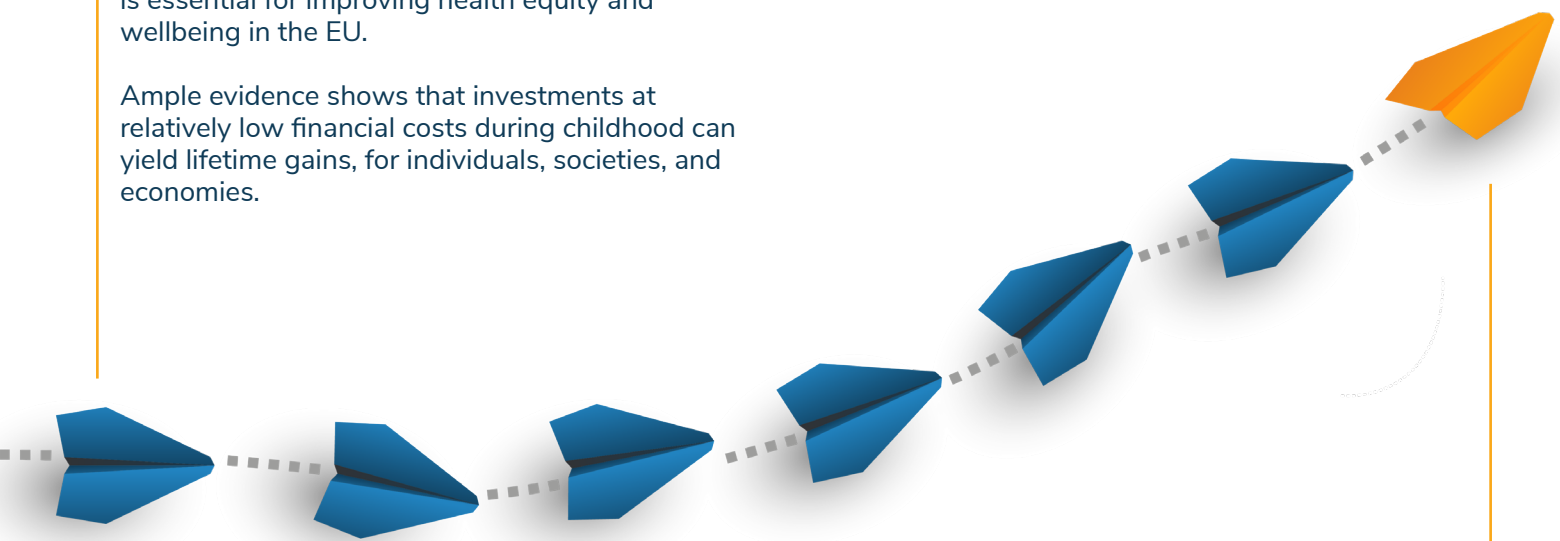
Ensuring that conditions for good health are prioritised for children and young people along the social gradient is key.

A “proportionate universalism” approach should be taken, supporting all and offering additional support when and where at-risk groups and individuals need it. Guaranteeing the best possible start to life in the first 1,000 days and continuing this support throughout school years is essential for improving health equity and wellbeing in the EU.

Ample evidence shows that investments at relatively low financial costs during childhood can yield lifetime gains, for individuals, societies, and economies.

EuroHealthNet therefore recommends:

- a. EU and Member States should step up their action on the EU Child Guarantee and ensure children's right to housing, education, health care, nutrition and leisure activities. An EU Child Guarantee Directive could be an option to further stimulate efforts. The **EU Youth Guarantee** should be maintained and strengthened.
- b. In the context of the EU Strategy for the Rights of the Child, propose actions to **safeguard access to clean and secure green spaces, nature-based leisure activities such as physical activity, and active mobility**. European Institutions can explore guaranteeing children's right to clean and healthy environments.
- c. Launch a new **EU Childhood Obesity Action Plan 2025-2035**.
- d. Regulate digital marketing and smartphone use, digitisation of lives and (mental) health consequences, linked to the **Better Internet for Kids** initiative, the **EU Strategy for the Rights of the Child**, as well as the **Digital Services Act Directive** and the **Artificial Intelligence Act**.
- e. In the context of the EU Skills Agenda through the **EU Pathways to School Success initiative** and the **European Educational Area**, work toward supporting Member States' national reviews of school curricula to include health and wellbeing competences, digital (health) literacy, and building skills for sustainable and green transition.



III. The European Health Union should be broadened to encompass other health priorities.

The European Health Union (EHU) is a welcome framework to bring together health policy measures, but it should be made more holistic, incorporating health equity as a key indicator of EU progress.

A stronger focus on the burden of noncommunicable diseases and inequalities in their distributional impact should be included. The EHU should also coordinate a more strategic approach towards mental health across all EU policies.

The EU should make greater use of social and behavioural science, such as Behavioural and Cultural Insights recommended by the World Health Organization Regional Office for Europe to inform policymaking and practices.

The push for universal health coverage should be broadened to include emerging digital challenges and opportunities.

- b. Strengthen equity considerations in the **European Health Data Space (EHDS)**, with a focus on inclusive digital health, data protection, and improving digital health literacy.
- c. Broaden the **European Center for Disease Control's (ECDC) mandate** to include NCDs as co-morbidity conditions to infectious diseases.
- d. Include **behavioural and cultural insights**, social sciences and wider health promotion and disease prevention measures in EU and MS emergency preparedness and crisis response packages.
- e. Be more ambitious and strategic in promoting **Mental Health in All Policies in the EU**. The current Mental Health Initiative provides a useful summary of past and planned actions (e.g., 'Flagship Initiatives'). EuroHealthNet encourages the EU and Member States to go beyond a good practice-exchange model, and **work toward an overarching strategic approach, including commitments to concrete, measurable objectives**.

Ensure that supportive national policy measures are in place to promote mental wellbeing and reduce stigma and discrimination around mental health issues. This can include, for instance:

- Keeping the promise to collect EU-wide mental health data through the **European Health Interview Survey (EHIS)**. Use this as the basis to monitor mental health in the EU, its connection to social determinants, and to help evaluate policies and interventions.
- Proposing an **EU Directive on psychosocial health and wellbeing at work**.
- Fund activities on **Whole School Approaches** that include mental health promotion.
- Secure the **provision of mental health services** as essential services in national health systems.
- Create a **European Year of Mental Health** and convene EU-wide action on mental health.

Expand the European Health Union to firmly include health equity, prevention of noncommunicable diseases (NCDs), and mental health

People with lower socioeconomic backgrounds were hit hardest by the pandemic. EU and Member States need to broaden the EHU mandate to include equity, health promotion, prevention and mental health.

EuroHealthNet suggests the following actions:

- a. Put **health equity** front and centre in the EHU and commission an EU-wide assessment of (trends in) health inequalities and relevant EU policies and legislative gaps. This assessment would form part of the biannual State of Health in the EU series and align with the profiles of the **Europe's Beating Cancer Plan's Cancer Inequalities Register**.

Bolder action on the **commercial determinants of health** can reduce power imbalances, create more level playing fields for businesses, set conditionalities to growth, and limit the proliferation of unhealthy and unsustainable products and industries.

We need the EU to accelerate the implementation of commitments in the prevention pillar of the European Beating Cancer Plan, specifically legislative files regarding alcohol, smoking, and nutrition, currently delayed due to various vested interests.

Address the commercial determinants of health through legislative actions

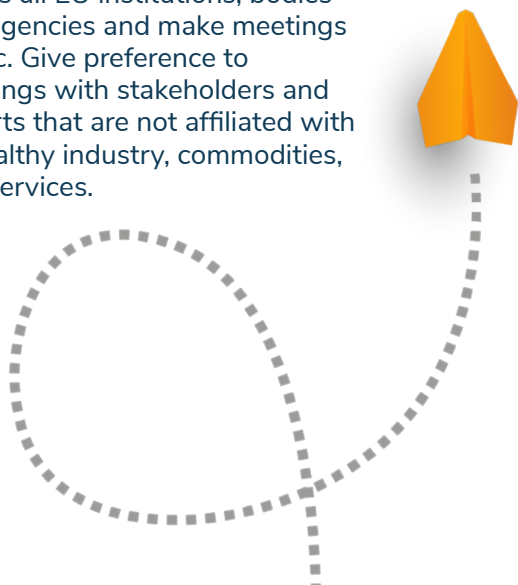
Noncommunicable diseases (NCDs) account for more than 80% of the disease burden in the EU, despite being largely preventable through health promotion and prevention.

The Prevention Pillar of the **Europe's Beating Cancer Plan** – although quite progressive – has experienced legislative file delays on smoking, alcohol, and food labelling.

We demand more proactive and timely action on the **commercial determinants of health** and accelerated work on the legislative files promised in the context of the Cancer Plan. There is a fierce industry lobby trying to influence these files, so collective action and transparency is required.

To limit the possible negative impacts of commercial determinants of health, EuroHealthNet suggests to:

- a. Make the **EU Transparency Register** mandatory and applicable across all EU institutions, bodies and agencies and make meetings public. Give preference to meetings with stakeholders and experts that are not affiliated with unhealthy industry, commodities, and services.



- b. Launch the reviewed **EU Tobacco Products and Tobacco Taxation Directives**, systematically looking for ways to accelerate the achievement of the Tobacco-free generation even earlier than by 2040, and the smoke-free environments commitments.
- c. Launch the reviewed **EU Alcohol Taxation Directive** and look into a potential for an EU-wide application of pro-health pricing policies, such as minimum unit pricing.
- d. Review the legislative framework for **cross-border purchases of alcohol** by individuals
- e. Revise **front of package (FoP) labelling** and introduce mandatory restrictions on aggressive marketing, notably on ultra-processed foods. Use credible nutritional profiles and colour-coding to support customers' healthier dietary choices. Improve alcohol labelling and include health warnings on the bottle, as part of the Food Information to Consumers (FIC) rules.
- f. Commission a study investigating regulatory gaps and untapped potential to act on NCDs and related risk factors and determinants within the boundaries of the current EU mandate on health. It should particularly investigate **pro-health taxes, regulations around sales, taxation, and advertising aimed to support pro-health and sustainable consumer choices**.

The **climate crisis** is among the most urgent challenges we face today. Its impact on planetary health places our own health and the resilience of our health systems at risk. This impact is unequally distributed and felt. While all of us are affected, people in more vulnerable situations are particularly at risk, both from the consequences of climate change and that of being left behind by solutions to adapt to and mitigate it.

The EU institutions need to support Member States to develop health-enabling living and working environments. This area will need significant financial investments, which could trigger co-benefits for health equity such as new employment opportunities and cross-sector partnerships.

Other **health co-benefits** should be explored and exploited. EU institutions should guide and incentivise MS to prioritise **greening the health care sector**.

Green our health systems and deliver on health enabling living and working environments

There is no human health without planetary health. The EU Green Deal and related efforts to ensure a green transition need to receive considerable financial investments, which could be harnessed for health equity.

To make joint progress towards climate and health goals EuroHealthNet suggest to:

- a. Commission a study investigating the **health co-benefits of the European Green Deal**, regulatory gaps, and untapped potential to act, with a particular chapter dedicated to health equity gains across life course and various population groups.
- b. Embrace the UN Committee on the Rights of the Child's new guidance affirming **children's right to a clean, healthy environment**, and legal protection against climate change.
- c. Accelerate efforts to **green the health care sector** at Member State-level through the EU-level incentives linked to the Green Deal.
- d. Promote and incentivise **social prescribing and nature-based solutions** as innovative and highly promising non-therapeutic solutions to over-medicalised and pressured health care system.
- e. Embrace the **One Health approach**, ensuring a focus on health equity, and propose an EU One Health framework with mandatory time-bound and target-oriented actions, going above and beyond acting on antimicrobial resistance, ensuring coherence with UN agencies such as World Health Organization, Food and Agriculture Organization, and the United Nations Environment Programme.
- f. Use the New European Bauhaus initiative to help ensure green and healthy living environments through use of nature-based solutions and social innovation in the construction and renovation of buildings and public spaces. Investigate **legal frameworks for the right to green spaces** based on the 3-30-300 rule (3 trees from every home, 30 percent tree canopy cover in every neighbourhood, 300 metres from the nearest public park or green space).

- g. Align **EU guidelines on air quality** with World Health Organization air quality recommendations by 2025/30 (progressive).
- h. Take forward the **European Declaration on Cycling** as well as the **EU Urban Active Mobility Agenda**.

Our food environments have also become increasingly unhealthy, particularly in more deprived areas. Trends of overweight and obesity are on the rise, including among children. Achieving **sustainable and healthy food systems** is a key priority for health equity.

EuroHealthNet urges the EU institutions to lead in creating and legally protecting healthier and more sustainable food environments, including at global level, creating value for people and planet.

To make this happen, EuroHealthNet calls for the **new European Commissioner for Health and Food to receive a broadened portfolio on food**; one that includes aspects such as healthy nutrition, food environments, and regulating marketing and advertising of unhealthy foods to children.

Contribute to achieving sustainable and healthy food systems

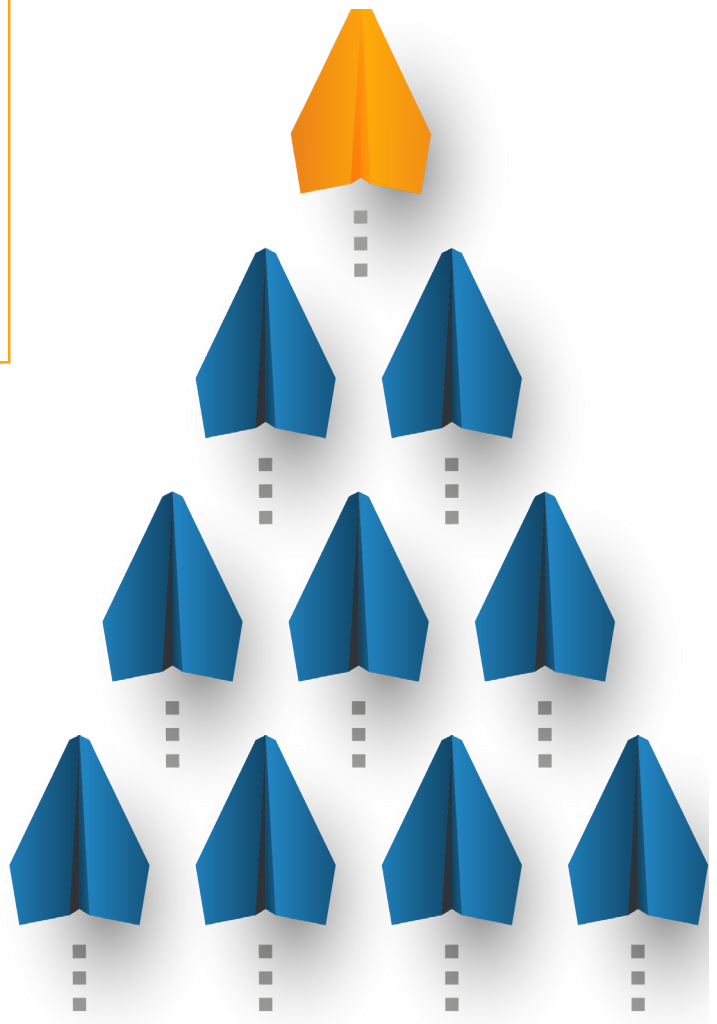
European societies see a proliferation of fast-food providers, retail for food high in fats, salt, sugar (HFSS), and ultra-processed food (UPF). Food environments have become increasingly unhealthy, particularly in more deprived areas. In addition to higher cost-of-living prices, trends of overweight and obesity are on the rise.

The EU should be the front runner in food environment and health policy, creating value for people and planet. Health actors have a role to play. EU institutions need to accelerate action to:

- a. Include labels with **nutrient profiles on UPF and high HSSF foods into a Regulation on Food Information to Consumers (FIC)**, as committed to in the EU Farm to Fork strategy.
- b. Launch a new **EU directive regulating marketing and advertising of HFSS foods** and sugary drinks to children, including regulation of social media influencers.

- c. Present, further debate and implement **sustainable food system legislative framework** (SFSF) a cornerstone of the European Green Deal, which now sees political delays, must ensure mandatory minimum criteria for sustainable and healthy food procurement in public settings such as schools and care services.
- d. **Propose EU-wide sustainable food systems scoreboard as part of the European Semester cycles** to monitor progress on transitioning to healthier and more sustainable food systems in the EU.
- e. Ensure **healthy food environments, greening and health-empowering public food procurement**, and provide a legal instrument (taking forward the services in the internal market directive – art. 15-3) that allow Member States to refuse unhealthy business establishments on health and environmental grounds, liveable criteria or against monocultures of services.

With European elections due in June 2024 – and with only 6 years remaining to achieve the 2030 UN Sustainable Development Goals – EuroHealthNet has presented its 2024-2029 policy priorities for the EU. EuroHealthNet calls on the EU institutions to align its policy objectives and efforts under the banner of a Wellbeing Economy, to ensure the **sustained health and wellbeing of people and planet and to improve social equity in health for all people living in Europe.**



EuroHealthNet is a partnership of public organisations, institutes, and authorities working on public health, disease prevention, promoting health and wellbeing, and reducing inequalities. We aim to tackle health inequalities within and between European States through action on the social determinants of health. For further information and further references go to www.eurohealthnet.eu.



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