

Horizon Europe Strategic Planning Revised Orientations towards the first strategic plan

Fields marked with * are mandatory.

With a proposed budget of 100 billion Euro from 2021 to 2027, the Horizon Europe framework programme represents the largest collaborative research and innovation investment in the world and is open to participants worldwide. The European Parliament and the Council, the co-legislators, have provisionally agreed on the Horizon Europe legislative package. A co-design process has been launched in order to optimise the targeted impacts for the first four years of implementation. It has been organised first through a web-phase consultation (28 June to 4 October) and then in the European Research and Innovation Days (24-26 September, via dedicated sessions and the village), more than 10000 contributions from stakeholders based in 99 different countries have been received. They have been taken into account and the original "Orientations" document has been modified accordingly.

The revised version of the "[Orientations towards the first Strategic Plan for Horizon Europe](#)", is now open to receive your views, focusing on a limited number of issues that had not been addressed before. Since the EU added value is the cornerstone of this survey, we particularly welcome views from organisations and networks with a cross border dimension and a mission of advocacy of relevance for research and innovation, (the so-called "umbrella organisations").

Section A - About you

* Are you representing an organisation with members from different countries or a transnational network?

- yes
 no

If you are representing an organisation or a network mentioned in the question, what is its name?

1000 character(s) maximum

EuroHealthNet

Where the headquarter of the organisation or the coordinator of the network is located?

Belgium

If you are responding on behalf of an organisation or a network mentioned in the question, how many members are you representing?

1000 character(s) maximum

62

If you are representing an organisation or a network mentioned in the question, in how many countries your members are based?

1000 character(s) maximum

28

* You or your organisation are mainly active/interested in the following areas of Horizon Europe (Please select all that apply):

- Health (cluster 1)
- Culture, creativity and inclusive society (cluster 2)
- Civil security for society (cluster 3)
- Digital, industry and space (cluster 4)
- Climate, energy and mobility (cluster 5)
- Food, bioeconomy, natural resources, agriculture and environment (cluster 6)
- Widening Participation and Strengthening the European Research Area
- Pillar I Excellent Science
- Pillar III Innovative Europe
- Other

* Publication privacy settings

The Commission will publish the responses to this public consultation. You can choose whether you would like your details to be made public or to remain anonymous.

- Anonymous
Only your type of respondent, country of origin and contribution will be published. All other personal details (name, organisation name and size, transparency register number) will not be published.
- Your personal details (name, organisation name and size, transparency register number, country of origin) will be published with your contribution.

Section B - Questions

Which targeted impacts can be best reached (or only reached) through Horizon Europe? On the other hand, what are the targeted impacts, mentioned in the updated orientations, least likely to benefit from Horizon Europe investments?

1500 character(s) maximum

An interconnected character of the Horizon Europe (HE) targeted impacts, bringing in more coherence to the overall impact of the programme is welcome. Overall, 'European Green Deal', 'Economy that works for people', and 'Europe fit for the digital age' priorities will be most likely reached through HE investments. From a public health perspective, environments in which we live are key determinants of health and well-being, subject to differential and often unfair distribution in populations. R&I should be able to ensure that the

transition to greater sustainability is feasible for all and socially fair.

While adding investing in 'healthy citizens' concept, HE still tend to overly prioritise biomedical R&I, with little focus on health promotion, prevention, and health determinants. In consequence, the growing burden of diseases and health inequalities will remain challenging to tackle and prevent. Health research funding should focus on a social model of health to generate specialist knowledge able to embrace the social determinants of health inequalities in 'real world'. In this way, the societal and system-wide impact of research can be improved, beyond mainly economic or industry return on R&I investment.

While offering opportunities to enhance disease prevention and improve well-being, we believe that research in digital transformation must address issues of digital (health) exclusion of disadvantaged populations.

Which common challenges between different clusters could reinforce their impacts (e.g. environment and health, green IT...)?

1500 character(s) maximum

The environment-health-equity link should be reinforced throughout all clusters. While HE acknowledges intrinsic interlinkages between health and other societal and environmental domains, mostly global in nature, 'health in all policies' approach must also be applied to other – perhaps less obviously health-related – clusters of the current proposal: climate, energy and mobility, as well as food, agriculture and environment. This would help to support HE expected contribution towards the implementation of the global sustainability agenda, at EU and (sub)national levels.

Prioritising research that focuses on a social model of health, place people at the centre would boost the societal and system-wide impact of research, beyond mainly economic benefit. HE should link up with the recent 'Economy of Wellbeing' developments. By putting people at the centre, HE supported R&I could move away from models of health and society that are purely problem-oriented, and complement these by models that are person- and population-focused, in which the needs of all people are addressed. Trans-boundary collaborations that focus on conditions for wellbeing would be able to generate new evidence to inform and develop effective and innovative policies and interventions.

Priority 4 and 6 should be more integrated around a positive narrative ('promote' rather than 'protect'). While important, 'protection' approaches provoke unnecessary fear amongst citizens instead of behaviour/systems change.

Beyond research and innovation, which other measures would be needed at the European level to best achieve the targeted impacts (e.g. innovation deals...)?

1500 character(s) maximum

To ensure a focus on real needs and support a health co-creation process, end-users and their community are increasingly being directly involved through participatory health promotion and prevention methods. Since the evidence on participatory methodologies is still being developed, funding should prioritise rigorous multi-disciplinary initiatives, including not only quantitative evaluation (which traditionally tends to be better accepted by the scientific community), but also qualitative evaluation. Qualitative methodological approaches are key to gain rich insights by providing 'thick data' (which is as important as generalised 'big data') into public health determinants, challenges and contexts, and allows to broaden the traditional research questions.

While aiming at improved health co-creation process among all citizens, equity concerns should be taken into account by addressing socio-economic, environmental, commercial and digital determinants of health. Greater focus on prevention and health-enhancing models of growth are needed.

Open access is a cross-cutting factor that can add value to findings emerged from Horizon Europe. This could be achieved by a.o. allowing research consortiums to spend part of the budget on Open Access

publications post project completion, as well as including Open Access among eligibility criterium already at the R&I proposal stage.

What are your impressions on the co-design process and how can we improve it?

1500 character(s) maximum

EuroHealthNet contributed both to the survey and took part in the Research and Innovation Days co-design sessions. We found the participatory co-design process valuable, promising and ownership-increasing. However, we miss a somewhat deeper participative 'penetration' of the research needs among society and specific communities of end beneficiaries, across entire social gradient, including the most vulnerable groups. Last but not least, we have been wondering how our ongoing suggestions have been concretely incorporated into the improved Horizon Europe plans, in particular those that had been more or less finalised well ahead of the consultative process. How our ideas feed into the somewhat isolated developments of the mission boards? Should this be repeated in the future, and we hope it will, it would be recommended to set out the plans and means of how to contribute early on.

Contact

Clement.EVROUX@ec.europa.eu