

NFP4Health Workshop: “(EU4)Health in all programmes - Harnessing synergies for a resilient future”

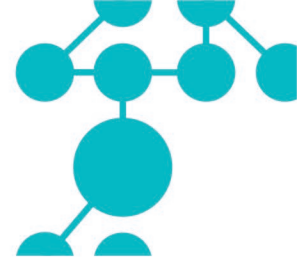
Outcomes report

Session organised by the EU4Health NFP Hungary in the Hungarian Ministry of Interior (Belügyminisztérium, BM) and the EU4Health NFP Austria in the Austrian National Public Health Institute (Gesundheit Österreich GmbH, GÖG) at the European Health Forum Gastein (EHFG) 2023 on Thursday, 28 September 2023, 08:45-09:45

At the EHFG 2023 conference, the Hungarian Ministry of Interior together with the Austrian National Public Health Institute organised [a joint session](#) in scope of the NFP4Health Joint Action's Work Package 5, dedicated to exploring synergies for health between different European funds and programmes and supporting their utilisation at the national level. The panel discussion was moderated by Matthias Wismar, Programme Manager at the European Observatory for Health Systems and Policies, and featured distinguished speakers and panellists:

- **Giovanni Nicoletti**, Head of Department, Italian Ministry of Health and Coordinator of the NFP4Health project (joining via remote connection);
- **Filip Domanski**, Programme Officer EU4Health, European Commission Directorate-General for Health and Food and Safety (DG SANTE);
- **Krisztina Biró**, Head of Unit, Department for Health Policy, State Secretariat for Health, Hungarian Ministry of Interior;
- **Caroline Costongs**, Director, EuroHealthNet;
- **Miklós Szócska**, Dean, Faculty of Health and Public Administration and Director of the Health Services Management Training Centre, Semmelweis University, Hungary.





The session aimed to highlight the pivotal role of synergies between [EU4Health](#), the fourth iteration of the European Union's Health Programme, and other health-related EU funds and programmes in addressing recovery from the COVID-19 pandemic as well as facing other crucial current and future health challenges in Europe. Panellists and session participants explored the role of EU4Health and its complementary programmes in working towards the realisation of a European Health Union, the availability of health funding opportunities across different policy agendas and financial envelopes, and the potential barriers to cross-programme synergy utilisation.

A poll to gauge the audience's profile and experience conducted prior to the start of the session revealed that a substantial number of attendees had already been involved in projects supported by one of the EU programmes. A follow-up poll showed that for most session participants, this experience came from the EU's Horizon funding stream focused on research and innovation, while significantly fewer participants were already familiar with projects receiving funding under the EU Health Programmes such as EU4Health.

Key Insights

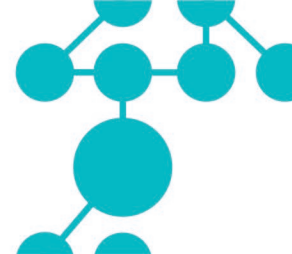
Matthias Wismar initiated the session by underscoring a significant challenge faced by the European Commission, namely the absorption capacity for available funds in the Member States and Associated Countries, which has become more pronounced with the budgetary increase in the EU Health Programme. Speaking via video link, Giovanni Nicoletti emphasized the importance of recognizing and harnessing cross-programme synergies in order to utilize funds effectively and addressed the necessity of intersectoral collaboration among stakeholders to take advantage of the opportunities presented for health not only in the expanded Health Programme itself, but also in other health-related funds and programmes under the current EU multi-annual financial framework (MFF).

Filip Domanski, representing the European Commission, outlined the history of the EU4Health programme, which underwent significant adaptations at the onset of the COVID-19 pandemic. Notably, the programme's budget witnessed a tenfold increase compared to previous EU Health Programmes, and considerations of crisis preparedness and resilience were given greater prominence. This is also reflected in the programme's [four primary objectives](#) to 1) improve and foster health, 2) protect people against cross-border health threats, 3) improve access to medicinal products and medical devices, and 4) strengthen the performance and resilience of health systems. Domanski also delved into the challenge of absorbing funds effectively, and the necessity of aligning activities and spending across different European programme streams to ensure their coherence.

Domanski provided examples of collaboration at the strategic and programming level within the European Commission, notably in scope of [Europe's Beating Cancer Plan](#) (EBCP). The Plan encompasses actions along the entire disease pathway of cancer and is supported through collaboration between several different Directorate-Generals (DGs) within the European Commission, who serve as parent DGs for different EU funds and programmes. The EBCP comprises disease prevention and health promotion initiatives supported by [DG SANTE](#) through EU4Health funding, as well as research and innovation activities in cancer diagnostics and treatment supported by [DG RTD](#) through the [Horizon Europe](#) programme. Furthermore, the EBCP seeks to enhance the quality of life for cancer patients, survivors, and caregivers in cooperation between DG SANTE and [DG EMPL](#), and includes actions for digitalisation in the area of cancer research and care that draw on funding under the [Digital Europe](#) programme headed by [DG CONNECT](#).

Krisztina Biró expanded on the dimension of synergy utilisation at the national level and within Member State institutions, connecting initiatives, projects, and financing across different instruments. Dr Biró described Hungary's launch of a comprehensive suite of public health measures since 2010 in





alignment with European programmes and strategies, not least the EU Health Programmes as well as the EU [Recovery and Resilience Facility](#) and other cohesion funds. She enumerated several relevant initiatives, including the Hungarian [public health product tax](#) and reforms in hospital and [school catering](#) as good practices recognised by WHO and the European Commission, as well as legislative limits on industrially produced trans fats in foodstuffs, daily physical activity introduced at schools, and smoking cessation programmes.

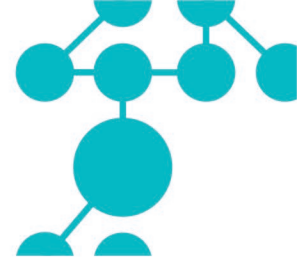
Building on Domanski's inputs and the session's theme, Dr Biró outlined two distinct and equally necessary forms of synergy utilization in the realm of public health: horizontal synergies between different EU programmes, but also vertical synergies in aligning available EU funding with national spending priorities. Dr Biró emphasized the importance of sustainability when designing EU funding programs to enable national actors to build on results that have already been achieved, citing as an example the consecutive Joint Actions [JAMRAI](#) 1 and 2 which address antimicrobial resistance, as well as the [Joint Action Best ReMaP](#) and its continuation in the upcoming Joint Action PREVENT NCD. She also stressed that high visibility and wide dissemination of information on EU4Health and other funding programmes amongst national stakeholders is a key to further promote the use of possible synergies. She raised the need for health actors to examine policy areas beyond the traditional public health scope to address pressing intersectoral challenges to health and well-being and harness relevant funding streams.



Caroline Costongs shared her experiences of exploring different European funding options in relation to the work of [EuroHealthNet](#) and its member institutions and organisations. EuroHealthNet's focus on combating health inequalities necessitates a comprehensive approach to European programming, since the social determinants of health are impacted by policies and conditions across many different sectors, and action on health inequality therefor must connect with several different DGs, policy areas, and funding streams at the EU level to be successful. Costongs shared that EuroHealthNet itself is supported in its operation by an operating grant from the [European Social Fund+](#), under parent DG EMPL, and also highlighted that ample opportunities exist for synergies regarding health promotion and health equity between the EU4Health instrument of Joint Actions, aimed at Member States' health authorities, and projects under other programmes within the current MFF.

As an example, Costongs cited effective cross-project synergy utilisation in context of the [Joint Action Best ReMaP](#), as also mentioned by Dr Biró before, which focused on developing and implementing policy proposals for healthy nutrition, and drew on scientific evidence generated within the [STOP project](#) (funded under a Horizon 2020 grant) to achieve this goal. At the same time, Costongs stressed that a continued and perhaps increased allocation of resources to the area of health promotion and





disease prevention within the EU4Health programme and beyond remains pivotal. Finally, she raised the question of how projects and activities under each EU programme can achieve sustainability once project-based funding has been exhausted. Addressing this challenge, panellists agreed, necessitates capacity building at stakeholder level as well as commitment from Member States to ensure the prioritisation of health topics in national spending, as well as within national utilisation of the EU structural and cohesion funds.

At the same time, Costongs emphasised the added value of not just project-based funding instruments but continuous operating grants specifically for health NGOs, to enable non-governmental stakeholders to pursue complementary project-based funds from a financially stable position, and voiced regret that multi-annual operating grants were not a feature of the current EU4Health work programme at the time of the session. Costongs also stressed the role National Focal Points (NFPs) and National Contact Points (NCPs) of EU programmes can play in providing information to stakeholders and guiding them through the application processes of different funds and programmes. She shared that EuroHealthNet has recently made available their own [mapping of NCPs and NFPs of different relevant programmes](#).

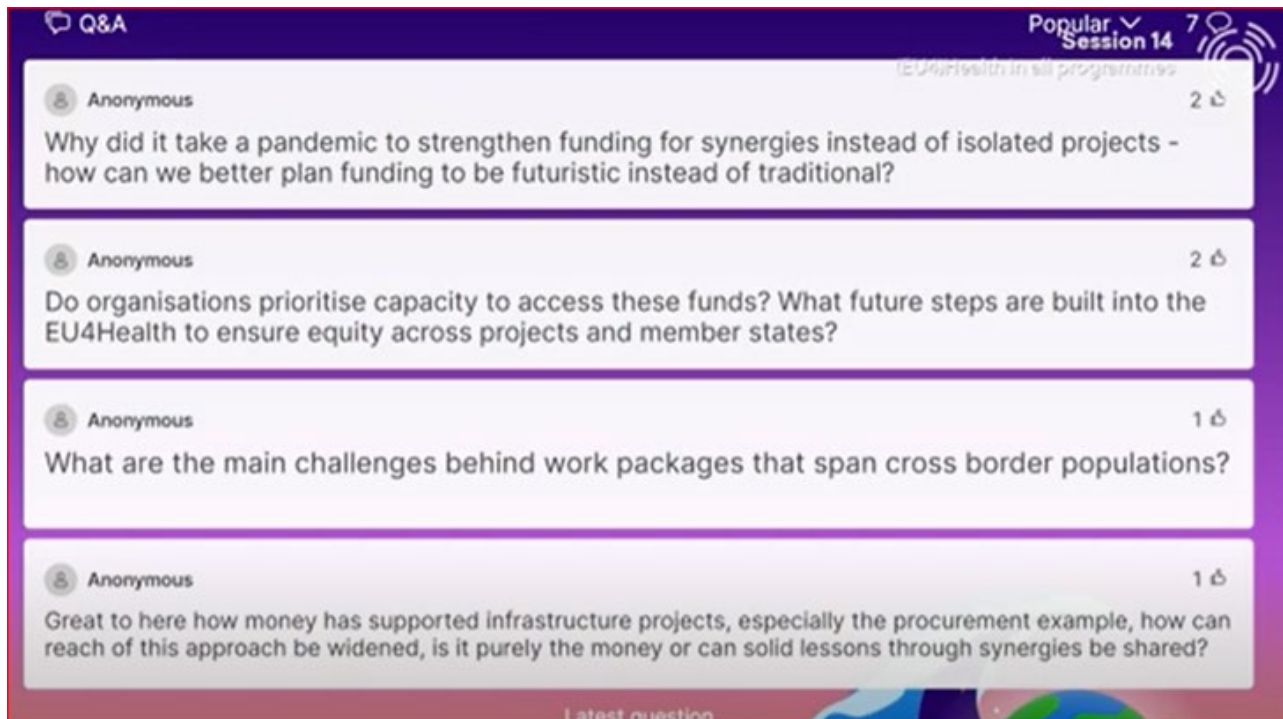
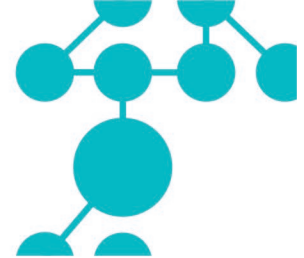
Miklós Szócska pointed out that there is a large amount of joint value creation across EU funds and programmes present in the scope of social innovation. As a positive example of sustainable EU-investment, he recounted the involvement of the Semmelweis University Health Management Training Centre in early activities addressing health human resources and their migration in scope of the [ProMeTHEUS study](#) that commenced in 2009. Results of ProMETHEUS grew over the course of four generations of follow-up projects into a pan-European network of national institutions, who are well equipped to address issues arising out of the acute health human resources crisis today, and who could be mobilised for the implementation of future Joint Actions in this space. Szócska also highlighted the Joint Action [JADECARE](#), which collected best practices in digitally assisted integrated person-centred care that could serve to inform criteria for investment and policy in the future.

At the same time, he emphasised that joint value can only be sustained through continuous knowledge-management as well as a strategic approach to investments and room for institutionalisation of relevant project outcomes and he lamented that the lack of a clear path towards their institutionalisation can be a significant downfall in this context. Concerning the topic of health human resources, he proposed for example the establishment of a joint European national health human resources database to connect data among already existing national or regional databases of consenting countries and ultimately serve to mobilise health professionals across Europe more effectively.

Regarding equity within the utilisation of programmes, Szócska also addressed the gap between equal value creation across EU Member States and Associated Countries and unequal reimbursement for the same value creation in the scope of costs-based grants due to gaps in salary ranges between different countries and he highlighted that a reduction of this gap between earnings could serve to stabilise the joint EU value creation.

Finally, several questions and comments from the audience, both in person and online, were discussed, deepening the conversation on aspects like sustainability and continuity in funding, both through EU-level and national means, along with creating also alternative national financial mechanisms, strengthening knowledge management around synergies, and ensuring a continuous focus on synergistic programming for health also outside of health emergencies.





Conclusions

In conclusion to the discussions, the speakers commended the collaborative efforts through multiple EU programmes and national funding sources for health action, which have collectively generated value within the EU. At the same time, they identified four principal challenges:

1. Ensuring equitable access to EU funding programmes across Member States and Associated Countries and within them.
2. Addressing capacity constraints at both the EU and national levels, particularly as the budget for the EU Health Programme has experienced significant growth.
3. Rectifying the absence of a comprehensive overview of various health funding opportunities and potential synergies between funding sources at EU level, coupled with inadequate visibility of some of the opportunities.
4. Ensuring the sustainability of valuable projects and initiatives once EU (co-)funding for them concludes.

To address these challenges, it was underlined that EU4Health NFPs, in partnership with their counterparts of other programmes, can play a pivotal role in making information on the synergies, similarities and differences between EU-programmes available to their national stakeholders and helping them navigate European funds. From side of the Austrian EU4Health NFP, Cara Pries encouraged health stakeholders interested in accessing EU funding to engage with their [national EU4Health focal points](#), as they can often offer guidance not only on EU4Health, but also in connecting stakeholders with the right counterparts and resources for other EU programmes in their countries. The close collaboration between the NFP4Health project and the Horizon NCP network project HNN3.0 was also mentioned in this context, with more information on joint activities of the two networks available on the [NFP4Health website](#).

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