

Procedure file

Basic information		
INI - Own-initiative procedure	2010/2070(INI)	Procedure completed
Health care systems in sub-Saharan Africa and global health		
Subject		
4.20 Public health		
4.20.06 Health services, medical institutions		
6.30 Development cooperation		

Key players			
European Parliament	Committee responsible	Rapporteur	Appointed
	DEVE Development		01/03/2010
		S&D DE KEYSER Véronique	
		Shadow rapporteur	
		PPE MITCHELL Gay	
		ALDE GOERENS Charles	
		Verts/ALE SARGENTINI Judith	
	Committee for opinion	Rapporteur for opinion	Appointed
	ENVI Environment, Public Health and Food Safety	The committee decided not to give an opinion.	
European Commission	Commission DG Development	Commissioner PIEBALGS Andris	

Key events			
20/05/2010	Committee referral announced in Parliament		
30/08/2010	Vote in committee		Summary
06/09/2010	Committee report tabled for plenary	A7-0245/2010	
06/10/2010	Debate in Parliament		
07/10/2010	Results of vote in Parliament		
07/10/2010	Decision by Parliament	T7-0355/2010	Summary
07/10/2010	End of procedure in Parliament		

Technical information	

Procedure reference	2010/2070(INI)
Procedure type	INI - Own-initiative procedure
Procedure subtype	Initiative
Legal basis	Rules of Procedure EP 54
Stage reached in procedure	Procedure completed
Committee dossier	DEVE/7/02922

Documentation gateway

Committee draft report	PE442.965	08/06/2010	EP	
Amendments tabled in committee	PE443.136	15/07/2010	EP	
Committee report tabled for plenary, single reading	A7-0245/2010	06/09/2010	EP	
Text adopted by Parliament, single reading	T7-0355/2010	07/10/2010	EP	Summary
Commission response to text adopted in plenary	SP(2011)94	10/02/2011	EC	

Health care systems in sub-Saharan Africa and global health

The Committee on Development adopted the own-initiative report drafted by Véronique De KEYSER (S&D, BE) on health care systems in sub-Saharan Africa and global health.

The report reminds the international community of its commitments to the Millennium Development Goals, and the EU of its undertaking to step up support for health services in sub-Saharan Africa.

Members consider that the international community, including the EU, must support states in the implementation of national health policy, whereby publicly funded health services accessible to everyone must be placed at the centre of these efforts.

Stressing that in Africa as elsewhere, health is not a commodity, Members are alarmed at the growing commoditisation of health care and the emergence of a two-speed medical system in countries experiencing political difficulties and shortcomings as regards good governance. They call on the Commission to promote the strengthening of national health systems, inter alia by taking an approach that acknowledges the crucial importance of the public interest and the need for public-private partnerships ? including the non-profit sector ? in the health field, based on criteria relating to effectiveness, fairness and efficiency, in order to achieve sustainable, lasting results.

In this regard, Members consider that mutual health organisations are the best way of creating a social dynamic based on the values of solidarity and providing universal access to health care. They call on the European Union to make the most of the potential offered by mutual health organisations for organising health demand and to support the many existing mutualist initiatives designed to promote access to health care.

The committee urges the Commission, Member States and international financial institutions such as the EIB to support the development and financing of mutual health insurance systems, e.g. by providing credit guarantees, (co-)funding investments in clinics and funding all or part of health workers' salaries. Member States are called upon, according to their varying areas of expertise, to provide more technical and financial support to developing country governments for the implementation and extension of social protection systems.

The report calls on the Member States and on European laboratories, in accordance with the provisions of the TRIPS Agreement, to negotiate a ?partnership approach? respecting patent protection in developed markets and covering voluntary licensing agreements, support for health programmes, technology transfer arrangements and an increase in local production capacity with a view to reducing the price of medicines in low-income countries (through tiered or differential pricing). Members ask the EU not to include in EPAs provisions on intellectual property rights that place further obstacles in the way of access to essential medicines.

The EU is called upon to actively support the development of permanent basic health infrastructure ? hospitals, dispensaries and pharmacies ? as well as the training of qualified health workers and access to medicines.

The report calls on the Commission to:

- continue to place emphasis on specific projects targeting socio-economic health determinants in the form of drinking water, road infrastructure, food security, decent living and working conditions, protection of the environment, and measures to combat climate change;
- adopt a firm stance at the meeting of the Global Fund to Fight AIDS, Tuberculosis and Malaria to be held in New York in October 2010 and to embark on specific projects for the period 2011-2013;
- supplement its aid for vertical funds with recommendations designed to encourage ?diagonal? measures to support basic health care in the countries concerned;
- make recommendations to the vertical funds with a view to their drawing up medium-term exit strategies for partner countries in line with the progress made in achieving the objectives for which they were set up;
- support the introduction of health cards in the EU's partner countries and to work with the countries concerned ? at regional level if necessary ? to ensure that resources are available to meet the needs in this field;
- include actions undertaken in the context of humanitarian aid for health care in its efforts to strengthen the horizontal health care

system.

The report calls on all the Member States and the Commission to allocate at least 20% of all development spending to basic health and education, to increase their contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria and their funding for other programmes designed to strengthen health systems, and to prioritise maternal health and efforts to combat infant mortality.

Health care systems in sub-Saharan Africa and global health

The European Parliament adopted by 328 votes to 183, with 24 abstentions, a resolution on health care systems in sub-Saharan Africa and global health.

The resolution reminds the international community of its commitments to the Millennium Development Goals, and the EU of its undertaking to step up support for health services in sub-Saharan Africa. Members consider that the international community, including the EU, must support states in the implementation of national health policy, whereby publicly funded health services accessible to everyone must be placed at the centre of these efforts.

Parliament welcomes the success achieved by vertical funds in proving attractive to donors and the progress made in combating major pathologies such as AIDS, tuberculosis, malaria, poliomyelitis and other serious diseases. It stresses, however, that this vertical approach can under no circumstances be a substitute for a sustainable horizontal approach to basic health care. Parliament welcomes the diagonal approach adopted by some vertical funds, which have decided to devote part of their resources to consolidating the health care systems of the countries affected by the pathologies targeted.

Stressing that in Africa as elsewhere, health is not a commodity, Members are alarmed at the growing commoditisation of health care and the emergence of a two-speed medical system in countries experiencing political difficulties and shortcomings as regards good governance. They call on the Commission to promote the strengthening of national health systems, inter alia by taking an approach that acknowledges the crucial importance of the public interest and the need for public-private partnerships ? including the non-profit sector ? in the health field, based on criteria relating to effectiveness, fairness and efficiency.

In this regard, Members consider that mutual health organisations are the best way of creating a social dynamic based on the values of solidarity and providing universal access to health care. They call on the European Union to make the most of the potential offered by mutual health organisations for organising health demand and to support the many existing mutualist initiatives designed to promote access to health care.

Parliament urges the Commission, Member States and international financial institutions such as the EIB to support the development and financing of mutual health insurance systems, e.g. by providing credit guarantees, (co-)funding investments in clinics and funding all or part of health workers' salaries. Member States are called upon, according to their varying areas of expertise, to provide more technical and financial support to developing country governments for the implementation and extension of social protection systems.

The resolution emphasises that there could be a role for members of the diaspora from sub-Saharan Africa in helping to raise awareness in their countries of origin about the benefits of mutual health insurance and the adoption of such schemes.

The resolution urges the Member States and on European laboratories, in accordance with the provisions of the TRIPS Agreement, to negotiate a ?partnership approach? respecting patent protection in developed markets and covering voluntary licensing agreements, support for health programmes, technology transfer arrangements and an increase in local production capacity with a view to reducing the price of medicines in low-income countries (through tiered or differential pricing). Members ask the EU not to include in EPAs provisions on intellectual property rights that place further obstacles in the way of access to essential medicines.

The EU is called upon to actively support the development of permanent basic health infrastructure ? hospitals, dispensaries and pharmacies ? as well as the training of qualified health workers and access to medicines.

The resolution calls on the Commission to:

- continue to place emphasis on specific projects targeting socio-economic health determinants in the form of drinking water, road infrastructure, food security, decent living and working conditions, protection of the environment, and measures to combat climate change;
- adopt a firm stance at the meeting of the Global Fund to Fight AIDS, Tuberculosis and Malaria to be held in New York in October 2010 and to embark on specific projects for the period 2011-2013;
- supplement its aid for vertical funds with recommendations designed to encourage ?diagonal? measures to support basic health care in the countries concerned;
- make recommendations to the vertical funds with a view to their drawing up medium-term exit strategies for partner countries in line with the progress made in achieving the objectives for which they were set up;
- support the introduction of health cards in the EU's partner countries and to work with the countries concerned ? at regional level if necessary ? to ensure that resources are available to meet the needs in this field;
- include actions undertaken in the context of humanitarian aid for health care in its efforts to strengthen the horizontal health care system;
- ensure that European policies on reproductive health are properly promoted among all associations receiving EU funds.

Lastly, the resolution calls on all the Member States and the Commission to allocate at least 20% of all development spending to basic health and education, to increase their contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria and their funding for other programmes designed to strengthen health systems, and to prioritise maternal health and efforts to combat infant mortality.