



Role of the European Union in global health

Elizabeth Speakman and colleagues (April, 2017)¹ propose the development of a European global health strategy. As researchers who have analysed the European Union's (EU's) role in global health in the past, we appreciate a renewed debate on this topic. However, we would like to contest some of the arguments.

First, Speakman and colleagues do not mention the developments in the 2000s, when notable EU attention was given to global health.² In 2010, there was a high-level conference and the launch of a European Commission Communication,³ which stated that the EU's commitment to global health should mainly focus on democratic and inclusive global health governance, ensure universal health coverage, create policy coherence, and invest in research that benefits all. The ensuing Council Conclusions urged for a more central EU role in global health. However, the initiative soon lost momentum.³ In addition to other urgent crises (for example, European sovereign debt and migration), which took priority for obvious reasons, the large fragmentation of the European global health community was probably also an explanation for the decreased interest. Moreover, despite attempts to coordinate EU action on global health, influential member states wanted to maintain control of this domain.

Second, Speakman and colleagues¹ mainly write from a health security perspective. Although health security is certainly an important aspect of global health,⁴ it tends to focus on issues that pose most risks to the countries providing assistance and does not necessarily resonate with the priorities of the countries in need. An updated EU global health strategy should also advocate for shared responsibility for global public goods, in line with EU documents from a few years ago, which claimed that “the

EU should apply the common values and principles of solidarity towards equitable and universal coverage of quality health services in all external and internal policies and actions”.⁵ In the current difficult international environment, a so-called enlightened interest perspective might be the most viable approach to combine both perspectives. Meanwhile, looser forms of collaboration between European countries in specific health-related areas could be developed—coalitions of the willing, if you will. The She Decides Initiative by the Netherlands and Belgium provides an excellent example of this approach.

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For more information on the She Decides Initiative see <https://www.shedecides.com/>