



Health for All Now!
People's Health Movement



Sheet 1: adequate public funding

Health before profit...

... Let's change Europe!

We want a Europe that promotes adequate public funding of healthcare to guarantee quality care and adequate working conditions for healthcare professionals.

For our health, ensure sufficient funding for public and non-profit health services to guarantee a universal social protection system based on solidarity, offering accessible, high-quality services and sustainable, attractive working conditions for healthcare workers

The role of Europe

The 2008 economic crisis significantly changed the way European institutions intervene in national healthcare systems.

Initially, it was a matter of exchanging best practices. Today, it is a matter of making recommendations via the European Semester. The Commission can even go as far as to give a state formal notice to take decisions, with financial penalties for non-compliance. It makes European aid (e.g. 'Next Generation EU' recovery and resilience plan) conditional on budgetary control measures.

The recommendations on healthcare focus mainly on consolidating public finances. They advocate, for example, for a reduction in the cost of institutional care, cuts in the reimbursement of care and reductions in funding for retirement homes and hospitals. The stated aim is to improve the efficiency of public budgets.

European pressure is also prompting national governments to cut public spending on social protection (pensions, unemployment, health). Spending on public/collective services (education, childcare, care for the disabled, the elderly, transport, etc.) and even infrastructure is also being targeted. Europe is thus encouraging the introduction of commercial arrangements such as PPPs (Public Private Partnerships) which, in the long run, are an economic burden. These economic arrangements surrender public health needs to private interests.

At the same time, governments are reducing social security contributions, which are seen as a competitive disadvantage.



In many parts of Europe, **the Covid-19 pandemic** highlighted the difficulty for private structures to intervene in an emergency if they are not sure of receiving public financial aid (the aim of private intervention is profit). It has become clear that only direct public intervention can manage the health sector and intervene in a coordinated way with other policies to improve the determinants of health.

On this occasion, it was clear that Europe has decisive competencies in the field of public health.

War has broken out in Europe and European states have made increasing arms spending one of their priorities. The stifling of public intervention and the increase in military spending are the main arguments against population health objectives.

The health priority that emerged during the pandemic has now been largely undermined by the imperatives of war (energy costs, military spending, etc.) and the climate crisis. Budgets released as part of a recovery and resilience plan have been largely diverted from health objectives.

The consequences were immediate:

The inadequate funding of healthcare structures prior to the pandemic pushed many public and non-profit operators into budgetary difficulties. They are now being forced to adopt commercial practices: concentration, downsizing, shorter stays, selection of patients and pathologies, PPP., etc. This is clearly reflected in a sharp deterioration in access to quality care.

At the same time, the pandemic and its impact on healthcare systems have led to a further deterioration in working conditions for healthcare staff. The consequences are high (and often long-term) absenteeism (burn-out, etc.), but also a movement of workers to part-time work or other professional sectors. The reality of working in the field is no longer compatible with the elements that most often motivate healthcare staff (human aspect, global vision, etc.). The emerging negative image is further alienating young people, who no longer recognise these professions as ones with a future. The shortage creates a vicious circle of deteriorating working conditions and care.



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Our priorities

- The social protection needs of the population must be defined as a budgetary priority for Member States.
- Member States' budgets must be able to respond to the health challenges of today and tomorrow (ageing population, impoverishment, chronic diseases, meteorological conditions, etc.).

Alternative political choices are possible:

- Put European solidarity on the agenda in the form of **tax and social harmonisation** and the fight against tax evasion.

This will enable each Member State to finance its public policies. We need an economy that meets the needs of the majority rather than supporting the profits of a minority.

Introduce progressive tax systems on a European scale.

This includes :

- the harmonisation of corporate tax in all Member States and the introduction of minimum tariffs Europe must restrict the freedom to set up in business if this has the effect of jeopardising healthcare systems in weaker countries.
 - coordinated measures against the proliferation of 'patent boxes'. There is no evidence that tax advantages for large pharmaceutical companies encourage innovation. On the contrary, they encourage tax competition between Member States.
- **Impose Europe-wide health**, staffing and social protection minimum standards in line with needs
 - **Harmonise salaries and working conditions** at European level to allow genuine freedom of movement for professionals.