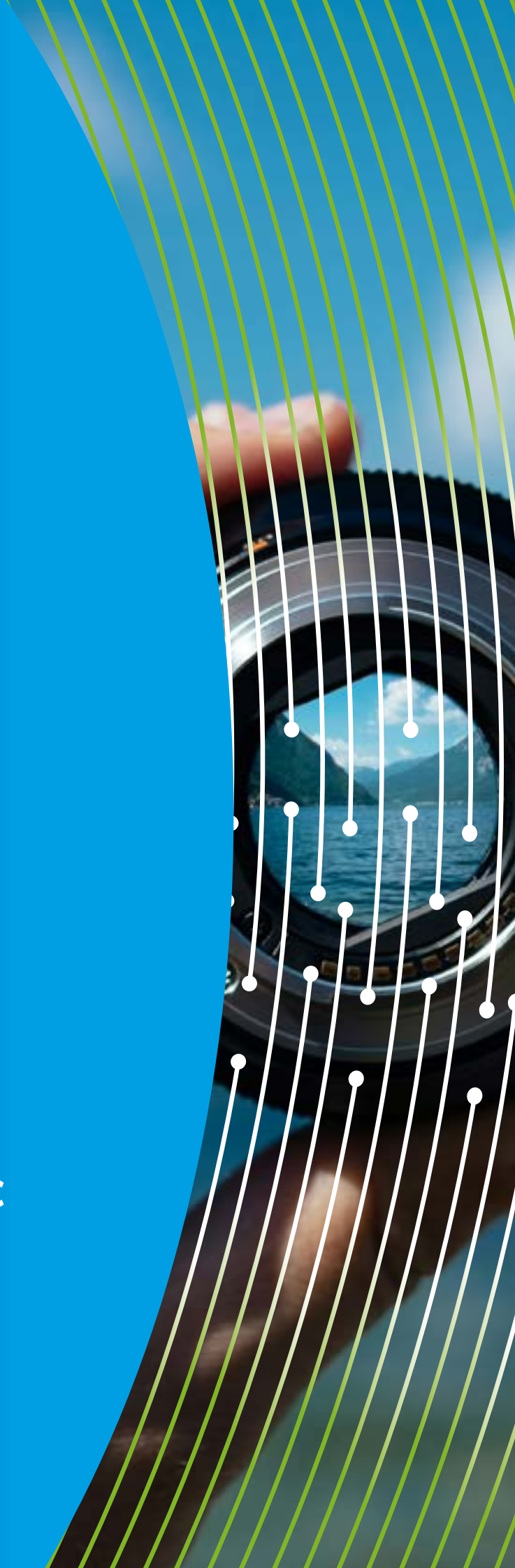
Euro Health Net



The future of public health in Europe

Summary Report

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EuroHealthNet is a not-for-profit European Partnership for health, equity, and wellbeing. With over 70 members, covering 31 European countries, our members include organisations, institutes, and authorities working on public health, health promotion, disease, prevention, and wellbeing.

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This short version of EuroHealthNet's 2023 Foresight report sets out the approach and results of the Foresight study of the EuroHealthNet Partnership, developed and coordinated by Bogi Eliasen, Patrick Henry Gallen, and José Manuel Jerez-Pombo from the Copenhagen Institute for Futures Studies, as well as Caroline Costongs and Anne Wagenführ-Leroyer from EuroHealthNet. The full Foresight report (December 2023) is available here: www.eurohealthnet.eu/foresight-2035

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Introduction

The European health landscape is undergoing significant changes. The digital transition as well as demographic and climate change influence social and health inequalities, and are bound to shape the future of public health in the region.

While the increased longevity presents potential opportunities, growing ageing populations and the rise of non-communicable diseases (NCDs), including mental health problems, threaten the sustainability of health and social protection systems. Emerging technologies, both within the context of the society-wide digital transformation as well as biomedical advances, may offer new opportunities to improve population health, but also pose substantial challenges including the risk of a digital divide. In addition, the reality of climate change and its indisputable impact on public health demands a holistic, whole-of-society approach, involving health and non-health stakeholders to work together to pursue planetary health and ensure that environmental impacts do not exacerbate social and health inequalities.

Health promotion and disease prevention must be at the core of these changes, to ensure the most efficient and equitable use of limited health resources, including financial and human resources. Moreover, new emerging policy frameworks that approach health holistically within a wider societal context have the potential to change the way that health policy – and public policy as a whole – is practiced. The transitions of our societies and related policy responses require public health stakeholders to foresee and plan in the long-term, establishing a basis for action that can enable healthier societies.

To this end, EuroHealthNet – in collaboration with the Copenhagen Institute for Futures Studies – has conducted a Foresight study with the participation of its members, Executive Board and other selected stakeholders, to collect insights and identify risks and opportunities. We aim to bring these insights into EU level debates on the new EU Strategic Agenda 2024-2029 and European Health Union (EHU), as well as relevant WHO policy processes.

About this Foresight Study

The focus of this Foresight study was to investigate the role of public health by 2035 in achieving health equity through health promotion and prevention, in the context of the digital and green transition.

The multi-round study ran from June to November 2023. It consisted of a workshop, a kick-off meeting, two rounds of surveys using the Delphi method, and a final backcasting expert panel. The Foresight study involved 35 experts across Europe and covered six themes as outlined below.

The study explored:

- Identification of the greatest challenges and opportunities;
- Prioritised actions for addressing challenges and opportunities;
- Insights for identifying health priorities towards 2035;
- Identification of key trends and developments in the future health landscape; and
- Alignment on the role of the EU and other key institutions in the future health landscape.

The six themes of this Foresight Study are:

- Public health policy and governance
- Public health financing and spending
- Sustainability and the green transition
- Health promotion and disease prevention
- Equity and society
- Digitalisation in public health

Summary of EuroHealthNet's Foresight Study's main outcomes

Respondents identified several **key public health challenges in Europe for the year 2035.** These challenges encompassed persistent inequalities, (unhealthy) living conditions, the rise in chronic diseases and mental health problems, the digital transition, as well as demographic change and climate change.

The **most important values that will continue to be central to public health in Europe in 2035,** identified by respondents, were:

- Equity and inclusivity;
- Transparency and trustworthiness;
- Health promotion and prevention;
- Effectiveness and evidence-based approach;
- Community engagement and collaboration;
- Sustainability and responsibility.

Theme 1:
Public health policy and governance

Respondents acknowledged the **persistence of health inequalities** in Europe, with factors such as income, education, and access to healthcare influencing disparities. They emphasised the need for targeted policy changes and interventions to address social determinants of health and reduce health inequalities. Collaborative efforts among policymakers, healthcare and public health professionals, and communities were deemed essential to achieving meaningful change.

There was a large consensus amongst experts that in 2035:

- **Public health agencies** will have to engage in **more aggressive competition** against other public agencies for attention and resources from political decision-makers (80.6% found this very likely).
- The **European Union** will have gained more comprehensive **competencies over the health policy** domain (71% found this (very) likely).
- Political polarisation, a **lack of public trust** in public institutions and among society, as well as the pervasive spread of **disinformation**, will have made achieving public health goals in Europe much more difficult (77.4% found this (very) likely).

The Economy of Wellbeing: a standard in 2035?

Respondents were very much divided on the question of whether the Economy of Wellbeing[1] approach will have become standard in the policymaking processes of all European countries by 2035. While 54.8% considered it to be (very) likely, 45.2% considered it to be unlikely.

The study points to **generating political will as a significant challenge** when implementing the Economy of Wellbeing. Opposition from entrenched interests and market individualism, compounded by short-termism and the slow pace of change often observed in economies, were seen as obstacles. Broader political trends, including populism, anti-globalisation, and political polarisation, may also undermine a future Europe-wide implementation.

Theme 2:
Public health financing and spending

Finding sustainable financing solutions that balance the interests of the public and private sectors was seen as essential. Respondents highlighted **concerns about the sustainability of public health financing**, particularly due to budget constraints and competing priorities. A large majority (77.4%) of experts did not expect that in 2035 European governments would spend as much on health promotion and prevention as on treatment.

In this context, the **need for strategic allocation of resources and innovative funding** to support public health initiatives was emphasised. The potential for private sector involvement in public health financing was seen as an opportunity but also raised **ethical considerations**.

Public health financing models in 2035: the same or different?

Financing models for public health were a topic of debate, with discussions around alternatives such as social impact bonds, health insurance, and taxation. Respondents were very much divided on the question of whether, by 2035, public health financing models in Europe will have remained the same or very similar to how they were in 2023. With 35.5% 'somewhat agreeing,' 35.5% 'somewhat disagreeing,' and 22.6% 'neither agreeing, nor disagreeing.' This could partly be explained by the heterogeneity of European countries and systems, as well as political and economic uncertainties.

Respondents identified **generating political will as a significant challenge** when implementing new public health financing models. Ways to overcome this included limiting the scope of implementation, for instance, through pilot programmes that may be upscaled later.

Another example is through dual track approaches that combine traditional and innovative financing and incentive models.

The **most attractive opportunities** for new financing models identified by participants were increased **taxation for health**, such as 'sin taxes' (taxes on health-harmful products such as sugar and alcohol), and **alternative procurement** with social, health, and environmental objectives.

1 The Economy of Wellbeing is an economic model that benefits people and the planet, and that ensures human dignity and fairness. www.eurohealthnet.eu/economy-of-wellbeing

Primarily health outcome driven incentive structures in 2035?

There was also ambiguity on the question of whether, in 2035, key stakeholders will have managed to shift incentive structures in European health systems from being primarily economically driven to primarily health outcome driven. (35.5% answered 'neither agree nor disagree.')

Public awareness campaigns, political will, and collaborations between the public and private sectors were proposed as tools to drive this shift. However, the **influence of powerful commercial interests** and the need for cultural and societal change were seen and still remain significant barriers.

Theme 3:
Sustainability and the green transition

Environmental health challenges such as climate change, environmental degradation, and biodiversity loss were identified as significant concerns for public health. Respondents highlighted the interconnectedness of climate change, planetary health, and population health.

They emphasised the need to **integrate environmental sustainability into public health policies and practices, as well as research**.

There was a large consensus that by 2035:

- There will be **EU legislation** for monitoring and evaluating the **ecological footprint of health system activities** (80.7% found this (very) likely.)
- There will be comprehensive **EU legislation** and guidelines for the **management of medical waste** (87.1% found this (very) likely.)
- A core function of public health will be **applying the 'One Health' approach** (e.g., improving environmental sustainability and resilience through more preventive interventions, enabling behavioural change in populations, and advocating for holistic health policies) (70.6% found this (very) likely.)

A green transition that benefits health by 2035?

However, there was major uncertainty about whether by 2035, the green transition will have led to significant and measurable improvements in population health, planetary health, and health system functionality (56.7% found this scenario likely, while 40% found it unlikely).

A very large majority of respondents identified **economic interests**, such as those from large multinational companies, **conflicting with environmental and health goals** as the biggest challenge. A majority also believed a green transition that improves health outcomes was hindered by a lack of political will.
For long-term sustainability, it was seen as essential to mitigate climate change and adapt to its already present effects, as well as promote a Wellbeing Economy that integrates the health-environment link to economies.

Respondents considered **major policy shifts**, as well as shifts in **public awareness and behaviour**, to be **crucial catalysts** for the green transition to drive significant and measurable improvements in population health, planetary health, and health system functionality. It will require a strong public consensus backed by the necessary financial commitment to accelerate action and achieve current objectives.

Collaboration between countries and across sectors, including urban planning, transportation, energy, and food systems, was **recommended** to promote healthier living environments and mitigate and adapt to environmental risks. Strategies included increasing access to green spaces, improving public transportation, and promoting sustainable behaviours to create a more resilient and ecologically balanced society.

Theme 4:
Health promotion and disease prevention

Respondents recognised the significance of health promotion and disease prevention strategies in **reducing the burden of diseases**. They emphasised the need for comprehensive and multisectoral approaches that address lifestyle factors, mental health, and social determinants. Strategies included enabling healthy behaviours, raising awareness, and integrating health promotion into education and workplaces.

There was a large consensus among experts that in 2035:

- **Public institutions like schools** will play a much more active role in promoting healthy behaviour among populations than they do today. (83.9% strongly or somewhat agreed.)
- Health promotion efforts will focus predominantly on enabling behavioural change and healthy choices through **healthy living environments**, financial incentives, etc. (77.4% strongly or somewhat agreed.)
- Prevention strategies that **target underlying social, economic, and environmental factors** will be a primary focus of public health engagements in all European countries. (71% strongly or somewhat agreed.)

A majority of the experts also agreed—but to a lesser extent—that by 2035:

- The European Union will have adopted new legislation to better monitor and regulate **commercial determinants of health**, e.g., alcohol sales and packaging, marketing of fast and processed food (67.8% strongly or somewhat agreed.)
- **Whole-of-system approaches to mental health** will be a fundamental aspect of public health activities in Europe (61.3% strongly or somewhat agreed.)

Population-wide early screening for NCDs and mental health: a standard by 2035?

There was some ambiguity on the question of whether population-wide early screening for all common non-communicable diseases (NCDs) and mental health will be a standard feature of health systems in European countries by 2035. While 45.2% 'somewhat agreed' with this statement, more than a third (38.7%) neither agreed nor disagreed.

Complementing wider health promotion approaches across sectors and early screening for NCDs and mental health was seen as valuable. Wearable devices, Artificial intelligence (AI) systems, and advancements in technology will probably play a role in early screening.

However, respondents emphasised that the approach **must be evidence-based and ethically sound**. More research is needed to produce evidence and identify the most effective approaches, which would in turn improve the use and access of technologies and data, create harmonised screening protocols, and foster EU-wide collaboration and knowledge sharing.

Regarding the main enabler of improved early screening, the focus on prevention by both policymakers and medical professionals clearly stood out. Regarding early **screening for mental health, the pervasive stigma is still an obstacle** to the standardisation of early screening measures. Some experts warned not to overlook prevention and risk factors in favour of early screening. Finally, **heterogeneity in health infrastructure** and policies in Europe makes developing a common European process difficult.

Theme 5:
Equity and society

Respondents highlighted the impact of socioeconomic determinants on health inequities, emphasising the need to tackle issues such as **income inequality and social exclusion**. There were calls for policies that prioritise populations in vulnerable situations, enhance social inclusion, and address the root causes of health inequities. Collaboration among various sectors and stakeholders was considered essential to achieve equitable health outcomes.

By 2035, equity surveillance and integration of equity in health policies can be expected to have been improved but work on the underlying structural drivers will remain a major challenge. Respondents referred to the **multi-facetted causes** such as the increase of the 'working poor' and its impact from an early age, the changing 'world of work' and risk of a two-tiered society, political sensitivities of redistribution, inequalities in increased impacts of environmental degradation and climate change, ageing, and migration.

An overwhelming majority of 93.6% of the experts found it (very) likely that **in 2035 increasing socioeconomic inequality will be the greatest challenge** to achieving goals related to health equity in Europe.

93.4% of the experts found it also (very) likely that **in 2035 'brain drain' and** acute workforce shortages in some countries' health and care systems **will be commonplace** due to aggressive, cross-border competition for personnel.

While a large majority of 77.4% estimated it to be (very) likely that the **privatisation of health and care services** will **become more** prevalent in Europe by 2035**, an overwhelming majority of 90.3% found it (very) unlikely that this scenario would markedly improve population health outcomes overall.**

Reasons highlighted were the continued heavy workloads and inadequate salaries, particularly for professionals working on the front lines. These are conditions that incentivise the flight of professionals from public hospitals, further worsening the problem of understaffing. In order to overcome this by 2035, respondents mentioned the need to value the work and wellbeing of health professionals, support countries that experience 'brain drain,' adopt international regulations, and increase investments in healthy ageing to prevent care dependency and reduce demand. healthy ageing to prevent care dependency and reduce demand.

The hope of several respondents was that, by 2035, policymakers will have realised that strong public health and care services are necessary to safeguard access and quality for all and achieve social justice and health equity.

Theme 6:
Digitalisation in public health

Respondents had **mixed views on digitalisation in public health and the role of AI systems**. They recognised the potential of digital health to enhance healthcare delivery and patient engagement. Digital health literacy was emphasised as essential for effective health interventions.

A large majority of experts were confident that **by 2035, public health professionals will have sufficient levels of digital literacy** and core competence (e.g., critical thinking and problem solving) to navigate/adapt to new technologies. (80.6% (strongly) agreed.)

At the same time, digital inequalities were highlighted as potential barriers to accessing health services, with efforts needed to bridge the digital divide and ensure equitable access. There was a large consensus among experts that in 2035, digitalisation of health systems will have created **new inequalities that divide digitally literate and digitally illiterate populations**. (87.1% (strongly) agreed.)

A majority of 67.8% of the experts believed that the use of AI systems would be standard in most aspects of public health in all European countries in 2035. However, several of them expressed concerns about ethical implications and unequal access—a challenge common to all digital tools. A majority of 60% of the experts (strongly) agreed with the statement that the l**ack of internet access will continue to pose significant barriers to accessing health services** in 2035.

Full implementation of the European Health Data Space by 2035?

Experts were unsure whether the European Health Data Space (EHDS) will have been implemented by 2035 and will have increased access to protected primary and secondary health data, resulting in more agile, precise, and data-driven approaches to public health in Europe. While 40% (strongly) agreed with this statement, another 40% of the experts neither agreed nor disagreed.

Experts most often identified **variations in data collection infrastructure, data privacy, and security concerns** as key challenges. Respondents also referred to the challenges of providing dedicated digital literacy training to public health professionals and updating role descriptions. The full implementation of the EHDS across diverse European countries by 2035 requires these challenges to be addressed.

The essential enablers that were identified were demonstrating the clear benefits of the EHDS to stakeholders, and following a balanced adoption across the EU supported by EU funding.

Additionally, some key considerations for the success of an EHDS were to address individual and societal aspects, **build trust to share data**, which varies from country to country, by ensuring secure and responsible access, and **foster digital inclusion**, though 2035 was seen by some as overly optimistic.

Main outcomes from the Backcasting exercise

In an online Foresight Expert Panel, participants had the opportunity to review and react to the results of the two Delphi rounds, as well as participate in a backcasting exercise. Experts explored different visions for 2035 and discussed the intermediary concrete actions that will be necessary to reach them. The visions for 2035 were based primarily on the results of the Delphi survey. Although various topics were addressed, there were some **common themes where action could already be taken today**.

Firstly, there was an emphasis on the **importance of equity and the reduction of inequalities in health and wellbeing**. Equity was seen as a fundamental principle in public health, and various strategies were proposed to achieve it, including addressing social inclusion, promoting fair access to resources and services, and improving child health.

Secondly, the experts stressed the **need to intensify intersectoral collaboration** through dedicated platforms and a **holistic approach to public health**. They advocated for partnerships between various government ministries and agencies, such as closer collaboration between ministries of finance and health, as well as engagement with civil society, the private sector, and local communities. This collaborative approach was seen as crucial for addressing complex public health challenges.

Thirdly, digitalisation and technology play a significant role in all areas. Experts recognised the **potential of digital tools**, AI systems, and data in advancing public health goals, whether it is in monitoring and evaluation, promoting health literacy, or supporting evidence-based decision-making. Success in this area **depends on addressing digital literacy and training** the health workforce.

Finally, experts highlighted the interconnection between environmental and human health and the importance of **taking a more sustainable and environmentally friendly approach to public health**. This includes establishing living in a healthy environment as a right, gathering data and evidence, and developing accountability mechanisms.

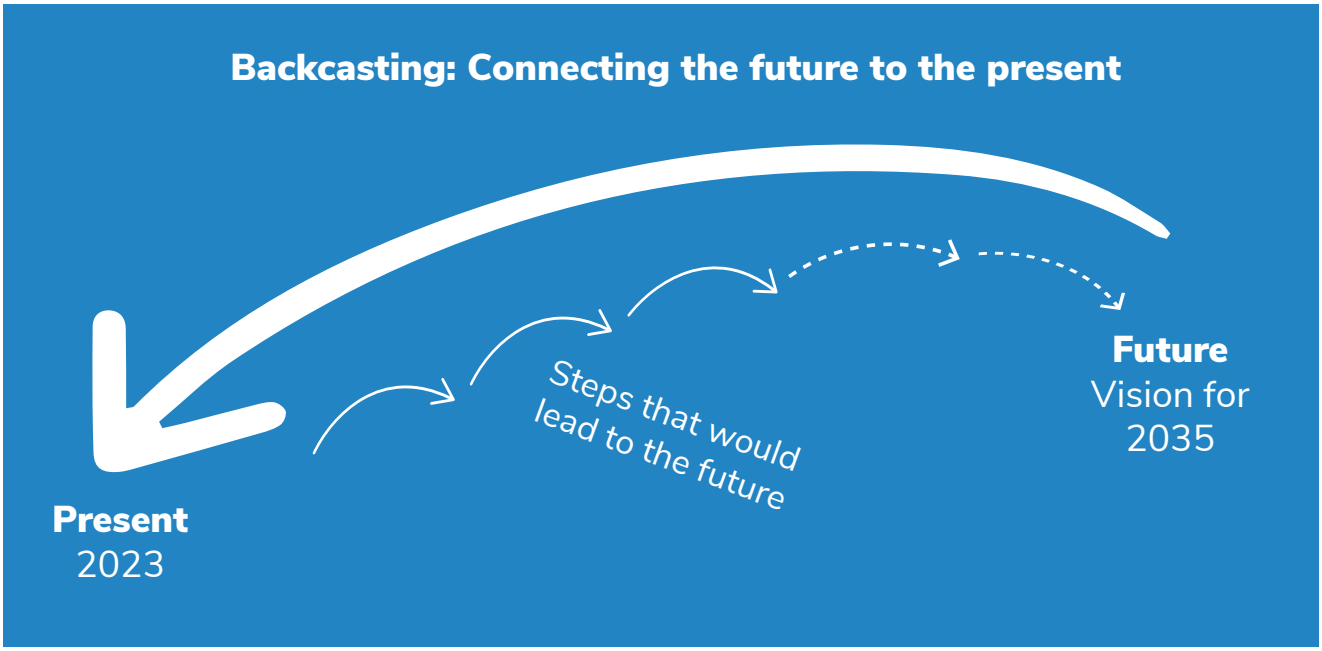

Figure 1: the Backcasting process

Three overarching recommendations

EuroHealthNet's Foresight study has confirmed some known trends on the future health landscape in Europe and revealed new ones, delving deep into the dynamics that may shape public health. The study led to important **calls for action in the six identified areas**, which are **supported by three overarching recommendations**. These must be taken forward urgently if we are to achieve better and more equitable health outcomes for all by 2035. Simultaneously, we need to navigate, respond, and mitigate the multiple challenges that we face today and in the future that were identified in this Foresight study.

The three overarching recommendations are:

1. **Generate political will** for health and wellbeing for all through a robust evidence base, new narratives, and participatory governance, as well as supporting community-based approaches, thereby shifting societal values, and reducing demand for health and social care services.
2. **Advocate for Wellbeing Economies**, which will facilitate new economic and financial models for health promotion and prevention within and beyond health systems, align incentives, and foster multi-stakeholder cooperation, including with the private sector, while tackling the commercial determinants of health.
3. Leverage digital, AI systems and other technological, biomedical as well as social innovations, while **applying equity impact assessments** and **exploring new health promotion and disease prevention approaches**. This new approach should complement population public health and policies on the social and environmental determinants of health.

Calls to action for public health in Europe

Based on the results from EuroHealthNet's Foresight study, public health stakeholders and decision-makers across Europe are called upon to address the following.

Public health policy and governance towards 2035

- Build consensus around public health objectives that give priority to health equity and wellbeing, rather than limited economic interests.
- Establish mechanisms to align economic incentives with health, social, and environmental objectives and restore trust in institutions.
- Follow a collaborative approach that brings together different sectors and stakeholders from the public, private, and civil society sectors, locally, nationally, and across the EU.
- Foster evidence-based decision-making and generate political will by developing capacity and allocating resources to the generation of evidence and communication on public health.
- Conduct Europe-wide studies that seek to identify effective public health policies and promising practices as well as common principles to transform health systems and other settings (such as local and regional communities).
- Encourage EU coordination on the Wellbeing Economy through a dedicated European Commissioner, a dedicated group in the European Parliament, and broadened EU health competences.

Public health financing towards 2035

- Focus on cross-sectoral spending for health promotion and prevention as well as health equity, thereby reducing the burden on health and social care services.
- Shift incentive structures in European health systems to health outcome-driven systems by developing and demonstrating evidence of impact.
- Investigate and apply pro-health taxes aimed at enabling healthy behaviour and sustainable consumer choices.
- Increase collaboration between the ministries of finance and health but also other ministries (e.g., education) to ensure comprehensive implementation of health policy.
- Explore the validity of new financing models through pilots in limited geographies or populations.

A sustainability and green transition towards 2035

- Develop the necessary evidence that demonstrates the importance of the green transition for population health and wellbeing.
- Develop policies that ensure the green transition, include indicators of population health, and utilise health impacts to drive the green transition.
- Introduce mandatory health, equity, and environmental impact assessments for new policies, products, and services.
- Spend the EU budget only for products, services, projects, etc. that are compliant with its green and sustainable objectives.
- Encourage the greening of the supply chain and public procurement procedures aimed at achieving social, health, and environmental objectives.

Health promotion and prevention towards 2035

- Advocate for a Wellbeing Economy approach, that benefits people and the planet and ensures peace, human dignity, equal opportunities, and fairness.
- Prioritise health promotion and disease prevention.
- Better monitor and regulate commercial determinants of health at EU and national levels.
- Enable healthy behaviours for all, raising awareness and integrating health promotion into education and workplaces.
- Investigate effective and ethical approaches for early screening of non-communicable diseases and mental health across the social gradient.
- Explore personalised approaches to prevention, leveraging advancements in data, AI systems, digital health, and biomedical research to tailor preventive interventions to improve health.

Equity and society towards 2035

- Ensure that policies prioritise populations in vulnerable situations, enhance social inclusion, and address the root causes of health inequalities.
- Offer affordable and sustainable consumption and mobility options, and targeted support for people in vulnerable situations.
- Encourage the further implementation of the EU Child Guarantee to reduce inequality and poverty experienced by children, and support a specific focus on health promotion in schools.
- Step up action on childhood obesity and increase health literacy across the lifecourse.
- Strengthen public universal services, and closely monitor the quality and impacts of private services through health equity impact assessments.
- Increase the visibility of health inequality issues in the media and on social media.

Digitalisation in public health towards 2035

- Embed (health) equity into the digital transformation and digital policymaking, for instance by monitoring equity impacts of digital policies.
- Ensure digital access and inclusion and make links between digital and social innovation.
- Promote digital health literacy and build a public health workforce that has digital and AI system competences.
- Support the EU wide harmonisation of data collection practices and access to the necessary technologies.
- Support the implementation of the European Health Data Space by collaborating with EU institutions and across European borders, identifying challenges and opportunities.

Next steps

The EuroHealthNet Partnership will take forward the three overarching recommendations as well as the more detailed calls for action for public health in Europe, feeding into local, national, European, and international policymaking processes. These include the **renewal of the EU Institutions in 2024,** as well as policy debates related to **WHO/Europe** and global action, such as the **fourth high level meeting of the UN General Assembly on the Prevention and Control of NCDs in 2025** and the review of the **UN Agenda 2030** and **Sustainable Development Goals**.

We will do that by contributing where relevant, for example, to discussions on the future of the **European Health Union (EHU)**. While the EHU focusses on healthcare priorities, the health workforce, the security of medicine supplies, and preparedness strategies, its agenda must be broadened to include strengthened investments in public health and wellbeing, and cover actions such as those called for in the six identified themes of the EuroHealthNet Foresight Exercise.

In addition, EuroHealthNet will provide input to debates in **multi-sectoral settings** as part of the **EU Strategic Agenda 2024-2029**, highlighting the co-benefits for health of a strong Social Europe, the future of the European Green Deal, the Education Area, etc. Given the high costs of inaction, we require the intersectoral engagement of ambitious public health actors, from local to global levels, highlighting the need for **systemic change** and a new overarching vision such as the **Wellbeing Economy**. Only then will we be able to move towards healthier societies and public health for all in 2035.

Co-funded by the European Union

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