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Supported by: MEP Kateřina Konečná (GUE/NGL, Czechia), MEP Brando Benifei (S&D, Italy)

## Strengthening the mandate and capacity of the European Centre for Disease Prevention and Control (ECDC)

### Time to expand the remit to cover chronic (non-communicable) diseases

#### Executive Summary

*“For me, it is crystal clear – we need to build a stronger European Health Union.” President Von der Leyen – State of the Union address 16<sup>th</sup> September 2020*

One of the first steps in building a stronger health Union is to have a stronger European Centre for Disease Prevention and Control (ECDC). If Europe is to focus on greater strategic autonomy and be a geopolitical force it **needs a world class Centre for preventing and controlling diseases.**

President Von der Leyen announced a legislative proposal to extend the ECDC mandate on the 16<sup>th</sup> of September 2020.

Health is a shared responsibility between our Members States and the EU. For this shared action to work effectively certain elements such as data and surveillance are best coordinated in a dedicated agency. It makes sense to therefore support a more effective ECDC that is all inclusive and that can present information which is relevant for health authorities and health care professionals. **One of the lessons of the pandemic is that the Centre needs to be able to cover non-communicable disease information if and when necessary.** Vital indicators on key diseases are currently missing hampering collective progress in the EU.

The solution must be to **bring all the disjointed data together in an integrated manner.** We need an effective ECDC to be able to display in a one stop shop the most important health data our essential healthcare workers need on both acute and chronic diseases. Our investment has always been in silos. Let's work together so that we have a **centre that compliments the work at national level**, the agency needs to be empowered to include the contribution of the best and brightest in Europe especially on chronic and acute disease links and **it needs to be able to deliver reliable information to allow priority setting, adjusting of strategies, and the measurement of results**, thereby **maintaining Europe as the healthiest region in the world.**

#### BACKGROUND

The European Centre for Disease Prevention and Control (ECDC) is responsible for strengthening the European Union's defense against infectious diseases, in particular to “identify, assess and communicate current and emerging threats to human health from communicable diseases<sup>1</sup>. Since its creation in 2005, the ECDC has made a significant contribution to public health across Europe with its ability to collect, evaluate and disseminate relevant independent scientific and technical data; provide well-established, high-quality expertise; and assist in the coordination of relevant national bodies to maintain EU-wide disease surveillance and early warning systems.

The latest independent evaluation of the ECDC<sup>2</sup> (September 2019) carried out in accordance with the ECDC's Founding Regulation assessed the potential extension of its mandate to cover areas beyond communicable diseases, including non-communicable diseases<sup>3</sup>. The COVID-19 pandemic has stimulated further these discussions and prompted all EU institutions to consider gaps and possible scenarios to strengthen the Agency.

<sup>1</sup> Regulation (EC) No 851/2004 of the European Parliament and of the Council of 21 April 2004 establishing a European centre for disease prevention and control. Official Journal of the European Union. L 142/1. Available at: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32004R0851&from=EN>

<sup>2</sup> Third independent external evaluation of the ECDC in accordance with its Founding Regulation. Final Report by PWC. September 2019. Available at <https://www.ecdc.europa.eu/sites/default/files/documents/third-independent-external-evaluation-of-ecdc-report.pdf>

<sup>3</sup> Idem 2

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Indeed, while the ECDC has provided invaluable work to date, its capacities and remit are limited, notably compared to similar institutions such as the Robert Koch Institute in Germany and its counterpart in the United States the CDC. However, the Agency has the potential to bring value in other areas of public health, notably in the prevention and control of chronic (non-communicable) diseases across Europe. This came as a key conclusion of the 2019 evaluation, which found that “the ECDC is a suitable candidate for increasing/centralising such activities [nb: in health information, monitoring, determinants, behaviour and promotion] in an existing EU agency”<sup>4</sup>. The analysis recommended to conduct an impact assessment to compare the options of: no change, the extension of ECDC’s mandate, or establishing a new EU Agency with a specific mandate; and outlined that the risks identified in a SWOT analysis could be “resolved through legislative means”<sup>5</sup>.

## RATIONALE & RELEVANCE

### 1. There is strong scientific evidence of the correlation between chronic diseases and infectious diseases

The segregation of chronic diseases from infectious diseases undermines efforts undertaken for an effective response to the diseases. Indeed, while the epidemiology of infectious disease and chronic disease are typically treated as two separate disciplines<sup>6</sup>, it is inefficient and difficult to address one without the other: there is extensive evidence showing their links and interactions, notably since many chronic diseases have an infectious origin, and as they share common social determinants of health, such as housing and socioeconomic status<sup>7</sup>. This relationship has been further exemplified by the COVID-19 pandemic<sup>8</sup>, with people with pre-existing chronic diseases being at higher risk of death or severe complications from the virus<sup>9</sup>. This statistic was notable enough for the ECDC to publish a leaflet that gave specific guidance for people with chronic diseases and their families to avoid or manage a COVID-19 infection<sup>10</sup>. In order to truly protect the health of Europeans, there needs to be a greater control of chronic diseases as well as further integrated responses to communicable and non-communicable diseases including by connecting epidemiology efforts and thus ensure better preparedness to manage present and future health challenges.

### 2. Chronic diseases are a major challenge in all EU countries, there is a need to reinforce EU-level action on prevention and management; as well as data collection

All EU countries are facing a rising prevalence of the major chronic diseases. COVID-19 demonstrates even further the urgency to reinforce the prevention and control of chronic diseases across Europe<sup>11</sup>.

The 2019 evaluation of the ECDC had already identified the need to strengthen the EU-level work on non-communicable diseases (health information, health monitoring, health promotion), and to provide a more sustainable structure for these activities, pointing that the ECDC could be suited for this task based on e.g. infrastructure, public health expertise, and reporting<sup>12</sup>. In particular, the review showed that the ECDC could respond to “the need for comprehensive evidence-based coverage of population health and burden of disease in an aging European society and provide information on the differences between Member States and the related policy needs for interventions to improve health, quality of life and well-being of EU citizens”. It also highlights that “ECDC’s tasks and activities should be expanded to include best practices and benchmarking in terms of coordinating between health promotion and health behaviour”, given that “more structured and coordinated

<sup>4</sup> Idem 2

<sup>5</sup> Idem 2

<sup>6</sup> Choi B, Morrison H, Yan Y-P, et al. Bringing chronic disease epidemiology and infectious disease epidemiology back together. *J Epidemiol Community Health*. 2007 Sep; 61(9): 802. doi: 10.1136/jech.2006.057752

<sup>7</sup> Idem 6

<sup>8</sup> Horton, R. (2020). Offline: COVID-19 is not a pandemic. *The Lancet*, 396(10255), 874. doi: 10.1016/s0140-6736(20)32000-6

<sup>9</sup> Kluge H, Kremlin W, Ripplin H, et al. Prevention and control of non-communicable diseases in the COVID-19 response. *The Lancet*. Published May 2020. DOI: [https://doi.org/10.1016/S0140-6736\(20\)31067-9](https://doi.org/10.1016/S0140-6736(20)31067-9)

<sup>10</sup> Information on COVID-19 for people with chronic diseases, their family members and care givers. ECDC. Available at: [https://www.ecdc.europa.eu/sites/default/files/documents/Leaflet-Covid-19\\_chronic\\_diseases.pdf](https://www.ecdc.europa.eu/sites/default/files/documents/Leaflet-Covid-19_chronic_diseases.pdf)

<sup>11</sup> Idem 9

<sup>12</sup> Minutes of the Forty-sixth Meeting Stockholm, 18-19 June 2019. ECDC Management Board. Available at: <https://www.ecdc.europa.eu/sites/default/files/documents/minutes-forty-sixth-management-board-meeting.pdf>

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approaches to health promotion are necessary". Further, ECDC already covers health determinants through some of its existing activities under Disease Programmes.

In 2012, the EU Commission mandated a report on data, indicators and available information on the prevalence of major chronic diseases in the EU<sup>13</sup>. It found that there was a significant lack of comparable and sustainable data on chronic disease prevalence. The availability and quality of data also varied enormously between EU member states. As stated in the document, health interview surveys, registries and epidemiological studies that include some form of health examination are important data sources. Without them, the EU is significantly impeded from successfully developing and evaluating health policy. The current lack of EU-level surveillance and comparable data on chronic diseases must be addressed, as without it, it is difficult to coordinate effective responses and to have a clear vision for future EU health policy.

### **3. The Agency's infrastructure and tools for surveillance are proven to be effective, its reputation and high quality expertise is recognized across Europe and globally**

The 2019 analysis of the ECDC concluded that "ECDC's tools for surveillance are effective for the collection, validation, analysis and dissemination of data and they promote harmonisation and coordination among Member States", despite the observed variations in member states' obligatory reporting. Expanding the existing infrastructure in the area of chronic diseases would provide a more permanent, centralised structure to data collection efforts in the field<sup>14</sup> (that are at present mainly based on cooperation between the European Commission and Member States or Joint Actions); and allow consistent and systematic surveillance.

As explained above, such a mechanism is missing for chronic diseases. This would support objectives under the European Health Data Space, in collaboration with the OECD and WHO.

Further, expanding the current tools to include chronic diseases indicators would also make sense due to the links between infectious diseases and non-communicable diseases.

In addition, the ECDC's existing experience, expertise and success in public health and in managing large networks of public health bodies in the EU and beyond; as well as its reputation for delivering high quality scientific advice are strong assets to expand the agency's current remit to other relevant areas<sup>15</sup>.

### **4. There is political and broader stakeholder support to the extension of the mandate**

The 2019 analysis outlines that a "large number of current stakeholders consider that it would be beneficial for ECDC to expand its work to cover non-communicable diseases, and especially those conditions that are closely linked to infections". It notes that "support is particularly high in the areas of health determinants, health information & monitoring, and health promotion".

Amid the COVID-19 pandemic, calls to empower and reform the ECDC have gained momentum. In a resolution of July 2020 on the EU's public health strategy post COVID-19, the European Parliament called for the extension of the ECDC competences to non-communicable diseases<sup>16</sup> and asked the Commission to propose a revised mandate that would significantly increase the ECDC's long-term budget, staffing and competences<sup>17,18</sup>.

<sup>13</sup> Information, indicators and data on the prevalence of chronic diseases in the European Union. RIVM. July 2012. Available at: [https://ec.europa.eu/health/sites/health/files/major\\_chronic\\_diseases/docs/eu\\_chronicdiseases\\_data\\_information\\_31072012\\_en.pdf](https://ec.europa.eu/health/sites/health/files/major_chronic_diseases/docs/eu_chronicdiseases_data_information_31072012_en.pdf)

<sup>14</sup> Idem 2

<sup>15</sup> Idem 2

<sup>16</sup> European Parliament resolution of 10 July 2020 on the EU's public health strategy post COVID-19 (2020/2691(RSP)). Available at: [https://www.europarl.europa.eu/doceo/document/TA-9-2020-0205\\_EN.pdf](https://www.europarl.europa.eu/doceo/document/TA-9-2020-0205_EN.pdf)

<sup>17</sup> Idem 16

<sup>18</sup> European Parliament resolution of 17 September 2020 on COVID-19: EU coordination of health assessments and risk classification, and the consequences for Schengen and the single market (2020/2780(RSP)). Available at: [https://www.europarl.europa.eu/doceo/document/TA-9-2020-0240\\_EN.pdf](https://www.europarl.europa.eu/doceo/document/TA-9-2020-0240_EN.pdf)

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Moreover, discussions at the informal meeting of health ministers on 16 July 2020 revealed the broad recognition of the need to strengthen the Agency and the assignment of additional tasks<sup>19</sup> and many countries referred to the importance of improving prevention and control of chronic diseases in the EU. Ministers asked the Commission to conduct an impact assessment that would be the basis for strengthening the ECDC in a legal proposal<sup>20</sup>.

## ROLE & RESPONSIBILITIES

With a mandate extended to chronic diseases, the ECDC could take a far more active role in public health:

5. centralise, analyse and interpret comparable data on chronic diseases and risk factors across Europe via a common surveillance system, intertwined with epidemiological surveillance for infectious diseases. This will provide vital data to inform public health policies and enhance effectiveness.
6. provide scientific advice to member states and EU institutions in the field of chronic diseases, assisting the work of the EU Steering Group on Promotion and Prevention of Non-Communicable Diseases; and complementing the guidance provided by WHO in the area.
7. contribute to the implementation of flagship initiatives of the EU, such as the Europe's Beating Cancer plan, in close cooperation with other EU institutions and international bodies.

Further, a single European coordination centre for cross-border health emergencies could also be a suitable future function for ECDC, since COVID-19 shows that there is a urgent need for a systematic response to health crisis situations, for example as hospital capacities, medication shortages, vaccines or scientific advice for governments are concerned.

**Article 31 of the ECDC's Founding Regulation provides for the possibility to "extend the scope of the Centre's mission to other relevant Community-level activities in public health<sup>21</sup>".** The COVID-19 pandemic highlights the need to expand ECDC's capacities beyond the current remit.

The ongoing discussions on the ECDC mandate provide a **window of opportunity to address one of Europe's major health challenges: the rising prevalence of non-communicable diseases.**

The most recent external evaluation of the ECDC already highlighted that the **"opportunities stemming from an extension of the mandate to the noncommunicable diseases are related to the expected increased sustainability and efficiency of EU-level activities in these areas** and the potential for link and synergies with ECDC's communicable diseases related work, that could also encourage more integration at national level<sup>22</sup>".

There is relevance in doing so to align the EU level approach to that of many public health institutes in the EU which already cover both communicable and non-communicable diseases.

**ECDC is seen as a natural actor to provide this work** due to its existing expertise, experience and pre-established networks amongst national public health authorities<sup>23</sup>.

<sup>19</sup> Informal Meeting of Health Ministers. 16 July 2020. Summary of the Presidency. Available at:

[https://www.bundesgesundheitsministerium.de/fileadmin/Dateien/3\\_Downloads/E/EU2020/Presidency\\_Summary\\_Informal\\_Meeting\\_of\\_Health\\_Ministers-16\\_July\\_2020.pdf](https://www.bundesgesundheitsministerium.de/fileadmin/Dateien/3_Downloads/E/EU2020/Presidency_Summary_Informal_Meeting_of_Health_Ministers-16_July_2020.pdf)

<sup>20</sup> Idem 19

<sup>21</sup> Regulation (EC) No 851/2004 of the European Parliament and of the Council of 21 April 2004 establishing a European centre for disease prevention and control. Official Journal of the European Union. L 142/1. Available at: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32004R0851&from=EN>

<sup>22</sup> Idem 2

<sup>23</sup> Idem 2