

Health crisis preparedness: Towards a meaningful whole-of-society approach

EPF's reaction to the European Preparedness Union Strategy & the Review of the implementation of the operations of the Health Emergency Preparedness and Response Authority (HERA)

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During a health crisis, **patients with chronic conditions** are particularly vulnerable. Patients tend to turn to patient organisations to find out how the health crisis may affect their condition. To better prepare patients for future crises, the authorities should coordinate with patient organisations so that the latter act as multipliers and relays for the public health authorities in their patient communities, and adapt the message to their therapeutic area.

In this respect, we share the view of the [European Preparedness Union Strategy](#) when it emphasises that the crisis response is currently driven by limited '**whole-of-society engagement**'¹. EPF shares the strategy's objective of encouraging a commitment from society as a whole and fostering a culture of preparedness and resilience. We suggest involving patient organisations in the development of related policies and in the dissemination of awareness-raising material. Patient organisations act as multipliers in awareness raising campaigns on public health threats and ensure that the content is relevant for the targeted audience. The COVID-19 pandemic taught us that public health officials need to keep communication channels open with patient organisations and involve them in their efforts to reach patients effectively. Too often, civil society engagement is deprioritised during crisis management and the public health response is weakened as a result.

In addition to training, we agree that **targeted communication** before and during a crisis needs to be improved. Ensuring consistent messaging and clear public communication strategies should be seen as an integral part of crisis preparedness and response. During the last pandemic, coordination between the authorities and patient organisations was limited. Almost half of the patients regretted the lack of clear information and communication². For instance, difficulties in accessing clear public health guidance were mentioned by more than two third of participants in a survey of the [PERISCOPE](#) project³. HERA could support the development of educational and training materials as well as templates for communication campaigns, in collaboration with other agencies, institutions and civil society organisations.

Finally, we support the adoption of an **EU Stockpiling Strategy**, as this is something we consider missing in the Critical Medicines Act proposed by DG Santé. Indeed, EPF is advocating to foster a EU coordinated system for stockpiling to avoid duplication, ensure consistency, and facilitate reallocation of stocks. Uncoordinated and

¹ Whole-of-society engagement is defined as “an inclusive culture of preparedness and resilience involving citizens, local communities and civil society, businesses and social partners as well as the scientific and academic communities”.

² [PERISCOPE, Horizon Europe, Analytical report on the welfare of patients suffering from chronic diseases during the Covid-19 pandemic](#)

³ [PERISCOPE, Horizon Europe, Analytical report on the welfare of patients suffering from chronic diseases during the Covid-19 pandemic](#)

non-evidence-based national stockpiling requirements create a risk of market fragmentation. The result is that patients in one country are denied basic access to a drug while another country has several months' supply of the same drug.

Yet we also notice the strong desire to move on from the pandemic, particularly with the need to address other pressing challenges confronting the continent, **we call the European Preparedness Union Strategy to give health a prominent place**. Nor must the need for flexible funding at EU level – described in the strategy, compromise sustainable and stable health funding at EU level. We must not forget the painful lessons learned from the COVID-19 pandemic: positive health outcomes require long-term, not fluctuating, investment. This is all the more true when we consider the new health threats we face, whether it is the steady increase in chronic diseases linked to Europe's ageing population, antimicrobial resistance or the effects of climate change on health.

❖ **EPF's positions as part of the Review of the implementation of the operations of HERA**

- EFF supports calls, despite the EU's limited competence in this area, for HERA's activities to be carried out more effectively by taking a comprehensive approach to public health, going beyond medical countermeasures, and more actively addressing issues such as shortages, allocation of human resources, environmental health and consistent communication to patients and health professionals about health threats.
- EPF supports HERA's future role in collaborative procurements, which we consider as critical to ensure better access to medicines for all patients in the EU, regardless of where they live.
- EPF supports HERA's work on facilitating clinical trials in times of crisis and as part of preparedness plans and is glad to contribute to this objective through the [PROACT EU-Response](#) project. Patient involvement in clinical research, including priority settings, supports participation and retention of patients and the development of products that meet patients' needs.
- EPF supports a strong and stable EU4Health Programme and regrets that budget cuts will affect HERA's activities, particularly in 2027.

About EPF

The European Patients' Forum (EPF) is an umbrella organisation of patient organisations across Europe and across disease areas. Our 80 members include disease-specific patient groups active at the EU level and national coalitions of patients representing over 20 countries across Europe. www.eu-patient.eu



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