

# Introductory remarks by Vice-President Dombrovskis at Citizens' Dialogue in Sofia

*Добър ден! Радвам се да разговарям с вас. [Hello. I am happy to discuss with you today].*

I'm very grateful for this opportunity to have this discussion and also to listen how people in Bulgaria see the European Union and the challenges we face, because it's important to constantly assess how we are doing, what is expected and can be improved, and how we can move forward.

And it is clear that Bulgaria wants to move forward. Its Presidency is steering the EU through now a vital couple of months. It is no coincidence that Bulgaria, your Presidency, stands for three very important "B"s: *бъдеще* [*budeshte = future*], budget and the Balkans, and we have important decisions to take in those areas, including indeed our future budget, the strengthening of the euro area, strengthening our Security Union and deepening our relations with our neighbouring countries, to name just a few.

One issue for Bulgaria is its membership of the euro area. And like the country where I come from, Latvia, we also asked this question after we went through a profound financial and economic crisis. We firmly opted for euro adoption, since we found it to be an anchor of economic and monetary stability. Eventually, we managed to go from crisis to euro accession in five years. Of course, it required engagement at all levels of government and ownership among social partners, among others. We had to overcome a number of fears and myths. We had to put in a lot of effort to ensure that prices are stable and do not rise as a result of euro introduction. And that is perfectly doable.

In fact, in economic terms, there are clear benefits of the euro area: it lowers barriers for businesses, it can reduce interest rates, it brings a positive impact on growth as a result of full integration into the single market, and stronger growth eventually leads to higher living standards in the country.

Politically too, euro membership puts countries at the very core of the European Union. So also through joining euro, Bulgaria will gain additional political influence.

As for the preparedness of Bulgaria, I would say the preconditions are there: since the inception of our single currency, the exchange-rate of the lev has been pegged to the euro; you can choose to have your bank savings in euro. So in many ways you are already with one foot in the euro area.

And the Commission is here to support you to get you with a second foot in the euro area as well. President Juncker has made it very clear: the EU wants

to support countries in their efforts to join the euro area. We stand with Bulgaria with this and we are ready to help you get ready for this. One issue is political support. But we also offer a new 'convergence facility' or, in other words, technical and financial assistance to make the adjustments needed. So there we can help countries to prepare and then prosper once inside Eurozone.

On the assessment of Bulgaria's readiness and we will publish our convergence report on 23rd of May. We see much strength in Bulgaria to have robust economic growth, way above EU average and solid fiscal policy, a balanced budget, one of the lowest public debt levels in the EU at 26% of GDP and going down, but of course there is still further work needed. For example, joining the euro also implies becoming part of the Banking Union, and in that sense there is further work in strengthening banking sector.

So to once again come back to my experience in joining the euro in Latvia, I can say that this road to the euro is maybe long and sometimes difficult. Sometimes it can be rocky. But it is a meaningful journey to make, because it mobilises minds and energy in the country to change it for the better and eventually to improve living standards of Bulgarians.

Thank you very much.

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## Questions & Answers: EU cooperation on vaccine preventable diseases

### **What are the benefits of vaccination?**

Vaccination is one of the greatest successes of public health. Before vaccines existed, many children would die young, or become crippled for life. In Europe, seasonal flu vaccination prevents around 2 million people from getting the flu each year. Worldwide, vaccination prevents 2.7 million people from contracting measles, 2 million from getting neonatal tetanus, and 1 million from getting pertussis (whooping cough) each year. Vaccination has also led to the eradication of smallpox, and the near elimination of polio.

Vaccines are a safe and effective way of protecting children and adults from serious illness and complications from vaccine-preventable diseases. They can prevent a disease from occurring in the first place, saving human suffering, and reducing healthcare costs. Vaccines protect not only you but others around you, provided that 'herd immunity' is reached. In the case of measles, diphtheria, tetanus and pertussis, a 95% coverage rate is required to protect the whole community.

### **Are vaccines safe?**

Yes. Despite the myths that have led to doubts amongst a growing proportion of EU citizens, an extensive body of research has proven the effectiveness and safety of vaccines. Reports of a link between the Measles, Mumps, and Rubella (MMR) vaccine and autism, for example, were based on a now discredited study. The EU has very strict rules for the market authorisation of vaccines. On average, it takes 12 to 15 years, including extensive clinical studies, to develop a vaccine. Once on the market, the European Medicines Agency continues to supervise a vaccine's safety, to detect, prevent and communicate any adverse effects.

### **Are vaccine-preventable diseases increasing in the EU?**

Several EU and neighbouring countries are in the midst of unprecedented outbreaks of vaccine-preventable diseases, due to insufficient vaccination coverage. Between 2016 and 2017, cases of measles more than tripled in the EU, bringing the total in 2017 to 14,000 cases. In the past 2 years, over 50 people have died due to measles and 2 from diphtheria. Furthermore, although the EU is currently polio-free, with falling vaccination rates, we run the risk that the virus will reappear on European soil.

Seasonal flu vaccination coverage in older age groups has also decreased in the past few years in the majority of EU countries, and the European Centre for Disease Prevention and Control estimates that 40,000 people in Europe – many of whom are elderly, die prematurely from complications from seasonal flu every year.

### **What are the key drivers of falling vaccination coverage?**

The first reason is vaccine hesitancy. Misconceptions about vaccination have shifted the public focus away from the benefits of vaccination, towards distrust in science and fear of possible side effects. While routine vaccination has led to a sharp reduction in vaccine-preventable diseases, it has also led to the severity of such diseases frequently being underestimated by citizens and healthcare workers alike.

A second challenge is the variation of vaccination policies and schedules between EU countries, which can be a particular obstacle to people who move between several EU countries during their lives. Variation in when vaccines are administered and the number of doses, for example, can cause confusion, and this can result in children not getting all the vaccines they need. Varying vaccine policies between countries can also lead to the perception that there are differences in opinion on the vaccines themselves.

Other factors that play a role in immunisation gaps include a lack of access to vaccines, vaccine shortages, challenges related to the research and development for new and existing vaccines, including unpredictable demand and insufficient motivation for industry to make the necessary investments in terms of financing and expertise, and constraints linked to public financing.

### **Why should we step up EU-level cooperation in this area?**

Infectious diseases such as measles, diphtheria and influenza are not confined within national borders. One EU country's immunisation weakness puts at risk the health and security of citizens across the EU. Given the cross-border nature of vaccine-preventable communicable diseases, and the common challenges faced by EU countries, there is a clear advantage to strengthening cooperation among all relevant sectors at EU level. Moreover, Member States themselves have requested intensified EU support, and stressed the need for common EU action and a more coordinated approach.

### **Why have you chosen a Council Recommendation as the instrument?**

Given that the organisation of vaccination programmes is a national competence, the Commission is proposing that Member States agree on a set of joint measures, in the form of a Council Recommendation. The proposal for a Council Recommendation on vaccine preventable diseases, accompanied by a Commission Communication on the policy rationale of acting together in this area, gives Member States flexibility and takes into account their history, practices and particular cultural challenges. It is also the best instrument for achieving the desired results.

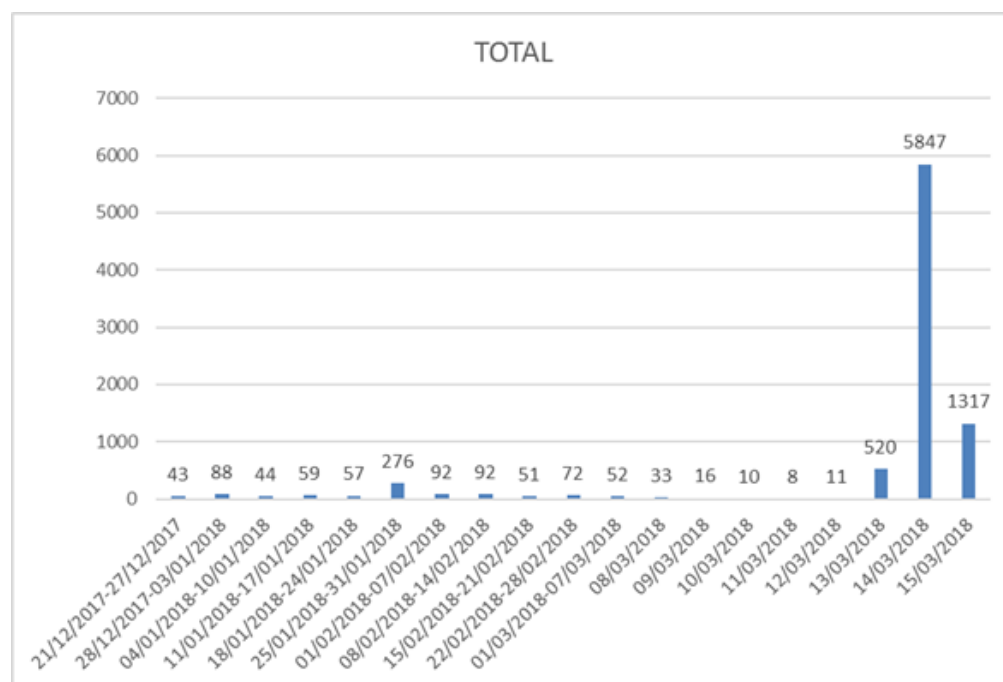
### **Who was consulted on the proposal and to what effect?**

The Commission consulted stakeholders and citizens, and organised a series of targeted face-to-face meetings with professional healthcare organisations, health NGOs, student organisations and the industry. The most support was for:

- EU and national authorities' support for healthcare professionals in advocating for vaccination and tackling hesitancy;
- scientific guidance and information from the EU and its agencies tailored to the specific circumstances of individual EU Member States;
- investment in R&D focusing on vaccine safety and effectiveness, with greater transparency and industry involvement.

The online consultation revealed citizens' lack of trust in the safety and effectiveness of vaccines as well as a lack of trust of public authorities and industry. For instance, 70% of the 8,688 citizens' replies, most of which were from France and submitted to the 12-week consultation within the same 24-hour period, chose 'no opinion' for all questions and submitted anti-vaccination comments. These replies suggest that powerful influencers greatly contribute to the current vaccine hesitancy in the EU that the Commission initiative intends to tackle as a key priority.

### Timescale and number of replies to online consultation



### What are the next steps?

The Commission's proposal will be discussed by the Council, with the aim of seeing it adopted before the end of 2018, with an immediate entry into force. Following this, every 3 years, the Commission will report on progress made in the implementation of the Recommendation. In addition the Commission will also produce a report on 'The State of Confidence in Vaccines in the EU', to monitor attitudes towards vaccination, in the context of the [State of Health in the EU](#) process.

### For more information

[https://ec.europa.eu/health/vaccination/overview\\_en](https://ec.europa.eu/health/vaccination/overview_en)

<https://ecdc.europa.eu/en/immunisation-and-vaccines>

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## [Vaccination: Commission calls for stronger EU cooperation against preventable diseases](#)

Today, the Commission is issuing a set of recommendations for how the EU can strengthen cooperation in the fight against diseases that can be prevented by vaccines. This follows President Juncker's call, in his [2017 State of the Union address](#), for action to increase vaccination coverage and to ensure that everyone in the EU has access to vaccines.

Commissioner for Health and Food Safety, Vytenis **Andriukaitis** said: *"Vaccination is one of the most powerful and cost-effective public health measures developed in the 20<sup>th</sup> century. As a medical doctor, I find it disheartening to witness children dying because of low uptake, vaccine hesitancy, or vaccine shortages. Infectious diseases are not confined within national borders. One Member State's immunisation weakness puts the health and security of citizens at risk across the EU. Cooperating in this area is in all of our interests. Protect our children, vaccinate!"*

Vaccination saves between 1 and 3 million lives worldwide every year. According to the World Health Organisation, vaccines will save 25 million more lives in the coming decade. And yet, according to [ECDC](#), several EU countries are facing unprecedented outbreaks of measles and a resurgence of other vaccine-preventable diseases due to insufficient vaccination coverage, and children and adults in the EU are still dying from these diseases.

The Commission's proposal focuses on 3 main pillars for action: tackling vaccine hesitancy and improving vaccination coverage; sustainable vaccination policies in the EU; and EU coordination and contribution to global health.

The proposal calls for 20 concrete actions by the Commission and Member States, including:

- Developing and implementing **national and/or regional vaccination plans** by 2020, including a target of at least 95% vaccination coverage for measles;
- Introducing **routine checks** of vaccination status and regular opportunities to vaccinate across different stages of life, for example in schools and workplaces;
- Presenting options for a common **vaccination card** that can be shared electronically across borders;

- Establishing a European **vaccination information portal** by 2019 to provide online objective, transparent and updated evidence on the benefits and safety of vaccines;
- Mitigating the risks of shortages by developing a virtual repository **EU data warehouse** with information on vaccine stocks and needs to facilitate voluntary exchange of information on available supplies and shortages of essential vaccines;
- Equipping all **healthcare workers** with the necessary training to confidently deliver vaccinations and address hesitant behaviours;
- Convening a **Coalition for Vaccination** to bring together European associations of healthcare workers as well as relevant students' associations in the field, to commit to delivering accurate information to the public, combating myths and exchanging best practice;
- Establishing a **European Information Sharing System** to gather knowledge and develop guidelines for a core EU vaccination schedule by 2020 with doses and ages that EU Member States agree as being common to all countries;
- Strengthening partnerships and collaboration on vaccination with **international partners**.

### **State of play: key vaccination gaps in the EU**

According to the most recent data collected by the European Centre for Disease Prevention and Control (ECDC), measles cases continue to increase in a number of EU and EEA countries. In the 12-month period between 1 March 2017 and 28 February 2018, 14,813 cases of measles were reported through the European Surveillance System. Of these cases, where vaccination status was known, 86% were unvaccinated. Furthermore, the ECDC estimates that at least 40,000 people die every year from influenza, partly due to low vaccination coverage.

### **Next steps**

The Commission's proposal for a Council recommendation will be discussed by the Council, with the aim of seeing it adopted before the end of 2018, with an immediate entry into force. Following this, every 3 years the Commission will report on progress made in the implementation of the recommendation. In addition the Commission will also produce a report on *'The State of Confidence in Vaccines in the EU'*, to monitor attitudes towards vaccination, in the context of the [State of Health in the EU](#) process.

### **Background**

In his [2017 State of the Union address](#), President **Juncker** said: *"In a Union of equals, there can be no second class citizens. It is unacceptable that in 2017 there are still children dying of diseases that should long have been eradicated in Europe. (...) No ifs, no buts. (...) Avoidable deaths must not occur in Europe."*

The Commission's recommendations on vaccine-preventable diseases build on a number of existing EU policies and projects in area of vaccination. These include the 2009 Council Recommendation on seasonal influenza vaccination,

the Joint Procurement Agreement, established by the serious cross-border health threats Decision (1082/2013/EU), and a Joint Action on vaccination co-funded by the Health Programme 2014-2020, which will start in the months to come, addressing vaccine hesitancy amongst other topics.

**For more information**

See [MEMO/18/3458](#)

[Vaccination – Overview](#)

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