

Strengthening prevention, resilience, and health security in the European Health Union

A regional perspective from Baden-Württemberg

Organised by the European Health Forum Gastein & the European Health Union initiative, supported by the Bosch Health Campus

This event highlighted the significance of the European Health Union (EHU) and the implementation of EU policies at the regional level, with a focus on Baden-Württemberg. The high-level discussion brought together policymakers, clinicians, health experts, and researchers to explore how European health policy frameworks can be translated into regional systems of prevention, resilience, and health security. While there was broad agreement that the EHU is highly relevant at the regional level, the discussion also highlighted ongoing challenges in translating EU policies into operational realities on the ground.

A central theme throughout the event was the gap between political ambitions at the European level and implementation at the regional level. Participants emphasised that strengthening preparedness and resilience is not primarily a question of new strategies, but depends on how existing instruments, structures, and responsibilities are coordinated and made to function across all levels of government.

Baden-Württemberg as a regional player in the field of health security

The discussion showed that Baden-Württemberg is already actively working on building structures that are in line with the goals of the EHU. These efforts have been shaped by both the lessons learned during the COVID-19 pandemic and a broader awareness of evolving geopolitical risks. Regional initiatives in the areas of hospital planning, patient evacuation coordination, disaster relief, and procurement illustrate that preparedness and resilience are increasingly seen as central governance tasks and no longer as purely technical or medical concerns.

The pandemic was a stress test that exposed both strengths and weaknesses within the regional system. While Baden-Württemberg was able to coordinate effectively in many areas, including cross-border cooperation and support to neighbouring regions, structural challenges in terms of coordination, resource allocation, and institutional responsibilities were also reflected upon. As a result, preparedness is now being approached more systematically, including by planning for various crisis scenarios.

The importance of cross-border cooperation

Baden-Württemberg's geographical location as a border region plays a decisive role in shaping its health policy. Due to the region's close ties with neighbouring countries, many health challenges are inherently cross-border. Participants repeatedly stressed that health threats, including infectious diseases and burdens on the health system, know no national borders, which is why cross-border coordination is essential for effective preparedness and response.

This cross-border dimension illustrates one of the clearest areas in which the EHU becomes operational at the regional level. Cooperation on patient transport, procurement, emergency planning, and data sharing reflects a practical form of European health governance that is already embedded in regional practice. In this sense, Baden-Württemberg shows that the EHU is not only a political framework at EU level, but also a network of interdependencies that shape regional decision-making and capacities.

From pandemic preparedness to an "all-hazards" approach

A key shift highlighted during the event was the move away from a narrow focus on pandemics to a broader "all-hazards" approach to preparedness. Participants emphasised that health systems must be able to respond not only to infectious disease outbreaks, but also to a wide range of risks, including climate-related events, cyber threats, geopolitical instability, and supply chain disruptions.

This broader understanding of preparedness reflects a significant change in how health is conceptualised within European policy. Health is increasingly seen as a matter of security and resilience, rather than solely as a social or healthcare issue. Baden-Württemberg's efforts to integrate disaster preparedness, crisis coordination, and strategic planning into its health system were presented as examples of how this shift is being implemented at regional level.

Understanding resilience in practice

The concept of resilience was central to the discussion, although participants noted that it is often used in vague or inconsistent ways. During the roundtable, resilience was defined as the capacity of systems and societies to maintain functionality, adapt to changing conditions, and continue operating under stress. It was emphasised that resilience is not a substitute for security, but rather a complementary concept that focuses on adaptability and continuity.

Importantly, resilience was not understood as a purely crisis-oriented concept. Participants stressed that resilience must be built into the everyday functioning of systems. If institutions, workforce structures or communication channels are weak under normal conditions, they are unlikely to perform effectively during a crisis. This highlighted the need to integrate preparedness into routine governance, rather than treating these as separate domains.

At the same time, participants acknowledged that the growing emphasis on resilience reflects underlying pressures on health systems. In this sense, resilience can also be seen as an indicator of systemic strain, requiring adaptation rather than stability.

Challenges in the implementation of the EHU

Despite the relevance of the EHU to regional challenges, participants pointed to significant difficulties in translating EU policies into regional practice. European health policy was described as increasingly present in various areas but lacked a clear structure or entry point for regional actors. While there are many instruments, initiatives and funding mechanisms, they are often perceived as fragmented, complex and difficult to access.

This leads to a situation in which the EHU is visible in principle, but less so in practice. Regional stakeholders may engage with certain elements, such as data initiatives or procurement mechanisms, without necessarily recognising them as part of a coherent European framework. The absence of a clear regional interface for the EHU was identified as a barrier to effective implementation.

The problem is therefore not simply a lack of political activity at EU level, but a problem of implementation at national and regional level, coordination and usability. Without clearer pathways for engagement, there is a risk that the potential of existing instruments will not be exploited.

Governance fragmentation as a structural obstacle

A major obstacle to effective implementation, which was identified during the event, is the fragmented nature of governance in Germany. Responsibilities for health, care, and social policy are spread across multiple levels and institutions, often without clear coordination mechanisms. This fragmentation makes both crisis management and long-term planning more difficult.

The interface between healthcare, long-term care, and social services was highlighted as particularly unclear, despite being central to resilience. Vulnerable populations, continuity of care, and crisis communication all depend on effective coordination between these areas. However, institutional boundaries often hinder integrated approaches.

This complexity at several levels also has an impact on the implementation of European policies. The path from EU-level initiatives to regional implementation leads through national, national and local structures, each of which has its own competences and limitations. Therefore, the challenge of implementing the EHU is closely linked to broader issues of governance reform and coordination within Germany.

Operational gaps: digitalisation, human resources, and procurement

Several operational challenges were identified as critical to strengthening preparedness and resilience. Digitalisation and data sharing were discussed as essential prerequisites for effective health governance, especially in crisis situations. However, current systems remain insufficiently interconnected, limiting the ability to monitor capacities, coordinate actions, and share information across institutions and borders.

Workforce capacity was another key concern. Participants emphasised that resilience depends not only on infrastructure, but also on the availability, distribution, and skills of healthcare professionals. Questions were raised about how to ensure that the workforce is adequately prepared for crisis situations, and how long-term care systems can be made more resilient.

Procurement and supply chain security were highlighted as areas where European cooperation could provide significant added value. The pandemic has shown the importance of reliable access to medicines, protective equipment, and other critical resources. Strengthening procurement systems and supply chains was therefore seen as a concrete area where the EHU could contribute to regional resilience.

The role of prevention and social determinants

Another important topic was the need to include prevention and public health more fully into discussions on resilience and health security. Participants argued that long-term threats to population health, such as obesity and lack of educational opportunities, need to be addressed as part of preparedness strategies.

This reflects a broader understanding of health that is shaped by social, economic, and environmental factors. The discussion highlighted the importance of health literacy, education and inclusive communication, especially for vulnerable groups. Resilience was therefore considered not only a matter of institutions, but also of societies.

In this context, the EU's role extends beyond health systems to broader policy areas such as market regulation and consumer protection. These areas influence the conditions under which health outcomes occur and therefore have significant implications for resilience and prevention.

Conclusion

The event confirmed that the EHU is of high relevance for Baden-Württemberg, especially in a border region where health challenges are naturally interlinked across national borders. The region already has many elements of EHU-related practice, especially in the areas of preparedness planning, cross-border cooperation and crisis coordination.

However, the discussion also revealed significant gaps in governance, implementation, and operational capacity. The main challenge is not the lack of a policy framework, but the difficulty of translating them into coherent and effective regional systems.

Ultimately, the success of the EHU will depend on the extent to which it succeeds in linking European strategies to regional realities. For Baden-Württemberg, this means embedding EHU-related instruments and approaches in ways that strengthen practical capacities for preparedness, resilience and health security.

This discussion contributes to ongoing discussions led by the [European Health Union initiative](#) with policymakers to achieve the overall goal of deepening awareness of the EHU at all levels and to actively strengthen the links between policy and practice. Future events will include a national roundtable with a small Member State, as well as a panel discussion with policymakers in the European Parliament. The European Health Forum Gastein will take place from Tuesday, 29 September, to Friday, 2 October under the motto "Health for a stronger European Union – High time for action!". The future of the EHU will be discussed as one of the central topics of the Forum, and the outcomes of the roundtable in Stuttgart will also be actively incorporated into the discussions.