

OPEN LETTER – URGENT CALL TO ACTION

Cancer Cannot Wait: Safeguard Health as a Standalone Priority in the EU Budget

To: Members of the European Parliament (MEPs)

Cc: European Commission, Council of the European Union

Europe is entering a cancer crisis – and the EU Budget is about to look away

Cancer is already one of Europe's leading causes of death, costing the EU over €100 billion annually in healthcare and lost productivity. Its burden is rising sharply. [According to the European Commission](#):

- 2.7 million diagnoses and **1.3 million deaths every year** in the EU.
- **24% increase in cancer cases expected by 2035.**
- Soon, **1 in 3 Europeans will be a cancer patient or caregiver.**

This is not a projection. It is a predictable, escalating reality, and at the very moment it demands a stronger EU response, the proposed EU budget risks downgrading health to a footnote. [All while 70% of Europeans want the EU to do more for health.](#)

The current Commission's MFF proposal makes health invisible

The European Commission's proposal for the **2028–2034 Multiannual Financial Framework (MFF)** introduces a fundamental structural shift:

Health funding, including EU4Health, would no **longer be a standalone priority** and would be absorbed into a **European Competitiveness Fund (ECF)** alongside 13 other programmes. Under the Commission's proposal, the ECF pools multiple programmes into four policy windows, meaning health competes inside a broader competitiveness mega-fund framework unless protected by law.

This means:

- **No transparency** – health spending becomes harder to trace.
- **No accountability** – the European Parliament loses its ability to scrutinise and protect health funding priorities, as decisions shift into broader funds and work-programme governance.
- **No guarantee** – long-term investment in health can be redirected to competing priorities at any time.

Stakeholders across Europe have already warned that this approach risks **diluting health policy into industrial and competitiveness objectives. Yet 70% of Europeans want the EU to do more for health – this MFF proposal does less.**

This is a political choice – not a technical necessity

The proposed MFF (nearly €2 trillion) prioritises flexibility, simplification, and competitiveness. But folding health into a broad fund with competing priorities is not an administrative convenience; it is a decision with consequences.

Health is not a sub-category of competitiveness - it is the precondition for it.

Without a healthy population, there is no productive workforce, no resilient economy, no competitive Europe. Health investment is *primarily* a productivity and resilience enabler.

A budget that forces health to compete against industrial policy for funding will:

- Create a **competition between health and industrial policy**.
- Risk **underinvestment in prevention and care**.
- Undermine Europe's ability to respond to the **growing cancer burden**

The World Health Organization (WHO) has said this for decades: the health of all peoples is fundamental to peace, security and development, and unequal development in health is a common danger. **Europe should not design a budget that institutionalises health inequality by making health investment discretionary.**

This puts SDG 3 and UHC delivery at risk – especially where health gaps are largest

This structural downgrade risks undermining Europe's commitments under the **UN 2030 Agenda for Sustainable Development, especially Sustainable Development Goal (SDG) 3 (Good Health and Well-Being)**, which the EU repeatedly affirmed is embedded across its policymaking.

It also conflicts with the World Health Organization (WHO) foundational principle recognising the highest attainable standard of health as a fundamental human right, and with WHO's definition of **universal health coverage (UHC)**: access to quality services across the full continuum, **from health promotion and prevention to treatment, rehabilitation and palliative care, without financial hardship**, explicitly linked to **SDG target 3.8**.

Progress is already uneven across Member States. Eurostat's SDG 3 monitoring shows wide cross-country gaps (including a **16-year spread** in "healthy life years" and stark differences in **avoidable mortality**, with **Latvia, Romania and Hungary** among the highest). A budget that makes health investment unstable and untraceable will slow progress precisely where needs are greatest.

The EU already documents substantial disparities in cancer prevention and care through the **European Cancer Inequalities Registry**. Weakening EU health investment now risks entrenching – not reducing – these gaps, contradicting the 2030 Agenda pledge to **leave no one behind**.

The cost of failure is measurable – and rising

Cancer already costs the EU **over €100 billion annually** in healthcare expenditure and lost productivity. EU-level health investment already exceeds €55 billion in this period, through national [Recovery and Resilience Plans](#) (about €43bn healthcare-related expenditure), [EU4Health](#), and [Horizon Europe health research](#).

Experts warn that **anything significantly lower would reduce ambition at a time of increasing risk**. Yet the proposed MFF **contains limited explicit reference to cancer** and shifts political focus toward **defence and industrial priorities** while failing to acknowledge that a healthy population underpins both.

MEPs: Your vote will decide whether health is protected, or dismantled

The European Parliament is now shaping its position on the MFF, ahead of negotiations with the Council. Parliament has already raised concerns:

- **Opposing the merging of distinct policies into single funding structures.**
- **Warning that consolidation undermines democratic oversight and policy clarity.**

In the current budget period, the EU backed its commitment to health with action: Europe's Beating Cancer Plan was a landmark initiative supported by dedicated EU funding. The proposed MFF structure threatens to reverse that progress by absorbing health into a broader competitiveness mega-fund with no guaranteed allocation for cancer.

You are not being asked to fund something new. You are being asked not to defund what Europe has already built.

You will be asked to vote on this framework in the coming months.

That vote is not procedural – it is historic.

OUR CALL TO ACTION

We, the undersigned organisations representing patients, healthcare professionals, researchers and civil society, call on all Members of the European Parliament to:

1. Protect Health as a Standalone Budget Priority

Ensure a dedicated, ring-fenced EU health programme in the next MFF.

2. Safeguard Investment in Cancer

Guarantee long-term funding for cancer prevention, screening, treatment and survivorship – honouring the commitments made under Europe’s Beating Cancer Plan.

3. Ensure Health Remains a Standalone Priority within a Competitive Europe

A competitive Europe depends on a healthy population. Health and competitiveness must be mutually reinforcing—not competing priorities.

Do not approve a budget structure where health funding:

- is **not visible**.
- is **not protected**.
- is **not accountable**.

We expect Europe’s competitiveness agenda to actively support better health and cancer outcomes – not dilute or subsume them.

4. Vote with Full Awareness of the Consequences

A vote that weakens health funding is a vote that will:

- Increase inequalities.
- Overload health systems.
- Cost lives

5. Align the MFF with Agenda 2030 and WHO standards for Universal Health Coverage

Ensure the next MFF structure enables transparent, trackable investment in SDG 3 delivery, including prevention, early detection, treatment, survivorship, and universal health coverage without financial hardship, consistent with WHO’s definition of universal health coverage and the right to the highest attainable standard of health, without deepening existing health and cancer inequalities between Member States.

To every Member of the European Parliament:

Do not make health invisible in Europe's budget.

Do not make cancer a secondary priority.

Do not trade long-term survival for short-term structure.

Because within the lifetime of this budget:

Nearly 20 million people will face a cancer diagnosis.

One in three Europeans will be directly affected by cancer.

They will remember whether Europe chose to act or chose to look away.

Signed,



IKCC
International Kidney
Cancer Coalition

INCA International
Neuroendocrine
Cancer Alliance





This open letter was originally published on the [WECAN Foundation website](#), which serves as the official source of this call to action. If you and your organisation wish to support and formally endorse this letter, you are invited to countersign. To do so, please contact the WECAN Foundation Secretariat at secretariat@wecanadvocate.eu, indicating your organisation's endorsement and providing your official logo for inclusion among the list of signatories below.