IN STRASBOURG, LOCAL AUTHORITIES ON THE FRONTLINE

IN DEFENDING ACCESS TO HEALTHCARE IN EUROPE

In a debate at the 50th plenary session of the Congress of Local and Regional Authorities of the Council of Europe in Strasbourg, local elected representatives sounded the alarm: everywhere in Europe, access to healthcare is under pressure. Apart from that finding, however, the debate mainly highlighted an oft-underestimated fact: it is local authorities that strive on daily basis to maintain the fragile balance of healthcare systems.

An ageing population, declining public resources, rising costs and supply chain pressures: the challenges are mounting and their effects are becoming clearer and clearer. Issues include overburdened services, lengthening waiting lists and a lack of investment, etc. The most vulnerable groups are paying a heavy toll, while healthcare professionals, under increasing pressure, are sometimes leaving the profession, thereby further compounding the situation.

In this context, local authorities are key players, at the crossroads between health policy, social services and prevention. In terms of co-ordination of care, innovation and co-operation between regions, solutions are often developed at local level, closest to where the needs lie.

Yves Coppieters, Minister of Health, Environment, Solidarity and Social Economy of Wallonia (Belgium), underlined the shortage of medical personnel, which he regarded as one of the major challenges. He called for medical studies to be made more attractive and for better distribution of practitioners, in particular in underserved areas. He also highlighted the need to streamline hospital provision by developing regional general hospitals bringing together specialist departments, while strengthening daycare and outpatient services. He said that access to healthcare must be considered holistically, in conjunction with housing, eating habits and living conditions, and referred to the 'Les Alizés' mental health services as an example of successful co-operation.

Bruno Metz, Mayor of Ettenheim (Germany), illustrated the tensions on the ground in concrete terms. In the Ortenau district, hospital restructuring and the reduction in the number of facilities had resulted in significant costs for local authorities. With an ageing medical workforce, difficulties in finding replacements and the trend towards 'medical deserts', the challenges were numerous, especially in rural areas. Yet Ettenheim had managed to bounce back following the closure of its hospital in 2022 by establishing medical centres (MVZ), a local healthcare network, a rehabilitation clinic and partnerships. This demonstrated the crucial role local authorities played in maintaining local healthcare provision.

The same was true in Greece, where Ilias Apostolopoulos, Mayor of Papagou-Cholargos, pointed out that access to healthcare was a cornerstone of social cohesion. Amid economic pressures, an ageing population and growing mental health needs, healthcare systems remained under strain. In his municipality, local clinics, often run by volunteer doctors, were trying to fill the gaps, but regional inequalities persisted, especially in rural and island areas. He called

for greater European solidarity and a stronger role for local authorities, backed by adequate funding and tools such as telemedicine and mobile units.

The youth delegates also made a significant contribution to the debate. Rayaa Ponnle (Ireland) and Isabella Sophia Laning (Netherlands) stressed that efficiency must not come at the expense of humanity and that particular attention must be paid to minority and disadvantaged groups. In their view, access to healthcare must go hand in hand with the fight against poverty, access to healthy food, decent housing and social networks. Other delegates stressed the impact of pollution and climate change on health, calling for greater recognition of the right to a healthy environment.

From Finland to Calabria in Italy, the statements highlighted a number of common challenges: tackling the shortage of medical provision or 'medical deserts', ensuring access to healthcare in rural, mountainous or remote areas and addressing the surge in mental health issues linked to health crises, migration or conflicts, in particular in Ukraine. "There are areas where people feel abandoned," warned Italian member Alberto Mazzoleni (ECR), referring to regions where medical facilities were located miles and miles away.

Given these findings, members put forward a number of practical solutions, including the development of telemedicine, the establishment of integrated care centres, the strengthening of primary care linked to hospitals, mobile services, 'social taxis', platforms for co-operation between local authorities and healthcare professionals, and cross-border agreements, such as those in Alsace. In addition, attracting doctors to rural areas entailed a need for supporting measures in terms of housing, working conditions and quality of life.

The debate also highlighted prevention as a key driver of local action. Joanne Louise Laban (United Kingdom, ECR) stressed the importance of vaccination campaigns and keeping vaccination records up to date in order to prevent the resurgence of forgotten diseases.

These are all initiatives that are quietly reshaping the European healthcare landscape. A landscape that is closer to citizens and more inclusive, but still a work in progress – and one in which local elected representatives are emerging more than ever before as the frontline architects.