

Chairwoman Willmott

Ladies and Gentlemen,

For those of you who do not know me, let me say a few words about myself before going further. My name is Maria de Graça Carvalho and I work as an MEP with a particular interest in the fields of research and innovation. At the moment, we are preparing the next research and innovation programme for the period 2014-2020, a programme that goes by the name of H2020.

As I see it, my contribution today will centre on how H2020 might best enhance multinational clinical research. This might be summed up, I feel, by two key concerns. One is the *funding aspect* and the second is the *structural effect of the programme*.

1) Funding of biomedical research under Horizon 2020

As far as funding is concerned, within the allocation of resources, *priority should be given to health research*. Indeed, in the doubling of the research budget that I have actively sought to achieve for the forthcoming H2020, I believe that the single largest item in the budget should be health.

This is the position of many MEPs and the Commission proposal reflects these priorities. This is also something that requires multi-disciplinary approaches, involving multinational and large scale research.

Secondly, given that medical research requires a much longer innovation cycle than other forms of research - it requires about 10 years - it is necessary to take this into consideration when planning the different funding instruments that are required.

Existing piece-meal funding is inadequate and there is not one single funding instrument that can encompass, at once:

- the development of ideas into novel concepts,
- the implementation of these concepts in clinical practice,
- their adaption for the market
- and finally the assessment of treatment strategies and outcomes.

The development of funding strategies, in this respect, should include key research stakeholders:

2) **Structure effect of Horizon 2020**

As for my second point, *the structure of H2020*, I believe that it is essential that we link research results with clinical applications. The EU research programmes should foster *the systematic involvement of the medical community in the development of research strategy*. This should take place across all the different phases of the process.

This involves the "added value" that the EU can bring:

in furthering harmonisation;
the development of a properly
interconnected research programme;
alongside Europe's ability to facilitate the
scaling up of research.

This is the time to really think about the form that such a structure would have given that we are in the process of elaborating the Horizon 2020 programme. If we do not manage to incorporate this structure - even in incipient form - into the new programme quickly we are liable to be unable to introduce it at a later point.

It is to be hoped that the new programme will reflect the lessons that we have learnt. A better funded, a better designed and better coordination between the EU and the member states should have a real impact on European health in general. It is, of course, also to be ardently hoped that it will have an impact on research concerning children with cancer.

Thank you very much.