

## **Australian Global Health Alliance**

Submission into the Inquiry into Australia's response to the priorities of Pacific Island countries and the Pacific region

For further information on this submission, please contact:

Dr Selina Namchee Lo Executive Director, Australian Global Health Alliance <u>selinanamchee.lo@unimelb.edu.au</u> +61405 596 559 ausglobalhealth.org

### Introduction

The Australian Global Health Alliance ("the Alliance") is delighted to have the opportunity to make this submission to help inform the inquiry into Australia's response to the priorities of Pacific Island Countries and the Pacific Region.

The Alliance is the member-based peak body for Australian global health organisations, with a mandate to strengthen the global health ecosystem through national and global connections, partnerships, research, and innovation, promoting best practices in global health, and advocacy. Our membership is diverse, ranging from universities and research institutes to international and national non-government organisations or peak bodies, to government entities and public-private partnerships. Founded in 2016 by a number of Australian global health organisations and leaders, the Alliance is currently the only OECD country global health alliance with a commitment to First Nations global health equity as part of its foundational mandate. The current strategic focus of the Alliance includes Planetary Health (with a specific focus on Climate Change and Health Security and Sustainable Development), Gender Equality, First Nations Global Health and Health Equity.

The Alliance also hosts the secretariats of the Australian Network of WHO Collaborating Centres and Pacific Friends of Global Health.

This submission was developed in consultation with Alliance members and partners, **and considers the following prompts from the terms of reference through the lens of global health:** 

- Evaluate the key concerns and aspirations of Pacific nations regarding their economic, environmental, and social development.
- Evaluate Australia's current efforts in supporting the Pacific in areas such as trade, investment, infrastructure development, security and capacity building that enhance Australia's position as a partner of choice for the Pacific family.
- Explore opportunities to enhance people-to-people links, cultural exchanges, and educational partnerships between Australia and the Pacific to maximise local and community development outcomes.
- Assess the effectiveness of Australia's aid programs and partnerships in promoting genuine community development, good governance, and capacity building for partners in the region.

Good health is foundational to a nation and region's economic and social prosperity, and crucial to maintaining stability and security. Efforts in the Pacific to enhance Australia's position as a partner of choice for the Pacific family should therefore include the recognition of global health as a strategic cross-cutting asset of international development and foreign policy, alongside diplomacy, investment and trade.

## Section 1: Key health concerns and priorities of Pacific nations

The Pacific is a rich and biodiverse region which not only has a deep cultural significance for the people of the Pacific, but has sustained life in the region for generations, and is critical for food and nutrition security, economic livelihoods, health, and wellbeing. Pacific nations are however faced with a complex array of health challenges that hinder economic, environmental and social development.

The high prevalence of non-communicable diseases (NCDs) poses significant concern, ranging from cardiometabolic issues, through to mental disorders and violence against women. The World Health Organization (WHO) Western Pacific Region, which includes 27 nations including the Pacific Island nations, accounts for one quarter of total global deaths from NCDs<sup>i</sup>. The four major NCDs –cardiovascular disease (CVD), cancers, chronic respiratory diseases, and diabetes – accounted for 12 million deaths in this region in 2019. Almost two thirds of deaths are linked to tobacco use, harmful use of alcohol, unhealthy diets, physical inactivity and air pollution<sup>ii</sup>. NCDs contribute to premature mortality and absenteeism, and local health systems in these countries are often ill-prepared to address them. The impact is amplified by the missed educational and employment opportunities for family members who must provide care for those affected by NCDs.

Climate change also presents a significant and existential threat to health in the region. Pacific Island nations are amongst the world's most vulnerable to the impacts of climate change, with health impacts including, but not limited to: direct and indirect impacts on air pollution; risk to lung and heart health; increased extreme weather patterns and natural disaster threats affecting livelihoods, housing and sanitation; and rise in infectious diseases risk through changes in vector population characteristics.

Communicable diseases such as hepatitis, HIV/AIDS, malaria, tuberculosis and COVID-19 continue to burden many Pacific Island countries and threaten the health security of the region and beyond. According to the Global Tuberculosis Report 2023, in 2022, the Western Pacific saw an estimated 1.9 million TB cases and 104, 000 deaths. Also in 2022, an estimated 2.2 million people were living with HIV in the Western Pacific Region. Papua New Guinea, Australia's closest neighbour, has the highest incidence rate in the world of malaria outside Africa.

Given the above health challenges, it is no surprise that many health systems in the Pacific region are under stress. This was evident from the outset of COVID-19, which quickly exacerbated existing health inequities in the region, particularly for already vulnerable populations, and exposed severe weaknesses and vulnerabilities in health systems to prevent and respond to health crises and their consequences. This includes workforce shortages, poor infrastructure, lack of funding, inadequate surveillance and lack of access to reliable technologies and medicines. More must be done to build resilience of health systems in the region to prevent, prepare for and respond to ongoing and future health challenges.

### The Pacific Healthy Islands Vision

In the Pacific, the concept of Healthy Islands is enshrined in the Yanuca Island Declaration (1995) that describes Healthy Islands as places where:

- children are nurtured in body and mind
- environments invite learning and leisure
- people work with age and dignity
- ecological balance is a source of pride
- the ocean which sustains us is protected

Over almost three decades that vision has formed the foundation for the Pacific Health Ministers Meetings that have followed every two years and served as a unifying theme for health protection and health promotion in the Pacific. Findings from the <u>20-year review</u> in 2015 found that the health of Pacific peoples had generally improved, with child survival and life expectancy increasing, reductions in chronic hepatitis B infection rates, remaining polio-free and significant progress being made on the elimination of neonatal tetanus from most Pacific countries. Countering this progress was the rise in NCDs, which was described in 2015 as a crisis.

# Section 2: Australia as a global health partner of choice in the Pacific: challenges and considerations

The Australian Government has an important role to play in supporting a healthy, resilient and prosperous Pacific Region. First and foremost, we are shared custodians of one of the most rich and complex - yet fragile - ecosystems on Earth, one that underpins the health of human and economic prosperity and stability of the region, and as such have a responsibility to protect and nurture that ecosystem to thrive. There is much that can be learned and shared from First Nations Australians and Indigenous peoples of the Pacific on protecting – and harnessing – this asset.

Moreover, the health of our Pacific neighbors and Australia is inextricably linked, as was so clearly demonstrated throughout the COVID-19 pandemic. With the reminder that infectious diseases do not respect borders, supporting the resilience of health systems in Pacific nations to prevent and respond to ongoing and future health threats is not only the right thing to do, but is in Australia's own national interest.

In addition, our unique geographic positioning as one of the only few high-income countries and large development donors geographically located in the Pacific, means we therefore have a responsibility to champion the needs and priorities of the region in global fora, and to facilitate the inclusion of Indigenous voices and perspectives, experiences and interests in all aspects of decision-making and implementation. Australia's ongoing representation on the boards of global health mechanisms, such as it currently holds at the Global Fund to Fight AIDS, Tuberculosis and Malaria, Gavi the Vaccine Alliance, and its membership within bodies such as G20, is therefore crucial to continue to guide global health and development principles for the future that are relevant and suitable for the region.

The Alliance recently welcomed the new International Development policy, which highlighted the importance of strong health systems and healthy populations to contribute to 'a more peaceful, prosperous and stable region'.

We also welcomed the announcement of the 5-year, \$620 million Partnerships for a Healthy Region Initiative which aims to better support nations across the Pacific and Southeast Asia to anticipate and control communicable diseases, prevent non-communicable diseases, advance sexual and reproductive health and rights, and build stronger, more equitable, national health systems. The inclusion of non-communicable diseases in particular was a welcome addition from previous health programming and policy priorities. This bilateral support, in addition to Australia's contributions to multilateral global health partners such as the Global Fund and Gavi, are critical to achieving positive health outcomes in the region.

The Alliance has however identified a number of key areas for ongoing review or consideration as part of this inquiry, and offers a number of recommendations:

#### Funding constraints:

Funding for global health programming, research and innovation in our region remains low. Australia's Official Development Assistance (ODA) - a key tool for supporting countries in our region to meet their development goals - as a portion of its Gross National Income (GNI) currently sits at 0.19 percent and the country is ranked 26th among 31 OECD DAC bilateral member countries, with this ranking expected to deteriorate further over time.<sup>iii</sup> Whilst a welcomed new initiative, the \$620m, 5-year, *Partnerships for a Healthy Region* program announced in early 2023 is a relatively small pool of funding to meet the growing health demands of the region. Of great concern to the sector is that in the most recent 2024-25 Federal budget, global health spend was reduced by \$185m from the previous year. **Health spend as a portion of the overall ODA budget now sits at just 13.2% in 2024-25**, **down from 18% in 2023-24 and at its second lowest level in a decade, despite growing challenges in the region.** 

Moreover, there is a paucity of global health specific research funding in Australia, to the detriment of the whole region. Alliance members and partner networks have expressed deep concern about

minimal, insecure, and short-term funding opportunities, which require institutions and experts to seek funding from varied international sources. Strong investment in R&D and innovation allows fast-tracked progress on tackling complex global health challenges in the Pacific and beyond, which in turn boosts economic and social performance across borders, builds resilience in the region against current and emerging health threats, and elevates the profile of Australia and the region as leaders in global health.

#### - Exacerbation of workforce shortages:

Migration of health workers from the region to rural and regional Australia - as is promoted under the Pacific Australia Labour Mobility (PALM) scheme - can benefit individual professionals and the Australian healthcare system, but they leave a gap in the workforce of the home countries. To be mindful of this, training programs, scholarships with return obligations, and partnerships that enable skill transfer and development in the Pacific health sector should be considered as an alternative option. The Australia Awards program remains an exemplary example of how fostering knowledge exchange and building a network of skilled professionals, who contribute to their home countries upon return, can support education and capacity building in the Pacific.

#### - Lack of coordination and integration of development partner programming:

Pacific Island leaders have expressed the need for greater coordination and collaboration amongst development donors and partners and agencies. As outlined by the Lowy Institute, at a Pacific Community (SPC) annual meeting in late 2022, "one small nation with a population of barely 100,000 was feeling the strain of more than 20 technical missions in two months, in addition to multilateral and bilateral 'dialogues"<sup>iv</sup>. This places additional strain on already stressed systems, and donors and agencies have a responsibility to our Pacific neighbours to reduce this burden and promote better cohesion. In the same vein, better integration of development partner programs and service delivery into national health systems is urgently in need of improvement.

#### - Barriers to knowledge-share and people-to-people exchange:

There is a need for the Australian Government to expand its knowledge exchange and education programs, including between First Nations Australians and Indigenous peoples of the Pacific. There is a richness of place-based traditional knowledge in the region that can be better harnessed to tackle challenges and promote true and meaningful partnership in international development. In addition, the recently proposed international student cap and increased international student fee (now amongst the highest in the world<sup>v</sup>) reduces opportunities and may discourage students from the Pacific region and beyond to learn in Australia, and threatens to decrease the output and leadership of Australia's higher education sector. Additionally, barriers such as lengthy and challenging processes for obtaining visas for delegates is making Australia an increasingly unattractive option to host leading international conferences. These forums are crucial for domestic, regional and global knowledge-share and exchange and there is a risk of them being moved offshore without intervention.

# SECTION 3: Opportunities to enhance Australia's role as a partner of choice for our Pacific neighbours

#### 1. Expand funding and funding mechanisms

In order for Australia to continue to effectively support the Pacific to build resilience against current and emerging health challenges, we must improve and expand existing funding mechanisms for global health (research and implementation). Doing so will have strong social and economic returns, advancing the International Development Policy's objective of a more stable, prosperous and peaceful region. For example: A report prepared by the World Health Organization in 2018 found that an additional US\$1.27 per person is needed to implement the World Health Organization's "Best Buys" (WHO's menu of policy options on NCD prevention and control) in low- and middle-income countries. This investment would yield a return of at least US\$7 for every dollar invested by 2030, save 8.2 million lives and reduce premature mortality by at least 15%.<sup>vi</sup>

#### Recommendations:

- Commit increased investment in health ODA funding for Pacific countries
- Work across government departments to leverage and stimulate more research funding through domestic mechanisms such as the Medical Research Future Fund (MRFF), NHMRC grants, and Australian Research Council grants, with a commitment to thoroughly review existing funding structures to meet emerging global health challenges more rapidly.
- Leveraging ODA to drive greater private and philanthropic investment in health in the region.

## 2. <u>Improved and Increased opportunities for information sharing, cultural exchange and people-to-people links</u>

Building knowledge and expertise within Pacific Island nations is essential to building a sustainable health workforce and developing local solutions to health and development challenges. Moreover, facilitating the sharing of place-based traditional knowledge can help promote true and meaningful partnerships and foster more effective international development outcomes.

#### Recommendations:

- Partner with Pacific nations to boost the number of trained health workers and strengthen local training institutions.
- Continue to encourage capacity building of people and communities with lived experience in designing and implementing aid programs.
- Expansion of the Australian Government's knowledge exchange and education programs, such as the Australia Awards and Australia Volunteers programs.
- Promote the expertise, knowledge and leadership of Aboriginal and Torres Strait Islander peoples and communities in connecting with Indigenous peoples and communities of the Pacific.
- Improved provisions for Masters and PhD research within Australian institutions or mentoring programs for public health specialists from the Pacific to train within Australia
- Fund and support new and existing exchange networks: Connected communities, such as global health alliances and networks are critical for coordination and collaboration. The Pacific's health challenges are complex and cannot be addressed by one institution or sector alone. Connected communities engaging with other connected ecosystems are therefore critical for effective action.
- Streamlining visa processes for international conference attendance in Australia to ensure conferences can continue to be viably held in the region.
- Reconsider the proposed cap on international students.

#### 3. <u>Expanded health programming and priorities delivered through the Australian international</u> <u>development program:</u>

#### Recommendations:

- Development of programs that incorporate Pacific Indigenous knowledge
- Stronger acknowledgement of the links between climate change and health reflected in programming that better prevents, builds resilience against and responds to changing disease patterns, increased frequency of extreme weather events, and addresses the impact on the health workforce and health systems capacity.
- Prioritise programs in the Pacific that tackle the commercial determinants of health. This includes reducing tobacco use, alcohol consumption, unhealthy food consumption and inadequate physical activity.
- Enhancing early warning systems for various disaster risks (such as advanced meteorological surveillance) and improving monitoring and surveillance of disease incidence and health impacts.
- Continue to advocate for the expansion of Universal Health Care, particularly in low- and middleincome countries, and the integration of the prevention and treatment of NCDs into primary care systems.
- Efforts to support the Pacific through trade should consider the\_potential harm of exporting unhealthy products to the Pacific. This involves the promotion of sustainable and healthconscious trade practices that reinforce Australia's commitment to the region's long-term prosperity. Specifically, Australia's trade to the region must be mindful of the potential harm associated with exporting unhealthy products, which can exacerbate health issues and strain local health systems.<sup>vii</sup>
- Healthy, local foods need to be the main source of food in an emergency response.

#### 4. Draw on Australia's world-class global health leadership, institutions, and networks

Australia has world-leading expertise and strengths in global health at-the-ready to support the Pacific to tackle current and future health challenges. Our global health institutions are world class and regarded in particular, for their strength across a broad range of technical fields. We have, for example, 54 WHO Collaborating Centres of research excellence - the highest number per capita in any country. Our institutions also lead in the global evidence practices in child and adolescent health, biomedical technologies, vector borne disease approaches, tobacco control and HIV/AIDS to name only a few. Likewise, Australia's university sector and Medical Research Institutes have many world-renowned researchers and educators contributing to global health evidence-based best practice, who are helping shape the next generation of global health leaders in Australia, the Pacific and beyond.

#### Recommendation:

- Utilising further Australia's global health experts with deep partnerships in communities across the Pacific, to co-design implementation of regional health programmes supported by the Australian Government.
- Investing in improving Australia and the Pacific's global health capacity, in particular, in improving future workforce capacity, expanding research and development and education, in order to maintain confidence and trust as an important development and diplomatic partner for Australia's Pacific neighbours.

#### 5. <u>Elevate Pacific and regional challenges and perspectives in international dialogues and decision</u> <u>making</u>

As a participant in key global fora, and an important development partner of the Pacific, Australia has an important role to play in advancing recognition and leadership on regional health issues:

Recommendations:

- Continue to advocate for the recognition of the complex and unique health challenges of the Pacific region and for increased allocation of funding to the region from multilateral global health institutions.
- Continue to advocate for the expansion of Universal Health Care, particularly in low- and middleincome countries, and the integration of the prevention and treatment of NCDs into primary care systems.

#### 6. Health security capacity building

Health Security should be an integral part of capacity building efforts in the Pacific. This includes funding the reviews and evaluations of biosecurity risks. Joint External Evaluations (JEEs) and Performance of Veterinary Services (PVS) evaluations are less frequently undertaken by these countries. These valuations provide evidence on health security from human, animal and in some cases environmental perspectives, for actionable recommendations to enhance cross-sectoral efforts and inform health security strategies.

#### Recommendation:

 Establishing a regional health security coordination mechanism to further strengthen health security by facilitating comprehensive planning and delivery across sectors. While the Asia Pacific Health Security Action Framework (APHSAF), was endorsed by Member States in 2023, to engage multi sectoral actors in health security, a more regionally focused platform designed specifically for the Pacific will benefit cross-border health security efforts with an emphasis on capacity building across these small island states.

<sup>&</sup>lt;sup>i</sup> Peng, W., Zhang, L., Wen, F., Tang, X., Zeng, L., Chen, J., Galea, G., Wen, D., Wang, Y. 2024. Trends and disparities in non-communicable diseases in the Western Pacific region, The Lancet Regional Health - Western Pacific 2024;43: 100938, https://doi.org/10.1016/j.lanwpc.2023.100938.

<sup>&</sup>lt;sup>ii</sup> Supporting Prevention & Control of NCDs | NCD Alliance

iii Comparisons - Australian Aid Tracker (devpolicy.org)

<sup>&</sup>lt;sup>iv</sup> <u>https://www.lowyinstitute.org/the-interpreter/getting-it-together-pacific-engagement-still-lacks-coordination</u>

<sup>&</sup>lt;sup>v</sup> https://go8.edu.au/media-release-international-student-visa-hike-another-nail-in-the-coffin-for-international-education

<sup>&</sup>lt;sup>vi</sup> World Health Organization, 2018. Saving Lives, Spending Less: A strategic response to non-communicable diseases. 409\_NCD\_Report\_design.indd (who.int)

<sup>&</sup>lt;sup>vii</sup> <u>Did imports of sweetened beverages to Pacific Island countries increase between 2000 and 2015? | BMC Nutrition | Full Text (biomedcentral.com)</u>