

06th September 2019

Capacity building roundtable on trade and health

Roundtable Discussion Report



**NHRMC Centre for Research Excellence on the Social Determinants of
Health Equity, Menzies Centre for Health Governance, School of
Regulation and Global Governance, Australian National University**

The Roundtable

Noncommunicable diseases (NCDs) such as coronary heart disease and lung cancer are the cause of nine out of ten deaths in Australia. NCDs have been labelled an invisible health epidemic and “one of the major challenges for development in the 21st century” (World Health Organisation, 2017).

While governments and intergovernmental organisations have highlighted the urgent need for action to reduce NCD risk factors, policymakers face significant challenges to promoting greater policy coherence between health and other sectors, including trade and investment.

During the global week of action on NCDs, on 6 September 2019, the Menzies Centre for Health Governance, in collaboration with the NHMRC Centre for Research Excellence in the Social Determinants of Health Equity, held the first national capacity-building roundtable on trade and NCDs.

The national roundtable, held at the ANU, comprised a mix of academics from diverse disciplines and leading public health, medical, nutrition, alcohol and NCD-focused health associations and organisations, as well as advocates with a strong professional interest in NCD policy.

Participants discussed the links between trade policy and NCDs risk factors, assessed the current trade landscape in Australia, and explored lessons from public health advocacy. The roundtable also focused on next steps for advancing greater attention to health in trade policymaking in Australia.

Trade and NCDs

Trade and investment agreements can shape our health in a number of ways. The roundtable focused on four key issues for NCDs – access to medicines, tobacco, alcohol, and nutrition.

Increased consumption of harmful commodities has been supported through goods and services liberalisation, provisions that reduce tariffs (i.e. border taxes) on goods or eliminate restrictions on foreign direct investment. This has generally increased both the volume of health harmful commodity imports, as well as the local production, manufacturing and distribution of these products, alongside intensive marketing and advertising campaigns.

Greater influence within regulatory environments afforded to corporations through harmonisation and investor-state dispute settlement can interfere with efforts to regulate the sale of these harmful commodities.

When the rates of NCDs start to climb due to increased consumption, expansive intellectual property rights in trade agreements, which include extending pharmaceutical monopolies, negatively affect access to treatment by keeping medicine prices higher for longer.

“Trade and investment agreements are a triple edged-sword for NCDs – they increase the supply of unhealthy goods, stifle regulation, and increase the cost of treatment.”

– Dr Ashley Schram, ANU

The Challenges

The Roundtable identified several challenges and barriers to advancing health on government trade agendas, including:

- The dominant market framing in policymaking for trade and investment agreements promotes expanding export interests no matter their health impacts
- There is a lack of meaningful consultation with public health advocates and experts on the potential impacts of trade provisions during trade negotiations
- Public health experts, parliamentarians and the public can only access the text after it is signed
- There is no independent health impact assessment conducted of trade agreements in Australia, either before or after they are signed

“Public health advocates face ideological, structural and institutional barriers to enabling greater attention to the health impacts in trade negotiations” – Dr Belinda Townsend, ANU



Next Steps

After exploring the links between trade and NCDs, and identifying challenges and barriers, the roundtable discussed a number of next steps including:

- Activities to demystify trade for the wider public health community and to sensitise the issues through further trade literacy activities
- Supporting governments to prioritise evidence based public health regulation
- Reframing the economics of trade agreements within their wider social and health impacts
- Identifying sustainable leadership and partnerships for public health engagement in the trade domain
- Building the wider network of public health associations and policy influencers and making use of wider connections
- Pooling resources and sharing information
- Developing coherent messages for public health engagement in trade policy
- Exploring spaces for further collaboration including through conferences, online webinars, case studies, and resources.

In summary

The Roundtable provided capacity-building for national organisations and associations in public health, medical and NCD advocacy. It focused on the ways trade agreements can shape NCD risk factors and lessons from advocacy in the trade and public health domains. Participants explored next steps for elevating attention to the potential health impacts in Australia's trade policymaking in the future. Participants agreed on the need for a wider network of organisations and policy influencers in the trade domain and further trade literacy activities and resources to strengthen capacity building for monitoring and advocacy.

“Trade and investment is the next frontier in public health” – Mr Terry Slevin, CEO Public Health Association of Australia

Participants

Anita George, McCabe Centre for Law and Justice
Anne-Marie Thow, University of Sydney
Ashley Schram, Australian National University
Belinda Townsend, Australian National University
Daniel Zhou, Australian Medical Students Association
Deborah Gleeson, La Trobe University
Dimitri Batras, Australian Health Promotion Association
Dori Patay, Australian National University
Jenn Lacy Nicholls, University of Melbourne
Liz Bennet, University of Melbourne
Emma Lonsdale, Australian Chronic Disease Prevention Alliance
Ingrid Johnston, Public Health Association of Australia
Jane Martin, Obesity Policy Coalition
Jenny Goodare, Foundation for Alcohol Research and Education
Leanne Elliston, Nutrition Australia
Mia Miller, La Trobe University
Michael McNeill, Alcohol and Drug Foundation
Pat Ranald, AFTINET
Paula O'Brien, University of Melbourne
Rebecca Smith, Heart Foundation
Robert Hunt, Dieticians Association of Australia
Sandro Demaio, EAT
Sharon Friel, Australian National University
Sharni Goldman, Australian National University
Terry Slevin, Public Health Association of Australia
Trish Hepworth, Foundation for Alcohol Research and Education
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