

Commonwealth High Commissioners Roundtable

Investing in health: an economic imperative for sustainable development

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The Commonwealth Health Professions Alliance (CHPA) was established in 2009 and is an alliance of Commonwealth accredited civil society organisations focused on health.

Membership comprises:

- Commonwealth Association for Health and Disability
- Commonwealth Medical Association
- Commonwealth Association for Paediatric Gastroenterology and Nutrition
- Commonwealth Pharmacists Association
- Commonwealth HIV and AIDS Action Group
- Commonwealth Nurses and Midwives Federation
- Commonwealth Dental Association

Members of the CHPA consider that by working together they can more efficiently and effectively represent and support health professionals in Commonwealth countries and promote high standards of care and equity in access to care for Commonwealth peoples.

The CHPA also consider that by working together, and in partnership with the Commonwealth Secretariat and the Commonwealth Foundation ,they can be more influential in advocating on behalf of Commonwealth health professionals and Commonwealth peoples in Commonwealth forums, including meetings of the Commonwealth Heads of Government and Commonwealth Health Ministers' meetings.

In past years, the CHPA has provided input into Commonwealth Health Ministers' meetings, addressing the meeting theme in a variety of ways.

In 2009, the CHPA surveyed its members and produced a report titled: *Climate change and health survey*.

In 2010, the CHPA conducted a debate on: *The health MDGs by 2015: possible or impossible for Commonwealth countries*.

In 2011, the CHPA held a forum titled: *Prevention of NCDs: children and young people*.

In 2012, the title of the forum was: *Cultural approaches to preventing communicable and non-communicable disease*.

In 2013, the title of the forum was: *Mental health: a legislative framework to empower, protect and care*. At the forum, a report on research commissioned by the CHPA and funded by the Commonwealth Foundation on the state of mental health legislation across the Commonwealth was released.

In 2014, the CHPA chose not to host a forum in conjunction with the annual CHMM for reasons that will be discussed later in the agenda. Instead, the CHPA has entered into discussions with the Commonwealth Foundation on the best way to influence Commonwealth Governments through the Commonwealth Health Ministers in 2015 on the economic imperative of investing in health for sustainable development.

This roundtable for High Commissioners is the first in a series of actions the CHPA and the Foundation will take to prepare for civil society to have meaningful input into the 2015 Commonwealth Health Ministers' meeting.

At the end of 2013, the Lancet Commission released the results of research which suggested that with a small increase in public spending on health, specifically targeting a range of low cost primary health care interventions, not only would health outcomes in low and middle income countries equal that of high income countries by 2035, but the economic gains as a result of that investment would be 9 to 20 times higher.

In the Lancet Commission research, five interventions were costed:

- Family planning,
- Maternal and newborn health,
- Malaria,
- HIV, and
- Immunisation.

There are other areas of course where low cost interventions yield high economic gains:

- NCDs - smoking, obesity, lack of exercise,
- Excessive alcohol consumption,
- Increase in motor vehicle trauma
- Mental health.

Tobacco kills nearly 6 million people each year. Approximately one person dies every six seconds due to tobacco, accounting for one in 10 adult deaths. Up to half of current users will eventually die of a tobacco-related disease.

Nearly 80% of the more than one billion smokers worldwide live in low- and middle-income countries, where the burden of tobacco-related illness and death is heaviest.

Tobacco users who die prematurely deprive their families of income, raise the cost of health care and hinder economic development.

In 2008, more than 1.4 billion adults were overweight and more than half a billion were obese. At least 2.8 million people each year die as a result of being overweight or obese. The prevalence of obesity has nearly doubled between 1980 and 2008. Once associated with high-income countries, obesity is now also prevalent in low- and middle-income countries.

Globally in 2010, over 42 million children under the age of 5 were overweight. Close to 35 million of these live in developing countries. Overweight children are more likely to become obese adults. They are more likely than non-overweight children to develop diabetes and cardiovascular diseases at a younger age, which in turn are associated with a higher chance of premature death and disability.

Mental ill health is the third leading cause of disease burden in the world, predicted to be the leading disease burden by 2030.

Mental ill health affects one in four people worldwide at some time in their life.

In 2010, the global economic impact of mental ill health was approximately US\$ 2.5 trillion and this cost is estimated to increase to US\$ 6 trillion by 2030. While mental ill health is typically left off the list of top NCDs, it alone accounts for over one third of the overall anticipated spend on NCDs over the next 20 years

The Lancet Commission research drew four major conclusions:

1. There is a very large payoff from investing in health.
2. A grand convergence is achievable within our lifetime.
3. Scale-up of low-cost packages of interventions can enable major progress in NCDs and injuries within a generation.
4. Progressive universalism is an efficient way to achieve health and financial protection.

Good health is the fundamental foundation on which democracy and development is built. Unless populations are healthy they cannot participate in education and employment or contribute to the economic wellbeing of their country. Additionally, an unhealthy population places an economic burden on their country.

I want to thank the Commonwealth Foundation for hosting this discussion today. I want to thank our two speakers, Joy Lawn and Tony Nelson and other CHPA members who are present. And above all, I want to welcome High Commissioners and look forward to your comments and input into this important discussion.