Aid cuts undermine regional health security

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Earlier this year on a visit to Myanmar, I saw first-hand the positive impact Australia’s international development program has in helping improve the quality of life for so many people in our region.

Unfortunately, that good work has been undermined by the $55 million cut from health programs in Myanmar alone as a result of the massive cuts to Australia’s international development program under the Liberals.

A cut of this size to the health budget in Australia would be damaging. In a nation as poor as Myanmar, it can have devastating consequences.

That’s just one small example of the task we face as a consequence of the international development budget being burdened with 21% of the cuts made as part of the infamous 2014 budget – a staggering amount when you consider at the time Australia’s international development budget accounted for just over 1% of total budget spend.

The unprecedented loss of bipartisanship on international development is disappointing for supporters of constructive internationalism, diminishes our reputation in our region and is devastating for those who relied on it.

Looking ahead, we face a fiscal and political challenge as a consequence. We also face a policy challenge – what priorities should guide Australia’s international assistance programs?

Health, as an investment priority within the international development program, fell from 17% in 2011-12 to just over 13% in the current international development budget – a budget that has now been cut by $11.3 billion. Sound health policy should be better integrated throughout Australia’s international development program.

Economic development is hindered by poor health outcomes. In the development context, investment in quality health systems not only improves individual well-being, but it can have positive impacts on the community in the longer term – contributing to both prosperity and stability.

Our region faces diverse and complex health challenges, including the ongoing challenge of HIV/AIDS and TB, and the rise of non-communicable diseases. Adding to this complexity is the threat of pandemics and infectious disease arising from climate change.

In addressing these complex health challenges, we must consider aid effectiveness and the mechanisms of delivery which best leverage Australia’s investment – whether through global funds, international research institutes, partnerships with NGOs, on the ground grants or in direct bilateral partnership with neighbouring governments.

The $100 million figure attached to the recently announced Regional Health Security Fund partnership may go some way in repairing Australia’s ability to leverage additional sources of support and funding for development programs in our region.

But so far, twelve months after the fund was first announced, the only thing of substance it has produced has been the appointment of a Regional Health Security Ambassador.

To be effective the Regional Health Fund must:
• Have as its core objective the improved health of people in our region;
• Address the communicable health challenges facing our region in a disciplined and effective way;
• Balance Australia’s health security needs with the health priorities determined by our regional neighbours;
• Tailor health initiatives to reflect capacity of existing health infrastructure in recipient countries;
• Have autonomy to respond to health emergencies as they develop and in partnership with recipient countries;
• Be consistent in its funding and reporting structures for research in order to deliver greater efficiencies in the use of Regional Health Fund money; and
• Provide opportunities of shared learning for both Australian and recipient country research and health workforces.

As we move forward in developing our response to the health challenges of our region, Labor will work to deliver a program that meets the communicable and non-communicable health needs determined by our region and which best match Australia’s ability to make the biggest impact on health outcomes.

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