

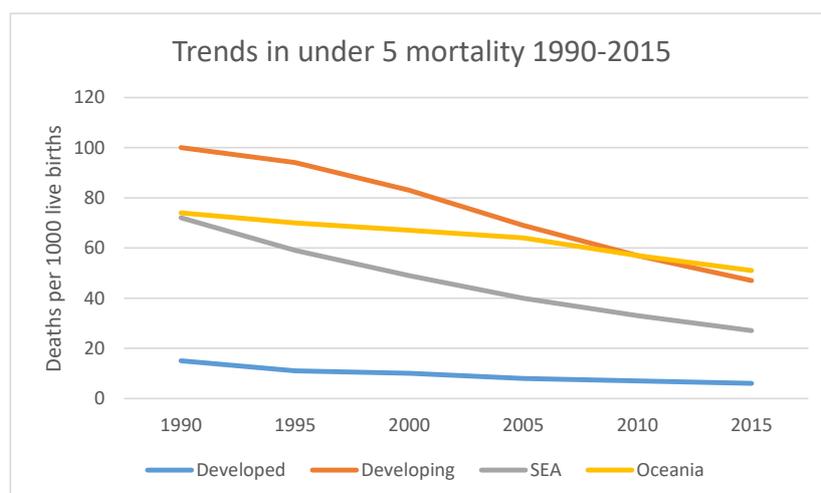
RETURN ON INVESTMENTS IN GLOBAL HEALTH: SUMMARY OF SUBMISSION TO FOREIGN POLICY WHITE PAPER GLOBAL HEALTH ALLIANCE MELBOURNE

Successes in global health are visible...

- In 2015, children under five died at half the rate of 1990, and the speed of decline has more than doubled since 2000 – that is an estimated **48 million children's lives saved** since 2000.
- Further increases in vaccine coverage could prevent the deaths of up to three million children under five each year.
- Globally, tuberculosis (TB) treatment **averted 49 million deaths** between 2000 and 2015.
- Human papilloma virus (HPV) vaccines, developed from Australian research, can prevent 70% of cervical cancers, which is the second biggest killer of women globally. To date, **over 200 million doses** have been provided in over 120 countries. GAVI and UNICEF are hoping to reach over **30 million girls** across 40 countries by 2020.
- Since the launch of the Australian Government's Avoidable Blindness Initiative, blindness prevalence has **reduced by 38.5%** in the Indo-Pacific region and **43%** in Southeast Asia.

Trends in under five mortality by key comparative region

(Data taken from UN-IGME 2015 Levels and Trends in Child Mortality Report. Unicef. New York September 2015)



...and returns are high

- Reducing mortality in low and middle-income countries has contributed **11%-24% to their economic growth**.
- Each US dollar invested can return:
 - **US\$9-75** in sexual and reproductive health and the health of women, children and adolescents;
 - **US\$2 to over \$120** for tuberculosis;
 - **US\$6-\$40** for malaria;
 - **US\$16-\$44** for immunisation; and
 - **US\$4** when addressing blindness and vision impairment
- Greater investment in global health will result in even greater returns.

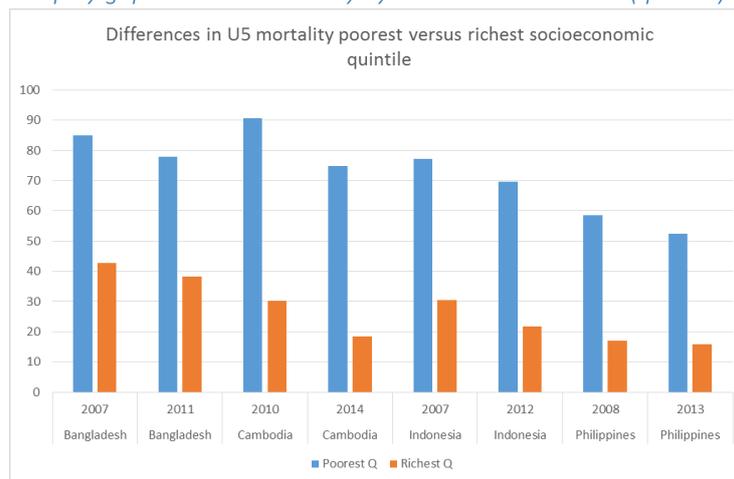
Yet Australia's development assistance in global health has declined...

- Australia's health-related development assistance has **declined by over 25%** in recent years.
- Greater investment is needed in partnerships that cut across traditional silos of work, supporting health innovation AND addressing the health system barriers to reaching the populations most in need. The Global Health Alliance Melbourne aims to facilitate these types of partnerships.

...and big challenges remain

- Over **16,000 children** under five still die every day – half due to infectious disease, and half in their first 28 days of life. Australia is well placed to support further uptake and scale of immunisation.
- Key health threats lie in our region including **multi drug resistant tuberculosis** (57% of cases occur in Asia-Pacific), and **artemisinin-resistant malaria**.
- By 2050, if left unchecked, **antimicrobial resistant infections** may kill up to **10 million people** a year and cost the worldwide economy **\$100 trillion**.
- The majority of the world's poor now live in middle-income countries. **Growing inequities** in economic development put stability at risk.
- Where **disease threatens to cross borders**, concerns for national security and population health can destabilise governance.

Equity gap – under 5 mortality by socioeconomic status (quintile)



So, what do we need to do differently and better?

- Australia should expand its position about the **importance of global health investment**, beyond human development, to the importance of economic growth and human rights.
- Increased investment in **women's, children's and adolescents' health** delivers deep and wide returns to individual life extension and quality, the wellbeing of future generations, and economic growth.
- Australia can leverage its **strong reputation and track-record** in global health innovation and **should invest in partnerships** that join the public, private and research sectors. Greater emphasis is needed on health systems, particularly primary health care systems, which can be supported and protected through bilateral and development assistance programs.
- **Evaluation** of program effectiveness should be built in right at the beginning, as opposed to only evaluating the use of monies. Find out **what works, in what context**.
- Pursue **greater coordination** between bilateral, regional and global multilateral health programs to **maximise the returns on investments made**.