**Submission to the United Nations High Commissioner for Human Rights on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health in the implementation of the 2030 Agenda for Sustainable Development**

Australia promotes the right of its population to achieve the highest attainable standard of physical and mental health. As a member of the World Health Organization (WHO), Australia is strongly aligned with the WHO’s right to health objectives. Australia is fully supportive of measures to promote the 2030 Agenda in the work of the WHO at the national, regional and global levels, and across other multilateral fora, to strengthen action towards achieving the health-related aspects of the Sustainable Development Goals (SDGs).

Australia is developing a response to the 2030 Agenda, which will map existing government initiatives aligned with the 2030 Agenda; strengthen government communications on the 2030 Agenda; and identify new opportunities to give effect to the 2030 Agenda. Australia will deliver its first Voluntary National Review on the 2030 Agenda at the United Nations High Level Political Forum in July 2018.

***Australia’s approach to healthcare***

The Australian Government has a steadfast and ongoing commitment to remain at the forefront of global efforts to achieve high life expectancy, healthy lifestyles and high quality health services. Australia acknowledges that the right to health is inclusive, contains freedoms that are fundamental to safeguarding human rights for Australians, and entitles the population to have access to timely, high quality health services that are delivered without discrimination.

Australia’s health system faces challenges common to many other countries: an ageing population; the rising incidence of non-communicable diseases; emerging and re-emerging communicable diseases; and poorer health outcomes for subpopulation groups including indigenous people, people living with mental illness, and those living in rural and remote areas.

Universal health coverage

The design of Australia’s health system provides a strong foundation on which responses to these challenges can be built. To support the entitlement of the population and their right to health, the design of Australia’s health system is based around the principle of universal health coverage, a focal point of all health-related SDGs.

Australia's universal health insurance program, Medicare, ensures that all Australian permanent residents have access to a broad range of high quality, free or low-cost, health services, including hospital care. Medicare is based on the principles of choice, access and universality, and it combines free access to public hospital services and subsidised access to medical services and pharmaceuticals, with higher subsidies for those using a higher volume of services and people with low incomes. It includes targeted assistance for particular groups, such as funding elements of community-controlled health services for Aboriginal and Torres Strait Islander peoples.

Under Australia’s federated system, responsibility for health service provision is shared across the Commonwealth (national) and state and territory governments. At the national level, collaboration across Australian Government portfolios also ensures a shared understanding of the inter-relationship between Government-funded clinical services, disability support and employment support services. This approach also allows for a more holistic understanding of the underlying determinants of health.

To support access to health services for the population, Australia is proud to have a highly skilled and motivated health workforce. However, the biggest challenge for Australia’s health workforce remains the unequal distribution of health professionals between inner‑metropolitan and rural/remote areas. To address this issue, Australia has introduced a range of strategies including rural training pathways, incentives for health workers to relocate to rural areas, and international recruitment, as well as support for telehealth and outreach services.

Maternal and child health

SDG3.1 and 3.2 focus on reducing global maternal mortality rates, whilst also reducing preventable deaths of newborns and children. In Australia, maternity care is amongst the safest in the world, and maternal death rates in Australia are lower than those of other comparable countries. In Australia, the vast majority of births occur at full term and are within the normal birth weight range. However, factors such as younger maternal age, remoteness and socioeconomic disadvantage of areas of usual residence are still associated with increased risk of a number of poorer maternal and perinatal outcomes.

Australia recognises the importance of providing national coordination and leadership for maternity services to improve outcomes for mothers, babies and their families, according to up-to-date research and best practice. A high-level, enduring strategy to support breastfeeding in Australia, addressing the barriers that prevent women establishing and maintaining breastfeeding, is currently being developed. Further, Australian Health Ministers are working together to further improve maternity services through the development of an enduring *National Strategic Approach to Maternity Services*. This will align the delivery of maternity services with the available evidence and support best practice care, articulating clear priorities for action.  Australia also advocates for the ongoing implementation of the *WHO-UNICEF Baby Friendly Hospitals Initiative*.

Australia has also shown significant progress in reducing infant and child deaths, particularly through the work of neonatal intensive care units, increased community awareness of the risk factors for sudden infant death syndrome, and reductions in vaccine-preventable diseases through national childhood immunisation programs.

Immunisation

SDG3.3 and 3.4 encourage countries to combat hepatitis, water-borne diseases and other communicable diseases, whilst also reducing premature mortality from non‑communicable diseases. Australia believes that immunisation is an important component of improving public health outcomes and protecting the community.

The National Immunisation Program (NIP) is a joint initiative of the Commonwealth Government and state and territory governments, providing universal, free vaccines through primary health care providers such as General Practitioners, local government and other community clinics, Aboriginal Community Controlled Health Services, and aged care facilities. Through the NIP, Australia provides vaccines against 17 diseases including measles, diphtheria, whooping cough (pertussis), Human Papillomavirus (HPV) and the meningococcal C vaccine which children, families and older Australians can access at no cost.

Chronic Diseases

Cancer, cardiovascular disease, mental and substance-use disorders, musculoskeletal disorders and injury account for around two-thirds of the disease burden in Australia.
Furthermore, coronary heart disease is the underlying leading cause of death for people over forty-five.

The *National Strategic Framework for Chronic Conditions* addresses primary, secondary and tertiary prevention of chronic conditions. Recognising that there are often similar underlying principles for the prevention and management of many chronic conditions, the Framework will better cater for shared health determinants, risk factors and multi-morbidities across a broad range of chronic conditions.

Use of tobacco, illicit drugs and other substances

Consistent with SDG3.5, which calls to strengthen the prevention and treatment of substance abuse, Australia’s new *National Drug Strategy (2017-2026)* aims to build safe, healthy and resilient communities by preventing and minimising alcohol, tobacco and other drug-related health, social, cultural and economic harms among individuals, families and communities.
It strives for a balanced approach across the three pillars of harm minimisation: demand reduction; supply reduction; and harm reduction.

In addition to this, Australia recognises the serious harm and suffering caused to Aboriginal and Torres Strait Islander people, their families and communities, by the use of tobacco, alcohol and illicit substances. The *National Aboriginal and Torres Strait Islander Peoples’ Drug Strategy 2014-2019* has been developed to identify key issues and priority areas for action in this particular cohort of the population.

Smoking rates in Australia are amongst the lowest in the world and are still falling.
Consistent with SDG3a, Australia is proud to be a world leader in tobacco control and has been a Party to the *WHO Framework Convention on Tobacco Control* since it entered into force.
As part of our ongoing commitment to the reduction of global tobacco smoking prevalence, Australia frequently shares its tobacco control expertise and materials with other countries.

***Access to healthcare for vulnerable groups***

Aboriginal and Torres Strait Islander peoples

The *National Aboriginal and Torres Strait Islander Health Plan 2013-2023* is an overarching framework designed to focus investment and effort in improving health outcomes for Aboriginal and Torres Strait Islander peoples. Consistent with the principles of the 2030 Agenda, the Plan uses a health equality and human rights methodology to improve the availability, accessibility and quality of health services for Aboriginal and Torres Strait Islander people.

The associated *Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023* recognises the importance of the holistic concept of health for Aboriginal and Torres Strait Islander people. The focus of the Plan is to ensure that the Australian health system delivers primary, secondary and tertiary health care that is evidence‑based, culturally safe, high quality, responsive and accessible for Aboriginal and Torres Strait Islander peoples and that health care is free of racism and inequality.
The Implementation Plan will be updated in 2018, with a strengthened focus on the social determinants and cultural determinants of Aboriginal and Torres Strait Islander health.
A consultation process was undertaken in the first half of 2017 to inform this work, reaching over 600 participants, and attracting more than 100 written submissions.

The *Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2016‑2026*embeds cultural respect principles into the Australian health system.
An appropriately trained Indigenous health workforce helps build the cultural competence of mainstream primary health care services and supports the ongoing viability of Indigenous‑specific health services, particularly those delivered through Aboriginal Community Controlled Health Services, which play a key part in improving the health outcomes for Aboriginal and Torres Strait Islander communities. This framework outlines a national approach to building a culturally respectful health system, including across workforce development, communication and consumer participation.

People living with mental illness

SDG3.4 seeks to promote mental health and wellbeing within the population. To support this, Australia utilises a human rights-based approach on promoting mental health and wellbeing that focuses on the whole lifespan—in early childhood, schools, post-education, and entry to employment, workplaces, and the broader community—and takes a whole‑of‑government approach to improving outcomes for people with mental illness. Australia recognises that particular groups, such as Indigenous Australians, children and young people, and people at risk of suicide, have specific vulnerabilities and funds targeted mental health services.

Australia is implementing significant mental health system reform to promote mental health and wellbeing through person centred care, and to improve the efficiency and sustainability of the mental health system. In Australia, mental health services are primarily delivered through a ‘stepped care’ model of service delivery, where services are targeted to individual and community need through regional planning, integration and commissioning of services at a local level. These reforms aim to address some of the key concerns and challenges in the Australian mental health system by shifting the focus towards self-care and early intervention services and away from more costly face-to-face, high intensity interventions, where possible.

One such intervention approach uses digital mental health services and technology, including through the development of a consumer-friendly *Digital Mental Health Gateway*. The Gateway comprises a website and a contact centre that provides the general community, consumers, carers, health professionals and service providers with access to evidence-based information, advice, and digital mental health treatment options. It is responsive to a person’s unique needs and makes it simpler, faster and easier to navigate services, support and information currently available.

***Australian support for health and medical research***

Australia supports the research and development of vaccines and medicines for communicable and non-communicable diseases, with an acknowledgement that investing in health and medical research brings a range of benefits to Australia’s communities, economy and health system. The National Health and Medical Research Council (NHMRC) is Australia’s main health and medical research funding body, and disburses over AUD 800 million every year for health and medical research through a variety of funding schemes, funding high-quality research.
Each scheme is designed to address strategic outcomes, including the creation of knowledge, translation of research, development of future capability, partnerships and international collaborations.

The Medical Research Future Fund (MRFF) and the Biomedical Translation Fund are also Australian programs that stimulate discovery, translation and commercialisation of great Australian ideas. Australia will invest AUD 65.9 million from the first round of MRFF disbursements to deliver new medical breakthroughs, enhance patient care, improve health system outcomes, ensure Australia’s health security and drive innovation.  The MRFF complements the work of the NHMRC by providing funding grants to support health and medical research and innovation, with the objective of improving the health and wellbeing of Australians.

***Australia’s development assistance***

Health is an investment priority under Australia’s aid policy, *Australian aid: Promoting prosperity, reducing poverty, enhancing stability*. Australia’s health sector support aligns with SDG Goal 3, and contributes to meeting other health-related Goals and targets given their interlinked nature and the importance of good health to the 2030 Agenda more broadly.

*Australia’s Health for Development Strategy 2015-2020* guides investment decisions to: help build country-level systems and services that are responsive to people’s health needs; and to strengthen regional preparedness and capacity to respond to emerging health threats.
We recognise that strong, resilient public health systems are the foundation for country and regional health security.

Australia’s largest bilateral health investments are currently in Papua New Guinea, the Solomon Islands, Cambodia and Timor-Leste with a focus on strengthening health systems for improved health outcomes. Australia also provides support to global public-private partnerships, multilateral agencies and international non-government organisations to extend the reach of our aid program to more countries and people to promote health investment in our region. For example, through contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria, Gavi the Vaccine Alliance, WHO, United Nations Population Fund, and the United Nations Programme on HIV/AIDS.

Australia’s health investments seek to address the financial, cultural and social barriers to health for vulnerable populations and lowest-income groups, including women, children and people with a disability. For example, Australia is partnering with the Cambodian Government and development partners to provide free essential health care to the poorest 20 per cent of Cambodians (approximately 3 million people) through the Health Equity and Quality Improvement Initiative. This is reducing health-related debt for Cambodians in the lowest‑income group and improving the quality and availability of health care services.

The Indo-Pacific region is recognised as a global epicentre for emerging infectious diseases, and the site of growing antimicrobial drug resistance. New outbreaks of communicable diseases have the potential to cause significant illness and death, and pose a major threat to trade, investment and tourism in Australia’s region and beyond. Responding to these challenges, Australia is implementing a Health Security Initiative for the Indo-Pacific. With funding of AUD 300 million over five years (2017-2022), the Health Security Initiative will contribute to avoiding and containing emerging and re-emerging infectious disease threats with the potential to cause social and economic harms on a national, regional or global scale.

Australia’s support for medical research, through Product Development Partnerships (PDPs), is being expanded under the Health Security Initiative. PDPs innovatively pool and leverage funding with other donor governments and philanthropic foundations for research and development in diseases that lack commercial value. Our support for PDPs so far has resulted in a number of achievements, including the release of the first ever child-friendly treatment product for children suffering from tuberculosis. As of July 2016, more than 155,000 courses of the new treatment had been ordered by 18 countries.

Under a new Product Development Partnerships Fund, Australia will invest up to an additional AUD 75 million in PDPs until 2022, building on AUD 40 million provided from 2013‑2018.
This research will accelerate access to new and effective tools to combat tuberculosis, malaria and other high burden, mosquito borne diseases, thus improving the health and wellbeing of populations in our region.