Policy Brief

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Health-Trade Policy Coherence for Non-Communicable Diseases - Pathways to Improving Health Outcomes and Mitigating Adverse Health Impacts of Bilateral and Multi-Lateral Trade Agreements

What are the Issues?

วล The establishment of the World Trade Organisation (WTO) in 1995 transformed the policy landscape of international economic relations, dismantling barriers to the movement of goods and services across borders.

วล An adverse outcome is the creation of a 'super highway' for the globalisation of unhealthy lifestyles, including the marketing of tobacco, alcohol, and 'unsafe' food. These are major risk factors for Non-Communicable Diseases (NCDs).

วล International trade and investment agreements often trump national health policies, restricting their regulatory space for preventing and controlling NCDs.

Trade and health objectives need not be mutually exclusive. The challenge is ensuring that trade and health are mutually reinforcing through coherent policy actions across government departments and agencies by creating synergies to achieve the agreed objectives. This brief addresses the policy pathways for countries to pursue international trade objectives without undermining national policies for the prevention and control of NCDs.

What is Policy Coherence?

วล "The promotion of mutually reinforcing policy actions across government departments and agencies creating synergies towards achieving the agreed objectives" (OECD, 2003).

What does the Evidence Say?

 валют The World Health Organisation (WHO) estimates that NCDs kill about 36 million people each year globally, mainly from cardiovascular diseases (48%), cancers (21%), chronic respiratory diseases (12%), and diabetes (3.5%). These major killers share four behavioural risk factors: tobacco use, unhealthy diet, physical inactivity, and harmful use of alcohol. Dietary habits and changes in industrial food processing systems are among the leading causes of the increase in the mortality and morbidity burdens of NCDs. Trade and corporate investments create opportunities for the globalisation of harmful substances – such as tobacco and processed foods with limited nutritional content, high in salt, sugar and fats – which lay the foundation for high blood pressure, increased blood glucose, obesity and consequently, diabetes, cardiovascular disease and other chronic illnesses. Unhealthy lifestyles are also globalised through the trade in goods and services that support smoking, excessive alcohol consumption and lack of physical activity. While governments and multilateral institutions like WHO and the UN Food and Agriculture Organisation (FAO) have developed policies, recommendations, and regulatory instruments on NCD risk factors, the effectiveness of these policies is often undermined by globalised commercial interests, and powerful corporate lobbies, especially in low- and middle-income countries.

What are the Options?

 валют Examples of Policy Recommendations by WHO and FAO
 валют • WHO, Global Action Plan for the Prevention and Control of NCDs, 2013-2020
 валют • Food and Agriculture Organisation of the United Nations and World Trade Organization, Trade and Food Standards
 валют • World Health Organisation, Report of the Commission on Ending Childhood Obesity
In 2006, the World Health Assembly, the highest policymaking organ of the WHO adopted Resolution WHA 59.26 on international trade and health. WHA59.26 is a response to the demand for information on the possible implications of international trade and investment agreements for health and health policies at the national, regional, and global levels. The Assembly, among other measures, urged Member States to:

- promote multi-stakeholder dialogue at national level to consider the interplay between international trade and health;
- adopt, where necessary, policies, laws and regulations that deal with issues identified in that dialogue, and to take advantage of potential opportunities, and address possible challenges, that trade and trade agreements may have for health, considering, where appropriate, using their inherent flexibilities;
- apply or establish, where necessary, coordination mechanisms involving ministries of finance, health, and trade, and other relevant institutions, to address public-health related aspects of international trade;
- create constructive and interactive relationships across the public and private sectors to stimulate coherence in national trade and health policies; and,
- continue to develop capacity at national level to track and analyse the potential opportunities and challenges of trade and trade agreements for health-sector performance and health outcomes.

### Recommendations

- Ensuring health is a central theme in bilateral, regional and multilateral trade agreements
- Encouraging dialogue between health, finance, trade departments and other stakeholders
- Underlining to health ministries the health impacts of trade and investment agreements
- Helping think tanks and civil society groups to monitor the corporate sector for NCD trends
- Fostering new forms of global trade and health diplomacy to build new synergies
- Reinforcing health systems to bring leadership and governance in line with the 2030 Agenda
- Supporting national and international actors to advocate for people-centred primary healthcare

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This brief is written by (in alphabetical order):

Obijiofor Aginam, UNU-IIGH
Pascale Allotey, UNU-IIGH
Eduardo Banzon, Asian Development Bank
Feisul Idzwan b. Mustapha, Ministry of Health, Malaysia
Subhash Pokhrel, Brunel University
Daniel Reidpath, Monash University, Malaysia

About UNU-IIGH:

UNU-IIGH is a global health think tank for the United Nations - building knowledge and capacity for decision-making by UN agencies and Member States. It is one of the research institutes and training programmes of the United Nations University, and currently a member of the United Nations Inter-agency Taskforce on Non-communicable Diseases. Located in Kuala Lumpur, Malaysia, the mission of UNU-IIGH is to improve decision-making by the UN system about global health issues. UNU-IIGH undertakes policy relevant research, capacity building, and dissemination of knowledge related to global health.