



Health and Trade: what hope for SDG3?

“... the forces of power, particularly corporate power, are impatient with what is adequate for a coherent community. Because power gains so little from community in the short run, it does not hesitate to destroy community for the long run.”
– [Wes Jackson](#), [Becoming Native to This Place](#)

In case you had been asleep for the last ten days, last week in New York the UN finally ratified the Sustainable Development Goals (SDGs) aiming to [end poverty, protect the planet, and ensure prosperity for all](#). Rockstars, heads of states, football stars and even the Pope himself rallied round to congratulate each other and themselves on laying out a framework to save the world’s poor. But away from the media sparkle, meeting in churches, parks and university rooms across the city, people’s movements from the Global South and citizens willing to scratch the surface are meeting this week to analyse, assess and critique the SDGs. This article aims to contribute to these debates by setting the scene for deeper investigations into the impact of global trade policies and laying open questions around the related potential for achieving SDG3 on health and well-being. Implementing the SDGs will require good governance, strong commitment and public health friendly legislation. This article questions whether this is possible in a global trade and investment climate driven by international competition to have the first and the best free trade agreements that are not designed to improve the many variables of international development.

The Sustainable Development Goals call for environmentally sustainable, socially inclusive development. The 3rd of the 17 Goals focuses on ensuring healthy lives and promoting well-being with 12 comprehensive targets (see below). These relate mainly to developing nations but are also important for regions where substantive health inequalities exist within and between countries, such as the US and the European Union.

Despite these lofty ideals and the massive celebrations, even by New York standards, none of the Sustainable Development Goals are legally binding. While governments are pledging to invest in their implementation, many are also on the other hand – as brilliantly argued by the [Campaign for People’s Goals for Sustainable Development](#) - committing to legally binding future trade agreements such as the Transpacific Partnership (TPP), the Transatlantic Trade and Investment Partnership (TTIP) and the Regional Comprehensive Economic Partnership (RCEP). These proposed trade agreements, as the Health and Trade Network Bulletins have been highlighting since their first publication, will do little to encourage health and well-being and will most likely end up having an adverse effect.

Linking our concerns about the trade agreements with the Goal 3 targets throws up more questions that can be answered without a concerted effort to research the implications of the FTAs on the achievement of the SDGs. What follows is a summary of a few areas of concern relating to a selection of the health targets.

Universal Healthcare Coverage (UHC) and financial risk protection

Achieving universal healthcare coverage underpins most of the targets, without it, the lowering of infant and maternal mortality rates, for example, would not be possible. Nor would it be possible to ‘eliminate AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases.’ Achieving UHC requires strong, transparent and accountable government policies that ensure healthcare provision reaches the poorest of the poor, women, men and children. The liberalization of healthcare services encouraged by the TTIP, the Trade in Services Agreement (TiSA) and associated procurement chapters in the trade agreements go against these aims pitching profit making healthcare companies against social protection policies in what often manifests as a battle between right thinking liberals and the politics of the left when, in actual fact, healthcare should be about providing the best services in the right circumstances to everyone.

In addition, the TTIP’s regulatory cooperation chapter intends to create a system whereby all proposed and reviewed legislative acts submit to an assessment (by the opposite trading partner) of their potential to damage transatlantic trade. If this is to be the trend in trade agreements around the world as the Commission hopes, how will this balance with the governmental investments and regulations needed to achieve the Sustainable Development Goals? Take, for example, the very real example of the Dutch Company Achemea suing the Slovak government in an international investment court to prevent the feared expropriation of their profits after the Slovak government proposed to renationalise their health insurance system: how can actions such as these possibly help to achieve universal healthcare and financial risk prevention?

Access to Medicines

The SDG targets aim to ensure ‘affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade Related Aspects of Intellectual Property Rights.’ Provision of medicines for all is interlinked with UHC, and yet also under threat through the legally binding proposed [increases in patent terms in a number of trade agreements](#) and potential threats to the European system of pricing and reimbursement procedures in the TTIP. With the Indian Prime Minister Modi meeting President Obama in New York this week and increasing pressure from the United States on India to change their patent laws – a move which would potentially kill off access to cheaper generic medicines for millions of the world’s poorest people, the future of the TRIPs Agreement needs to be protected so as not to undermine SDG3.

Tobacco, alcohol and environmental toxins

The single target to strengthen the Framework Convention on Tobacco Control is worth applauding and a great deal of investment. With the current preponderance of ISDS cases and threatened ISDS cases against countries attempting to implement or proposing legislation to regulate tobacco packaging and the size of health warnings however, there is a strong danger that this will be rendered unachievable given the potential regulatory chill effect of ISDS. A recent article written jointly by [HaT and ASH](#) described how richly financed and persistent lobbying by the tobacco industry on both sides of the Atlantic in the TPP and TTIP is aimed at protecting their lethal products and their markets. While the presence of this target in SDG 3 is surely a testament to the excellent lobbying by the tobacco control community, it may also indicate, more depressingly, that the tobacco companies are simply not interested in the SDGs because they know where the real power lies. Likewise for the prevention of alcohol related harm: the alcohol industry is a constant presence in TTIP stakeholder meetings around the negotiations. The European Commission has also publicly stated that it views pricing control mechanisms established to protect public health in the United States as discrimination

against European wine exporters. For years the WTO has included alcohol control laws as technical barriers to trade, with this being reinforced by the proposed FTAs, what hope is there for improvements in alcohol control measures called for by SDG3?

A recent paper by [Sharon Treat and the Centre For International Environmental Law](#) succinctly outlines how the TTIP threatens to 'Gut US State's Ability to Protect on Toxic Chemicals.' If, as it is often stated by officials in the European Commission, the TTIP is setting a 'gold standard' in trade agreements, how will the predicted downward harmonization and loss of political independence enable the target 'substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination' to be met? The common perception is that it won't, that the TTIP will lead to a lowering of standards starting with the EU-US trade agreement then exporting those lowered standards throughout the world in other FTAs.

Trade in the SDGs

Goal 17 of the SDGs aims to 'Revitalise the Global Partnership for Sustainable Development' in three areas: finance, technology, capacity building and trade. Already, the trade section appears astonishingly out of touch. The goal calls for three trade targets:

1. To promote a universal, rules-based, open, non-discriminatory and equitable multilateral trading system under the WTO and conclusion of the Doha Development Agenda
2. Significantly increase the exports of developing countries to double least developing countries' share of global exports by 2020 and,
3. Realise timely implementation of duty free and quota free markets on a lasting basis for all least developed countries including by ensuring that rules of origin apply to all imports from least developed countries are transparent, simple and contribute to facilitating market access.

The gap between Goal 17 and the reality of the patent extending, regulation bending, unequitable, secretive, and bilateral rule setting of the TTIP and TPP alone is enormous. Conspicuous by their absence in the SDGs, the existing and proposed regional and bilateral trade agreements (and the lobbyists behind them) simply appear to have completely ignored the SDG process as they push on with their negotiations in Brussels, Washington and Hawaii. The reduction of tariff barriers in agriculture between the EU and the US alone threatens to decrease exports to the EU and US from Africa and Asia where many of the least developed countries lie.

And Finally... are these forms of development still relevant?

The one thing that the SDGs and the trade agreements do have in common is a stated aim to increase national Gross Domestic Product (GDP). Never mind that the GDP measurement as a standalone indicator of development is flawed, the trading powers still claim that increasing the gross domestic product of a country or region will contribute to development and improve incomes across the board. While they may indeed bolster the development statistics of a nation, GDP figures do not reflect the complexity of human development and the importance of different types of poverty, gender and social inequalities, educational levels and the well-being of human populations. The UN's Human Development Index which measures human rights, health, educational attainment and variations in income per capita is closer to the spirit of the SDGs; however trade agreements - where all the actual commitment of the world's leaders in the US, EU and China really lies - have yet to be designed to address these more holistic and inclusive development indicators.

Neither trade policies nor the SDGs challenge the obsession with growth and development. It is beyond doubt that it is deeply unfair that millions of people still live in poverty while the rest of the planet exists comfortably off or enjoying privileged lifestyles: can growth and development ever 'pull' the poorest nations up to a more equivalent standard of living? Perhaps we should be asking if the wealthiest countries (and individuals) would be prepared to de-develop in order to create more equal societies and improve well-being? This would mean using less energy, travelling less, procuring services locally, relying more on information technology for sharing ideas to spark innovation in open fora, minimising the costs to healthcare systems by banning tobacco, limiting alcohol and using the savings to provide healthcare for all and maybe even developing medicines in national research centres for national markets: in other words a complete turnaround of economies of scale, and the direct opposite of what the multinationals advocating for the trade agreements are asking for. Are the people in power really prepared to do this rather than fund displays of wealth and good intention on the one hand, whilst snuffing away our right to health and well-being in secret trade deals on the other?

Box 1. The 12 Targets of SDG 3: Ensuring Healthy Lives and Promoting Well-Being

- By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births
- By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births
- By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases
- By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being
- Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol
- By 2020, halve the number of global deaths and injuries from road traffic accidents 3.7
By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
- Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all
- By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination
- Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate
- Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all
- Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States
- Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks