

# Health for all by 2030 is within our grasp: we must act now

Sandro Demaio<sup>1,2</sup>

Australia has a once-in-a-lifetime opportunity to create a healthy, sustainable, equitable and prosperous future by taking bold action to build back better, fairer and greener after the coronavirus pandemic



Australia is considered a coronavirus disease 2019 (COVID-19) success story by international standards,<sup>1</sup> notwithstanding the significant health and economic impacts experienced across the country. The level of pandemic-induced disruption has been profound, with COVID-19 catapulting us all, as individuals and communities, into new ways of being.

Governments around the world have responded to COVID-19 differently. Since the pandemic was declared by the World Health Organization in March 2020,<sup>2</sup> we have witnessed significant social policy reforms in Australia with the rapid introduction of evidence-based (and at times, long-debated) policy change, including free childcare,<sup>3</sup> accommodation for people experiencing homelessness,<sup>4</sup> wage subsidies,<sup>5</sup> widespread uptake of flexible and remote working arrangements,<sup>6</sup> and the rollout of telehealth.<sup>7</sup> Despite the temporary nature of some reforms, it is indisputable that change is in the air.

Alongside the rapidly changing policy environment is growing evidence of changing community attitudes and expectations. Public support has increased in some critical areas, including support for action to protect and promote health, the use of scientific evidence to inform decision making, and the leadership role of governments.<sup>8</sup> Furthermore, there is growing recognition of the interconnectedness of different facets of life, something long understood by Aboriginal and Torres Strait Islander people, including the inextricable links between human and planetary health.<sup>9</sup>

COVID-19 has brought a new level of visibility to the health inequities facing Australians, including Aboriginal and Torres Strait Islander people who continue to experience unacceptably poor health outcomes.<sup>10</sup> In shining a light on persistent problems, it has heightened dissatisfaction about the lack of progress to redress health inequities, and galvanised the health sector to overcome longstanding policy inertia and drive meaningful change. The pandemic has also highlighted new issues, such as the spatial inequities experienced during stay-at-home restrictions by communities and individuals who lack local amenities or adequate space for home-based learning and working, and residents of high rise apartment buildings with lifts and shared facilities that impede physical distancing.<sup>11</sup>

The health sector is spurred on by these unjust differences in daily living conditions and health outcomes. As we emerge from a state of pandemic-induced disruption and flux in Australia, we



have a unique opportunity to leverage the policy window and burgeoning community support for evidence-based public health action and create a post-pandemic pathway to health for all.

We know that a healthy, sustainable, equitable and prosperous Australia is possible, because we know what causes good health and wellbeing, and the foundations for action are already in place.

Health and wellbeing for current and future generations can be achieved with evidence-based action on the multiple and complex determinants of health. As set out in the supplement accompanying this issue of the *MJA*,<sup>12</sup> bold action is required and the time for change is now. To achieve health for all by 2030, progress on the social determinants of health needs to be accelerated, and broadened to include the cultural determinants of health in order to improve the health and wellbeing of Aboriginal and Torres Strait Islander people in particular. In recognition of the inextricable link between human and planetary health, we must lift our gaze and focus more broadly on protecting all life (not just human life) and achieving intergenerational planetary health equity (rather than a narrower focus on human health equity). Strong partnerships with urban design and transport planning are important to integrate health into transport and land-use decisions and enhance the liveability of Australian cities by increasing opportunities for safe and active local living. Addressing the commercial determinants of health is long overdue but critical to ensure health always comes before profit. Strong governance to protect health from commercial interests and to redress power imbalances between corporations, Australian governments and citizens is urgently required. We must also proactively respond to rapid and exponential technological change with increased sophistication, and inclusive and ethical practice.

The foundations for action are already in place — evidence, frameworks, precedents in other sectors — and international case studies abound, as identified in the accompanying supplement.<sup>12</sup> There is nothing holding us back and no excuses for complacency, inaction or practice not informed by evidence or based on principles of equity and sustainability.

The health sector has a key role in providing policy-relevant evidence and driving and advocating for concrete political action to meaningfully address the many determinants of health. Mobilising community support and multisectoral partnerships and action will be critical to success. Fundamental changes in the way we govern our lives and what is valued by society are required, including participatory governance to ensure an engaged civil society.

In order to achieve these profound shifts, the health sector and public health workforce must also evolve. Investment in the workforce is essential, and existing health promotion frameworks need revising to support the shifts and guide subsequent action to build back better, fairer and greener.

It is time for bold action and systemic change. We must work together to seize this opportunity to create a post-pandemic pathway to health for all by 2030.

**Competing interests:** No relevant disclosures.

**Provenance:** Commissioned; not externally peer reviewed. ■

© 2021 AMPCo Pty Ltd

- 1 Margo J. WHO expert explains Australia's pandemic success. *Australian Financial Review* 2021; 15 Jan. <https://www.afr.com/policy/health-and-education/who-expert-explains-australia-s-pandemic-success-20210114-p56u8w> (viewed Mar 2021).
- 2 World Health Organization. WHO Director-General's opening remarks at the media briefing on COVID-19 – 11 March 2020. <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020> (viewed Mar 2021).
- 3 Klapdor M. COVID-19 economic response – free child care. Parliament of Australia, 6 Apr 2020; amended 19 May 2020. [https://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/FlagPost/2020/April/Coronavirus\\_response-Free\\_child\\_care](https://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/FlagPost/2020/April/Coronavirus_response-Free_child_care) (viewed Mar 2021).

- 4 Parsell C, Clarke A, Kuskoff E. Understanding responses to homelessness during COVID-19: an examination of Australia. *Housing Stud* 2020; <https://doi.org/10.1080/02673037.2020.1829564>.
- 5 Arthur D. COVID-19 economic response – wage subsidies aim to put workplaces into hibernation. Parliament of Australia, 6 Apr 2020. [https://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/FlagPost/2020/April/Coronavirus-Response-Wage-Subsidies](https://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/FlagPost/2020/April/Coronavirus-Response-Wage-Subsidies) (viewed Mar 2021).
- 6 Victorian Health Promotion Foundation. VicHealth coronavirus wellbeing impact study: follow-up survey. Melbourne: VHPF, 2020. <https://www.vichealth.vic.gov.au/media-and-resources/publications/vichealth-coronavirus-victorian-wellbeing-impact-study-follow-up-survey#> (viewed Mar 2021).
- 7 Australian Government Department of Health. COVID-19 National Health Plan – Primary Care – MBS telehealth items staged rollout [fact sheet]. 24 Mar 2020. <https://www.health.gov.au/resources/publications/covid-19-national-health-plan-primary-care-mbs-telehealth-items-staged-rollout> (viewed Mar 2021).
- 8 Bendle S. Around the traps: 15 things to note for a new crisis, *Croakey* 2020; 4 June. <https://www.croakey.org/around-the-traps-15-things-to-note-for-a-new-crisis/> (viewed Mar 2021).
- 9 Russell L. Australia's health care after coronavirus – is there a silver lining to the pandemic? Pearls and Irritations: John Menadue's Public Policy Journal; 3 July 2020. <https://johnmenadue.com/lesley-russell-australias-health-care-after-coronavirus-is-there-a-silver-lining-to-the-pandemic/> (viewed Mar 2021).
- 10 Australian Institute of Health and Welfare. Indigenous Australians. <https://www.aihw.gov.au/reports-data/population-groups/indigenous-australians/overview> (viewed Mar 2021).
- 11 Horne R, Willand N, Dorigon L, Middha B. The lived experience of COVID-19: housing and household resilience (AHURI Final Report No. 345). Melbourne: Australian Housing and Urban Research Institute, 2020. <https://www.ahuri.edu.au/research/final-reports/345> (viewed Mar 2021).
- 12 Backholer K, Baum F, Finlay S, et al. Australia in 2030: what is our path to health for all? *Med J Aust* 2021; 214 (8 Suppl): S1-S40. ■