



## **PLENARY SESSION 0**

**POLITICAL ECONOMY OF NCD: PLAYERS, POWERS AND POLICY PROCESSES**



## | BACKGROUND

Noncommunicable diseases (NCD) epidemic constitute one of the major challenges for development in the 21 century, in terms of health and well-being as well as obstacle for socio-economic development in all societies, rich and poor alike. NCD are the leading causes of morbidity and mortality, claiming 40 million out of 56 million annual deaths globally. The number of premature death from NCD continues to rise disproportionately in low income and lower middle income countries where 47% (7 million) of premature deaths from NCDs occur.

NCD has got significant global political attention, since adoption of the Political Declaration on NCD prevention and Control at UN General Assembly in 2011; leading to the adoption of nine Global Voluntary Targets in 2013 covering targets on premature mortality, risk reduction and national system response; and the adoption of SDG 3.4 to reduce premature mortality from NCDs by one-third in 2030. However, under a business-as-usual scenario, or without scaling up efforts significantly before 2020, the current rate of decline in the risk of dying prematurely from non-communicable diseases is insufficient to meet the target by 2030.

Keeping social and economic significance of NCD epidemic and the progress we made so far, global community has witnessed two wonders. First wonder, there is a major systematic barrier separating what we know and what we do. Evidence shows that most NCDs are preventable, delayable and manageable. Furthermore, evidence also differentiates interventions those do not work from those cost-effective and feasible Best Buys interventions. Population-based preventive intervention can prevent half up to two-third of premature deaths, while effective individual-targeted health care can prevent one-third up to half of premature deaths. Evidence also confirms that investment for only one to three dollars per capita per year could make significant NCD premature mortality decline. The global community fail to close this know-do gap.

The second wonder; we know well that most effective interventions lie outside health care system boundary. Therefore, collaboration within and beyond public sector, or so-called Whole-of-Government and Whole-of-Society approaches are needed. Effective multisectoral coordination and collaboration are still a rare case in reality.

“Political economy” recently emerges as an innovative tool to better addressing policy agenda and program, beyond linear technocratic approach. It focuses on both politics and economics and interaction between them; power and resources, how they are distributed and contested and the resulting implications for development outcome; it also considers underlying interests, incentives, rents/rent distribution, historical legacies, prior experiences, social trends and how factors effect or impede change.<sup>1</sup> Meanwhile, OECD<sup>2</sup> describes “Political economy analysis is concerned with the interaction of political and economic processes in a society: the distribution of power and wealth between different groups and individuals, and the processes that create, sustain and transform these relationships overtime”.

While policy direction to tackle NCD is pretty clear, governments often find it difficult to safeguard the health and well-being of their population, in the context of multiple stakeholders with different and common values and interests, unevenly distributed influence, and with restricted capability. Report to the third High Level Meeting of UN General Assembly on NCD Prevention and Control identifies five groups of challenge which hamper the global progress of effort to tackle NCD epidemic. These are 1) weak and non-integrated political actions; 2) ineffective health system response; 3) inadequate national capacity; 4) insufficient international finance on NCD; and 5) industry interference. Arguably, these five major challenges are all about policy process of domestic and international stakeholders, policy actors as well as powers and interactions between them, leading to system competency to deal with NCD in any society.

Aims to foster and enhance global momentum for NCD prevention and control, PMAC 2019 introduces an unconventional outlook on NCD epidemic, through political economy perspective. At the outset, this Plenary is to set the scene and provides conceptual platforms to articulate all three sub-themes; better understanding of NCD determinants through political economy lens (sub-theme 1), promote comprehensive system approach to address NCD (sub-theme 2), and lastly, 3) unfold hindrance of and strategize roles of governments (sub-theme 3).

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1 World Bank, How-to notes: political economy assessment at sector and project levels (2011)

2 DFID. Political economy: how to note (2009)

## | OBJECTIVES

- To introduce and provide overarching conceptual fundamental for the whole PMAC 2019, covering all three sub-themes, in particular how political economy is important but neglected for NCD prevention and control
- To discuss how the whole society approach could better address political economy of NCDs





Moderator

## Timothy Evans

*Senior Director, Health, Nutrition and Population*

The World Bank  
United States of America

Tim Evans is the Senior Director of Health, Nutrition and Population at the World Bank Group. From 2010 to 2013, Tim was Dean of the James P. Grant School of Public Health at BRAC University in Dhaka, Bangladesh, and Senior Advisor to the BRAC Health Program. From 2003 to 2010, he was Assistant Director General at the World Health Organization (WHO). Prior to this, he served as Director of the Health Equity Theme at the Rockefeller Foundation. Earlier in his career he was an attending physician of internal medicine at Brigham and Women's Hospital in Boston and was Assistant Professor in International Health Economics at the Harvard School of Public Health. He is a board member of a number of international health alliances. Tim has been at the forefront of advancing global health equity and strengthening health systems delivery for more than 20 years. At WHO, he led the Commission on Social Determinants of Health and oversaw the production of the annual World Health Report. He has been a co-founder of many partnerships including the Global Alliance on Vaccines and Immunization (GAVI) as well as efforts to increase access to HIV treatment for mothers and innovative approaches to training community-based midwives in Bangladesh. Tim received his Medical Degree from McMaster University in Canada and was a Research and internal Medicine Resident at Brigham and Women's Hospital. He earned a D.Phil. in Agricultural Economics from University of Oxford, where he was a Rhodes Scholar.





Keynote Speaker

## Michael R. Reich

*Taro Takemi Research Professor of International Health Policy*

Harvard T.H. Chan School of Public Health  
United States of America

Michael R. Reich is the Taro Takemi Research Professor of International Health Policy at the Harvard T.H. Chan School of Public Health. He received his Ph.D. in political science from Yale University in 1981 and has been a member of the Harvard faculty since 1983. He has served as Chair of the Department of Global Health and Population and as Director of the Harvard Center for Population and Development Studies; he continues as Director of the Takemi Program in International Health. Dr. Reich has longstanding research interests in the political economy of health reform, pharmaceutical policy, and access to medicines. He coauthored a leading textbook on health systems, *Getting Health Reform Right: A Guide to Improving Performance and Equity* (Oxford University Press, 2004, with M.J. Roberts, W.C. Hsiao, and P. Berman). He has taught in the World Bank's Flagship Course on Health System Strengthening and Sustainable Financing since the course started and currently serves as director of the global course. Since the early 1990s, Dr. Reich has worked with David Cooper on a Windows-based software program for applied political analysis. This tool, called PolicyMaker, provides a computer-assisted guide for strategic political thinking about policy reform. The software is available for free on the Internet ([click here](#)). Many of his publications are available on his Harvard faculty website ([click here](#)). He is founding Editor-in-Chief of the journal *Health Systems & Reform* ([click here](#)), now completing its fourth year of publication. In April 2015, the government of Japan announced in its Spring Honors List the award of the Order of the Rising Sun, Gold Rays with Neck Ribbon, to Professor Reich, for his outstanding contribution to the promotion of Japan's policy for global public health as well as for advancing public health in Japan ([click here](#)). In November 2016, Dr. Reich received the Award for Lifetime Service to the Field of Health Policy and Systems Research from the Alliance for Health Policy and Systems Research and from Health Systems Global.



Panelist

## Margaret Chan

*President of Global Health Forum, BFA*

Boao Forum for Asia  
China

Dr. Margaret Chan, from the People's Republic of China, is the Director-General Emeritus of the World Health Organization (WHO). As the 7th Director-General from January 2007 to June 2017, Dr. Chan led WHO through a period of profound change. The political, social, economic and epidemiological challenges facing health in the early 21st century have been unprecedented in their complexity and global in their impact. Population ageing, antimicrobial resistance, climate change, obesity, and the globalised marketing of unhealthy products, chronic non communicable diseases overtook infectious diseases as the leading killers worldwide. The global economic slowdown since 2008 also affected populations around the world as many governments struggled to finance basic health services. Despite these immense challenges, Dr. Chan's leadership ensured sustained progress in improving health and life-expectancy in populations around the world. During her tenure, Dr. Chan led the global movement on "universal health coverage", and the global response to major health emergencies like the influenza pandemic, Ebola and Zika epidemics. She has also transformed WHO into one of the most transparent and accountable international organisations by initiating an ambitious program of reform since 2011. As Director-General, Dr. Chan frequently emphasised the importance of working in partnership with other stakeholders in society to achieve common goals in health. Dr. Chan obtained her B.A., M.D. and DSc degrees from the Western University, Canada and a MSc in public health from the National University of Singapore. She completed a programme for management development at Harvard Business School in Boston.



Panelist

## Naveen Rao

*Managing Director*

The Rockefeller Foundation  
United States of America

Dr. Naveen Rao joined The Rockefeller Foundation in 2018 as Managing Director for Health. In this role, he advances innovative strategies with the goal of bending the curve on country achievement of SDG targets for health, starting with maternal and child mortality and universal health coverage. The Rockefeller Foundation has a long history in health—from eradicating hookworm in the American South, to creating the field of public health, to developing the yellow fever vaccine. Today, the Foundation’s goal in health is grown out of the recognition that there exists a unique opportunity to harness the power of data for community health. The Foundation’s Health initiative, under Dr. Rao’s leadership, aims to build an approach that enables scale of successful data-driven efforts—strengthening community health systems. The Rockefeller Foundation aims to lead the global effort for data-driven community health by convening the right global partners, driving innovation, engaging the private sector, and developing public goods and best practices. Our approach will integrate disparate data sources and generate actionable insights for decision makers—delivering the right intervention to the right population at the right time. Our goal is to save the lives of 6 million at-risk mothers and children over the next 10 years. Prior to joining The Rockefeller Foundation, Dr. Rao held numerous leadership positions at Merck & Co., Inc from 1993 to 2018. His most recent position was Lead of Merck for Mothers, Merck’s 10-year, \$500 million initiative to reduce maternal mortality around the world. In this capacity, Dr. Rao was responsible for leveraging the company’s science and business expertise to accelerate progress in reaching the Sustainable Development Goals. Dr. Rao is Board Certified in Internal Medicine and is a Fellow of the American College of Physicians. He was Associate Director of the Department of Medicine at Beekman Downtown Hospital and practiced Internal Medicine in New York City for 10 years prior to joining Merck in 1993



Panelist

## Rocco Renaldi

*Secretary General*

International Food and Beverage Alliance  
Belgium

Rocco Renaldi is the Secretary General of the International Food and Beverage Alliance (IFBA). IFBA is a group of twelve of the largest international food and beverage companies, dedicated to developing, implementing and promoting good practice on health and nutrition. Rocco had led the development of IFBA's current global commitments on product formulation and innovation, responsible marketing, nutrition information to consumers and the promotion of healthy lifestyles. Rocco represents IFBA towards the World Health Organisation, other UN agencies and government authorities; he maintains relationships with non-governmental organisations; and leads the development of local initiatives modelled on the IFBA commitments around the world.





Panelist

**Sicily K. Kariuki**

*Cabinet Secretary (Minister)*

Ministry of Health  
Kenya



Panelist

## Takao Toda

*Vice President for Human Security and Global Health*

Japan International Cooperation Agency (JICA)  
Japan

As the Vice President for Human Security and Global Health, Dr. Toda promotes strategic planning and implementation of JICA's operations. Dr. Toda received Ph.D at the Graduate School of International Development in Nagoya University in 2009, master's degree at the Graduate School of Frontier Sciences in the University of Tokyo in 2001, and LL.B at the Faculty of Law in Kyoto University in 1984. For more than three decades, he has been playing various key roles of strategizing and implementing Japan's ODA, such as Group Director on Peace Building, Group Director on Human Security, Senior Fellow of JICA Research Center, Chief Representative of Bangladesh Office, Director General of Human Development Department. He has a wide range of knowledge and experience especially on the operationalization process of Human Security, which has been the core concept of Japan's diplomatic policy of international cooperation.

