



PLENARY SESSION 1

**THE POLITICAL ECONOMY OF THE DETERMINANTS OF NCDS: ACCELERATING
ACTIONS FOR PREVENTION**



| BACKGROUND

Noncommunicable diseases (NCDs), such as cardiovascular diseases, cancer, chronic obstructive pulmonary disease, diabetes and mental illnesses are the leading causes of morbidity and mortality, claiming 41 million out of 56 million annual deaths globally in 2016. The global premature deaths from NCDs, that is, the deaths between the ages of 30 and 69, are of particular concern: In 2016, 15 million people died prematurely, and nearly 85% of these deaths took place in low- and middle-income countries.

NCDs have been recognized as a significant development challenge and human rights issue, as they impede social and economic development and are driven by underlying social, economic, political, environmental, and cultural factors. Therefore, responding to NCDs and their shared risk factors, such as tobacco use, unhealthy diets, physical inactivity and harmful use of alcohol, along with environmental risk factors (e.g. air pollution), is not simply a matter of changing individual health behaviours in isolation. The international community has increasingly come to recognise that technical solutions to development problems will not work if they are not aligned with political economy concerns.¹

Leadership and action from the health sector is critical to respond to NCDs. However, there is a need for robust and coherent national policies and strategies in all sectors with an increased focus on the social, environmental and commercial causes of NCDs, requiring a whole-of-society and whole-of-government approach to address the underlying determinants. Intersectoral collaboration encompassing both health and relevant non-health sectors is necessary in combating NCDs at global, regional, national and local levels. The approach has been endorsed at the highest political level and is reflected in political documents, such as the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Noncommunicable Diseases, the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013-2020 and the 2030 Agenda for Sustainable Development.²

Although progress on chronic NCD prevention and control has been slow, there is now strengthened global support for action. The three High-level Meetings on NCDs have contributed to rising political attention to preventing chronic diseases globally. However, for countries to make progress in the implementation of high-level commitments, domestic solutions need to reflect local historical, political, cultural and institutional legacies.³

¹Global Health Estimates 2016: Deaths by Cause, Age, Sex, by Country and Region, 2000-2016. Geneva, World Health Organization; 2018

² Fox AM, Reich MR (2015) The politics of universal health coverage in low- and middle-income countries: a framework for evaluation and action, *Journal of Health Politics, Policy and Law* 40(5) 1023-60.

³ Bump JB (2010) *The long road to universal health coverage: a century of lessons for development strategy*. Seattle, WA:PATH

| OBJECTIVES

- To review the multi-level determinants of NCDs – biological, social, economic, behavioural, environmental, commercial, fiscal and political – using a political economy framework
- To discuss strategies in tackling the major risk factors (unhealthy diets, tobacco use, harmful use of alcohol, physical inactivity and environmental pollution) and the underlying determinants, focusing on the implementation of cost-effective interventions to achieve SDG3.4 and other NCD-related targets
- To share and learn from national, regional and global experiences in addressing the main risk factors of NCDs and their social, economic, commercial, fiscal and political determinants
- To provide examples of strategies on how to scale up best NCD prevention practices in different contexts
- To identify knowledge gaps and approaches to address them
- To formulate key policy recommendations and actions to implement the proposed solutions





Moderator / Speaker / Panelist

Tea Collins

Adviser, WHO Global Coordination Mechanism on Noncommunicable Diseases

World Health Organization
Switzerland

Téa Collins, MD, MPH, MPA, DrPH, is Adviser to the World Health Organization (WHO) Global Coordination Mechanism on the Prevention and Control of Non-Communicable Diseases (GCM/NCD), where she oversees work on development cooperation, resource flows into NCDs, strengthening health systems for universal health coverage, implementation research and social determinants of NCDs. Dr Collins came to WHO from the International Atomic Energy Agency (IAEA), where she provided technical advice and expertise on matters related to comprehensive cancer control and health systems strengthening to the Programme of Action for Cancer Therapy (PACT). Prior to IAEA, Dr Collins advised the World Medical Association (WMA) on global health issues of concern to the medical profession, in collaboration with the WHO Global Health Workforce Alliance. As part of her work at WMA she oversaw a global campaign on immunization against influenza among physicians and other healthcare workers. She also served as the first Executive Director of the NCD Alliance, a partnership of over 2,000 member organizations in 170 countries with a mission to combat the NCD epidemic by putting health at the center of all policies. Dr Collins' background includes work at the national Ministry of Health in Georgia, as well as experience managing technical assistance for the US\$ 20 million World Bank Health Reform Implementation Project. She also led the USAID-supported reproductive health and primary health care education projects in the Caucasus targeting internally displaced populations. Dr Collins's academic work includes an appointment at the George Washington University in Washington, DC, where she taught graduate courses on subjects ranging from international health and development to strengthening health systems in Eastern Europe and the former Soviet Union. While at GWU, Dr Collins conducted research and consulted with organizations such as John Snow, Inc., the US Department of Health and Human Services and the National Council on Hispanic Aging. Dr Collins is a pediatrician with a Doctorate in Global Health from The George Washington University, as well as a Master's Degree in Public Health from Boston University and a Master's Degree in Public Administration from the Harvard University Kennedy School of Government. She was a Presidential Scholar, Mason Fellow and Public Service Fellow at Harvard and served on the Board of Directors of the Kennedy School Alumni Association.