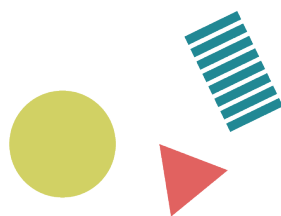




**PMAC**

PRINCE MAHIDOL  
AWARD CONFERENCE

**2019**



## **PARALLEL SESSION 3.5**

**FRAMING NCDS TO ACCELERATE POLITICAL ACTION**



## | BACKGROUND

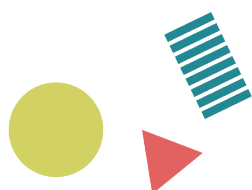
There are multiple competing frames involved in the governance of noncommunicable diseases (NCDs). These include: NCDs as a technical public health problem, with technocratic solutions (such as WHO's Best Buys); NCDs as an obstacle to economic growth; NCDs as an equity and human rights issue; NCDs as a development issue, central to achieving the SDGs; NCDs as an externality of transnational corporate practice, an 'industrial epidemic'; and NCDs as a multi-sectoral issue, requiring a 'whole-of-government', 'whole-of-society' approach. This typology of framing also links NCDs to existing global health agendas, such as those of health security, UHC and health systems strengthening. There are also additional risk factor and disease-specific frames, for example concerning obesity/diabetes, sleep deprivation and environmental exposures to pollution. No one frame yet has dominance, and there is currently a pluralistic approach to conceptualising NCDs and the response required to manage them. The response globally has been heavily criticised for its fragmentation - often seen as a major hindrance to progress, especially regarding the achievement of political traction. It is not clear how the different competing frames might be contributing to the fragmented response. However, it is clear that the commonalities and overlaps in the various frames and agendas could be better harnessed and any synergies realised to accelerate political commitment and action.

## | OBJECTIVES

- Informed by the commissioned paper (provided by Chatham House), to provide an opportunity for participants to reflect on the framing of NCDs - a neglected topic in policy discussions thus far.
- To bring together actors and opinion-formers from across the NCD response spectrum, to discuss and debate how their different framings may be affecting progress, especially in terms of political action;
- Based on both the commissioned paper, and the discussions by participants, to make recommendations on how to accelerate political commitment.
- Via a targeted call for abstracts to increase the participation of younger and less well-known NCD experts, to bring fresh voices, and new ideas to the table.

**DRAFT 20Commissioned 20Work 20for 20PMAC 202019 ( [Download](#) )**

**PMAC 20session 203.5\_audience 20 Handout ( [Download](#) )**





## Panelist

### Johanna Ralston

*Chief Executive Officer*

World Obesity Federation  
Switzerland

Johanna Ralston has worked in global NCDs and their risk factors for over two decades. She has served as CEO of World Obesity Federation since 2017, focusing on changing the narrative and elevating obesity on the global agenda. From 2011-2016 Johanna served as CEO of World Heart Federation, the main CVD organization in official relations with WHO and a founder of NCD Alliance. Johanna's work included mobilizing the CVD community around the NCD agenda and WHO initiatives including the Global Action Plan on NCDs 2013-2020 and Global HEARTS, as well as a shared strategy to address rheumatic heart disease. Johanna also served as Vice Chair, steering group member and Interim Director of NCD Alliance during that period, and led the communications strategy for the 2011 UN HLM and strategic planning for the second business plan. From 1999 until 2011 Johanna was Vice President of Global Strategies at American Cancer Society, overseeing global advocacy and building the global capacity building program to strengthen community based cancer and tobacco control in LMICs. She is also a fellow at Geneva Centre for Security Policy, leading the course on global health security. A dual citizen of Sweden and the US, Johanna is an alumna of Harvard Business School and studied public health at Johns Hopkins, after a first degree in literature. She serves on various committees and boards including Lung Cancer Alliance, the WEF Global Future of Health and Healthcare Council, and the WHO NCD Civil Society Working Group, the WHO Expert Advisory Panel on Surgical Care, and the WHO Bloomberg NCD Business Case Expert Group.

