**BACKGROUND**

The world is facing a spectre of non-communicable diseases (NCDs), which will diminish the length and quality of life, interact with existing health conditions, raise household and public health expenditures, and increase the burden of care on family members. A number of policies have been implemented to fight NCDs and studies have shown some interventions to be ‘best buys’ whereas others are ‘wasted buys’. Most NCDs can be preventable and, given the generally lower cost and simpler delivery of preventive interventions, a move towards preventive rather than curative interventions could be attractive. Another approach that is gaining prominence in discussions of NCDs is ‘do-it-yourself’ or DIY interventions. NCDs are by definition not contagious or infectious and people develop them over the course of their lives for many reasons including those to do with lifestyle. As such, they can be prevented if people modify their lifestyles (i.e., in DIY interventions). At present, there is no definitive collection of evidence on ‘best buys’, ‘wasted buys’, and DIY interventions for the prevention of the NCD burden that governments, health professionals, NCD program managers, and healthy lifestyle promotion personnel can use.

**OBJECTIVES**

This session will introduce an upcoming information package which aims to provide details on Best Buys, Wasted Buys, and DIYs in NCD prevention focusing on cardiovascular diseases (heart disease and stroke), diabetes, chronic lung disease and cancers. This work is not intended to offer a one-size-fits-all approach for making recommendations on NCD prevention. It seeks instead to identify how different systems can create and utilize information for identifying interventions offering best value for their populations.
Panelist / Moderator

Jesse Bump

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Jesse B. Bump is Executive Director of the Takemi Program in International Health and Lecturer on Global Health Policy in the Department of Global Health and Population at the Harvard T.H. Chan School of Public Health. He leads the global health field of study in the Master of Public Health degree and teaches on the political economy of global health. His research focuses on the intellectual ecology of global health, examining the historical, political, and economic forces that are among the most fundamental determinants of ill health, and the most significant contextual factors that shape institutions and the approaches they embrace. This work addresses major themes in global health history, and in the political economy of global health to analyze these macro forces and develop strategies for navigating solutions within them. Projects have investigated the history of child health problems such as diarrheal disease and congenital syphilis to explain how issues rise and fall on the global health agenda and to produce strategies to better align political visibility with health needs; the historical development of health systems and the implications for development assistance in that area; and the political economy of policy making and implementation in areas such as universal health coverage, humanitarian assistance, tobacco control, and nutrition governance. Dr. Bump has collaborated with the Wellcome Trust on access to pharmaceuticals and aid allocation, the Rockefeller Foundation on applied political economy analysis for universal health coverage, the World Health Organization on the political economy of evaluation, and with UNICEF on the history and politics of nutrition policy. Dr. Bump holds a Baccalaureate in Astronomy and History from Amherst College, a Master in Public Health from Harvard University and a PhD in the History of Science, Medicine, and Technology from the Johns Hopkins University. Previously he was a Takemi Fellow at the Harvard School of Public Health and then Assistant Professor in the Department of International Health at Georgetown University.