

## **PARALLEL SESSION 3.5**

**FRAMING NCDS TO ACCELERATE POLITICAL ACTION**



## | BACKGROUND

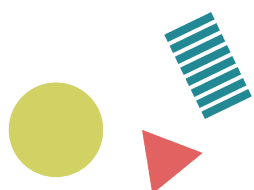
There are multiple competing frames involved in the governance of noncommunicable diseases (NCDs). These include: NCDs as a technical public health problem, with technocratic solutions (such as WHO's Best Buys); NCDs as an obstacle to economic growth; NCDs as an equity and human rights issue; NCDs as 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

## Rhea Saksena

*Global Policy Coordinator*

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Rhea Saksena is an active health advocate. She currently works as a Medical Doctor in London within National Health Service (NHS). Alongside this she is the Global Policy Coordinator for NCDFREE, a global social movement which aims to create a world free of NCDs. She completed her undergraduate studies in Global Health at the Institute of Global Health, University College London (UCL) where she graduated with First Class Honours. She was nominated for the Faculty of Life Sciences Medal for her dissertation analysing whether a more comprehensive strategy on sugar reduction is needed to reduce obesity in the UK. She was also awarded Highly Commended on the UCL Dean's List and awarded the John Yudkin Prize in International Health for outstanding commitment to global health advocacy. She completed her medical training from UCL with a Certificate of Merit. She has worked as Scientific Officer with Public Health England to design and implement national sugar reduction strategies to reduce childhood obesity. Rhea has also undertaken an internship with the World Health Organisation Regional Office for Europe in the Nutrition, Physical Activity and Obesity Department, co-designing a study to look at market availability of complementary feeding products across the WHO European Region and their effect on Under 5 years nutrition and obesity rates. Furthermore she has interned with the WHO Country Office in Samoa to implement a national NCD strategy (PEN Fa'a Samoa) as well as working in the Obstetrics and Gynaecology Department in Samoan National Health Service. She is excited to use the learning from these experiences as she pursues her passion - to collaborate and use a collective voice to demand better, for the health of both individuals and populations.

