POLITICAL ECONOMY OF NCDS

C. JAMES HOSPEDALES
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ACCELERATING NUTRITION POLICIES IN THE CARIBBEAN: CREATING SUPPORTIVE ENVIRONMENTS FOR HEALTHY CHILDREN

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Involving young people: Luca helping me to shop in the hardware
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Introduction/Background
First major global health symposium to include Political Economy (PE) in its title and frame for discussion.

... organizers called this “an unconventional outlook.”

This commentary argues that political economy should become viewed as a conventional, indeed, an essential outlook for NCDs, and more broadly for global health.
A FEW HOOKS TO HANG IDEAS on
THE POLITICAL ECONOMY OF NCDs

1. Definitions
2. Themes and Actors
   1. Determinants and role of commercial enterprises
   2. NCDs in social systems and role of patient organisations
   3. Governance challenges and role of government agencies
3. Concluding Comments
Definitions

• Political Economy (PE): how the distribution of political and economic resources affect something we care about, e.g., inequality, health, environment...

• PE analysis considers power, interests, stakeholders, ideologies

• PE: “Who gets what, when and how” – actors, consequences, timing, processes (Lasswell 1936)
CARICOM 6-Point Policy Package for Healthier Food Environments

Evidence-informed, comprehensive

Something I care about…
Something we all care about…
Scientific Evidence about NCDs is not enough to improve health; Political Economy Analysis and Strategies are also needed to make progress...

Need to package evidence to “speak to the Head, the Heart and the Pocket”
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Need to package evidence to “speak to the Head, the Heart and the Pocket”

If you talk to a man in a language he understands, that goes to his head. If you talk to him in his language, that goes to his heart.

NELSON MANDELA
Using Political Economy to Analyse NCDs

- Three themes
- One key actor for each theme

1. Determinants of NCDs
   Commercial Enterprises: as drivers of the epidemic

2. NCDs in Social Systems
   Patient Organisations: Role in creating solutions

3. Governance challenges
   Government Agencies: Role in changing institutions and actions for NCDs
Discussing launching of **CARICOM Moves** with Prime Minister Harris of St Kitts & Nevis and Christopher Tufton, Minister of Health of Jamaica, June 2019
Theme 1. Political Economy of Changing the Determinants of NCDs

A magical policy solution, “Two birds with one stone”: Increased flows of new revenues for government, and reduced disease burden and health costs

But that is the technical/economic aspect of the policy solution; overlooks the PE of introducing ‘sin taxes’

Requires political economy analysis and strategies – because of huge commercial interests that benefit from production, sale, consumption

Introducing ‘sin taxes’ *inevitably* triggers a political struggle with commercial organisations, which have greater economic and political resources that under-resourced public health advocates

*How and when can public health win, despite powerful commercial forces?*
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How and when can public health win, despite powerful commercial forces?
Tobacco control

- Literature on political economy limited, even with long history of policy struggle

- Systematic review found only 8/2,500 papers that used PE analysis to examine tobacco control in Low- and Middle-income countries *(Jesse Bump et al 2013)*

- Primary opposition to taxation is transnational tobacco companies and their allies
What does this look like in practice?

Successful passage of soda tax in Mexico. Advocates used PE analysis as one factor to decide on strategies to promote the tax in Mexican society, and push the tax through Congress (Erin James et al, 2019)
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How do industry interests overpower public health?

The Coca Cola Company created a NGO (a BINGO) in China to shape scientific research and public policy for 15 years. (Making China safe for Coke: Susan Greenhalgh 2019)

A complex web of institutional, financial and personal linkages; group operated within the China CDC, shaping government policy on obesity in line with corporate policy, “that it is activity, not diet, that matters”
Theme 2: Political Economy of NCDs in social systems

Changing a health system’s orientation often requires political struggle – evidence is *necessary but not sufficient* and needs packaging.

One key force comes from people directly harmed – people living with NCDs – but not easy to take personal troubles public

Lessons from Caribbean and world experience of HIV/AIDS – critical role of affected people in organising social movements

Similar lessons learned from environmental causes, pollution, civil rights, maternal and child health, TB...

The world needs mobilisation of people living with NCDs in order to change the PE of NCDs and change resistant government and corporate policies...
Social mobilisation 2,500 years ago

• Case of Nehemiah re-building the walls of Jerusalem....
• faced situation of poverty beyond belief... ‘there was a great outcry of the people and of their wives ...’
• wealthier Jews had taken advantage of those less fortunate and reduced many to slavery...
• “Then I was very angry when I had heard their outcry...
• I thought it over ... and contended ... with the nobles and the rulers ...
• Therefore, I held a great assembly against them"
Social mobilisation for NCDs

- Where is the “great assembly” of people with NCDs?

- How can we do this next year - digitally?
Social mobilisation for NCDs

• Where is the “great assembly” of people with NCDs?

• How can we do this next year - digitally? Get the Message 2.0 campaign?

• How to create connections across different conditions, e.g., breast cancer and anti-tobacco movements, which have had success in catalysing change?
• **Theme 3: Political Economy of reforming governance of NCDs**

• Institutions resist change – period!

• Gap in global governance is striking – Declarations say NCDs are a priority, but development assistance very limited in LMICs. *How are WHO, USAID, W Bank, DFID etc., being held accountable?* (Critical area for research.)

• At national level, governance is weak and confused. Health systems often not oriented to NCD services

• At regional level, despite POS Declaration, governance is also weak and fragmented. *How are our Heads of Government being held accountable?*

• Additional PE challenge for national action is that interventions needed outside health sector, e.g., food and agriculture regulation, changing school curricula. Requires cross-ministry collaboration that creates bureaucratic obstacles
Concluding Comments

• Political Economy thinking and analysis needed...

• Development agencies, Foundations need to move from slogans to action and provide funding support. Include PE in grant proposals

• Researchers need to direct more attention to the PE of NCDs - not just epidemiological and economic analysis

• Need accountability mechanism for assessment of PE analyses in practice and research

• Regional initiatives/ mandates help provide ‘air cover’ for national policy makers

• Absolutely key role of patient organisations and civil society, youth, women, old folks

• “Insertion” into standing items on agenda of Conference of CARICOM Heads – Climate Change, Caribbean Single Market and Economy

• … we still have problems - few people know what is/are NCDs, we lack the capacity for negotiation and partnership work. We talk partnership but there is a dearth of how-to guidelines and training (The Partnering Initiative of UK a rare exception)
THANK YOU!