Showcase 2016: Political Economy of Public Health
TUESDAY SEPTEMBER 6, 2016
PublicHealth@Cambridge
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“PublicHealth@Cambridge is a multidisciplinary community of researchers established in 2013 to strengthen our capacity beyond the established membership of the Cambridge Institute of Public Health, allowing us to work together to tackle research in areas of public health importance.

“Today’s Showcase focuses on one current area we are keen to build in Cambridge: Political Economy of Public Health. This is a growing multidisciplinary field that combines public health research with political economy research in the Germanic tradition. It uses theories and methods from this tradition to explain population health outcomes, as well as how the unspoken rules governing health systems and health resources develop.”

Professor Carol Brayne, Chair of the PublicHealth@Cambridge Steering Committee
10.00 Introduction and welcome
   Carol Brayne, Network Chair

10.15 Lightning talks

   Marko Tainio / MRC Epidemiology Unit
   Mortality and consumer cost impacts of five physical activity and six diet scenarios: A Health Impact Assessment study

   Stephanie Palmer / Faculty of Law
   The role of law and evidence in response to non-communicable diseases

   Elias Nosrati / Department of Sociology
   Health inequalities under a strong welfare state

   Victor Roy / Department of Sociology
   Betting on Hepatitis C: The financialisation of drug development and public health

   Freya Jephcott / Department of Veterinary Medicine
   Beyond a foreign vision of outbreak response systems in West Africa: The case study of a cryptic encephalitis outbreak in the Brong-Ahafo region of Ghana

   Silja-Riin Voolma / Public Health and Primary Care
   Adding insights from history into public health intervention design: A case study from Estonia

   Katarzyna Doniec / Department of Sociology
   Austerity threatens universal health coverage and quality of healthcare in Brazil

   Philip Chen / Department of Land Economy
   The socio-economic implications of environmental policies

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11.35 Martin McKee
London School of Hygiene and Tropical Medicine
The corporate determinants of health: Overcoming the methodological challenges

12.15 Lunch and poster session

13.30 Larry King
University of Cambridge
Privatisation and the postcommunist mortality crisis

14:10 Anna Gilmore
University of Bath
The importance of understanding disease vectors: The case of the tobacco industry

14.50 Coffee

15.20 David Stuckler
University of Oxford
The body economic: Why austerity kills

16.00 Sarah Hawkes
University College London
Gender and global health institutions: Understanding the evidence to policy gap

16.40 Discussion

17:15 Drinks reception

18:30 Close
Lightning talks

Marko Tainio  
*MRC Epidemiology Unit*  
Mortality and consumer cost impacts of five physical activity and six diet scenarios: A Health Impact Assessment study

Physical inactivity and lack of fruit and vegetables (F&V) in diet are significant risk factors for mortality. In this study we estimated changes in mortality and consumer costs for five physical activity and diet scenarios. In hypothetical scenarios car trips of different lengths were replaced with cycling. For the diet scenarios the study population was assumed to increase F&V consumption. Physical activity scenarios benefited most people with high sex and socioeconomic status (SES) and diet scenarios people with low SES. Diet scenarios increased costs, with highest proportional increase in costs for lowest SES groups. Increasing F&V consumption could create large health benefits and reduce health inequalities, while replacing short car trips with cycling would create benefits for health and costs.

Stephanie Palmer  
*Faculty of Law*  
The role of law and evidence to non-communicable diseases

Non-communicable diseases (NCDs) pose an increasing burden on health systems. Tobacco use, excessive alcohol consumption, and unhealthy diets and lifestyles are the primary NCD risk factors. States have been urged to take steps towards prevention of NCDs. The UK has introduced policies and implemented legal regulations with the aim of promoting healthier lifestyles. These regulatory interventions have led to legal litigation as they affect the commercial interests of powerful economic entities. Public health responses to NCDs must consider from the outset the exacting analysis that will be required in a court of law. This presentation will consider the issue of evidence in developing and defending public health regulations on NCDs.

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Elias Nosrati  
*Department of Sociology*

Health inequalities under a strong welfare state

Despite the presence of strong welfare policies targeting structural inequalities, distinct health inequalities persist in Scandinavian societies. In Norway inequalities in diabetes prevalence are particularly salient, notably between ethnic groups. In this talk, I will shed light on the sociospatial mediation of these inequalities. In the Norwegian welfare system, material factors play less of a role than in other advanced capitalist nations. However, the political economy of urban space and the spatial distribution of health-related resources exert an independent effect on diabetes prevalence. The principal policy implication would be that beyond public commitment to strong welfare states, efforts must be made to combat the creation of toxic environments.

Victor Roy  
*Department of Sociology*

Betting on Hepatitis C: The financialisation of drug development and public health

New curative medicines represent a crucial breakthrough for patients with Hepatitis C, a chronic infectious disease among the world’s leading killers. Yet the affordability of these medicines has challenged health systems around the world to scale-up diagnosis and treatment. This talk examines the influence on public health of the financial sector. The development of medicine is followed from the labs of public institutes, small and large companies, and finally to patients. Expensive bidding wars, share buybacks, and sales growth projections for a curative therapy show how the costs of research are magnified. Long-run trends in corporate governance and drug development are revealed as key determinants for determining the trajectory of this viral epidemic.
Alcohol consumption in Estonia is the highest in Europe and although cigarette smoking is reduced, other forms of tobacco consumption are on the rise. Our focus group study aimed to explore the attitudes and beliefs that Estonian adolescents and young adults hold around alcohol and tobacco consumption. Themes emerging included deeply-rooted beliefs in the inability of individuals to change their behaviour, in the inevitability of Estonians overconsuming alcohol and of alcohol and tobacco needing as an aid to socialising and stress relief.

We developed a digital intervention programme to reduce the alcohol and tobacco consumption in Estonian adolescents and young adults. Engaging adolescents and young adults in the intervention design process is crucial for developing effective interventions.
Katarzyna Doniec  
*Department of Sociology*

**Austerity threatens universal health coverage and quality of healthcare in Brazil**

Brazil is currently facing serious economic recession and political crisis. While Dilma Rousseff is facing an impeachment trial, new centre-right government is introducing severe austerity measures to revive economic growth. Reduction in public spending is going to affect the sectors of education and health care.

Apart from fiscal adjustment, current government is undertaking various actions to deregulate the public healthcare system, leading to over-reliance on the private sector. This drastic change in policy has severe implications for public health and threatens human rights.

This talk discusses briefly Brazil’s government new policies and their detrimental effects on universal health coverage and quality of health care as well as the methodology and preliminary findings of the project.

Philip Chen  
*Department of Land Economy*

**The socio-economic implications of environmental policies**

Environmental policies aimed at improving air quality often lead to public health improvement. However, socio-economic development is also associated with health improvement. Socio-economic and environmental agendas often compete for attention, particularly in developing countries. It is therefore important to assess the public health benefits of environmental policies in relation to socio-economic policies. We develop an economic model which predicts a positive influence of income and education on health, and a negative impact from increasing age. The model also predicts that environmental policies benefit the low income, low education and old age groups more heavily, since these groups are more vulnerable to ambient air pollution. Environmental policies therefore have the potential to reduce health inequity.
The corporate determinants of health: Overcoming the methodological challenges

This paper starts from the premise that transnational corporations are an increasingly important but still inadequately researched determinant of population health. They exert visible, hidden, and invisible power, and it is the last of these that is most challenging for researchers. I will identify four ways in which corporations exert power, by defining the narrative and how issues are framed, by capturing regulatory processes, including investor state dispute settlement processes, by exploitation of people and resources, and by extending the concept of property, in particular by defining the rules around intellectual property. I will illustrate each of these examples of how research methods have been used to make the invisible visible.

Martin McKee CBE MD DSc FRCP(Lond) FRCP (Edin) FRCPI FFPH FMedSci is Professor of European Public Health at the London School of Hygiene and Tropical Medicine where he founded the European Centre on Health of Societies in Transition (ECOHOST), a WHO Collaborating Centre. He is also Research Director of the European Observatory on Health Systems and Policies and President of the European Public Health Association. He trained in medicine and public health and has written extensively on health and health policy, with a particular focus on countries undergoing political and social transition.
Larry King  
*University of Cambridge*

**Privatisation and the postcommunist mortality crisis**

After the collapse of Communism the Post-Soviet countries experienced an unprecedented mortality crisis, with as many as 7 million excess deaths occurring during the 1990s. Public health researchers have identified alcohol and psychosocial stress as important proximal determinants of individual level mortality. However, there has been very little work on the explanations of the variation across or within countries or on the more distal causes of elevated mortality levels. This talk will present research filling this gap with macro-, meso- and micro-level data linking radical privatisation programs to elevated male mortality levels in Russia.

- Lawrence King is Professor of Sociology and Political Economy at the University of Cambridge and has published extensively on the political economy of the transition from Soviet-style systems to capitalism, as well as in the nascent multidisciplinary field of the Political Economy of Public Health. This latter work includes studies of the impact of privatization on mortality in postcommunist society, the impact of International Monetary Fund programs on health systems in Sub-Saharan Africa, and access to pharmaceuticals in the US and UK, among many other topics.
The importance of understanding disease vectors: The case of the tobacco industry

This presentation will explain why understanding corporations whose products are damaging to health is key to public health using the example of the tobacco industry. In so doing it will provide an overview of the structure and profitability of the global tobacco industry, present a recently developed taxonomy of its corporate political activity and illustrate this using the tobacco industry’s efforts to undermine plain packaging legislation in the UK. Finally, it will explore some of the more difficult issues facing tobacco control and public health policy making.

Anna Gilmore MBBS (hons), DTM&H MSc (dist) PhD FFPH is Professor of Public Health, and Founding Director of the Tobacco Control Research Group (TCRG) at the University of Bath and a member of the UK Centre for Tobacco and Alcohol Studies. Her work focuses on corporate influences on health and policy, and policy evaluation. The impacts of her research have been recognised through two international awards – the Public Health Advocacy Institute Award and the WHO World No Tobacco Day Award for outstanding contribution to tobacco control. She is European Editor of Tobacco Control, is a member of various international and national expert groups including the WHO Expert Committee to Examine Tobacco Industry Interference with Tobacco Control and the Royal College of Physicians Tobacco Advisory Group. Her research group established www.TobaccoTactics.org, a widely acclaimed innovative knowledge exchange platform that provides public access to timely research on tobacco industry conduct. You can follow the TCRG on @BathTR

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The global financial crisis has had a seismic impact upon the wealth of nations. But we have little sense of how it affects one of the most fundamental issues of all: our physical and mental health.

The Body Economic puts forward a radical proposition. Austerity, it argues, is seriously bad for your health. We can prevent financial crises from becoming epidemics, but to do so, we must acknowledge what the hard data tells us: that, throughout history, there is a causal link between the strength of a community’s health and its social protection systems. Now and for generations to come, our commitment to the building of fairer, more equal societies will determine the health of our body economic.

David Stuckler, PhD, MPH, HonMFPH, FRSA is a Professor of Political Economy and Sociology at University of Oxford and research fellow of the London School of Hygiene and Tropical Medicine. He has written over 170 peer-reviewed scientific articles on global health in The Lancet, British Medical Journal and Nature in addition to other major journals. His book about the global chronic-disease epidemic, Sick Societies, was published by Oxford University Press in 2011. He is also an author of The Body Economic, published by Penguin Press in 2013 and translated into over ten languages. His work has featured on covers of the New York Times and The Economist, among other venues. Foreign Policy named him one of the top 100 global thinkers of 2013.
Gender and global health institutions: Understanding the evidence to policy gap

Gender is described as being “among the most influential of the social determinants of health” (Sen and Ostlin, 2010). Despite the widely acknowledged role that gender can play on health outcomes – through its interaction with biological sex, its influence on risk behaviours, its role in determining whose health needs are addressed by societies, and its intersection with other drivers of health status (Crenshaw 1991, Collins 1998) – there has been little systematic analysis of the policy and institutional positions of global and national health institutions to gender as a health determinant. In this talk, I will analyse the global evidence for the differences in risk-taking, ill-health and mortality, suffered by men and women, and will then explore possible drivers of the differences from a gender perspective. The talk will analyse the responses of global health institutions to the evidence of the interaction between gender and health, and will investigate what might be driving such responses. Strategies for bridging the evidence to policy gap will be discussed.

Sarah Hawkes is a medical doctor with a degree in sociology and a PhD in epidemiology. She is Professor of Global Public Health at University College London where she leads a research theme analysing the use of evidence in policy processes, particularly in relation to gender and health, and sexual health. She has lived and worked for much of the past 20 years in Asia, where she has gathered evidence, built capacity and helped develop policy for programmes focusing on gender, sexual health and rights. She works closely with national governments, research organisations, WHO and UNFPA in Asia and the Middle East. From 2012-2014 Sarah was Wellcome Trust Senior Fellow in International Public Engagement, and focused on the use of public engagement in policy processes.

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Posters

- Rafael Dall Alba / Federal University of Rio Grande do Sul, Brazil
  Discrepancies and disputes in technical healthcare models in Brazilian Unified Health System (SUS)

- Sally Atkinson / Cambridge Institute of Public Health
  Robustly social, meaningfully ethical: Embedding social science in the Dementias Platform UK

- Cornelia Guell / UKCRC Centre for Diet and Activity Research (CEDAR)
  Negotiating evidence in uncertain times: A qualitative study of knowledge exchange in transport and health

- Zack Hassan / Cambridge Institute of Public Health
  Are ACOs a suitable Healthcare Delivery Model for England?

- Sarah Kelly / Cambridge Institute of Public Health
  Alcohol in older people: Systematic reviews of interventions and context

- Richard Milne / Cambridge Institute of Public Health
  Approaches to the communication of Alzheimer’s disease risk (ACAR)

- Olawale Olanrewaju / Cambridge Institute of Public Health
  Physical activity in community dwelling older people: A review of systematic reviews of interventions and context

- Olivia Remes / Cambridge Institute of Public Health
  Area deprivation and generalised anxiety disorder: Findings from the EPIC-Norfolk cohort study

- Helen Street / Cambridge Institute of Public Health
  How context matters to re-consent and participation in longitudinal health research

- Tennie Videler / Cambridge Institute of Public Health
  What can a Research Funding Coordinator do for you?

- Ian Wellwood / Cambridge Institute of Public Health
  Improving uptake and adherence to exercise-based rehabilitation programmes in long term conditions: A series of systematic reviews
The PublicHealth@Cambridge Research Network generates fresh insight into the health and well-being of global populations via our multidisciplinary community of researchers. We support development of new research and coordinated activities in areas of importance to public health and facilitate translation of research to the benefit of current and future populations.

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For any questions, comments or discussion, please contact the Network coordinator, Dr Paula Frampton: coordinator@publichealth.cam.ac.uk