

The NCD Academy: leveraging the essential role of health professionals in advocacy

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Langue Anglais



In this blog, Grace Dubois, Acting Head of Policy & Advocacy at NCD Alliance, reflects about the decision to leave her career as a doctor to get involved in health policy.

A few years ago, my typical work day might have included racking up a few kilometres trekking up and down hospital corridors, welcoming a couple of beautiful babies into the world, standing for long hours behind an operating table, and running an antenatal clinic. Today, my days are more marked by thinking, writing and meetings – oh, the meetings! Meetings with Ministry of Health officials, WHO staff, advocates, and team members...

True, the differences in my role then - as an obstetrics and gynaecology doctor, and now - as an advocate of effective policy and action related to noncommunicable diseases, might seem striking but my fundamental goal is the same – shaping a world in which people can live healthy and productive lives, free from the preventable suffering, stigma, disability and death caused by disease. The main difference? Instead of creating a differential diagnosis and treatment plan for patients, I construct them for health systems.

What led me to leave a career I loved, caring for people in a very practical and useful way, to my current role which entails hours behind a computer screen? A valued mentor challenged me to “look upstream”. My mentor’s challenge started me down the path of public health. I can still remember the groans of my medical school cohort whenever “statistics”, “public health” and “epidemiology” were mentioned. However, we are being negligent as healthcare professionals if we do not realise that people are not isolated islands – we and our patients live in societies that are steeped in influences, both positive and negative, on our health – be they the type of housing we live in, the support we receive from our neighbours, the advertisements we are exposed to, the type of food we choose and eat, the list goes on.

We are all advocates

Over the years I have learnt, and continue to learn, that problems are never as simple as they first appear and long-term solutions for problems related to health cannot purely revolve around patient care in health care structures. For example, I am sure I am not the only healthcare professional who found myself frustrated to see the same patient present with the same condition on multiple occasions over the course of a few months or years.

Nurses, pharmacists and doctors are vital for the health of a population. But so too are individuals who look to be “doctors and nurses” of the health systems themselves. Advocacy is defined as “public support for an idea, plan, or way of doing something” in the Cambridge Dictionary. As a doctor, I would never have said I was an advocate, but looking back I can see that advocacy has always been an integral component of my work of effectively caring for patients. For example, without knowing it as a junior doctor I advocated for a woman to receive an ultrasound scan showing ruptured appendicitis that would have otherwise been missed, and whilst on my medical elective, I advocated for an increased focus on community health training in a rural hospital in India. Advocacy doesn't sound as foreign, now does it?

Our health systems need YOU!

[The new NCD Academy course](#) [1] provides an opportunity to find out more about advocacy and how health care professionals can be involved in influencing health policy at local, country, regional and global levels. Its three modules take a stepwise approach introducing you to advocacy and its relevance to your day-to-day life as a healthcare professional, whilst giving you a taste of the opportunities available to engage in advocacy at national, regional and global levels. The course will teach you how to develop goals for your advocacy, and then how to implement effective advocacy activities to create the political support needed to achieve your goals.

I challenge you to give the course a try. We all want the best for our patients and we all have more to learn to improve our effectiveness as healthcare professionals. Getting a good grasp on advocacy can help you amplify good practice and achieve sustained, meaningful impact, whilst enabling people to stay at the center of their care.

But beware! “Looking upstream” has led to me to undertake a Masters of Public Health, to work in remote rural villages in western Myanmar and to swanky Geneva office buildings as well as to countless hours in front of a computer screen. Where might it take you? More importantly, what could be the positive impact it could have on those all-too-frequent return visitors to your clinic?

About the author

Grace Dubois is Acting Head of Policy & Advocacy at NCD Alliance. Grace joined the NCD Alliance in June 2020 as Policy and Research Manager. She is responsible for developing and implementing NCDA's policy and advocacy work on Universal Health Coverage and an Inclusive NCD Agenda. Grace is a medical doctor by background with specialist training in Obstetrics and Gynaecology. Upon joining NCDA she had held project management positions in humanitarian and development settings in Iraq, Myanmar and Cambodia. She holds a Masters of Public Health from the University of Manchester.

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