



PMAC | PRINCE MAHIDOL
AWARD CONFERENCE

2027

CALL FOR ABSTRACT

ACHIEVING HEALTH THROUGH ADDRESSING COMMERCIAL DETERMINANTS OF HEALTH



Conference Dates:

January 26–30, 2027 | Bangkok, Thailand



Abstract Submission Period:

15 June – 15 August 2026



Abstracts Portal:

<https://pmac2027.com/abstracts>

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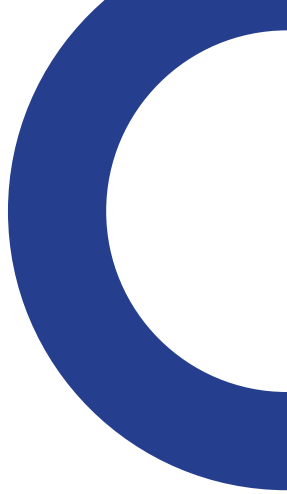
CONFERENCE OVERVIEW

The global health landscape is increasingly shaped by commercial forces that extend far beyond individual products or industries. Markets, corporate actors, financial systems, and economic incentives interact with governments, communities, and international institutions in ways that profoundly influence health outcomes, equity, and sustainability across all countries — from high-income settings to low- and middle-income countries (LMICs) facing the steepest rises in non-communicable disease (NCD) burden.

The commercial determinants of health (CDoH) — defined as the systems, practices, and pathways through which commercial actors drive health and equity — encompass both the harms generated by profit-driven practices and the opportunities that arise when commercial entities are effectively governed and aligned with public health objectives. From ultra-processed foods, tobacco, and fossil fuels to digital platforms, pharmaceutical innovation, and global trade, the commercial sector's influence on population health is pervasive, systemic, and growing.

PMAC 2027 aims to advance a systemic, evidence-based understanding of how commercial actors shape health outcomes and to identify actionable governance mechanisms, policy tools, and cross-sectoral strategies that can reduce harms and harness commercial opportunities to advance health equity, universal health coverage (UHC), and sustainable development.

We invite researchers, policymakers, practitioners, civil society representatives, and advocates to share their work through oral presentations or poster displays.



SUB-THEME 1:

SETTING THE AGENDA ON THE COMMERCIAL DETERMINANTS OF HEALTH

Commercial actors — spanning tobacco, ultra-processed foods, fossil fuels, alcohol, technology, finance, and arms — shape population health through systems of power, inequality, and misinformation that extend far beyond individual products. The costs of commercial activity fall disproportionately on vulnerable populations, including women, children, informal workers, and communities in LMICs, while the benefits accumulate among those with economic and political influence.

Governance failures, regulatory capture, information asymmetries, and the strategic deployment of disinformation by industry have allowed health harms to persist and deepen, even as accountability ecosystems — including civil society, independent media, and oversight bodies — struggle to counterbalance concentrated commercial power. Profit shifting by multinationals further erodes the domestic fiscal space needed for public health investment, compounding structural inequities across generations.

Objectives

Sub-Theme 1 aims to strengthen multi-sectoral awareness and accountability by:

Examining how the costs and benefits of commercial activities are distributed across populations, generations, and countries;

- Analyzing the concentration of wealth and corporate power and its influence over policy agendas, regulatory environments, and public narratives;
- Exploring governance failures and accountability gaps, including regulatory capture and weak institutional oversight;
- Highlighting the role of civil society, media, and independent accountability ecosystems in counterbalancing commercial power;
- Addressing misinformation and disinformation as a core commercial determinant of health; and
- Identifying fiscal and transparency reforms — including action on profit shifting and taxation — that can expand domestic resources for health and advance equity-centered governance.

Focus Areas:

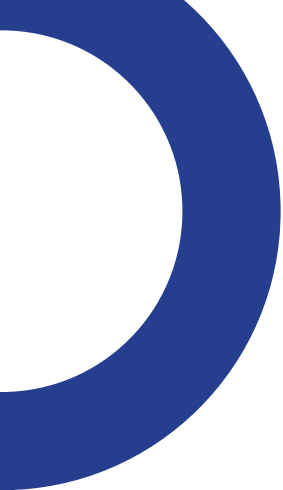
- NCDs, mental health, and obesity driven by commercial products and practices
- Organized large-scale violence, the arms industry, and population health
- Infectious diseases, pandemics, and One Health through a commercial lens
- Climate change and the commercial forces behind environmental health harms
- Inequality of care: how commercial systems distribute health benefits and burdens unequally

Key Topics:

NCD epidemiology and commercial drivers; tobacco, alcohol, and ultra-processed foods; the arms industry and conflict; zoonotic spillover and One Health; fossil fuel health harms; climate and health intersections; structural health inequities; vulnerable populations.

Potential ST 1 Sessions include

- **PL 1:** Setting the Agenda on the Commercial Determinants of Health
- **PS 1.1:** Reproduced Diseases — NCDs as Structural Outcomes of Markets and Health Systems
- **PS 1.2:** Arms, Conflict, and Health — AI and the Arms Industry as a Major Commercial Determinant of Health
- **PS 1.3:** Commerce and Contagion — How Markets Shape Infectious Disease
- **PS 1.4:** Profits, Power, and Population Health — The Commercial Drivers of the Climate Health Emergency
- **PS 1.5:** Inequitable Access to Quality Healthcare



SUB-THEME 2:

POWER, PROFIT, AND PLANETARY HEALTH: HOW COMMERCIAL FORCES SHAPE OUR FUTURE

Commercial determinants of health operate across a wide range of sectors — not only traditional “unhealthy commodity” industries — because they are embedded in how markets are structured, incentives are set, and governance is exercised across finance, technology, and the arms industry. Population health is shaped not only by individual corporate behaviors, but by broader political-economic conditions including deregulation, financialization, and global trade and investment rules that determine whose interests are prioritized and which business models are rewarded.

Sub-Theme 2 offers a systems-level examination of how these upstream forces translate into policy choices and everyday health environments. It explores how corporate power shapes regulatory agendas and public discourse, how the commercial playbook travels consistently across sectors, and how intermediaries amplify these dynamics — all within a rapidly shifting global context of geopolitical tension, technological acceleration, and changing health financing landscapes. Particular attention is given to the experiences of LMICs, where regulatory asymmetries and external economic pressures often amplify commercial health harms.

Objectives

Sub-Theme 2 aims to:

- Examine how commercial actors and systems influence health outcomes — both harmful and beneficial — through macroeconomic drivers, markets, governance, and social norms in a rapidly changing political economy;
- Explain how financial systems and corporate concentration shape markets and distribute health risks;
- Unpack the commercial playbook — including lobbying, knowledge shaping, marketing, financial engineering, and reputation management — and explain why it operates consistently across industries;
- Identify how intermediaries extend commercial influence across policy processes and public norms; and
- Examine how trade and investment agreements, and current megatrends including geopolitical volatility, artificial intelligence, and platform dynamics, reshape the conditions for effective health governance.

Focus Areas:

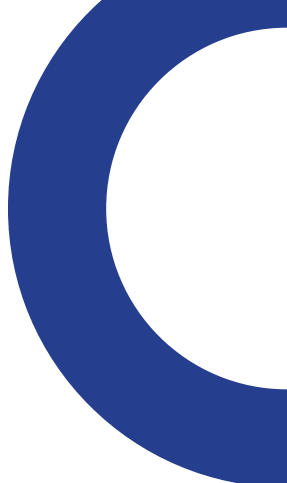
- Mega-trends shaping the commercial determinants of health in the 21st century
- Hidden structural forces: power, markets, and the global political economy
- Marketing, science shaping, and digital strategies as commercial health pathways
- Leadership, labor, and how commercial actors shape individual and community health choices
- Market incentives, financialization, and their effects on population health outcomes

Key Topics:

Neoliberal economic paradigms; global trade and investment regimes; regulatory asymmetries; artificial intelligence and data power; commercial playbooks; lobbying and political influence; misinformation and science shaping; digital advertising and behavioral design; corporate concentration and market power.

Potential ST 2 Sessions include

- **PL 2:** Power, Profit, and Planetary Health — How Commercial Forces Shape Our Future
- **PS 2.1:** Exacerbating Effects of Interrelated Mega-Trends on the Commercial Determinants of Health
- **PS 2.2:** The Hidden Forces Shaping Health — Power, Markets, and the Global Economy
- **PS 2.3:** Engineering Health Pathways — Understanding Commercial Practices and Their Influence on Health
- **PS 2.4:** Shaping the Health Leadership of Tomorrow — How Commercial Forces Influence Talent Pipelines, and How We Navigate the Consequences
- **PS 2.5:** How Market Incentives and Structures Shape Population Health — A Health Economics Perspective



SUB-THEME 3:

PATH FORWARD: SHAPING MARKETS AND STRENGTHENING GOVERNANCE FOR EQUITABLE EALTH

Commercial determinants of health present not only risks but also opportunities: markets, commercial actors, and financial systems can, if guided by sound governance and the right incentives, become powerful forces for health promotion and equitable access. Sub-Theme 3 moves beyond diagnosis to focus on solutions, examining how governance mechanisms, financing strategies, taxation, economic incentives, and innovative business models can redirect commercial behavior toward positive health and socio-economic outcomes.

Drawing on real-world case studies across governance, financing, procurement, and partnership, the sub-theme explores how public and community actors can hold commercial actors accountable, how business models can advance both profitability and equitable health, and how commercial sectors can be leveraged to strengthen universal health coverage and resilience — particularly in LMICs where the opportunities for transformative alignment are greatest. Productive tension between regulators and industry — where differing mandates are recognized rather than dissolved — is treated as a governance asset rather than an obstacle.

Objectives

Sub-Theme 3 aims to:

- Present governance models, regulations, taxation, and economic incentives that motivate commercial actors to contribute meaningfully to health;
- Showcase mechanisms by governments, civil society, and communities to hold the private sector accountable and address misinformation;
- Identify practical actions whereby innovative business models and public–private partnerships harness commercial capacity for better, more equitable health outcomes; and
- Highlight financing strategies and procurement approaches that align commercial engagement with UHC objectives across the life course.

Focus Areas:

- Governance and accountability mechanisms for commercial actors to drive equitable health outcomes
- Innovative financing strategies to enhance commercial engagement for health
- Economic incentives and commercial regulatory design across multiple industry actors
- Effective public–private partnerships and new business models for health
- Leveraging commercial sectors to achieve universal health coverage and build resilience

Key Topics:

Governance and regulatory frameworks for commercial actors; accountability, transparency, and conflict-of-interest management; disinformation and health literacy; innovative financing and strategic public purchasing for UHC in LMICs; health taxes, subsidies, and pricing policies; product reformulation and procurement reform; decarbonizing supply chains; social enterprise and impact-driven business models; public–private partnerships and co-benefit scaling; roles of commercial actors in UHC financing, service delivery, and health technologies; community and civil society accountability.

Potential ST 3 Sessions include

- **PL 3:** Path Forward — Shaping Markets and Strengthening Governance for Equitable Health
- **PS 3.1:** From Corporate Power to Public Accountability — Governing Markets for Health
- **PS 3.2:** Showcasing Innovative Financing Strategies to Enhance Commercial Engagement for Better and Equitable Health Outcomes
- **PS 3.3:** Designing Commercial Economic Incentives to Promote Population Health Across Multiple Industry Actors
- **PS 3.4:** Breaking the Checkmate — Redesigning Public–Private Collaboration and New Business Models for Health
- **PS 3.5:** Aligning Commercial Incentives with UHC and Resilient Health Systems Across the Life Course

SUBMISSION GUIDELINES

- Abstract should **not exceed 300 words** in length.
- Submissions may draw on scientific research, case studies, field experience, policy development and implementation, practice-based evidence, or advocacy narratives — provided they relate clearly to the conference theme and sub-themes.
- **Submission period: 15 June – 15 August 2026.** The deadline for submission is **15 August 2026** at 16:00 Thailand local time (UTC+7). No extensions will be granted.
- All abstracts must be submitted electronically through the conference website at <https://pmac2027.com/abstracts>. Please follow all instructions provided in the online submission system.
- Submitters should indicate the single sub-theme their abstract most closely aligns with.
- Abstracts should clearly state the objective, methodology or approach, main findings or argument, and policy or practice implications.

REVIEW CRITERIA AND PROCESS

All abstracts will undergo blind peer review by members of the PMAC Independent International Scientific Committee. Selection will be based on the following criteria:

- Scientific and technical rigor, including a sound and clearly described methodology;
- Policy relevance and implications for practice or governance; and
- Strength of contribution to the conference theme and sub-themes.

Preference will be given to abstracts that:

- Are grounded in evidence-based or solution-oriented approaches; and
- Inspire collective action and meaningful change for global health.

The decision of the Abstract Reviewers is final.

NOTIFICATION AND PRESENTATION

Authors of accepted abstracts will be invited to participate in PMAC 2027 (28–30 January 2027, Bangkok, Thailand) either as session presenters or for poster displays.

- Further details on poster format and presentation guidelines will be communicated in due course.

Authors accepted for session presentations may be asked to adjust the scope or framing of their presentations to align with session objectives and format.

FUNDING OPPORTUNITY

Limited financial support for travel and accommodation is available for presenters whose abstracts have been accepted, subject to specific eligibility criteria.

- Priority will be given to authors selected for session presentations, particularly those from government agencies, academic institutions, and NGOs in developing countries.
- To be considered for a scholarship, please indicate this clearly in your submission.

We look forward to receiving your contributions and to advancing the global dialogue on commercial determinants of health at PMAC 2027.



QUESTIONS ABOUT ABSTRACT SUBMISSION

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