Comments for the online consultation on the draft outcome document dated 9 August 2017

MONTEVIDEO ROADMAP 2018-2030 ON NCDs AS A SUSTAINABLE DEVELOPMENT PRIORITY
WHO Global Conference on NCDs
Pursuing policy coherence to achieve SDG target 3.4 on NCDs
(Montevideo, Uruguay, 18-20 October 2017)

23 August 2017

Cochrane is a global independent network of researchers, professionals, patients, carers, and people interested in health, and welcomes the opportunity to provide comments for this online consultation.

Cochrane Nutrition supports the pursuit of policy coherence to achieve SDG target 3.4 on NCDs, as well as the comprehensive action areas outlined in the draft outcome document, namely: Reinvigorate political action; Enable health systems to respond more effectively to NCDs; Increase significantly the financing of national NCD responses and international cooperation; Increase efforts to engage sectors beyond health; Seek measures to address the negative impact of products and environmental factors harmful for health and strengthen the contribution and accountability of the private sector; Reinforce the role of non-State actors; Continue relying on WHO’s leadership and key role in the global response to NCDs; and Act in unity.

Cochrane Nutrition would like to raise four points for consideration by Member States during their next informal consultation on 29 August 2017.

1. The draft outcome document mentions evidence and use of evidence-based actions and provision of evidence. Cochrane is an independent, global source of synthesized health evidence to inform policy and guidelines. We would like to emphasize the value of using synthesised evidence to translate knowledge into effective, implementable and scalable actions to reach targets.

Finding and implementing effective, scalable and sustainable solutions to address the complex, multi-sectoral NCD burden is challenging for all stakeholders, particularly since decision-makers often have to deal with diverse and competing interests. Readily prepared syntheses of quality-appraised evidence, such as systematic reviews, support decision-making by integrating findings from many studies to give a clearer and more comprehensive picture than any single study. We continually work on advancing methods of evidence synthesis, on developing methods to synthesize complex evidence for public health questions, and for identifying gaps in the evidence base.

Global synthesised evidence can be combined with national, sub-national or local evidence on service use, practice, costs, policy and organisational factors to inform decisions on what actions are effective and how to best implement and deliver these actions. Training of all stakeholders and organisations in using synthesised evidence can facilitate evidence-informed decision-making (EIDM). EIDM involves using research evidence with expertise, resources, and knowledge about contextual health issues, local context, and political climate to make intervention, policy and program decisions. This systematic and transparent inclusion of research evidence in decision-making can strengthen health actions, promote the provision of
effective and efficient interventions and services, and support a more responsible use of financial and human resources.

2. Poor diets are responsible for more of the global burden of disease than sex, drugs, alcohol and tobacco combined. The draft outcome document mentions health systems, industry and engaging sectors beyond health, but it fails to emphasise the role of current food systems in the existing NCD burden. Food systems describe the paths that food takes from the agricultural sector to the consumer, including retail and food provisioning, food production, processing, and marketing, and transport and trade. Food systems determine which foods are available, affordable and desired. These factors play crucial roles in the quality of people’s diets, and hence in people’s health. Viewing diets through a food system lens adds to our cross-sectoral understanding of the availability, affordability and acceptability of foods, and facilitates the multi-sectoral upstream focus discussed in the roadmap to achieving SDG target 3.4 on NCDs.

Coherence of policies across the continuum of sectors in food systems, from food production through to consumption, and across sectors, is needed to meets people’s nutrition needs and promote safe, sustainable, diversified and healthy diets. Food system policies and interventions, particularly in trade and markets, should be designed in consultation with both food system stakeholders (e.g. agriculture, post-harvest, retailers, consumers) and health stakeholders to ensure they seek to balance health and nutrition with profitability, and are coherent with health and sustainability policies and objectives.

3. The document covers a range of comprehensive actions, and may benefit from identifying urgent or priority actions from the comprehensive range, as this may assist with implementation plans.

4. The document should also emphasise the need for transparent and ethical management of competing interests in all policymaking processes, as these may hamper efforts to successfully cluster conflicting public health goals and private sector objectives for coherent policies.

Cochrane Nutrition looks forward to further engagements, and is committed to supporting the goal of improved policy coherence to achieve SDG target 3.4 on NCDs.

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on behalf of Cochrane Nutrition, http://nutrition.cochrane.org/

Cochrane Nutrition will aim to coordinate activities related to nutrition reviews within Cochrane; ensure that priority nutrition reviews are conducted with rigorous methodology; and, promote the use of evidence from systematic reviews to inform health decision-making.