Key mission findings

1. The sheer size and population of India, along with its diversity, rapid urbanization and changes in lifestyle, mean that responding to an issue as complex as NCDs is an enormous challenge. The task ahead should not be underestimated.

2. All government ministries have shown commitment and demonstrated leadership by adopting ten national NCD targets for 2025, as well in being the first country in the world to develop national targets aligned to the WHO voluntary global targets.

3. The Ministry of Health and Family Welfare has developed a National Multi-Sectoral Action Plan but this has yet to be translated into action at national and state level.

4. While total health expenditure accounts for 4.2% of GDP, government expenditure is a little over 1%. This is grossly insufficient to support an effective NCD response.

5. Successes in tobacco control in various state initiatives have been due to: (a) strong tobacco control policy (and law); (b) the allocation of dedicated national funds to implement the tobacco control programme; (c) clear guidelines and advisories issued at the national level; (d) effective coordination mechanisms at state and district levels; (e) an active civil society movement; and (f) political leadership at the state and district level, including a commitment to policy enforcement.

"As most of the determinants that influence NCDs and their risks lie beyond the purview of the health sector, there is a need for coordinated, multi-sectoral action to create an enabling environment to promote healthy behaviours."

Dr. Poonam Khetrapal Singh
Regional Director for WHO South-East Asia

"NCDs are the most challenging and most ambitious of our programmes. It’s really good to see that other ministries have given us their support. They are our partners and we need to make that partnership more effective on the ground."

Lov Verma, Secretary
Ministry of Health and Family Welfare

Key adult NCD mortality and risk factors*: premature mortality and significant disability are preventing India from fulfilling its economic potential

- 26% probability of premature mortality from NCDs
- 12% are insufficiently physical active
- 9% have diabetes
- 23% have hypertension
- Drink 4.3 litres of pure alcohol per person per year
- 15% smoke tobacco
- 5% are obese
- No data available for amounts of fruit and vegetables
- 9% have hypertension

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Key recommendations

1. The UN Country Team, government and development partners need to: (a) support implementation of the National Multi-Sectoral Action Plan and focus on the most cost-effective interventions across all sectors; (b) work towards a rapid and very significant scale up of financial and human resources for the prevention and control of NCDs across the country; and (c) introduce monitoring and accountability mechanisms to track implementation of prevention and control measures.

2. Steps need to be taken to comprehensively implement WHO FCTC policies, including by increasing taxes on tobacco products, to build on gains made in tobacco control.

3. The UN Country Team needs to prioritize NCDs in its collective actions by, among others, establishing a strategic mechanism to support the government, and ensuring that each UN agency proactively engages with counterparts in key ministries.

Adding value: actions taken following the mission

1. Preparation of the National Multi-Sectoral Action Plan is nearing completion.

2. An inter-ministerial consultation held to endorse the National Multi-Sectoral Action Plan will be followed with a dialogue on the establishment of an Inter-Ministerial Council on NCDs.

3. The Joint UN Task Force mission drew high-level support across government, with a large number making firm commitments to take action on NCDs. Twenty-five ministries have now nominated NCD focal points.

4. The Joint UN Task Force engaged strongly with civil society, and mapping of NGOs is underway to foster partnerships between civil society, the government and the UN, thereby creating an enabling environment for a whole-of-society response to the NCD challenge.

5. The Ministry of Health and Family Welfare, with support from WHO, launched a communication and awareness programme to promote healthy lifestyles among the general population.

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The mission was important in encouraging the UN to come together as one. But the joint mission also highlighted to government at a high level the importance of a whole-of-government and society response to NCDs. The challenge now is to ensure that we in the UN system are sufficiently resourced to provide the sort of support that governments are expecting as a result of these missions.

Dr. Nata Menabde
Executive Director of the WHO Office in New York and WHO Representative when the Mission took place

“The UNIATF mission has contributed to catalysing high level government commitment extending beyond the health sector. Recent progress in developing a National Multi-Sectoral Action Plan for the prevention and control of NCDs and establishing a multi-sectoral coordination mechanism for its implementation represent a significant move from commitment to action.”

Dr. Henk Bekedam
WHO Representative, India

Next steps

1. The UN Country Team (UNCT) will explore opportunities to extend support to state level.

2. The UNCT will support the government to establish a functional Inter-Ministerial Council on NCDs.

3. The UNCT will support the government in making the case for population-level interventions to reduce sodium intake and harmful use of alcohol.

4. The UNCT will support the government in developing a road map for alternative livelihoods for tobacco growers and bidi rollers.

5. India will benefit from a follow-up Joint UN Task Force mission to ensure greater coordination and commitment among the different in-country UN agencies.


Additional information on the status of NCDs in India can be found on the WHO NCD DataFinder app.