UNDP’s comments on the Montevideo Roadmap 2018-2030 on NCDs as a Sustainable Development Priority, August 25, 2017

Overall comments

1. UNDP welcomes the opportunity to comment on this important document and reaffirms its commitment to work with WHO as the UN System’s leading agency on health.

2. The document is comprehensive in scope and intent. One missing component, however, is recognition of the contribution of the action and potential of sub-national governments, especially municipalities.

Specific comments

Para 2. We stress that the social determinants of health in respect to NCDs strongly feature commercial factors.

Para 3. We agree that reducing NCDs remains a low priority across UN agencies, relative to their share of the global burden of disease. We also note that UN agency activity is largely driven by national development priorities and their reflection in UN Development Assistance Frameworks. Dialogue at all levels and across government on NCDs is essential in this regard to stimulate a more robust and sustainable partnership.

Para 6. Prioritisation of interventions must also address the need to ‘leave no-one behind’ and ensure the inclusion of vulnerable and hard to reach populations. Also demand for support goes beyond the four ‘common’ NCD risk factors. UNDP prefers the framing of behavioural risk factors, and emphasizes the need for greater attention across the UN to address pollution, mental health and road traffic injuries.

Para 11. The emphasis on infectious disease and NCD co-morbidities is welcomed. Interactions that include those between TB, HIV, HPV, hepatitis C, tobacco use, harmful use of alcohol, diabetes and cancers are well understood and need to be further addressed in systems planning and in support from institutions such as the Global Fund to Fight AIDS TB and Malaria.

Para 12. Universal health coverage must include integration of NCD prevention and impact mitigation responses within social protection framing and instruments.

Para 15. UNDP is pleased to be working jointly with WHO in over 25 countries on the development of investment cases on both NCD prevention and control and the full implementation of the WHO FCTC. We stress that these investment cases do not necessarily create fiscal space for action but provide the evidence as to why an expanded and sustainable fiscal space is necessary – to reduce and prevent significant economic and social costs now and into the future, while improving health and protecting development gains.

Para 16. A technical support platform is essential to allow countries to provide a degree of support when direct financial assistance is not possible or forthcoming. A South-south and triangular cooperation frame is relevant and appropriate here.
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Para 19. UNDP agrees that a UN Commission on NCDs and the Law under the auspices of the UN Inter-Agency Task Force is needed, and notes that to be effective the Commission would need the necessary resources and support.

Para 23. UNDP will continue to work closely with WHO on the development and updating of the joint guidance on multi-sectoral action on NCDs.

Para 27. Links between SDG targets 3.4 and 3.9 are worth more prominence and rely on strong partnerships at country level between ministries of health and the environment.

Para 29. Strengthened implementation of the WHO FCTC is essential in its own right and as the cornerstone of both global and national NCD responses.

Para 30. We concur that there is the need for a commission on the commercial determinants of health that have a bearing on the prevention and control of NCDs. We stress that political determinants are often inseparable from such commercial interests. Implementation at country level of the recommendations of any previous relevant commissions, such as that on Ending Childhood Obesity, should be noted as commitments of member states and the international community.