How to fulfil national NCD commitments in 2015 and 2016
(in preparation for a third UN High-level Meeting on NCDs in 2018)

First WHO Global Meeting of National NCD Programme Directors and Managers
(Geneva, 15-17 February 2016)

CONCEPT NOTE

WHO will convene a first global meeting of national NCD Programme Directors and Managers from Monday 15 to Wednesday 17 February 2016 at WHO in Geneva, Switzerland, to forge a strategic conversation among peers on how countries can develop ambitious national responses to the NCD-related targets in the SDGs, and the fulfil the four national time-bound commitments for 2015 and 2016 included in the 2014 UN Outcome Document on NCDs.

NCDs: Where do we stand?

- **The health and development dimension**: Noncommunicable diseases (NCDs) – mainly cardiovascular diseases, cancers, chronic respiratory diseases and diabetes – remain the leading cause of death worldwide. More than 36 million die from NCDs (63% of global deaths), including 16 million people who die too young before the age of 70. More than 13 million (i.e. 82%) of people who die prematurely from NCDs live in low- and middle-income countries. The percentage of people who die from NCDs before the age of 70 ranges from 28% in high-income countries to 59% in low-income countries. The probability of dying from one of the main NCDs between the ages of 30 and 70 ranges from 10% in high-income countries to 40% in low-income countries.

The underlying drivers for these inequalities between countries are:

1. poverty;
2. the effects of globalization of marketing and trade in the absence of regulatory, statutory and policy frameworks to reduce tobacco use, harmful use of alcohol, unhealthy diet and physical inactivity;
3. unplanned rapid urbanization;

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4) population ageing.

- **Tipping point:** Cognizant of these dimensions and the underlying drivers, Heads of State and Government met at the United Nations General Assembly in September 2011 during the first UN High-level Meeting on NCDs and acknowledged that NCDs constitute one of the major challenges for socioeconomic development in the 21st century. They agreed on a road map of commitments on what governments will do to take domestic action to reduce premature mortality from NCDs. They also requested WHO to provide guidance to countries on how to do this and where to focus. Ministers met at the United Nations General Assembly in July 2014 during the second UN High-level Meeting on NCDs and agreed that progress in countries had been largely insufficient and highly uneven. Collectively, they committed to prioritize four immediate domestic actions in 2015 and 2016, in preparation for a third UN High-level Meeting on NCDs in 2018 where will review progress made.

- **New developments:** Heads of State and Government will also assemble at the United Nations General Assembly in September 2015 at the UN Summit for the adoption of the Post-2015 development agenda to commit to a global target to reduce by one third premature mortality from NCDs, by 2030, and to strengthen the implementation of the WHO FCTC, as part of the universal Sustainable Development Goals 2015-2030.

**Which policies and programmes best drive progress?**

- **What?** Heads of State and Government agreed in September 2011 during the first UN High-level Meeting on NCDs that premature mortality from the four principal NCDs is largely preventable by:
  1) strengthening the primary role and responsibility of governments in addressing NCDs
  2) developing public policies and legal frameworks in all sectors to reduce tobacco use, harmful use of alcohol, unhealthy diet, and physical inactivity
  3) tracking the NCD epidemic and strengthening NCD surveillance
  4) strengthening the health systems' response to NCDs through people-centered primary care and universal health coverage.

  Specifically, they adopted the 2011 UN Political Declaration on NCDs which sets out a road map of national commitments on how governments shall take domestic action to reduce premature mortality from NCDs.

- **How?** Ministers endorsed the WHO Global NCD Action Plan 2013-2020 at the World Health Assembly in May 2013. The Global Action Plan comprises a menu of policy options which, when implemented collectively by Member States, international partners and WHO, will contribute to the attainment of nine global NCD targets for

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2 See [http://www.who.int/nmh/events/un_ncd_summit2011/political_declaration_en.pdf?ua=1](http://www.who.int/nmh/events/un_ncd_summit2011/political_declaration_en.pdf?ua=1)
2025. The menu of policy options provides guidance on the effectiveness and cost-effectiveness of interventions based on current evidence and what kind of interventions governments should consider according to national circumstances. The menu includes a subset of very cost-effective and affordable NCD interventions for all countries (“best buys”), as well as a range of other cost-effective NCD interventions. WHO maintains a list of tools on its website to provide information and guidance on how to implement these best and good buys.

- **Where to focus?** To focus national efforts, Ministers adopted the WHO Global Monitoring Framework on NCDs at the World Health Assembly in May 2013. The Framework includes 9 global NCD targets for 2025 and 25 indicators to enable tracking of mortality and morbidity, risk factors and national system responses.

- **When?** Ministers adopted the 2014 UN Outcome Document on NCDs in July 2014 which includes four time-bound commitments on when governments will take national action:
  1. By 2015, consider setting national NCD targets for 2025
  2. By 2015, consider developing national multisectoral policies and plans to achieve the national targets by 2025
  3. By 2016, reduce risk factors for NCDs, building on guidance set out in the WHO Global NCD Action Plan

- **What gets measured?** Pursuant to a request from the WHO Executive Board in January 2015, WHO published a Technical Note on 1 May 2015 setting out 10 progress indicators which WHO will use to report in 2017 to the United Nations General Assembly. These 10 progress indicators provide further guidance for Member States which actions to prioritize.

- **How to finance?** Significant additional investments are required to address NCDs in the post-2015 era. These investments will need to rely primarily on domestic public finance. Domestic action and domestic finance will be the crux of the implementation of all targets in the SDGs, including the NCD-related targets. For instance, the potential to increase taxation on tobacco and alcohol exists in many countries. Even if only a portion of the proceeds were allocated to health, access to services would be greatly enhanced.

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4 See [http://www.who.int/nmh/events/2014/a-res-68-300.pdf?ua=1](http://www.who.int/nmh/events/2014/a-res-68-300.pdf?ua=1)
How to work with sectors beyond health? Health gains can be achieved much more readily by influencing public policies in sectors beyond health than by making changing in health policy alone. Ministers adopted a Framework for Country Action Across Sectors for Health and Health Equity in May 2015 at the World Health Assembly. The Framework provides guidance on how government can adopt approaches to NCD policy development that involve all government departments, ensuring that public health issues receive a cross-sectoral response. The Framework also provides guidance on how governments can fulfill their commitment to establish a national multisectoral mechanism for engagement, policy coherence and mutual accountability of different spheres of policymaking that have a bearing on NCDs, in order to implement health-in-all-policies and whole-of-government and whole-of-society approaches.

How to interact with the private sector? Heads of State and Government committed themselves in 2011 to call upon the private sector to (i) reduce the impact of marketing of unhealthy foods and non-alcoholic beverages to children, (ii) produce and promote more products consistent with a healthy diet, (iii) create an enabling environment of healthy behaviours among workers at the workplace, (iv) reduce the use of salt in the food industry, and improve access to and affordability of NCD medicines and technologies. To date, progress in fulfilling these commitments have been insufficient and highly uneven. Bolder measures of governments are urgent to mandate approaches ranging from statutory regulation to co-regulatory mechanisms and industry-led self-regulation.

Why this meeting now?

There are a number of new developments which have led WHO to convene the first global meeting of national NCD Programme Directors and Managers:

- From problem to progress: The first development is the growing international awareness that Ministers committed themselves in 2014 to implement four time-bound commitments in 2015 and 2016.

- Delivering results: The second development is that WHO is currently conducting a national NCD capacity assessment survey (May – August 2015) and will start reporting on some of the findings as early as September 2015. All findings will be made available at the meeting. Further reporting on progress will be done in 2016 and 2017, in preparation for the third UN High-level Meeting on NCDs in 2018.

– **Demanding action**: The third development is that feedback from WHO seminars for NCD policy makers at national and regional levels is that regions would benefit also from global exchanges.

– **Clarity on what gets measured**: On 1 May 2015, WHO published 10 indicators which the WHO Director-General will use to report, by the end of 2017, to the United Nations General Assembly on the progress achieved in the implementation of the four time-bound commitments at national level.

– **Emerging perspectives**: The fourth development is that WHO is working on potential policy options that governments could consider to end childhood obesity, fulfill their commitment to provide financing for NCDs, as well as mandating approaches ranging from statutory regulation to co-regulatory mechanisms and industry-led self-regulation to reduce the impact of the marketing of unhealthy foods and non-alcoholic beverages to children, produce and promote more products consistent with a healthy diet, create an enabling environment for healthy behaviours among workers at the workplace, reduce the use of salt in the food industry, and improve access to and affordability of NCD medicines and technologies.

– **Landmark SDGs**: Unlike the Millennium Development Goals (MDGs), which covered 2000-2015, the Sustainable Development Goals (SDGs), which will cover 2015-2030, include several NCD-related targets. Target 3.4 calls for a one third reduction in premature mortality from NCDs by 2030. Premature NCD mortality has been defined as the probability of dying from the four main NCDs between ages 30 and 70 years. Other relevant targets include: Target 3.a on strengthening the implementation of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) in all countries, as appropriate; and Target 3.5 on substance abuse, including harmful use of alcohol. Finally, Target 3.8 addresses the issue of universal health coverage (UHC) that has implications for a wide range of NCD-related prevention and treatment interventions. In September 2015, Heads of State and Government will commit to develop ambitious national responses to the NCD-related targets as soon as possible.

**What will the meeting aim to achieve?**

**Goal:**

- **Getting to 2018**: To support national NCD Programme Directors and Managers in their efforts to implement the four time-bound national commitments for 2015 and 2016 included in the 2014 UN Outcome Document on NCDs in preparation the third UN High-level Meeting on NCDs in 2018 (and taking into account the 10 progress indicators which the World Health Organization will use to report, by the end of
2017, to the United Nations General Assembly on the progress achieved in the implementation of these time-bound commitments).

Objectives:

- **Break the impasse**: To update national NCD Programme Directors and Managers on existing WHO tools and guidance, and support them in their efforts to raise awareness about the national public health burden caused by NCDs and the relationship between NCDs, poverty and socioeconomic development, to develop business cases for investment, and to exercise a strategic leadership and coordination role in NCD policy development that engages all stakeholders across government, NGOs, civil society and the private sector.

- **Renew commitments**: To encourage national NCD Programme Directors and Managers to fulfill the national commitments included in the 2011 UN Political Declaration and 2014 UN Outcome Document on NCDs, building on the guidance provided by the WHO Global NCD Action Plan 2013-2020 and regional action plans.

- **Share experiences**: To increase the exchange of ideas, information and lessons learnt between national NCD Programme Directors and Managers and their peers about ways and means to implement the four time-bound commitments for 2015 and 2016.

- **Sustain national NCD responses**: To pursue a discussion with national NCD Programme Directors and Managers about the potential to increase domestic revenues from taxation on tobacco and alcohol, and to allocate a portion of these domestic proceeds to health with a view to enable governments to prioritize budgetary allocations for addressing NCDs and increase domestic spending on NCDs.

- **Promote global accountability through domestic ownership**: To strengthen the understanding among national NCD Programme Directors and Managers about the global accountability framework on NCDs, which measures and reports country progress on a regular basis to the World Health Assembly, the United Nations General Assembly and the United Nations Economic and Social Council.

- **Strengthen how WHO delivers results**: To encourage the use of technical support provided by the World Health Organization, as well as technical assistance provided by the UN organizations which are a member of the WHO-led United Nations Inter-agency Task Force on NCDs.

- **Advance NCD prevention and control**: To promote the use of WHO tools which contain political, normative or standardized messages to be considered in the implementation process of national NCD responses.
Join forces: To establish a WHO-led global practice community of national NCD Programme Directors and Managers and create synergies with other relevant WHO-led communities.

Expected outcome:

Catalyzing the next phase: The first meeting of national NCD Programme Directors and Managers will result in a better understanding of the government’s primary role and responsibility in responding to the challenge of NCDs in the next two years, in preparation for the third UN High-level Meeting on NCDs.

When will the meeting take place and who will participate?

Dates and venue: The meeting will take place on Monday 15, Tuesday 16 and Wednesday 17 February 2016 at the WHO Executive Board Room at WHO’s Headquarters located at 20 Avenue Appia, Geneva, Switzerland. Two break-out rooms will also be available: Conference Room C and D.

Member States: The meeting will take place with the participation from government-appointed national Programme Directors and Managers responsible for national NCD policies and programmes. Governments will be invited to appoint one focal point per Member State through the relevant WHO Regional Office. Health Attachés from the Permanent Missions to the United Nations in Geneva are encouraged to accompany their Programme Director.

International partners: Directors from relevant United Nations organizations and other international organizations, WHO Collaborating Centres, relevant NGOs in official relations with WHO, and selected philanthropic foundations will also be invited to attend.

Experts: Leading experts on NCDs from around the world will also be invited to attend.

Private sector: Representatives from private sector entities will not able to attend the meeting.

What will the agenda look like?

Exercise leadership: The meeting will provide an opportunity to identify challenges and solutions to implement the four time-bound commitments for 2015 and 2016.

Move forward with action in 2015: The first day of the meeting will encourage “vertical” discussions among NCD Programme Directors and Managers on the two time-bound commitments for 2015 included in the 2014 UN Outcome Document on
NCDs. The theme for the first day is “moving forward with action in 2015”. Suggested topics for discussion will include discussions on the first four progress indicators which WHO will use to report in 2017 to the United Nations General Assembly and include:

1) How to set time-bound national NCD targets and indicators based on WHO guidance? How to raise awareness about the national public health burden caused by NCD and the relationship between NCDs, poverty and socioeconomic development? How to build a domestic business case for investment decisions?

2) How to establish a functioning system for generating reliable cause-specific mortality data on a routine basis?

3) How to conduct a STEPS survey or a comprehensive health examination survey? How to build an investment case? How to address gaps in reporting? (e.g. salt, coverage of medicines and technologies)

4) How to establish an operational multisectoral national strategy/action plan that integrates the major NCDs and their shared risk factors? How to establish a national multisectoral mechanism to implement health-in-all-policies and whole-of-government and whole-of-society approaches for NCDs? How to finance the implementation of the national strategy/action plan using domestic resources?

- **Take care of every detail in 2016**: The second day will encourage “horizontal” discussions among Programme Directors and Managers on the two time-bound commitments for 2016. The theme for the second day is “dotting the i’s and crossing the t’s in 2016” (taking care of every detail in 2016). Suggested topics for discussion will include the six progress indicators which WHO will use to report in 2017 to the United Nations General Assembly and will be organized around policy options, and regulatory, statutory and policy frameworks, that governments could consider to:

- Reduce tobacco use
- Reduce the harmful use of alcohol
- Reduce the intake of unhealthy foods and non-alcoholic beverages and increase the intake of healthy foods
- Promote physical activity
- Establish evidence-based national guidelines/protocols/standards for the management of major NCDs through a primary care approach
- Provide drug therapy, including glycemic control, and counselling for eligible persons at high risk to prevent heart attacks and strokes, with emphasis on the primary care level.

- **Galvanize commitment**: To provoke discussions during the meeting, WHO will publish a discussion paper (in English) closer to the dates of the meeting. An agenda will also be made available.

- **Work together**: Interpretation services will be provided during the meeting in Arabic, Chinese, English, French, Russian and Spanish.
Forge participation: The meeting will be webcasted over the internet using online web conferencing services open to all external visitors of WHO's website.

How to receive more information?

For more information and communicating interest in participating, please contact WHO by sending an email to ncdfocalpoint@who.int

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