Strengthening national capacities for NCDs:
Where do we stand five year after the first High-level Meeting on NCDs?

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WHO
NCDs: Getting ready for 2018

2007 CARICOM
Port-of-Spain Declaration on NCDs

2009 ECOSOC
Doha Declaration on NCDs

2011
Moscow Declaration

2014
Outcome Document

2015
SDGs

2015
AAAA

2018
3rd HLM
NCDs: On our way to 2030

SDG 3.4: By 2030, reduce by one third premature mortality from NCDs

2030 milestone: NCD-related targets in the SDGs

2025 milestone: 9 voluntary global NCD targets

2018 milestone: Four time-bound commitments

Components of national NCD responses

- Governance
- Risk factors
- Health systems
- Surveillance

- 2011 UN Political Declaration on NCDs
- 2014 UN Outcome Document on NCDs
- WHO Regional NCD Action Plans
- 2030 Agenda
Countries with an operational national NCD policy/plan: from 33% (2010) to 63% (2015)

Percentage of countries* with an operational integrated national NCD policy, strategy or action plan, by WHO region, 2010, 2013 and 2015
Countries with an action plan for cardiovascular diseases: from 36% (2010) to 69% (2015)

Percentage of countries* with operational plans, policies or strategies or action plans for cardiovascular diseases by WHO region, 2010, 2013 and 2015

* of the 160 countries that responded to all 3 rounds of the survey
Countries with an action plan for cancer: from 19% (2010) to 58% (2015)

Percentage of countries* with operational plans, policies or strategies or action plans for cancer by WHO region, 2010, 2013 and 2015
Countries with an action plan for tobacco: from 53% (2010) to 81% (2015)

Percentage of countries* with operational plans, policies or strategies or action plans for tobacco, by WHO region, 2010, 2013 and 2015.
Taxation: 31 countries in the world now tax sugar-sweetened beverages (2015)

Percentage of countries implementing fiscal interventions (taxation on products) by category, by WHO Region

- AFR
- AMR
- EMR
- EUR
- SEAR
- WPR

Legend:
- Alcohol
- Sugar sweetened beverages
- Foods high in fat, sugar, or salt
- Tobacco
Percentage of countries covering 0-9 risk factors in recent*, national adult NCD risk factor surveys, by World Bank income group
Countries with cancer registries: from 47% (2010) to 63% (2015)

Percentage of countries* with population-based cancer registries, by WHO region, 2010, 2013 and 2015
## Global accountability framework for NCDs

<table>
<thead>
<tr>
<th>Source</th>
<th>Total Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table 1 in Appendix 1 of document A66/8 (endorsed by resolution WHA66.10)</td>
<td>25</td>
</tr>
<tr>
<td><a href="http://apps.who.int/gb/e/e_wha66.html">Link</a></td>
<td></td>
</tr>
<tr>
<td>Table in paragraph 2 in Annex 4 of document A67/14 (agreed by WHA67)</td>
<td>9</td>
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<tr>
<td><a href="http://apps.who.int/gb/e/e_wha67.html">Link</a></td>
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<tr>
<td>Technical note published by the WHO Director-General on 1 May 2015</td>
<td>10</td>
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<tr>
<td><a href="http://www.who.int/nmh/events/2015/getting-to-2018/en/">Link</a></td>
<td></td>
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<tr>
<td>Report of the IAEG-SDGs to the 47 session of the UN Statistical Commission</td>
<td>2</td>
</tr>
<tr>
<td><a href="http://unstats.un.org/sdgs/iaeg-sdgs/">Link</a></td>
<td></td>
</tr>
</tbody>
</table>
## Outcome indicators (World Health Assembly: May 2016)

<table>
<thead>
<tr>
<th>Progress towards the 9 global NCD targets for 2025</th>
<th>2010</th>
<th>2014</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unconditional <strong>probability of dying</strong> between ages of 30 and 70 from cardiovascular diseases, cancer, diabetes or chronic respiratory diseases</td>
<td>20%</td>
<td>19%</td>
<td>↓</td>
</tr>
<tr>
<td>Total (recorded and unrecorded) <strong>alcohol</strong> per capita (aged 15+ years old) consumption within a calendar year in litres of pure alcohol, as appropriate, within the national context</td>
<td>6.4</td>
<td>6.3</td>
<td>↓</td>
</tr>
<tr>
<td>Prevalence of current <strong>tobacco smoking use</strong> among adults aged 18+</td>
<td>23.1%</td>
<td>21.8%</td>
<td>↓</td>
</tr>
<tr>
<td>Age-standardized prevalence of <strong>raised blood pressure</strong> among persons aged 18+ years and mean systolic blood pressure</td>
<td>23%</td>
<td>22%</td>
<td>↓</td>
</tr>
<tr>
<td>Age-standardized prevalence of raised blood glucose/<strong>diabetes</strong> among persons aged 18+ years or on medication for raised blood glucose</td>
<td>8%</td>
<td>9%</td>
<td>↑</td>
</tr>
<tr>
<td>Age-standardized prevalence of <strong>overweight and obesity</strong> in persons aged 18+ years</td>
<td>11% (obesity) 37% (overweight)</td>
<td>13% (obesity) 39% (overweight)</td>
<td>↑</td>
</tr>
<tr>
<td>Number of countries</td>
<td>2010</td>
<td>2015</td>
<td>Trend</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------------</td>
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<tr>
<td>with at least one operational multisectoral national action plan</td>
<td>30/166 (18%)</td>
<td>61/166 (37%)</td>
<td>↑</td>
</tr>
<tr>
<td>that have operational NCD unit(s) / branch(es)/ department(s) within the Ministry of Health, or equivalent</td>
<td>88/166 (53%)</td>
<td>110/166 (66%)</td>
<td>↑</td>
</tr>
<tr>
<td>with an operational policy, strategy or action plan to reduce the harmful use of alcohol within the national context</td>
<td>80/166 (48%)</td>
<td>111/166 (67%)</td>
<td>↑</td>
</tr>
<tr>
<td>with an operational policy, strategy or action plan to reduce physical inactivity and/or promote physical activity</td>
<td>91/166 (55%)</td>
<td>119/166 (72%)</td>
<td>↑</td>
</tr>
<tr>
<td>with an operational policy, strategy or action plan, in line with the WHO FCTC, to reduce the burden of tobacco use</td>
<td>109/166 (66%)</td>
<td>135/166 (81%)</td>
<td>↑</td>
</tr>
<tr>
<td>with an operational policy, strategy or action plan to reduce unhealthy diet and/or promote healthy diets.</td>
<td>99/166 (60%)</td>
<td>123/166 (74%)</td>
<td>↑</td>
</tr>
<tr>
<td>that have evidence-based national guidelines/ protocols/ standards for the management of major NCDs through a primary care approach, recognized/approved by government or competent authorities</td>
<td>125/166 (75%)</td>
<td>61/166 (37%)</td>
<td>N/A</td>
</tr>
<tr>
<td>that have an operational national policy and plan on NCD-related research, including community-based research and evaluation of the impact of interventions and policies</td>
<td>NO DATA</td>
<td>60/166 (36%)</td>
<td>N/A</td>
</tr>
<tr>
<td>with NCD surveillance and monitoring systems in place to enable reporting against the nine voluntary global NCD targets</td>
<td>60/166 (36%)</td>
<td>48/166 (29%)</td>
<td>N/A</td>
</tr>
</tbody>
</table>
WHO NCD Progress Monitor 2015: Progress is insufficient

Number of "fully achieved" Indicators vs. Number of Member States
Is the current rate of decline in premature mortality from NCDs sufficient to meet the 2030 SDG target 3.4 to reduce, by one third, premature mortality from NCDs?

No
Key takeaways

- The 2011 UN Political Declaration on NCDs has catalysed action and retains great power in engendering collective action for faster results.

- Remarkable progress has been made by countries since September 2011.

- Many countries, including some of the poorest, have established NCD units within Ministries of Health and have started to develop national action plans.

- However, progress has been insufficient and highly uneven.

- The current rate of success is insufficient to fulfil the four time-bound commitments on NCDs made at the second UN High-level Meeting on NCDs in 2014 in preparation for the third one in 2018.

- Bolder measures are urgent to accelerate efforts to address NCDs and mitigate their impacts.
Thank you
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