

NCD Alliance Webinar

Tuesday 15 March 2016



NCD Alliance

PUTTING NON-COMMUNICABLE DISEASES
ON THE GLOBAL AGENDA

Agenda

National NCD Commissions in the Caribbean

Maisha Hutton, Healthy Caribbean Coalition

Establishing Multisectoral NCD Coordination Mechanisms: WHO SEARO Guidance

Shoba John, Consultant

138th WHO Executive Board and Preparations for WHA 69

Alena Matzke, NCD Alliance

WHO NCD Directors' Meeting

Cristina Parsons Perez, NCD Alliance

SDG Indicator Framework and other UN Updates

Priya Kanayson, NCD Alliance

Experiences of National NCD Commissions (NNCDCs) in CARICOM



Maisha Hutton
Executive Director
Healthy Caribbean Coalition

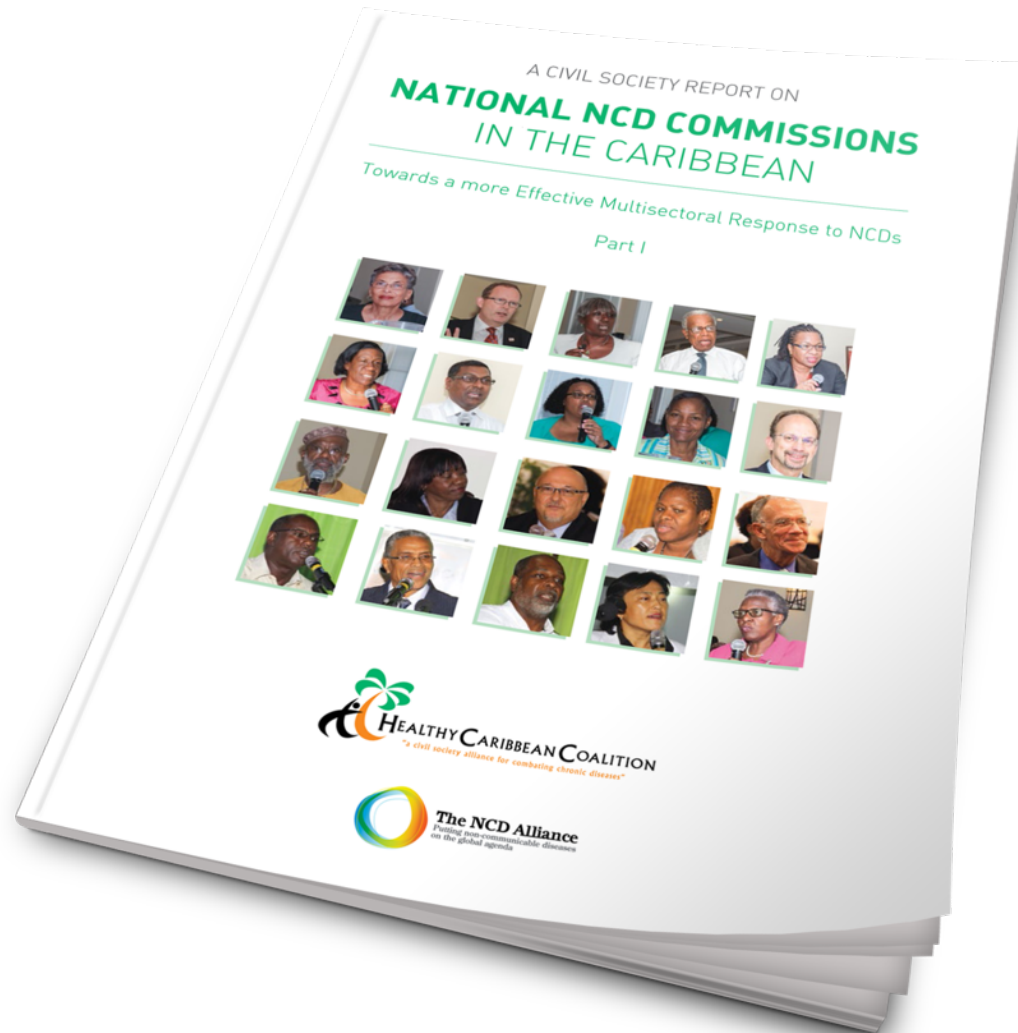
Caribbean Support for National NCD Commissions

- 2007 CARICOM Heads of Government PoS Declaration endorsed a Multisectoral response to NCDs
 - “we strongly encourage the establishment of National Commissions on NCDs or analogous bodies to plan and coordinate the comprehensive prevention and control of chronic NCDs”

Global Support for Multisectoral Mechanisms

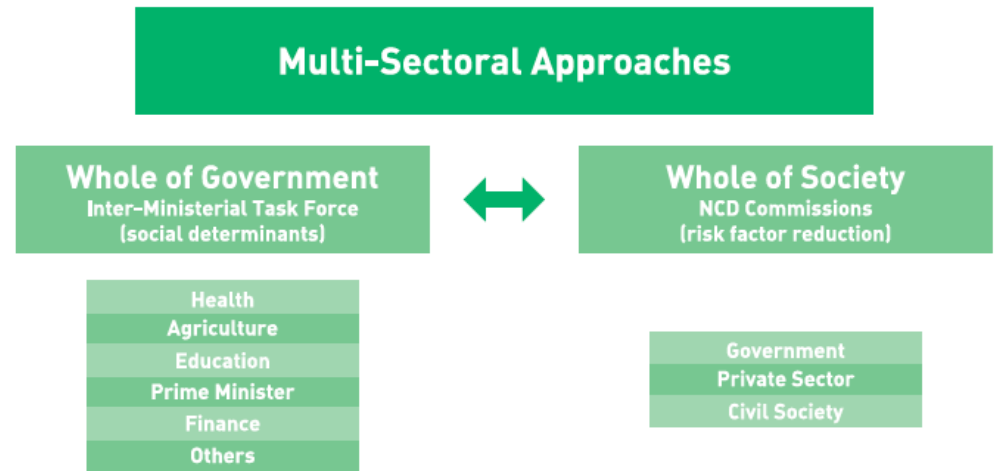
- 2011 Political Declaration on NCDs called for a mechanism to coordinate a multisectoral approach
- The WHO Discussion Papers (2012) recommended, ‘Effective Approaches for Strengthening Multisectoral Actions for NCDs’
- UN NCD Review 2014 Outcome Document called for, *‘establishing, as appropriate to the respective national context, a national multisectoral mechanism, such as a high-level commission, agency or task force...’*
- Recommendations from global NCD leadership

National NCD Commissions in the Caribbean – Towards a more Effective Multisectoral Response to NCDs



What are NNCDs?

- National platforms for whole of society and whole of government response to NCDs
- Instruments of government sitting within the Ministries of Health to advise the Minister of Health
- Standalone NCD Commissions OR NCD committees within broader overarching health & wellness commissions or partnerships (Bermuda, BVI, SKN, SVG etc.)



- G. Alleyne

NNCDCs in the Caribbean

Barbados NNCCDC 2016-2018



- Twelve (12) out of 20 countries in CARICOM (60%) have formed NCD Commissions or analogous bodies (including wellness Commissions)
- 9 currently active
 - **Correlation between successful NNCCDCs and country population*

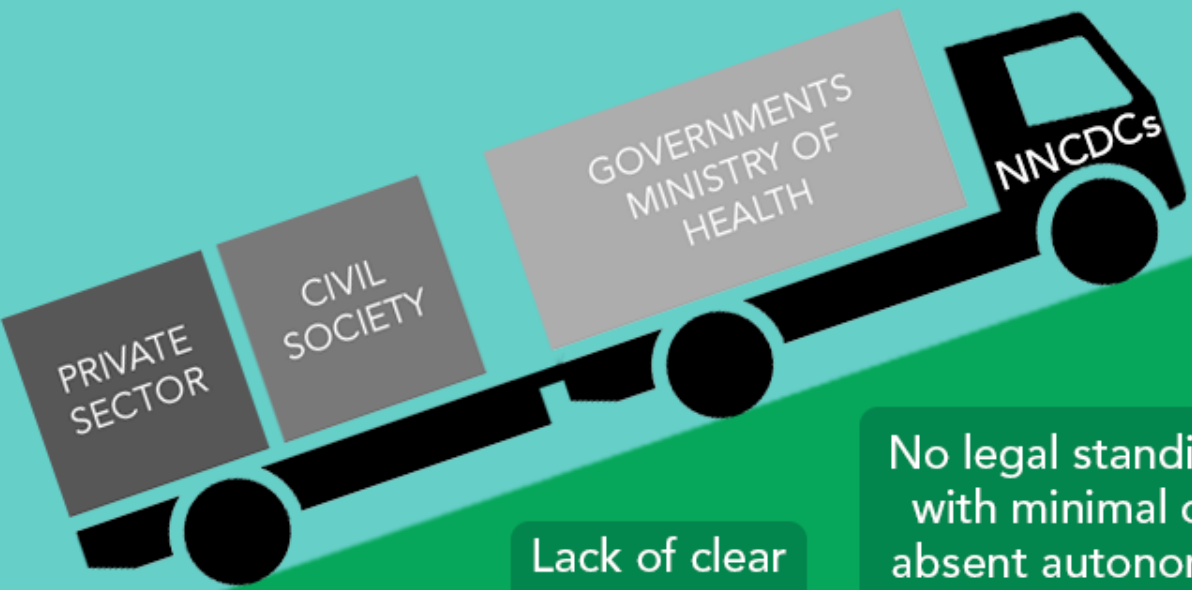
Mandate of NNCDs

- Advisory and/ or implementation bodies
- Advise the Minister of Health/ PM (Gov't) on NCD policies, legislation and programmes
- Support the implementation of national NCD strategic plans (assist in priority setting)
- Broker effective involvement of all relevant sectors
 - Whole of government
 - Whole of society including the private sector & civil society
- Assist in resource mobilization
- Recommend research priorities
- Monitoring, evaluation, surveillance

Composition of NNCDs

- Chairperson
- Ex Officio Members
 - Chief Medical Officer, NCD Focal Point, Chief Nursing Officer etc.
- Representatives of non-health ministries
- Civil Society
 - National NCD Alliances, Health NGOs, FBOs, Trade Unions, Women's groups, Youth groups etc.
- Private Sector
 - Hotel & Tourism, Insurance etc.
- The NNCD may have subcommittees such as Healthy Schools, Healthy Workplaces, Alcohol, Tobacco etc.

Challenges



COI mechanisms

Limited realization of whole of government and whole of society (representation, capacity)

Limited advisory role due to intermittent or weak access to Minister of Health

Lack of clear direction

No legal standing with minimal or absent autonomy to implement

Inadequate resources

Insufficient technical assistance

Weak methods of appointments

Lack of strong committed leadership



Successes

Engaging private sector

Alcohol policy implementation

National NCD Risk Factor Surveys

Caribbean Wellness Day

Implementation of FCTC related legislation

Inter-Ministerial Task Force on NCDs

National nutrition improvement and population salt reduction campaign

Contributed within countries to greater NCD awareness and multisectoral response



Key Lessons Learned & Recommendations



Dedicated technical support

Commissions need secretariats and appropriate funding commensurate with the mandates

Clearly defined Terms of References and Strategic Plans needed to inform the roles and responsibilities of various actors on the NNCCDC
- Including COI for private sector members

Develop guidance for establishment/ operationalisation of NNCCDCs

Strong leadership positively correlated with successful NNCCDCs

NNCCDCs should be enshrined in legislation, with standing to influence and effectively collaborate with senior decision makers in government, civil society and the private sector

Connect NNCCDCs to facilitate dialogue and sharing



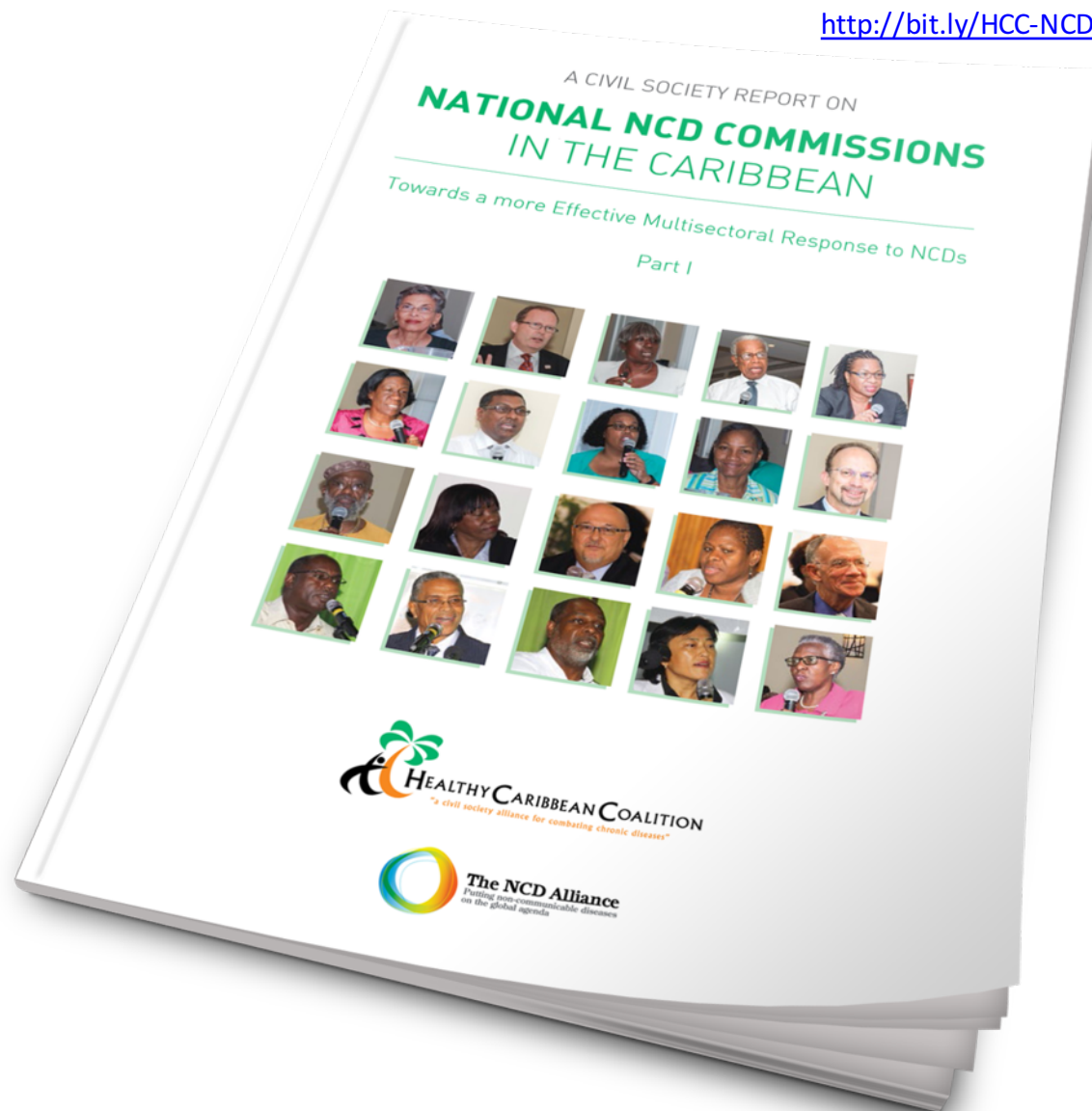
Supporting Regional Scale-up NNCDC Implementation Framework

- Tool for establishing or strengthening National NCD Commissions
- Step by step guide
- Practical resources such as sample TORs, sample meeting minutes, sample strategic plans and action plans, case studies, directory of existing commissions/ commissioners
- Supporting the establishment of **National NCD Alliances** to represent CS on NNCCDCs



Thank you

<http://bit.ly/HCC-NCD-Commissions-Report>



Q & A



APPROACHES TO ESTABLISHING MULTISECTORAL COORDINATION MECHANISMS FOR THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES

WHO SEARO Guidance

Shoba John, India

NCD Alliance Webinar, 15 March 2016.



Mandate for Multisectoral action on NCDs

UN Political Declaration on NCDs

“...non-communicable diseases worldwide can be largely prevented and controlled through collective and multisectoral action by all Member States and other relevant stakeholders at local, national, regional, and global levels...” (Para 33)

WHO Global Action Plan on NCDs

Objective 2- Policy options for Member States

“(f) Strengthen multisectoral action: As appropriate to the national context, **set up a national multisectoral mechanism – high-level commission, agency or task force** – for engagement, policy coherence and mutual accountability of different spheres of policy-making that have a bearing on noncommunicable diseases,.....”.(Para 30)

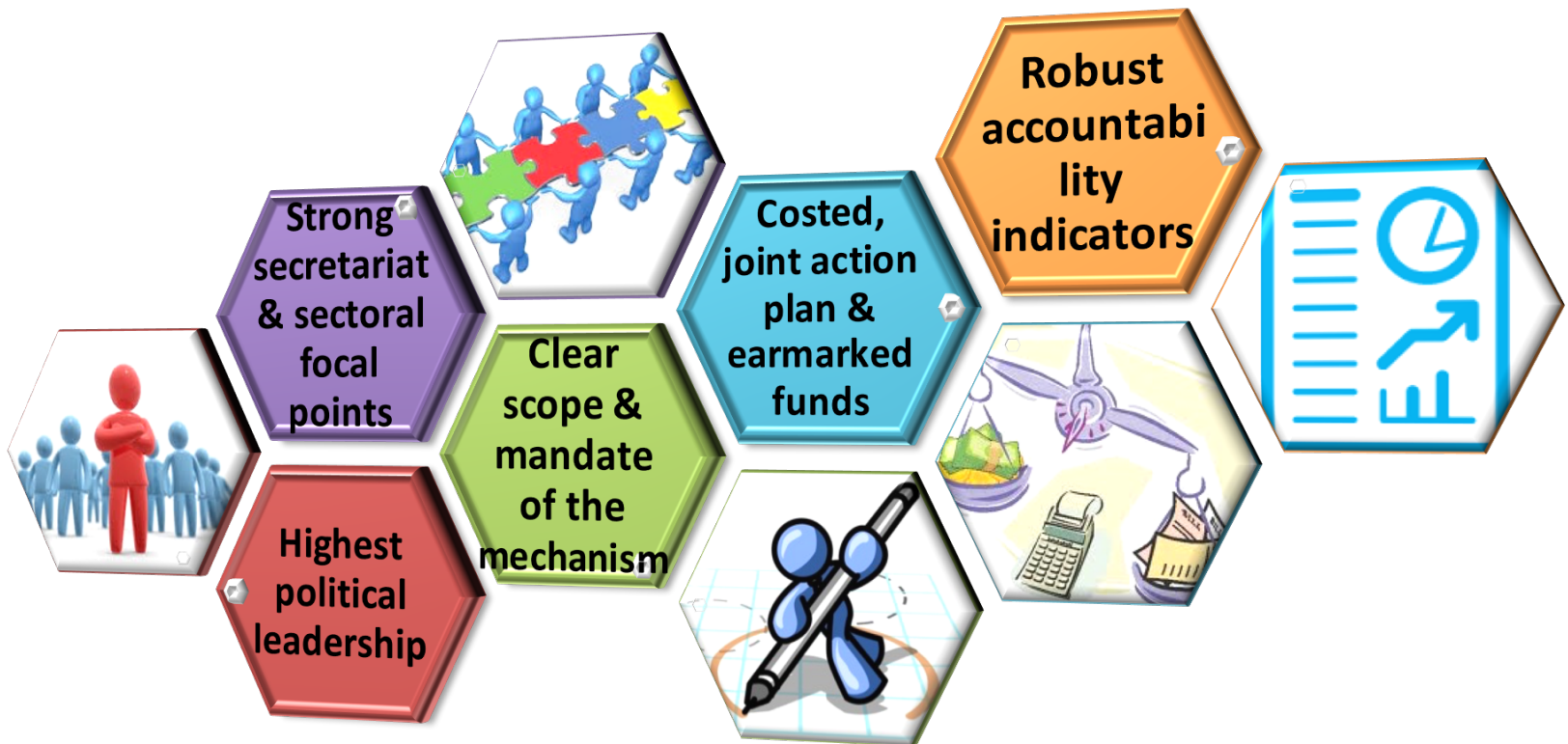
The 5 X 5 Guidance

5 ELEMENTS



5 STRATEGIES

5 ELEMENTS OF COORDINATION MECHANISMS



I. Highest political leadership

- Mandate for coordination should emerge from the highest political office
- All sectors should be accountable to this office



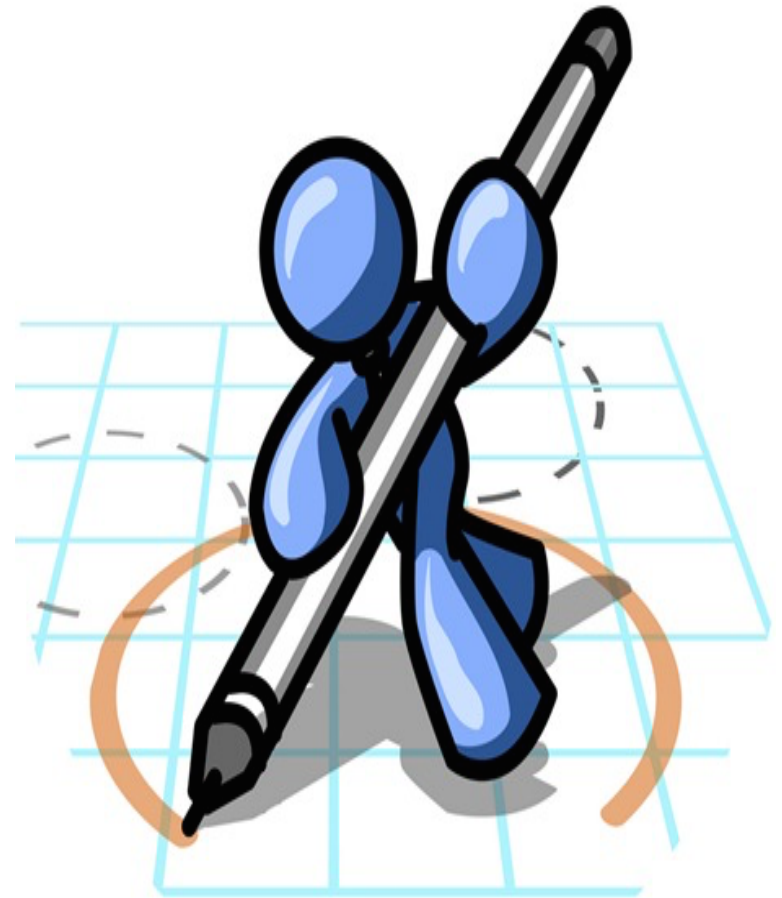
Report of the Commission on AIDS in Asia, 2008

Table 1: Comparison of three leadership scenarios for National AIDS Commission

	Ministry of Health leads planning response	Other Ministry (e.g. Ministry of Planning) leads HIV	National AIDS response Commission led by Head of Government leads response
Leadership & political commitment	Low	Low	High
Allocation of resources	Low	High	High
Coordination	Low	Medium	High
Flow of Resources	Low	Medium	High
Most-at-risk groups prioritised	High	Low	High

II. Clear scope and mandate for the coordination mechanisms

- The national mechanism needs to provide the vision, targets, oversight, resources, policy and accountability framework.
- The mandate of the subnational mechanisms should, address local challenges, tap into local resources and provide for effective implementation and timely reporting.
- Make room for core and additional sectors in the mechanism.



III. Strong Secretariat and sectoral focal points

- Robust and resourced secretariat with with core expertise drawn from different sectors
- Housed in an agency where it enjoys political support and sustainability.
- Focal points for NCDs in other relevant sectors to ensure coordination and accountability



IV. Costed, joint action plan

- Develop the plan jointly towards national priorities, facilitated by the supraministerial authority
- Cost the plan
- Locate resources for the plan



V. Robust accountability indicators

Process indicators

- Presence/ functioning of the mechanism
- availability of a joint plan
- decisions taken/implemented
- participation of relevant sectors,
- Resources allocated/spent,
- Secretariat's responsiveness,
- Reporting

Outcome indicators

- number of planned outputs achieved;
- number of policies developed/amended;
- number of goals and targets of the multisectoral NCD action plan met.



5 STRATEGIES TO GET THE RELEVANT SECTORS ON BOARD



1. Set the Political agenda

Showcase public preparedness

Build political support

Involve the
affected
communities

Persons of
influence as
champions

2. Make the business case for other sectors

- Generate economic evidence on the impact of NCDs on productivity, economy and investments (Cost of inaction)
- Present the cost of action and return on investment



3. Showcase benefits and share responsibilities

- Demonstrate the co-benefits of NCD interventions in maximising outcomes for sectoral priorities
- Identify tasks that aligns with sectoral strengths

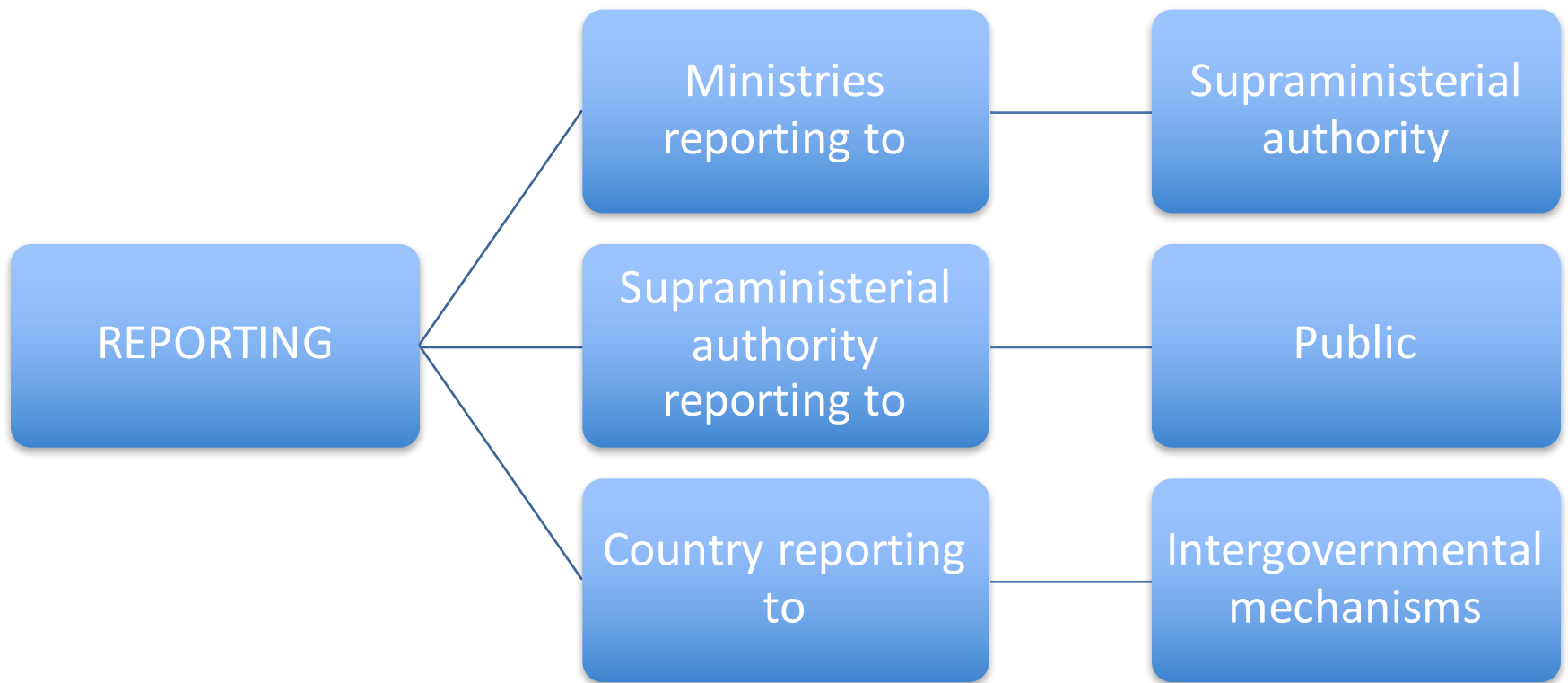


4. Ensure joint accountability through process indicators

- Developing process indicators for each of the NCD (public health) targets as fitting the mandate and existing policy framework of the stakeholder ministries.



5. Periodic reporting



PART 3 OF THE GUIDANCE DOCUMENT

- Supportive role of intergovernmental and international organisations
- Create active pathways for civil society input to the coordination mechanisms
- Ensure the private sector complies with NCD-related regulations and strengthens national response; address conflict of interest

For more details, please contact:

- Dr Renu Garg, Regional Adviser- NCDs, WHO SEARO- gargr@who.int
- Ms Shoba John- sjohn@healthbridge.in

THANK YOU!!!

Q & A



138th WHO Executive Board
Updates &
Preparations for the
69th World Health Assembly



Important Documents



All EB Documents:

http://apps.who.int/gb/e/e_eb138.html

NCD Executive Board Updates:

<http://bit.ly/1MjJTmK>

NCD Statements:

<http://bit.ly/22hU5pe>

All WHA Documents:

http://apps.who.int/gb/e/e_wha69.html

Provisional Agenda:

http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_1-en.pdf

EB Decisions at a Glance

6.3 Prevention and Control of NCDs

- Lack of progress on the nine global NCD targets; need to fast-track national action in the lead up to 2018 UN High-Level Review
- Endorsed process to:
 - Update Appendix 3 of NCD GAP (*consultation in June - TBC*),
 - Develop an approach to register and publish contributions of non-State actors in NCD response
- Adopted resolution with an amendment to highlight the central role of strong surveillance systems, in addition to calling for implementation of the four time-bound commitments.
- See [EB138/10](#) and [EB138/10 Add.1](#)

EB Decisions at a Glance

6.1 Maternal Infant and Young Child Nutrition

- Further discussions in intercessional period needed on resolution to endorse new *WHO guidance on ending the inappropriate promotion of foods for infants and young children*
- Specific request to review recommendation 6
- Request for final report of the Commission on Ending Childhood Obesity to be included in report to 69th WHA, as well as information on how the 2025 WHA Nutrition targets will be aligned with 2030 Agenda
- See [EB138/8](#) and [EB138/8 Add.1](#)

EB Decisions at a Glance

5.3 Framework of engagement with non-State actors (FENSA)

- Extension of the mandate of Open-ended Intergovernmental Meeting, to resume its work for a final session on **25-27 April 2016** to ensure adoption of a consensus text at 69th WHA
- ‘Implications paper’ to assess the practical and resource implications of FENSA on WHO at global and regional levels
- To be presented to Member States ahead of the April negotiations
- See [EB138/7](#)

EB Decisions at a Glance

7.2 Health in 2030 Agenda for Sustainable Development

- WHO to ensure a fully integrated and multisectoral approach to implementing the health goal in the SDGs
- NCDs as a concern for all countries in the new health and development agenda
- Two resolutions were introduced; the Board endorsed [a resolution on UHC](#) and requested further discussions ahead of WHA on a second resolution on the role of WHO in the implementation of 2030 agenda
- See [EB138/14](#)

EB Decisions at a Glance

7.3 Global Strategy for Women's, Children's and Adolescents' Health

- Took note of report; suggested a WHA resolution be developed recognizing the important role of WHO in the implementation
- Technical briefing at 69th WHA
- [See EB138/15](#)

7.4 Global strategy and plan of action on ageing and health

- Call for greater emphasis on aspects of gender, equity and human rights, together with mental health issues
- Resolution will be drafted for adoption at 69th WHA
- See [EB138/16](#)

EB Decisions at a Glance

7.5 Global response to adverse health effects of air pollution

- Wide support for roadmap and clear recognition of air pollution as a public health priority. Impact of air pollution on NCDs and co-benefit solutions to address other NCD risk factors highlighted
- Updated roadmap, indicator framework and costing details presented to the 69th WHA. See [EB138/17](#).

8.7 Migrant Health

- Ground work in human right to health
- Response not only one of emergency, but must be informed by health systems strengthening and viewed as a longer term response
- Need for a global framework for action and specific attention to NCDs and mental health in this framework. See [EB138/26](#).

Commission on Ending Childhood Obesity

Final Report and Recommendations

36 specific recommendations across **6 areas**:

1. Promote intake of healthy foods
 2. Promote physical activity
 3. Preconception and pregnancy care
 4. Early childhood diet and physical activity
 5. Promote phys. activity, health, nutrition for school-age children
 6. Weight management
- **Recommendations include:** effective tax on sugar-sweetened beverages, restricting the marketing of unhealthy foods & beverages, promoting and supporting breastfeeding etc.
 - **Implementation plan & accountability framework** next year

ECHO Final Report: <http://bit.ly/1nu60RW>
NCDa/WCRFI response: <http://bit.ly/1Xsbhoz>

Preview of WHA Side Events

NCD Alliance events

Monday 23 May evening: Main NCD Alliance side event, Intercontinental

Wednesday 24 May: Roundtable on Healthy Workplace, (invitation-only)

NCD Alliance Federations/CSO Partners events

Tuesday 24 May: WHF side event on *Cardiovascular Disease*

Tuesday 24 May: NCD Child Breakfast Event

Thursday 26 May: WHF Roundtable on *Rheumatic Heart Disease*

Thursday 26 May: HelpAge and International Federation of Red Cross and Red Crescent Side Event on *WHO Ageing Report*

Date TBC: Global Alcohol Policy Alliance side event

Preview of WHA Side Events

Official WHA Side Events (UN Palais des Nations) –
PENDING CONFIRMATION by WHO Secretariat

Childhood Undernutrition and Overweight/Obesity: *Finland*, 12
Country Co-Sponsors, UNSCN and Alliance of 12 CSOs, incl. Jamie
Oliver Foundation, Save the Children and NCD Alliance

ECHO Final Report: *Ghana*, Malaysia, Mexico

Financing for NCDs: *Peru*, USA, India, GCM Secretariat

Air pollution: *Norway*, Zambia (NCD Alliance speaker role)

Cancer control: *Malaysia*, multiple governments, UICC

Physical Activity: *Thailand*, US, Japan, Finland

Total of 70 side events applications received, 24 slots available.

69th WHA Planning

NCD Alliance WHA Prep:

- Detailed **WHA Advocacy Briefing** will be available 9 May
- Next **NCDA Webinar** planned for 11 May (TBC):
 - Presentations of GCM/NCD Working Group Final Reports on *Financing and Engagement of Private Sector*
 - NCD Alliance WHA Advocacy Priorities
 - WHA Side Events

We would like to hear from you:

- Let us know if you are attending WHA
- Share relevant intelligence & your WHA advocacy priorities with us

First WHO Global Meeting of National NCD Programme Directors and Managers

Cristina Parsons
Perez/NCD Alliance

WHO Global Meeting of National NCD Programme Directors and Managers

- 15th – 17th Feb Geneva, Switzerland
- Support implementation 4 time-bound commitments:
 - By 2015, set national NCD targets for 2025
 - By 2015, develop national multisectoral policies and plans to achieve the national targets by 2025
 - By 2016, reduce risk factors for NCDs
 - By 2016, strengthen health systems to address NCDs

WHO Global Meeting of National NCD Programme Directors and Managers

- GCM/NCD Alliance/WEF Stakeholder Forum – Interactive dinner & Marketplace breakfast
- 6 interactive stations:
 - Governance
 - Prevention
 - Health Systems
 - Integration and coordination
 - Access to Meds
 - Financing for NCDs



WHO Global Meeting of National NCD Programme Directors and Managers

- Attended by 222 country participants inc mission reps
- <http://www.who.int/nmh/events/2016/ncd-focal-points/en/>

Follow up:

- Communities of practice at global and regional level
- Civil society follow up – global/regional/national

Q & A



Update on Global Indicators for the Sustainable Development Goals



Priya Kanayson
NCD Alliance

Global Indicator Framework

Inter-Agency Expert Group

- Submitted [proposed framework](#) of 230 indicators to measure progress on the 169 targets to UN Statistical Commission for endorsement
- Target 3.4:
 - Indicator 3.4.1: Mortality of CVD, cancer, diabetes, or CRD
 - Indicator 3.4.2: Suicide mortality rate
- Target 3.8 (UHC)
 - Indicator 3.8.2: Number of people covered by health insurance or a public health system per 1000 population
 - Much weaker than previous iteration of indicator
 - Does not address prevention of catastrophic out-of-pocket expenditure
- [3rd meeting](#): 30 March – 1 April in Mexico City

UN Statistical Commission (UNSC)

47th Session of UNSC

- 8 – 11 March, New York
- Discussed proposed indicator framework



Outcomes

- [Outcome document](#) acknowledging work of IAEG, workplan for UNSC
- Endorsed proposed indicator framework
 - Acknowledged work will be ongoing as knowledge improves and new tools and data sources become available
- All documents are available, [here](#)

Next Steps for Indicators

- Indicator framework to be adopted by ECOSOC and GA in September
- IAEG-SDGs will continue work
 - Discuss tier system, particularly indicators classified as Tier III
 - Establish procedure for methodological review of indicators
 - Develop global reporting mechanisms, including flow of reporting from national to global level

Commission on the Status of Women



Commission on the Status of Women (CSW60)

60th Session of CSW

- 14 – 24 March, New York
- [Priority theme](#): *Women's empowerment and its link to sustainable development*
- Review theme: *The elimination and prevention of all forms of violence against women and girls*
- Ministerial segment with round tables and high-level interactive dialogues
- [Draft outcome document](#) is available online
Organisation of work available, [here](#)

NCD – related side events

Date	Time	Event Title	Location	RSVP
15 March	1:15 – 2:30pm	The Roadmap to Realizing Rights: EWEC's Global Strategy for Women's, Children's and Adolescents' Health	Trusteeship Council Chamber	By invitation – email everywomaneverychild@unfoundation.org
16 March	4:45 – 6pm	Strategies for Promoting Women's Health and Well-Being: Prevention and Control of NCDs and Chronic Illness	Conference Room 11	Open to registered CSW delegates and UN pass holders
17 March	6:30 – 7:45pm	Sustainable Energy, air pollution, gender and health	Ex-Press Bar – GA Building	Contact osseirann@who.int
21 March	10 – 11:15am	Investing in women's nutrition for sustainable development	Ex-Press Bar – GA Building	Contact wun@whoun.org
23 March	11:30am – 12:45pm	Time for Action: Women mobilizing against NCDs	Ex-Press Bar – GA Building	Contact baker@who.int

Full calendar of side events, [here](#)

Please email info@ncdalliance.org with other events

Access to Medicines



Access to Medicines (A2M)

High-level Panel on Access to Medicines



- Convened by the Secretary – General
- Purpose: *to review and assess proposals and recommend solutions for remedying the policy incoherence between the rights of inventors, international human rights law, trade rules and public health in the context of health technologies*
- Three pathways:
 1. Solicit and assess proposals and recommend solutions
 2. Expert Advisory Group to provide technical support to HLP
 3. Consultation process, which includes public hearings

Access to Medicines (A2M)

The Process

- Open contribution period from 21 Dec – 28 Feb 2016
 - Over 100 contributions received (available [online](#))
 - NCDA submitted a [response](#) highlighting factors behind lack of access to medicines and technologies for NCDs
- Global Dialogues
 - [10 March, London](#): heard from selected contributors on topics such as patents, strengthening policy coherence, and partnerships
 - 17 March, Johannesburg: will be livestreamed, [here](#)
- Outcome
 - HLP will draft a report mid-April, to be agreed in June

Access to Medicines (A2M)

NCD Alliance Contribution – Key Points

- Numerous political commitments have been made to reduce the global burden of NCDs – this includes access to essential medicines and technologies for NCDs
- Must consider the issue from a holistic perspective to recognise the needs of people at risk or living with NCDs along the life-course
- Underdeveloped national health infrastructure and financing systems, not patents, are main issue for inadequate access – need reactive health systems
- Optimisation of supply chains requires procurement of quality goods, with govt, public and private sector involvement
- Multistakeholder and multisectoral partnerships essential

Q & A



2016 Conferences



Advance rates until 12 April
<http://www.adi2016.org/>



Lower fee until 13 May
www.worldcardiocongress.org



Early bird rate until 10 May
liverpool.worldlunghealth.org



Reduced rate until 31 May
www.worldcancercongress.org

Thank you!

Please visit our website:

www.ncdalliance.org

[@ncdalliance](https://twitter.com/ncdalliance)

