

# NCD Alliance Webinar

Wednesday 21 October 2015



**NCD Alliance**

PUTTING NON-COMMUNICABLE DISEASES  
ON THE GLOBAL AGENDA

# Speakers

## **Moderator:**

**Katie Dain**, NCD Alliance

## **Speakers:**

**Priya Kanayson**, NCD Alliance

**Nick Watts**, Global Climate and Health Alliance

**Alena Matzke**, NCD Alliance

**Corinna Hawkes**, Global Nutrition Report Independent Expert Group

# Agenda

## **Global Development Campaign**

- UN Sustainable Development Summit and UNGA70
- Post-2015 Indicator Development Process

## **Our Climate Our Health**

- Climate and NCDs
- COP21

## **NCD Global Forum**

- Updates from Regional CSO Preparatory Meetings

## **WHO Updates**

- Regional Committee Meetings
- Global Coordination Mechanism

## **Global Nutrition Report**

# Global Development Campaign Update



Priya Kanayson,  
NCD Alliance

# Overview

1. Outcomes of the UN Sustainable Development Summit and UNGA70
2. Update on the Post-2015 Indicator Development Process



# UN Sustainable Development Summit

## Overview

- **25 – 27 September 2015**
- Summit to adopt the [2030 Agenda for Sustainable Development](#)
- Six interactive [dialogues](#) on the theme “*Transforming the world: realizing the post-2015 development agenda*”
  - Health covered under Dialogue 2: *Tackling inequalities, empowering women and girls and leaving no one behind*
- Side events held Monday 21 September – Saturday 3 October
- Official agenda:
  - **Friday 25 September:** Sustainable Development Summit began
    - Pope Francis addressed General Assembly
  - **Monday 28 September:** General Debate began
  - **Saturday 3 October:** General Debate closed



# Main Takeaways from the Summit and UNGA

## General Themes:

- Eradicating poverty
- Reducing inequalities within and across countries
  - Achieving gender equality
- Peace and Security
  - Refugee crisis
  - Terrorism
- Renewed global partnership
- Continued international assistance
- Delivering on commitments made in the [Addis Ababa Action Agenda](#)
- Importance of agreeing a robust climate change [agreement](#) in Paris



# Main Takeaways from the Summit and UNGA

## Focus on Health:

- **NCDs** are firmly on the **global agenda**
  - Several Heads of State and Government referenced NCDs in their statements, including Uruguay, Switzerland, Tonga
- **Capacity building** in all countries to cope with public health crises
- Emphasis on **integration** across health sector
  - Involvement of non-health actors is essential
- Responsible involvement of the **private sector**
- Need for strong **accountability mechanisms** and for all stakeholders to be involved

## What's Next?

- High-level Political Forum ([HLPF](#))
- UN Committee [work](#)
- Indicator Development Process





# NCD Alliance Advocacy Messages

## Why UNGA?

- High-level, multisectoral audiences
- Diverse health and development discussions
- NCDs in Agenda 2030
- New global health agenda

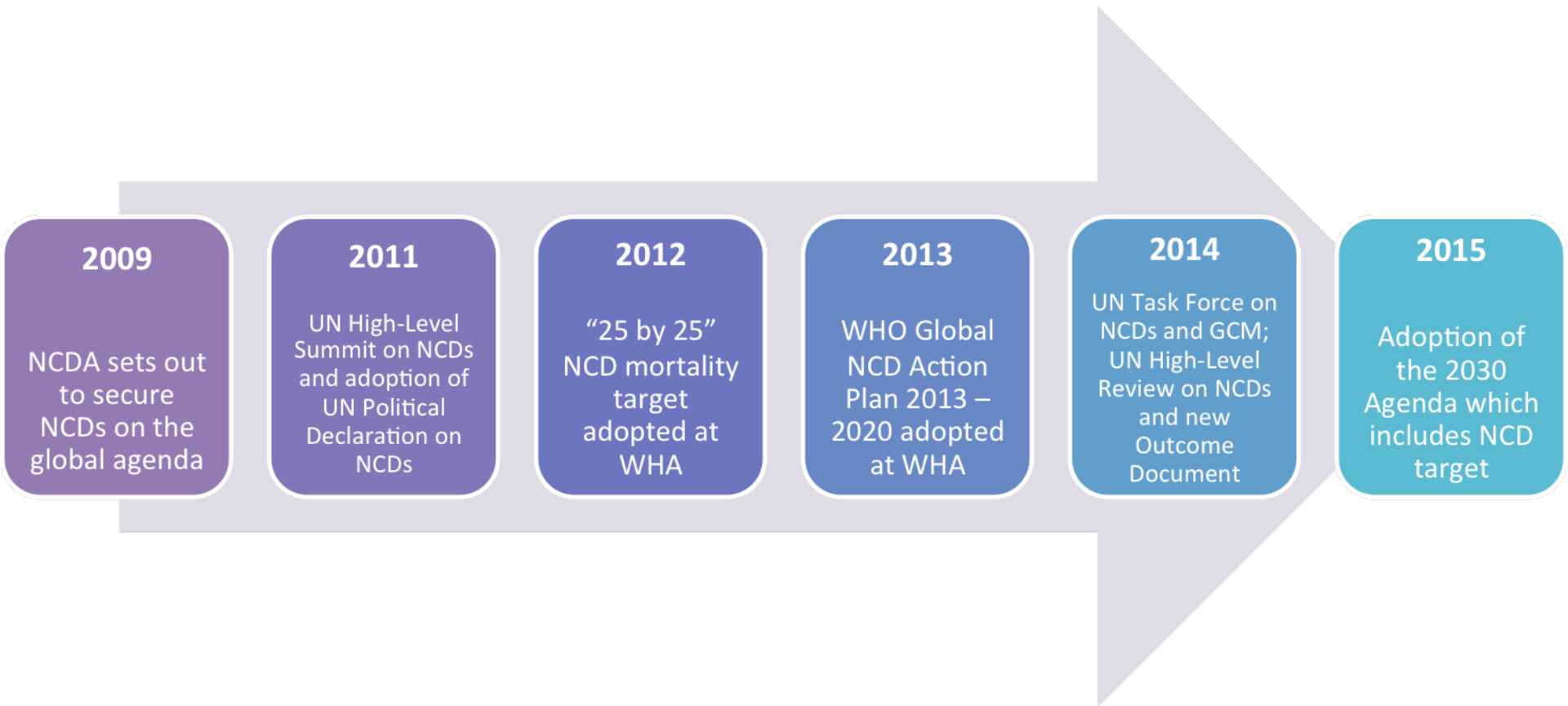
“...urge decisive action from the global community to find solutions to a raft of global challenges, including NCDs.”  
– President of Uruguay

## Key Messages for NCDA

- Celebrate inclusion of NCDs in Sustainable Development Goals
- Launch NCDA [Advocacy 2-pager](#)
- Promote integration across health sector and multisectoral partnerships
- All stakeholders must deliver on commitments made in the [Addis Ababa Action Agenda](#) on financing for development
- Announce change in NCDA leadership

# NCD Alliance Advocacy Messages

## NCDs in the 2030 Agenda: Culmination of a 6 year campaign



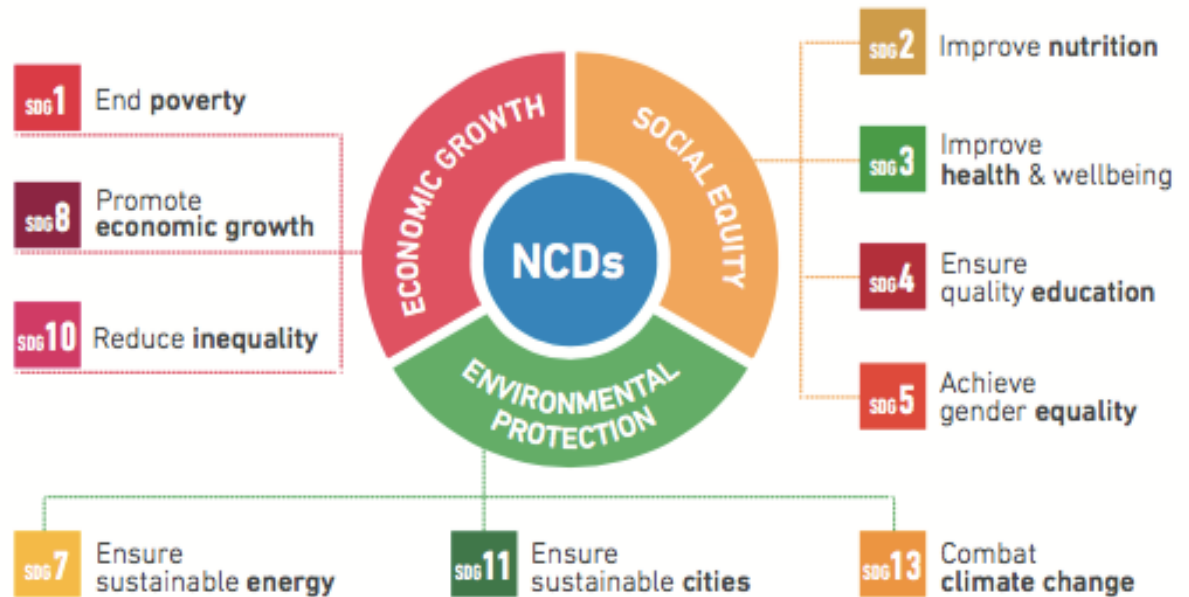
# NCD Alliance Advocacy Messages

## AGENDA 2030: TIME FOR ACTION ON NCDs

#ActNowforNCDs

### Working across sectors to improve health and NCDs

NCDs are now a universal priority. All governments must urgently take action if they are to meet these 2030 targets. Investing in efforts to reduce the global NCD burden will not only improve health outcomes, it will also accelerate progress on many other SDGs.



# NCD Alliance Advocacy Messages

## AGENDA 2030: TIME FOR ACTION ON NCDs

#ActNowforNCDs

### A global framework for financing development and NCDs

Resources and effective partnerships will be key to the success of the SDGs. The July 2015 Addis Ababa Action Agenda is a framework adopted by all countries to catalyse domestic, multilateral and private investment for the SDGs. Important policy commitments are included to increase financing for NCDs:



# NCD Alliance Advocacy Messages

**AGENDA 2030: TIME FOR ACTION ON NCDs**

#ActNowforNCDs

## The means to drive progress in health

Four means of implementation targets are included to support the attainment of the health targets. All are important building blocks of the NCD response:

Target 3.a



Strengthen implementation of **WHO FCTC**.

Target 3.b



Support **R&D of vaccines and medicines, and improve access.**

Target 3.c



Strong, well-trained **health workforce.**

Target 3.d



Strengthen **capacity to manage health risks.**

# NCD Alliance Activities: Side Events

## Translating the Post-2015 Agenda: Action on NCDs for a Sustainable Future



### Key Takeaways:

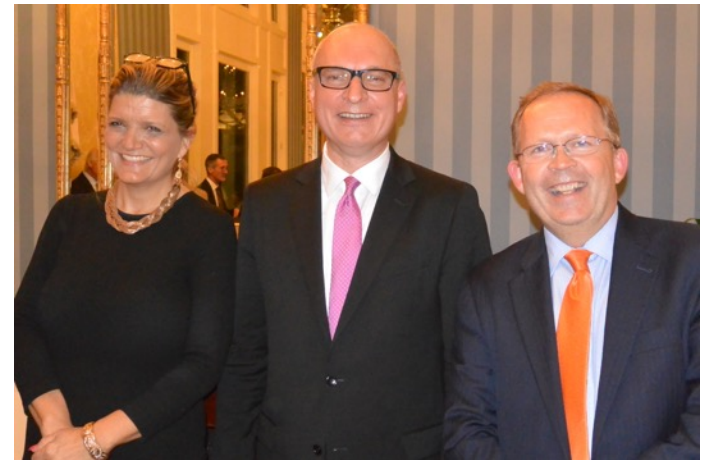
- Need money, capacity, and strong data
- Prevention of NCDs goes beyond the health sector, to trade and infrastructure
- Visibility and cross-sectoral action necessary to implement the SDGs
- Civil society must push governments when needed but also support them
- UN system must evolve to understand cost of NCDs affects whole of society

# NCD Alliance Activities: Side Events

## Leadership Reception: Celebrating progress, preparing for the future

Thursday 24 September

- Celebrate inclusion of NCDs in 2030 Agenda
- Mark transition in NCDA leadership
- Share highlights of new NCD Alliance Strategic Plan 2016 – 2020
- Read the full statement [here](#)



*“It is time to start delivering...to shift from talking and framing, to acting. Now is the time for implementation at the national and regional levels.”*

– Mr José Luis Castro, Executive Director of The International Union Against Tuberculosis and Lung Disease, and Chair of the NCD Alliance Steering Group

# NCD Alliance Activities: Side Events

## Health in Post-2015 NGO Strategy Meeting

Friday 25 September | Co-hosted with UN Foundation, International HIV/AIDS Alliance, Global Health Council

### Objectives:

- Review landscape of health SDG advocacy entry points over next year
- Identify common priorities and opportunities for joint advocacy

### Opportunities to Engage:

- [Global Strategy](#) for Women's, Children's and Adolescents' Health
  - PMNCH Post-2015 Working Group
- [Primary Health Care Performance Initiative](#)
- [Measurement and Accountability for Health](#)
- Post-2015 Indicator Development Process





# Other Side Events during UNGA

## NCD-related

- **WHO** event on promoting healthy lifestyles and NCD control
- **Danish** mission roundtable
- Launch of [Global Nutrition Report](#)
- **Women and NCDs Taskforce** event on women, SDGs, and NCDs
- **NCD Child** event on implementing the SDGs for young people
- **RHD Action [campaign](#)** launch

## Other

- **EWEC** events – including launch of updated [Global Strategy](#) for Women's, Children's and Adolescents' Health 2016 – 2030
- **iERG** report launch: [Accountability for Women's and Children's Health](#)
- Side events on **UHC, HIV/AIDS, SRHR, private sector involvement, and accountability for health and the SDGs**

# Every Woman Every Child Strategy Launch

## Updated Global Strategy for Women's, Children's and Adolescents' Health 2016 – 2030

- **Vision:** By 2030, a world in which every woman, child and adolescent in every setting realizes their rights to physical and mental health and well-being, has social and economic opportunities, and is able to participate fully in shaping prosperous and sustainable societies
- **Objectives:**
  - **Survive:** End preventable deaths
    - *Reduce by 1/3 premature mortality from NCDs and promote mental health and well-being*
  - **Thrive:** Ensure health and well-being
    - *End all forms of malnutrition and achieve UHC*
  - **Transform:** Expand enabling environments
    - *Birth registration for all*
- **Alliance of Alliances** partnership



# Key Publications Launched during UNGA

## NCD Publications

- NCD Alliance Advocacy 2 pager – [NCDs: A Major Challenge to Sustainable Development](#)
- WHO: [NCDs Progress Monitor 2015](#)
- Healthy Caribbean Coalition: [A Civil Society Report on National NCD Commissions in the Caribbean: Towards a more Effective Multisectoral Response to NCDs – Part I](#)
- NCD Child: [Advocacy Guide – A New Era for Action: The Sustainable Development Goals](#)
- [NCD Scorecard](#)
- The Lancet Commission: [Reframing NCDs and injuries for the poorest billion](#)
- [The Global Nutrition Report 2015](#)
- [RHD Action](#)
- PATH: [No Empty Shelves: Diabetes Supplies, There When Needed](#)
- FCA: [Tobacco Control and the SDGs: An Advocacy Toolkit](#)

## Other Publications

- Every Woman Every Child: [The Global Strategy for Women's, Children's and Adolescents' Health \(2016 – 2030\)](#) and [Accountability Reports](#)
- WHO: [World Report on Ageing and Health 2015](#)
- Overseas Development Institute: [Projecting progress: reaching the SDGs by 2030](#)

# Update: Indicators for the SDGs

## Proposed timeline:

- **26 – 28 Oct:** 2<sup>nd</sup> [meeting](#) of IAEG-SDGs (Bangkok)
- **30 Nov:** Indicator proposal submitted to 47<sup>th</sup> session of UNSC
- **March 2016:** Global indicators finalized and adopted by UNSC, to be later adopted by ECOSOC and the UN GA
- **Note:** original timeline allowed for a second round of consultations prior to Bangkok meeting, but this did not occur

### Important documents:

- [Website](#) of IAEG-SDGs
- [Proposed workstream](#) for the IAEG-SDGs
- [Updated list](#) of priority indicators (v. 11 August)

# Update: Indicators for the SDGs

## Second meeting of the IAEG-SDGs:

- 26 – 28 October in Bangkok, Thailand
- **Objectives:**
  - Review the list of possible global indicators
  - Discuss the global indicator framework, interlinkages across targets and issues such as data disaggregation
  - Discuss the work plan and next steps
- The meeting will be [webcast](#)

### **Important documents:**

- [Provisional agenda](#) for the expert group meeting
- Background [documents](#) to inform the meeting
- [Summary](#) of results from open consultation process

# Update: Indicators for the SDGs

## Current proposed indicators for NCD targets:

- **Target 3.4:** The probability of dying of CVD, cancer, diabetes or chronic respiratory disease between 30 – 70 years of age
- **Target 3.a:** Age-standardized prevalence of current tobacco use among persons **age 18+**

## NCD Alliance Submission to IAEG-SDGs Consultation

- **Target 3.4:** Proposed alignment with existing indicators in WHO [Global Monitoring Framework](#)
- Proposed indicators for **Target 2.2** (nutrition), **Target 3.5** (substance abuse), **Target 3.6** (road traffic injuries), **Target 3.9** (air pollution), **Target 7.1** (sustainable energy), **Target 11.2** (safe transport and physical activity)

# NCD Alliance Indicator Consultation Process

## January 2015

- Initial NCDA network consultation
- **Result:** Table with proposed indicators for NCD – relevant targets



## August 2015

- Consultation based on proposed indicators
- **Result:** Collective NCD community submission to IAEG-SDGs consultation process



## Next Steps

- Follow IAEG-SDGs indicator process through March 2016
- Continue to input into process to ensure strong NCD indicators

- Respond to outcomes of IAEG-SDGs meeting in Bangkok

# Next Steps

- Find out what your government said at UNGA
- Send letter to government officials
  - Congratulating them on inclusion of NCDs in the 2030 Agenda and offer support in implementation (*NCDA template*)
- Ask to meet with relevant government officials
  - How will they incorporate Target 3.4 into national health and development plans and priorities?
- Follow indicator process, [here](#)
- Inform NCDA of planned activities by email: ([info@ncdalliance.org](mailto:info@ncdalliance.org))





# Questions and Answers





# Our Climate, Our Health

**Nick Watts**  
*Director, Global Climate  
& Health Alliance*



**OUR CLIMATE,  
OUR HEALTH.**

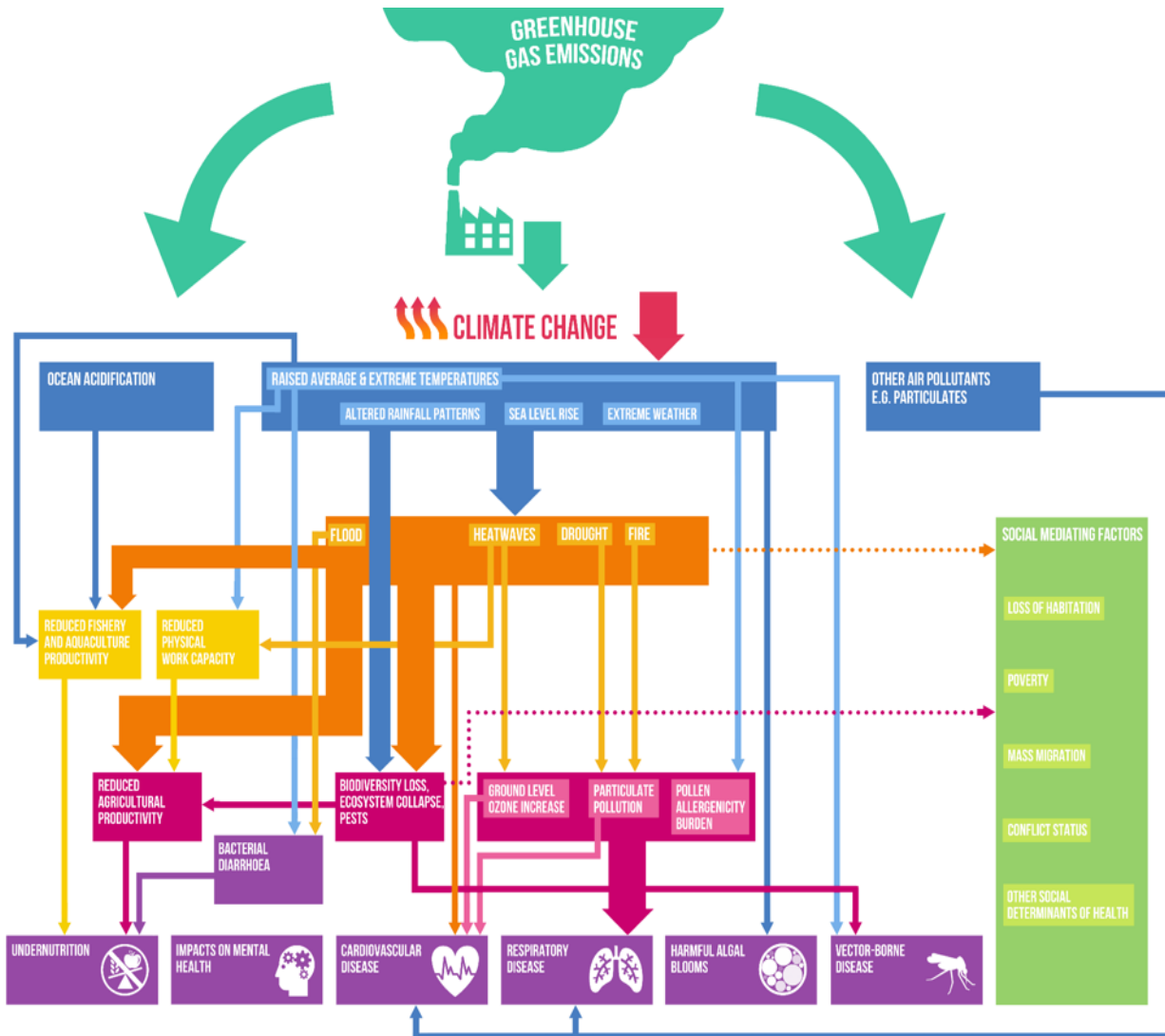
THE GLOBAL  
CLIMATE & HEALTH  
ALLIANCE

- “Map out the impacts of climate change, and the necessary policy responses, in order to ensure the highest attainable standards of health for populations worldwide.”
- Multi-disciplinary team
- 11 core partner institutions

## Health and climate change



“Tackling climate change could be the greatest global health opportunity of the 21st century.”



# NCDs and Climate Change



OUR CLIMATE,  
OUR HEALTH.

- a. Potentially catastrophic for human survival
- b. Undermine the last half-century of gains in development and global health
- c. A medical emergency



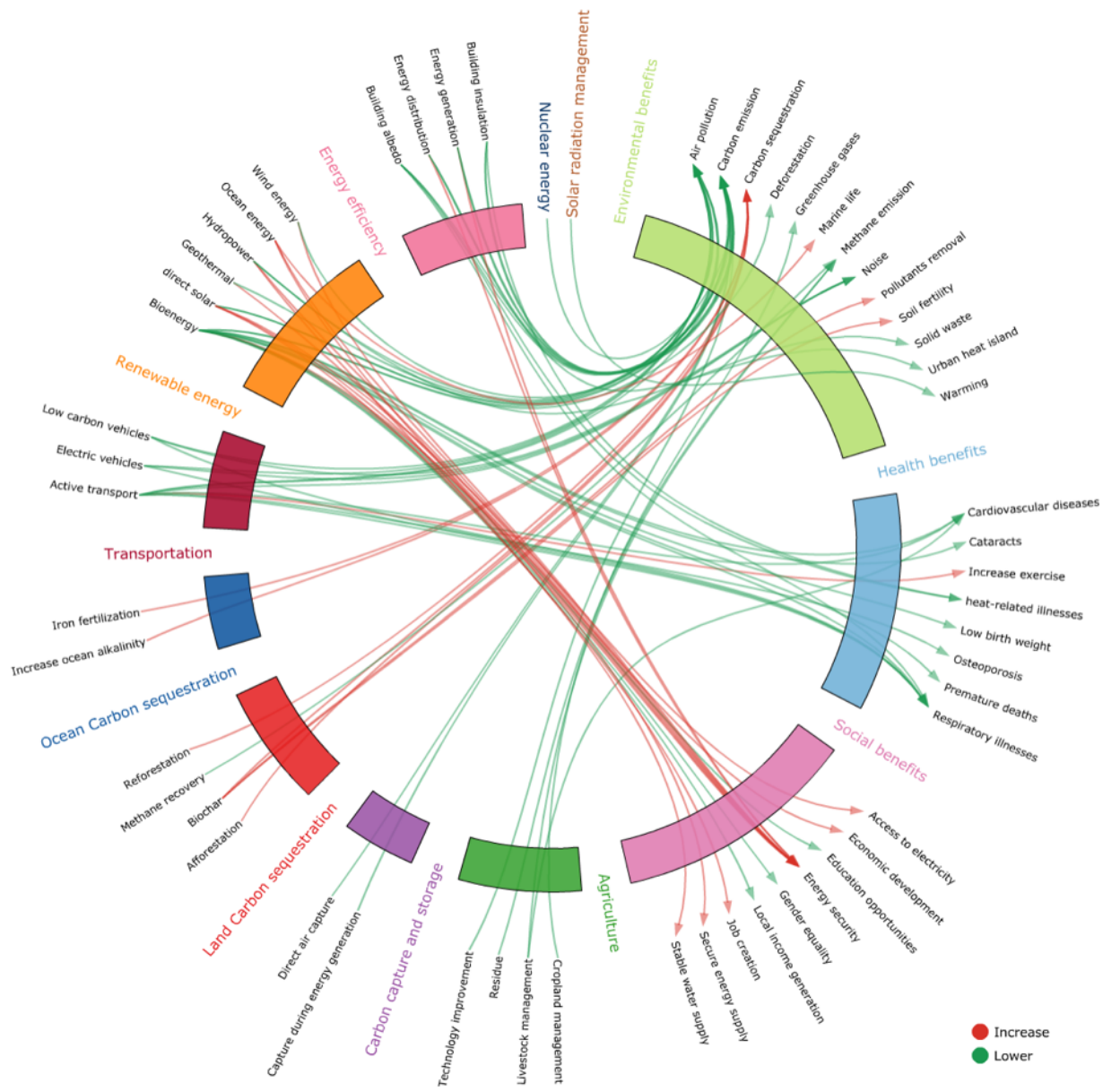


*“Responding to climate change could be **the greatest global health opportunity** of the 21<sup>st</sup> century”*

*The Lancet, 2015*



**OUR CLIMATE,  
OUR HEALTH.**



# Our Climate. Our Health.

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- Mobilize the health profession and catalyze action on the many solutions available and press for action in implementing them.
- To take this message to the Paris COP and demand a firmer deal.



**OUR CLIMATE,  
OUR HEALTH.**





# Who are our partners?



# Bringing the Health Community to Paris



**OUR CLIMATE,  
OUR HEALTH.**



# Get Involved

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OUR CLIMATE,  
OUR HEALTH

- Visit [www.ourclimateourhealth.com](http://www.ourclimateourhealth.com)
- Participate in an event
- Engage nationally
- Engage globally
- Coming to Paris?
- Sign the Calls to Action





**Our Climate. Our Health.**

**@GCHAlliance**

**[www.ourclimateourhealth.org](http://www.ourclimateourhealth.org)**

**[info@ourclimateourhealth.org](mailto:info@ourclimateourhealth.org)**



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OUR HEALTH.**

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ALLIANCE

# Questions and Answers



# NCDA Global Forum: Update on Regional Preparatory Meetings

Alena Matzke,  
NCD Alliance

# Regional Preparatory Meetings



## Objectives:

1. To share **experiences, challenges, lessons learnt, and best practices;**
2. To stimulate a **multisectoral approach to NCD prevention and control;**
3. To explore, nurture and support **incipient national/regional alliances;**
4. To identify the **regions main capacity building** needs.

## Dates and Locations:

- **Caribbean:** 6 June, Barbados
- **Latin America:** 8 -10 June, Panama
- **SEARO:** 9 -10 July, India
- **EMRO:** 1-2 September, Egypt
- **AFRO:** 2-3 October, Kenya
- **EURO:** 23-24 February, Belgium
- **WPRO: 2016 (TBC)**

# Regional Meeting, Nairobi



## Overview:

- **2-3 October 2015** in Nairobi, Kenya
- **10 African NCD Alliances**, East Africa NCD Alliance Initiative, Global and Danish NCD Alliance; regional FCA, WLF, UICC reps
- **Aimed to strengthen NCD Alliances** through sharing experiences, mapping capacity and **priorities for joint regional advocacy**
- **Thematic sessions** on role of civil society in accountability, integration of NCDs into NDPs/UNDAFs,
- **Areas requiring attention** included integration of NCDs and infectious disease/RMNCAH programmes
- Agreed establishment of **Africa NCDs Network (ANN)**



# Recommendations and Outcomes



- **Establish Africa NCDs Network** (ToR under development) for information sharing and joint advocacy towards African Union & WHO AFRO based on **priorities for regional advocacy & action:**
  - Integration of NCDs in NDPs and UNDAFs
  - Establish national HL multisectoral NCD commissions
  - Improve access to early detection & management
  - Strengthen HR & institutional capacity for surveillance, monitoring and evaluation
- Grow **networks in different regional blocks** (SADAC, EAC, COMESA, ECOWAS)
- Increase engagement with **WHO and UNDP country and regional offices**
- NCDA to **support capacity building activities in region**

*Meeting report available in coming weeks.*

# Regional Meetings: Themes & Findings

- Formation of **new national and regional alliances**
- **Coordination & collaboration** at national/(sub-)regional level
- Organizational and advocacy **capacity building**
- Engagement of **non-health sectors**
- **Accountability** – sensitive political and cultural context
- Differing **regional priorities**
- Integration of NCDs into **National Development Plans & Frameworks**
- Integration of NCDs into **infectious disease and RMNCAH programmes** – risks and opportunities
- Relationship and attitude towards **private sectors**

# WHO Updates

Regional Committee Meetings

Global Coordination Mechanism



Alena Matzke,  
NCD Alliance

# PAHO: 28 Sept-2 Oct, Washington DC

## Strategy and Plan of Action on Dementias in Older Persons Adopted

- PAHO first region to adopt a Regional Plan of Action on Dementia - **most substantial action by a public health agency on dementia issues to date.**
- Dementia in the Americas set to increase from 9.4 million to almost 30 million people by 2050
- Five strategic recommendations to Member States to strengthen the response capacity of health system, with a **multisectoral approach**; focus on **human rights, gender equality, and equity**

## Progress Report on Implementation of the WHO FCTC Noted

- **Number of States Parties to FCTC has increased to 30 in Region** - ratification by El Salvador in Oct 2014
- Taxation: Honduras has adjusted its specific tax on tobacco to take inflation into account; Dominica and Grenada have raised special tax on consumption, taking effect in 2015. Chile and Venezuela have established measures to make tobacco products more expensive within framework of their tax reforms
- Packaging: Jamaica, Suriname, and Trinidad and Tobago have issued enabling regulations for their laws on packaging and labelling of tobacco products, including graphic health warnings

# EMRO: 5-8 October, Kuwait

## Resolution Passed on Implementation of UNPD on NCDs

- Welcomed the efforts of Regional Director to **raise global and regional awareness** of the magnitude of the problem and to strengthen action in NCD prevention and control
- Urged Member States to take the necessary actions to reduce premature mortality from NCDs

## Framework of Action Agreed to Scale up Mental Health Care

- The **mental health treatment gap in some countries of the Region is as high as 90%**
- Member States agreed to scale up mental health care and implement four strategic interventions related to **governance, prevention, health care and surveillance**

## In addition

- Report on transition from **MDGs to SDGs in Post-2015** noted
- Report on **Universal Health Coverage** noted
- Report on **Regional Strategy on Health and Environment 2014-2019** noted

# WPRO: 12-16 October, Guam, USA

## Report on NCD Prevention and Control Noted

- NCD plans: WHO supported six Member States in developing **national NCD multisectoral action plans or strategies** - endorsed in Cook Islands, Fiji and Viet Nam.
- Tobacco control: 9 countries implemented tobacco **tax increases**, 7 countries expanded **smoke-free zones**, 3 countries introduced **graphic health warnings** on tobacco packaging, 2 countries developed **tobacco control action plans**.

## Resolution Passed on Universal Health Coverage

- Urges Member States to use WPRO Regional action framework on UHC to **inform national policy and planning process**, exercise government leadership in **multisectoral approaches**, and establish **monitoring mechanisms**

## Resolution Passed on Urban Health

- Urges Member States to adopt proactive and **life-course approaches to urban health** using the regional framework as a reference, establish and strengthen mechanisms for **cross-sectoral governance and multisectoral initiatives**, invest in **human resources training and capacity-building**, and strengthen **monitoring systems**

## Report on Ageing and Health Noted

- Continued support for four pillars of the Regional Framework for Action on Ageing and Health: **fostering age-friendly environments** through actions across sectors, **promoting healthy ageing** across the life course, **reorienting health systems** to meet the needs of older people, and **strengthening the evidence base** on ageing and health.

# Remaining 2015 RCM: AFRO

## **WHO AFRO Regional Committee Meeting**

**23-27 November, N'Djamena, Chad (rescheduled)**

### **Key Agenda Items**

- Post-2015 Health Development Agenda: Perspectives for AFR
- Progress Report on Implementation of Health Promotion Strategy for AFR
- Progress Report on Strategy for Addressing Key Determinants of Health in AFR
- Progress Report on Establishment of African Medicines Agency

(No NCD-specific agenda item)

AFRO RCM Documents: <http://bit.ly/1Gnw2OT>

NCD Alliance RCM Webpage: <http://ncdalliance.org/who-regional-committees-2015>

**Please let us know if you plan to attend by emailing**  
**[info@ncdalliance.org](mailto:info@ncdalliance.org)**

# GCM Dialogue 30 November - 1 December

- **Theme:** *Mobilizing international cooperation on NCDs through North–South, South–South and triangular cooperation.*
- **Background Documents** and **online registration** available [here](#)
- **Audience:** Health & Development community – governments, civil society, academia, donors, private sector
- **Dialogue Pre-Meetings on 29 November:**
  - NGOs, private sector entities/philanthropic foundations, and UN system
- **Objectives:**
  - Identify barriers & opportunities for intl. cooperation on NCDs
  - Develop common position and concrete recommendations as input into the Dialogue





# Civil Society Caucus: 29 November

## **Non-Governmental Organizations and the Next Generation: Advocacy and Accountability for NCDs**

- **Audience:** Health & development NGOs, Patients, Youth and Ageing Communities, and Academia
- **Co-convenors:** NCDA and YP-CDN
- **Date:** 29 November, 12:00 – 18:00, Geneva (venue TBC)
- **Expected Outputs:**
  - Joint advocacy roadmap
  - 1-3 recommendations for concrete action
- **RSVP online:** <http://bit.ly/1OefDGX>

# Questions and Answers



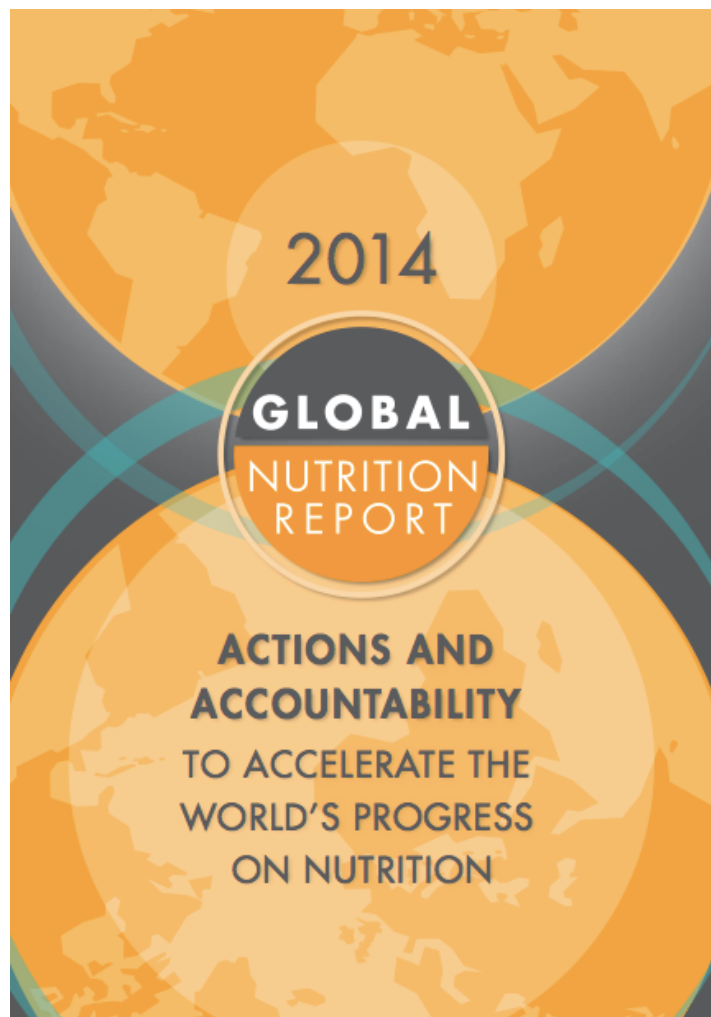
# Global Nutrition Report 2016

Speaker

Corinna Hawkes

Co-Chair, Global Nutrition Report Independent  
Expert Group

# The Global Nutrition Report



# Nutrition for Growth

## NUTRITION FOR GROWTH | Beating hunger through business and science

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**Global prosperity is being undermined by the silent crisis of undernutrition, which prevents people in countries reaching their full potential.**

Undernutrition is the largest single contributor to child mortality worldwide, underlying one third of deaths amongst children under five. It is also responsible for the loss of billions of dollars in productivity, in effect stunting not only citizens, but also the competitiveness and economic growth of the countries most affected.

The governments of the UK and Brazil, and the [Children's Investment Fund Foundation \(CIFF\)](#) will co-host a high-level international meeting, Nutrition for Growth: Beating Hunger through Business and Science on 8 June in central London.



## Nutrition for Growth Commitments: Executive Summary

Preventing at least 20 million children from being stunted and saving at least 1.7 million lives by 2020

### Achievements:

- **Global Nutrition for Growth Compact** endorsed by a total of 94 stakeholders, including 26 Governments addressing undernutrition, and 27 business and science organisations.<sup>1</sup>
- **15 Governments** committed to increase the domestic resources for scaling up nutrition, and **12 Governments** announced national stunting-reduction targets.
- Donors today have secured new commitments of up to **GBP £2.7 billion** (USD \$4.15 billion) to tackle undernutrition up to 2020, **GBP £1.9 billion** (USD \$2.9 billion) of which is core funding with the remainder secured through matched funding.
- An estimated **GBP £12.5 billion** (USD \$19 billion) committed for improved nutrition outcomes from nutrition-sensitive investments between 2013 and 2020.
- **22 businesses** pledged to improve the nutrition and consequently the productivity and health of **over 927,000 workforce members** in more than **80 countries**.
- **New partnerships between business and science** to research new solutions and scale up effective technologies which include biofortification, high energy foods, fortification, and the use of mobile phones for nutrition.
- Commitment to develop a new **catalytic financing facility** for nutrition.
- New commitments to **scale up research, knowledge sharing and South-South partnerships**, including the launch of a **Global Panel on Agriculture and Food Systems**.
- Launch an **annual Global Report on Nutrition** from 2014, together with online annual publication of plans, resource spending, and progress updates.
- Hold **annual global nutrition meeting** in margins of UN General Assembly, from September 2013.
- Hold a **High-Level Nutrition Event**, under the leadership of the Government of Brazil, during the **2016 Rio Olympics**.

*“Launch an annual Global Report on Nutrition from 2014, together with online annual publication of plans, resource spending, and progress updates”*



## Stakeholder Group

### Co-chairs:

- Augustin Flory (Children's Investment Fund Foundation)
- Ferew Lemma (Ministry of Health, Ethiopia)

### Members:

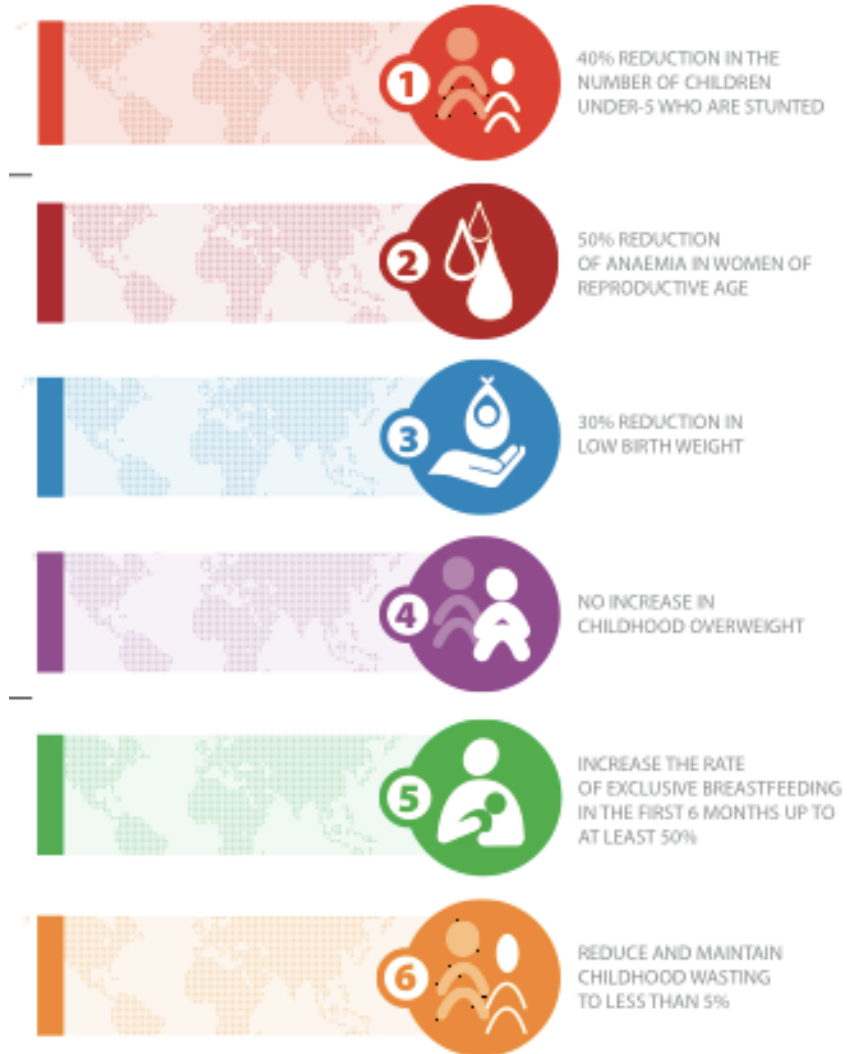
- Abdoulaye Ka (Cellule de la Lutte contre la Malnutrition, Senegal)
- Anna Lartey (UN Food and Agriculture Organization)
- Anne Peniston (USAID)
- Chris Osa Isokpunwu (SUN Focal Point, Nigeria)
- David Nabarro (UN Secretary General's Office; SUN Secretariat)
- Edith Mkawa (Office of the President, Malawi; SUN Focal Point)
- Francesco Branca (World Health Organization)
- Mario Leeftang (Government of the Netherlands)
- Milton Rondo Filho (Ministry of Foreign Relations, Brazil)
- Jane Edmondson (UK Department for International Development)
- Jean-Pierre Halkin (European Commission; SUN Donor Network)
- Jésus Búlux (Secretaría de Seguridad Alimentaria y Nutricional, Guatemala)
- Jo-Ann Purcell (Government of Canada; SUN Donor Network)
- John Cordaro (Mars; SUN Business Network)
- Kate Houston (Cargill; SUN Business Network)
- Kathleen Beckmann (Federal Ministry for Economic Cooperation and Development, Germany)
- Lucero Rodríguez Cabrera (Ministry of Health, Mexico)
- Lucy Sullivan (1,000 days; SUN CSO Network)
- Marc Van Ameringen (Global Alliance for Improved Nutrition; SUN Business Network)
- Martin Bloem (World Food Programme)
- Muhammad Aslam Shaheen (Planning Commission, Pakistan)
- Nina Sardjunani (Ministry of National Development Planning, Indonesia)
- Shawn Baker (Bill & Melinda Gates Foundation; SUN Donor Network)
- Tom Arnold (Institute of International and European Affairs; SUN Coordinator *ad interim*)
- Werner Schultink (UNICEF)

## Independent Expert Group

- Lawrence Haddad (International Food Policy Research Institute) - Co-Chair
- Corinna Hawkes - (Independent) - Co-Chair
- Emorn Udomkesmalee (Mahidol University, Thailand) - Co-Chair
- Endang Achadi (University of Indonesia)
- Arti Ahuja (Women and Child Development, Odisha, India)
- Mohamed Ag Bendech (FAO)
- Zulfqar Bhutta (Hospital for Sick Children, Toronto & Aga Khan University, Pakistan)
- Rafael Flores-Ayala (CDC, USA)
- Patrizia Fracassi (SUN Secretariat, Switzerland)
- Laurence M. Grummer-Strawn (WHO)
- Elizabeth Kimani (African Population and Health Research Centre, Kenya)
- Yves Martin- Prével (IRD, France)
- Purnima Menon (International Food Policy Research Institute)
- Eunice Nago Koukoubou (University of Abomey-Calavi, Benin)
- Holly Newby (UNICEF, USA)
- Rachel Nugent (University of Washington, USA)
- Stineke Oenema (ICCO Alliance, Netherlands)
- Leonor Pacheco Santos (University of Brasília, Brazil)
- Judith Randel (Development Initiatives, UK)
- Jennifer Requejo (PMNCH, Switzerland)
- Boyd Swinburn (University of Auckland)

# GLOBAL TARGETS 2025

To improve maternal, infant and young child nutrition





## Packages of Nutrition Interventions

### Optimal maternal nutrition during pregnancy

- Maternal multiple micronutrient supplements to all
- Calcium supplementation to mothers at-risk of low intake<sup>3</sup>
- Maternal balanced energy protein supplements as needed
- Universal salt iodization

### Infant and young child feeding

- Promotion of early, exclusive breastfeeding for 6 months; continued breastfeeding until 24 months
- Appropriate complementary feeding education in food secure populations and additional complementary food supplements in food insecure populations

### Micronutrient supplementation in children at risk

- Vitamin A supplementation between 6-59 months age
- Preventive zinc supplements between 12-59 months of age

### Management of acute malnutrition

- Supplementary feeding for moderate acute malnutrition
- Management of severe acute malnutrition

Ref: Bhutta et al 2013, Lancet, similar to WHO Essential Nutrition Interventions

# MALNUTRITION COMES IN MANY FORMS



**stunting**  
(people are too short for their age)



**wasting**  
(people are too thin for their height)

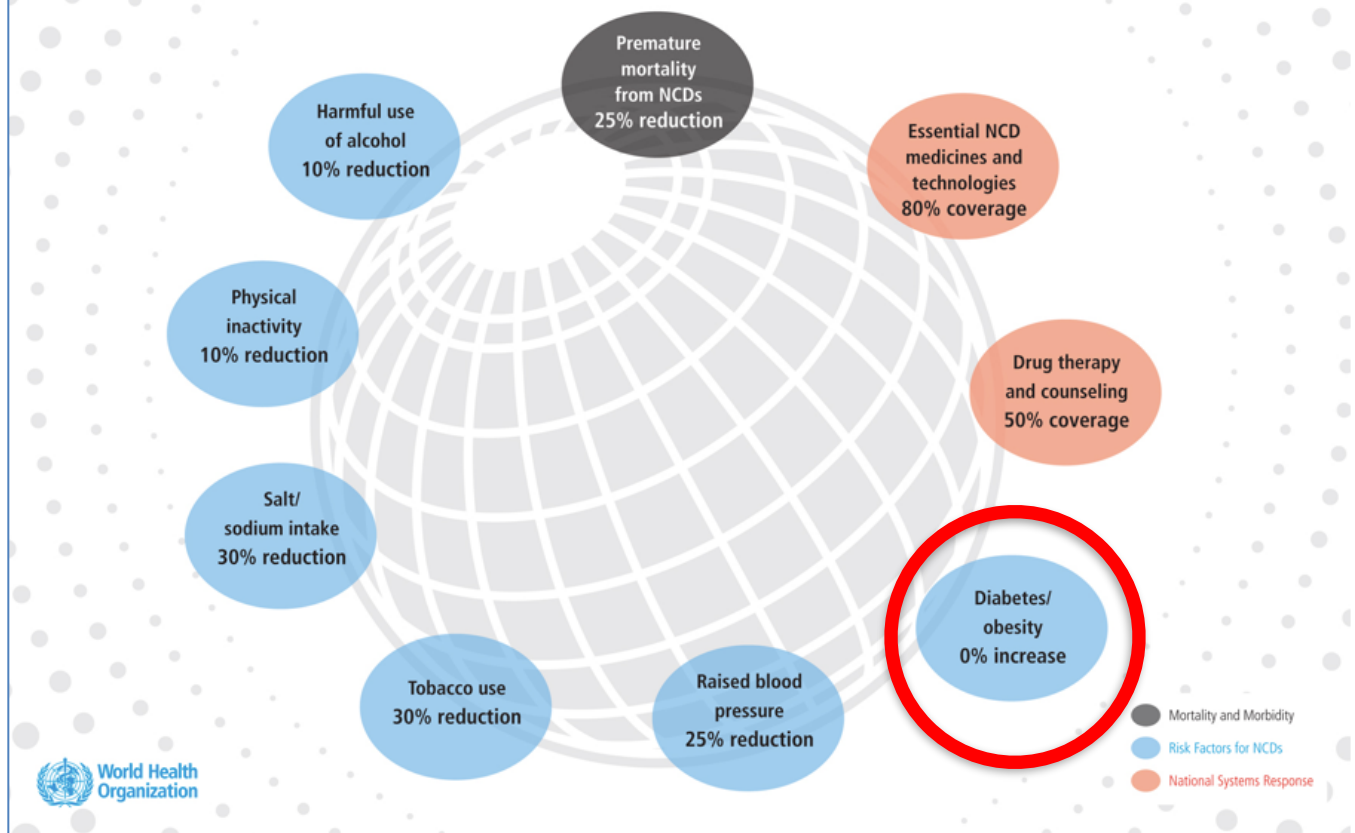


**obesity**  
(people are overweight)

 GLOBAL NUTRITION REPORT 2015

#NutritionReport

# Set of 9 voluntary global NCD targets for 2025



# GLOBAL ACTION PLAN

FOR THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES

2013-2020



## POLICY OPTIONS FOR MEMBER STATES:<sup>1</sup> PROMOTING A HEALTHY DIET

<sup>32</sup> The proposed policy options are intended to advance the implementation of global strategies and recommendations to make progress towards the voluntary global targets set out below:

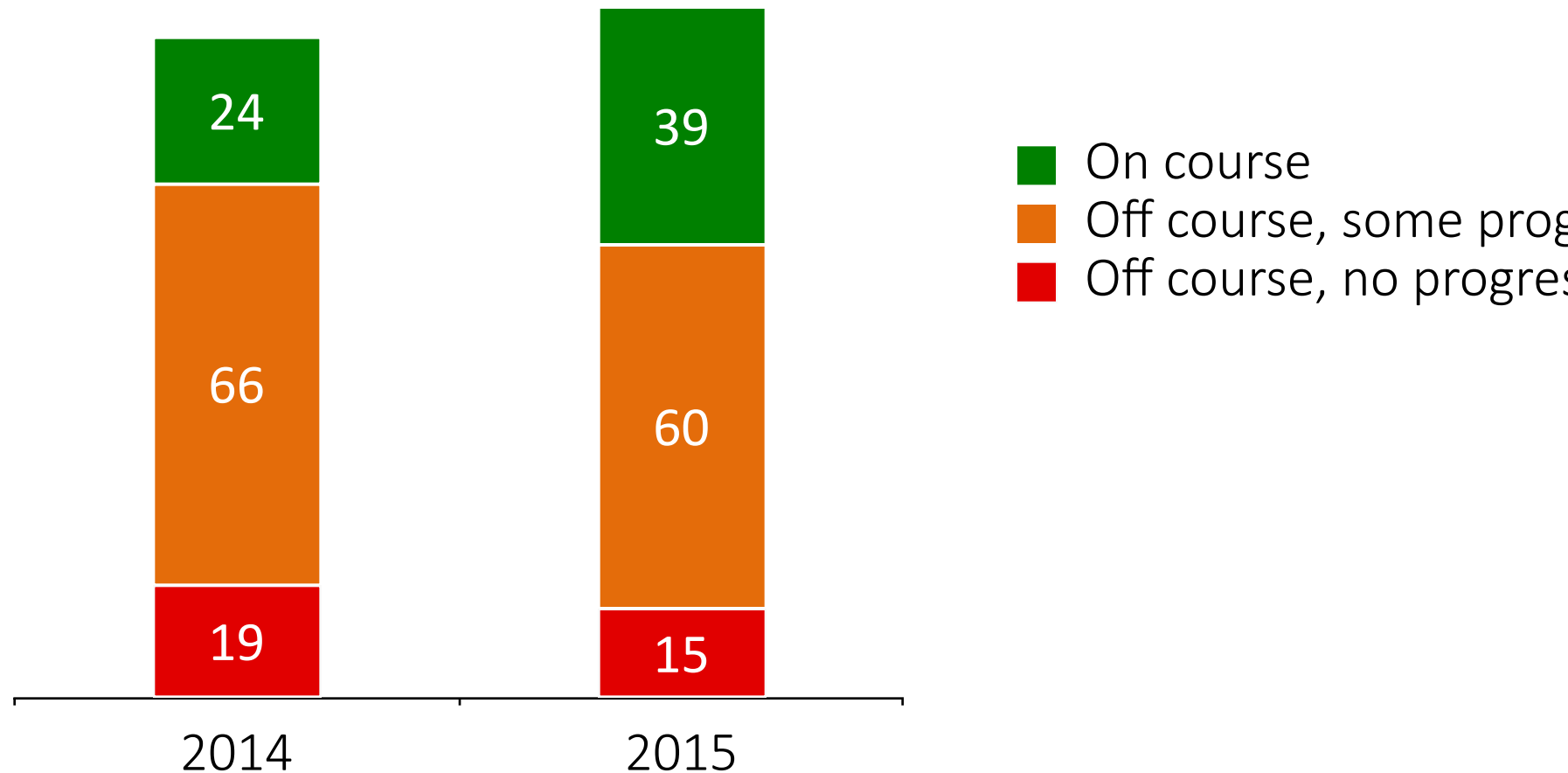
- A 30% relative reduction in mean population intake of salt/sodium
- A halt in the rise in diabetes and obesity
- A 25% relative reduction in the prevalence of raised blood pressure or containment of the prevalence of raised blood pressure according to national circumstances.

<sup>33</sup> Member States should consider developing or strengthening national food and nutrition policies and action plans and implementation of related global strategies including the global

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# Progress on stunting reduction (too short for age)

Number of countries on course to meet global targets



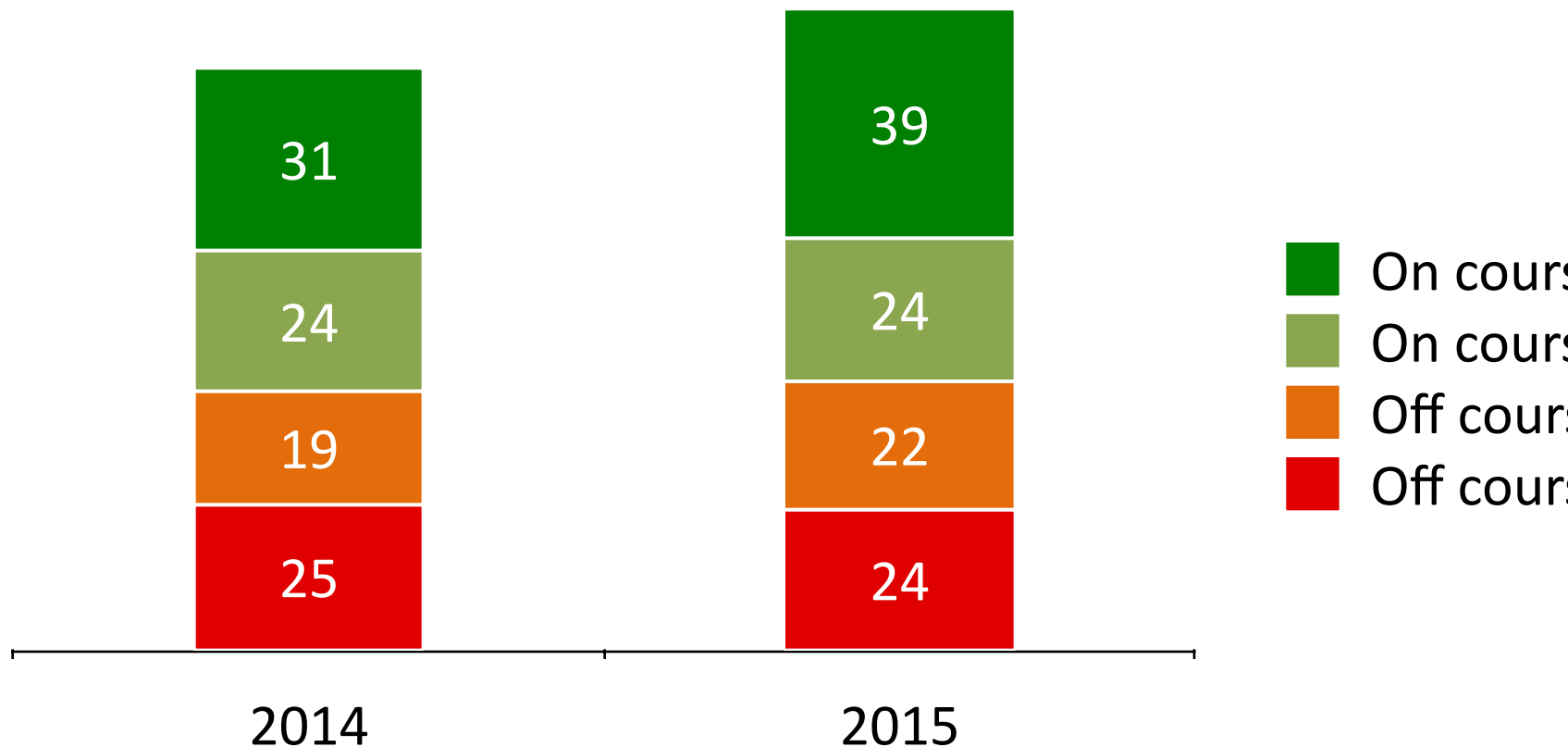
# Some progress on reduction of wasting (being too thin)

Number of countries on course to meet global targets



# Some progress on u-5 overweight reduction

Number of countries on course to meet global (WHA) targets

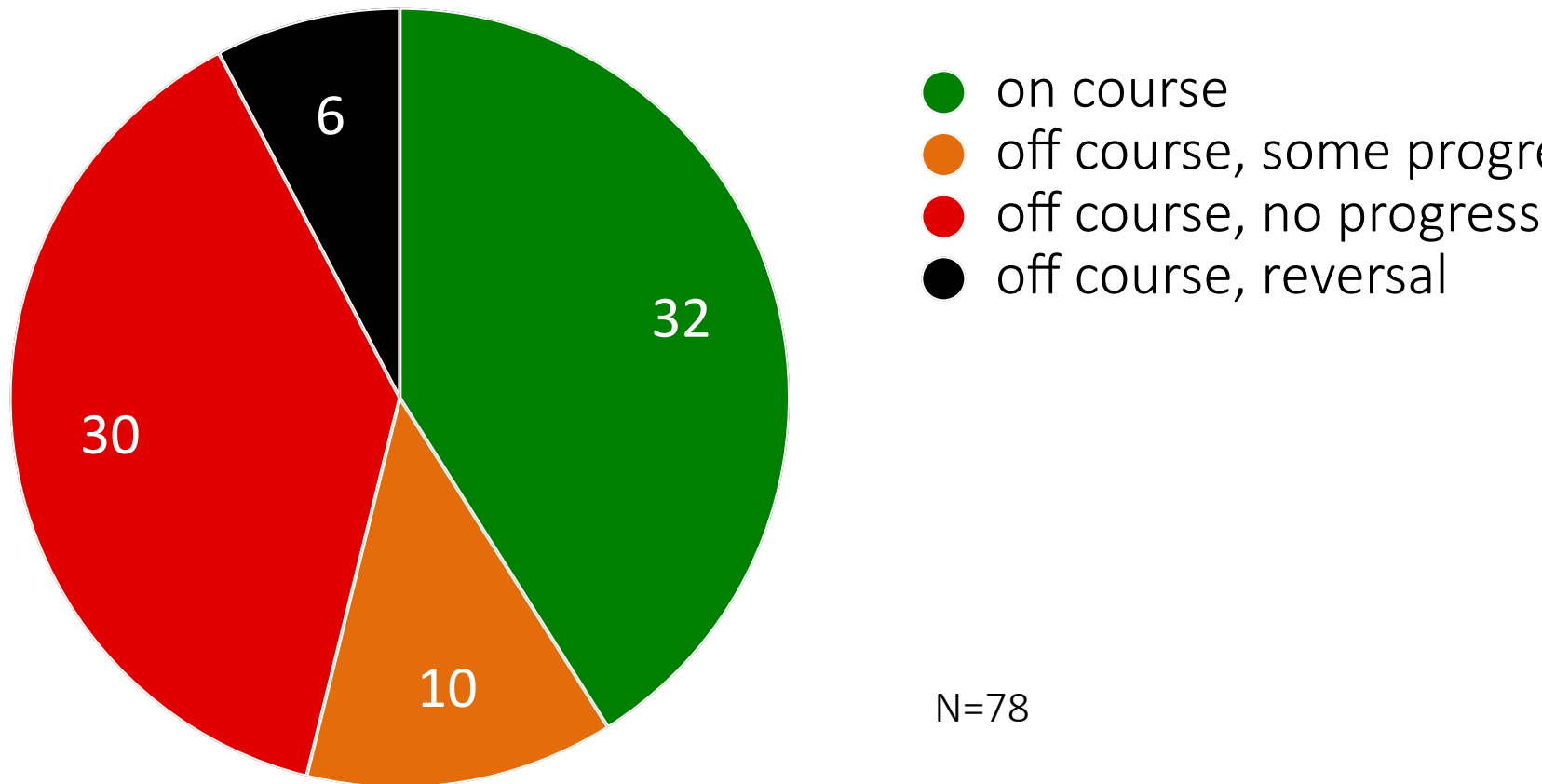




# Exclusive Breastfeeding Rates

Less progress. Not much data. Reversals.

Number of countries on course to meet global (WHA) targets



Countries experiencing a reversal: Cuba, Egypt, Kyrgyzstan, Mongolia, Nepal and Turkey

But... number of countries that  
have reduced  
adult obesity rates

**ZERO**

Only 5 of 193 countries (Djibouti, Iceland, Malta, Nauru, and Venezuela) have halted the rise of the diabetes indicator (raised blood glucose).

## Co-existence of extreme hunger, obesity the 'real face' of malnutrition

OUR BUREAU

COMMENT · PRINT · T+

### Why is the world so overweight?

By Donald Armbricht

Oct 7 2015

Comments

f 724 t 356 in 422

The [Global Nutrition Report](#) has revealed some startling data concerning the worldwide obesity epidemic. According to the [2015 report](#), not a single country was on route to meet the World Health Assembly's obesity target. Quite the opposite: numerous regions, notably Europe and Latin America, were pushing the global averages dangerously off course, with obesity now defined as "high and increasing". Obesity (a body mass index of 30 or over) among adults of both sexes has seen an increase in every country based on 2010-2014 data.

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5

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great. No Fees & Express Delivery!

Global Nutrition Report calls for proper data, increased funding

NEW DELHI, SEPTEMBER 21:

Governments and other stakeholders must be held accountable for the actions they say they will take to address public health problems. If commitments are not honored, then health falls down the priority list. The *Global Nutrition Report* creates a mechanism through which governments and other stakeholders can be held accountable for progress in addressing malnutrition in all its forms. It reports on the latest available data on nutrition status and on the actions that stakeholders have taken—and presents the way forward for the wider set of actions across sectors that they need to take to make further progress. In many ways it is a model of a report that can be used to ensure accountability: it is independent yet developed with the full engagement of the stakeholders which should be held to account; it points out the data gaps which should be filled; it reports with academic rigor but communicates clearly to those it seeks to influence; it is produced annually but also highlights longer-term needs.

**GEORGE ALLEYNE** DIRECTOR EMERITUS, PAN AMERICAN HEALTH ORGANIZATION

There is a clear dearth of policy attention to nutrition in countries where children growing up healthy are in a minority. Amongst the plethora of reasons for this is the fluidity of nutrition as a sector, which is why it washes down (institutional) cracks. In many countries, it is difficult to find an institutional home for nutrition amidst the archipelago of government departments and ministries. An intersectoral solution for nutrition necessitates the creation of intermediary agencies skilled at convening, instruments to map asset allocation, incentives for collaborative division of labor, and metrics for assessing whole-of-government performance. The *Global Nutrition Report* has brilliantly referred to these in terms of the “accountability of all nutrition stakeholders” and centers its strategic pitch around this notion.

**SANIA NISHTAR** FOUNDER AND PRESIDENT, HEARTFILE, PAKISTAN

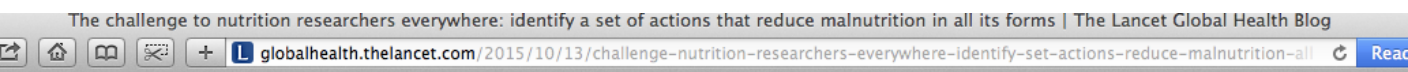
Undernutrition and obesity harm billions of people around the world—and they are preventable. By taking action, we help young and old alike live longer and healthier lives—and this report, with its wealth of data, can guide the way.

**MICHAEL R. BLOOMBERG** FOUNDER, BLOOMBERG LP AND BLOOMBERG PHILANTHROPIES, AND THREE-TERM MAYOR OF  
NEW YORK CITY



## RECOMMENDED ACTIONS

3. **Researchers** who work on all forms of malnutrition should come together with the **international agencies** to identify “double-duty actions” that can address undernutrition as well as overweight, obesity, and nutrition-related noncommunicable diseases simultaneously. They should share their findings in a report at the 2016 N4G Rio Summit and other relevant forums. Steps to create more enabling political environments, healthier food environments, and nutrition-friendly food systems, as well as to promote nutrition in children’s first 1,000 days, all offer opportunities for addressing both kinds of malnutrition synergistically.



# THE LANCET *Global Health Blog*



## The challenge to nutrition researchers everywhere: identify a set of actions that reduce malnutrition in all its forms

13th Oct 2015 Food Nutrition Non-communicable diseases 0 comments

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# GNR 2016: *from commitment to action to impact*

- What are SMART and ambitious targets and commitments for obesity/NCDs?
- How well are countries doing in implementing healthy diet policies?
- Food environments/systems as underlying determinants of obesity/NCDs
- Financing for NCDs – amount and modalities
- Panel case studies :
  - Countries that have established SMART and ambitious commitments to addressing obesity/NCDs
  - Countries that have illustrated commitment through action
  - Policy processes leading up to successful implementation

# What the NCD community can do

- *Read it, share it, shake it, talk about it and act on it!*
- Send ideas for examples for panel case studies
- Send comments and critique on GNR 2014 and 2015
- Talk about GNR at events
- Engage more closely with undernutrition community



Thank you!

[www.globalnutritionreport.org](http://www.globalnutritionreport.org)



# Questions and Answers



# Thank you!

Please visit our website:

[www.ncdalliance.org](http://www.ncdalliance.org)

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

