

Change Issues: International Financing Dialogue for NCDs continues call for Integrated Financing Approaches

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Marijke Kremin, NCDA's Policy & Advocacy Manager, reflects on the International Dialogue on Sustainable Financing for NCDs and Mental Health in this blog, covering the achievements, challenges and future of a much-anticipated meeting.

On 20-21 June, stakeholders from Ministries of Health, Ministries of Finance, civil society, academia, philanthropies, and advocates with lived experience joined co-hosts WHO and the World Bank for the [International Dialogue on Sustainable Financing for NCDs and Mental Health](#) [1] in Washington, DC (hereinafter “the Dialogue”). The long-awaited meeting comes six years following the [Global Dialogue on Partnerships for the Sustainable Financing of NCDs](#) [2] (Copenhagen, 2018) and was the first opportunity for stakeholders to come together to discuss NCD financing following the COVID-19 pandemic and the two UN High-Level Meetings on Universal Health Coverage (UHC), both of which have had a sizeable impact on approaches to global and public health. Looking ahead, the Dialogue was one of the WHO’s preparatory processes for the High-Level Meeting (HLM) on NCDs taking place next year

Preparations for the Financing Dialogue: NCDA's contribution

As part of the lead-up to the event, the WHO and World Bank (WB) held and facilitated two key opportunities for external stakeholders to engage. The first, a Multi-stakeholder Briefing, was held in early March and included WHO and WB official briefing on the dialogue’s early content and objectives and included remarks from NCD Alliance, where we launched our [Financing Solutions paper](#) [3], as well as from United for Global Mental Health, and NCD Diarist [Edith Mukantwari](#) [4]. This was followed by a six-week online virtual consultation, which asked stakeholders to reflect upon and provide feedback on a set of [technical background papers](#) [5] and “emerging messages” intended to inform the Dialogue’s forthcoming outcome document.

Country case studies show progress on NCD financing

The WHO set out for the Dialogue to discuss the technical components of how to increase domestic resource mobilisation and maximise existing resources to improve service coverage, financial protection, and health outcomes for NCDs through a primary healthcare (PHC) driven approach to UHC. Presentations by countries such as Egypt, Ethiopia, Indonesia, Malaysia, Moldova, and the Philippines highlighted meaningful progress in this direction, showing the diverse and interesting ways governments are developing and implementing these UHC strategies for NCD prevention and control.

Both the Philippines and Egypt noted that they used taxation for health – a notable point, given the divisiveness of the practice – and found them to be a crucial tool to financing their health systems. Ethiopia highlighted their progress on national implementation of a package of essential noncommunicable (PEN) diseases interventions as well as the Mental Health Action Program (mhGAP) but noted that implementation was slow with donor support for health limited to 2% of total health expenditure (THE), nicely bringing in the point on the catalytic role Development Assistance for Health (DAH) can play, as highlighted in the background papers.

Raising the profile of NCDs and lived experience

NCD Alliance has been saying for a while now that, for this meeting, “the medium is the message”. The World Bank’s interest in co-hosting the Dialogue and holding it at their offices in Washington DC was an opportunity to show not just the prioritisation and emphasis the Bank will place on NCDs, but also turn the heads of other financing and development actors toward the NCD Agenda. As it looks to meet the ambitious goal of reaching 1.5 billion people by 2030 through its UHC initiative, as announced by World Bank President Ajay Banga at the Spring Meetings, many parts of the Dialogue felt like they were geared towards the Bank developing its own plans and priorities for initial action as they heighten the priority of NCDs across their programming.

It was also impressive that the voices of those with lived experience came through so strongly throughout the meeting – Our Views, Our Voices Advisory Committee Member, Charity Muturi, and friend of NCD Alliance, Pierre Cooke, both gave engaging testimonies and made substantive contributions to open discussions. NCD Alliance’s members, including CLAS (Healthy Latin America Coalition), World Heart Federation, and World Obesity Federation, and partners Helmsley Charitable Trust and World Diabetes Foundation, were also all present to represent civil society and these voices helped remind discussants that the “how” is important, but the “who” must always be kept in mind when developing policies.

Concrete actions and commitments on NCD financing: more to be done

While the national presentations were incredibly rich, the event overlooked the wide-ranging contexts of the countries in the room in its provision of technical advice. We would have liked to see the Dialogue do more to clarify and tailor messaging across the different incomes, geographies, and disease burdens represented across the countries present to provide more concrete and actionable ideas for government representatives to walk away with.

Despite being part of WHO’s Road to 2025 plans, the Dialogue itself focused more on the broader, technical aspects of health financing and less on what commitments are necessary to strive toward in the Political Declaration of the High-Level Meeting. The adage “it takes cash to care” was cited by Sir George Alleyne, who also noted in his fireside chat that the NCD community needed to devote brain power to developing a global target for NCD financing. The final session of the Dialogue asked participants to narrow down the top “non-negotiables” – we were pleased to see a number of the priorities NCD Alliance outline in its policy brief be referenced, but this exercise did not show enough consensus to point a clear way forward for progressing NCD financing discussions in political processes. As we move forward, it’s clear (to us!) that there are three key opportunities for advancing NCD financing in the lead-up to the HLM:

1. Increasing sustainable funding for health that includes specific and measurable financing targets for NCDs,
2. Improving the monitoring, transparency, and accountability for financial flows, and
3. Leveraging the “win-win” that excise taxes and other fiscal measures provide for health.

The future of the Financing Dialogue

So what next? The WHO and the World Bank will develop an Outcome Document containing key messages and recommendations from the Dialogue in the coming months and its contents will be integrated into the Director-General's report on NCDs later this year. This will then be submitted to the UN Secretary-General and used as the SG Progress Report on NCDs which will help inform the Zero Draft of the Political Declaration. There may still be additional opportunities for civil society to speak out on NCD financing through regional consultations and UN processes and NCDA will alert its members if and when any of these formalize.

About the author:

Marijke Kremin ([@MarijkeKremin](#) [6]) is NCDA's Policy and Advocacy Manager based in New York City, and is responsible for covering financing policy and United Nations advocacy. Prior to this, Marijke worked in international peace and security and human rights focusing on gender and the Women, Peace and Security agenda, mass atrocity prevention, and the protection of civilians in conflict. She has also worked in legal aid and advocacy for refugees and asylum seekers in Cape Town, South Africa.

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