148th WHO Executive Board: highlights for the NCD agenda

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The 148th WHO Executive Board meeting (EB148) took place from 19 to 26 January 2021, where governments agreed upon the agenda for the 74th World Health Assembly, which will take place in May 2021, and resolutions and decisions for consideration.

The NCD Alliance actively advocated for governments to support key items that are relevant for the global NCD agenda. Important outcomes resulted from discussions on (a) Item 6: Follow-up to the UN High-Level Meeting on NCDs; (b) Item 14: Public health emergencies preparedness and response; and (c) Item 16: Resolution on social determinants of health.

Reflecting on the ongoing COVID-19 pandemic and the weaknesses and inequalities exposed in health systems around the world, Director-General of the World Health Organization (WHO) **Dr Tedros Adhanom Ghebreyesus** opened the meeting with strong remarks, stating "I need to be blunt: the world is on the brink of a catastrophic moral failure –and the price of this failure will be paid with lives and livelihoods in the world's poorest countries."

Item 6: Key decisions on the NCD response

As a follow-up to the UN High-Level Meeting on NCDs in 2018, the first WHO consolidated report on the progress on prevention and control of NCDs was submitted to the EB. A Decision of the EB calls on WHO to develop an implementation plan to accelerate progress in the final phase (2023-2030) of the Global Action Plan on NCDs. Amongst other items, the report included details on the implementation of the cancer resolution, WHO action to encourage physical activity, an approach to reducing air pollution, and a discussion about responding to the needs of people living with NCDs during health emergencies.

Within discussions on this Agenda item, a draft Resolution on Oral Health received strong support from many governments. The EB recommended that the Resolution be considered for formal adoption at WHA74 in May. It calls on governments to provide oral health services, recognizing them as essential services and as part of UHC; to

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implement actions towards prevention of oral health problems; and to seek inter-sectoral action, including education and nutrition policy.

The Resolution also emphasizes inequalities and the social determinants of oral health. Oral diseases represent a huge burden affecting 3.5 billion people worldwide, often implying high costs, and are commonly interconnected with other NCDs via shared risk factors like poor diet, tobacco and alcohol use. The Resolution mandates WHO to develop proposals for a Global Oral Health Strategy, Action Plan, targets for 2030 and recommended policy interventions as well as technical guidance to governments on how to include oral health care and disease prevention within Universal Health Coverage (UHC).

A Decision on diabetes as a public health problem was also approved within this Agenda item, reflecting global concern at skyrocketing diabetes deaths, which have increased by 70% since 2000. WHO will launch a Global Diabetes Compact in April 2021, marking the Centenary of the discovery of insulin. The EB Decision calls on governments to intensify efforts to address the prevention and control of diabetes as a public health problem and as part of UHC. However, the decision falls short of stakeholder and expert discussions hosted by WHO in late 2020, which identified a need for more concrete policy action on diabetes, including target setting for 2030, action to secure the necessary financing, and a focus on access to insulin and necessary devices, such as glucose test strips.

Under separate agenda items, the EB also recommended that proposed targets for 2030 on eye health and preventable blindness, be considered for adoption at WHA in May, and that the WHO align with the cross-UN response on ensuring the rights of people with disabilities, including those related to NCDs.

Item 14: Public health emergency preparedness and response – including COVID-19

Discussion of impacts and lessons learned from COVID-19 dominated much of the meeting, with interim reports presented by the Independent Panel on Pandemic Preparedness and Response, the Global Preparedness Monitoring Board and the review committee on the International Health Regulations. EB Member States approved a Decision on mental health preparedness and response in health emergencies. The shortcomings of health systems regarding mental health were made clear during the COVID-19 pandemic, and the Decision calls to better integrate mental health into Universal Health Coverage. It also calls for the long-term neurological impacts of COVID-19 to be reflected in health systems' capacity to provide care for people living with 'long COVID', with effects that last weeks or months after the initial illness.

Within discussions on this Agenda item, there was a call from the European Union for an international treaty on pandemic preparedness and response, and a call from the Global Preparedness Monitoring Board for a UN High-Level Summit on Health Security. Both were supported by WHO.

Item 16: Resolution on social determinants of health

A Resolution on social determinants of health was adopted by the EB, including environmental and commercial determinants, such as unhealthy food environments, tobacco, alcohol and exposure to polluted air and poor housing. The Resolution calls for more WHO technical support for governments to develop policies to tackle inequalities, and for improved monitoring and evaluation to inform policy decisions.

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16. Social determinants of health (Document EB148/24) [3]

Joint statement at the 148th session of the WHO Executive Board on Agenda item 14: Public Health Emergencies

Preparedness & Response [4]

Joint Statement at the 148th session of the WHO Executive Board, Agenda Item 6: item 6, Draft Decision on

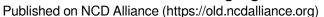
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