
NCD Countdown 2030



© Sarah Al-Obaydi / Photoshare: Dr. Sarah Al-Obaydi leads a health education session at a school in rural Iraq.

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Launched in September 2018, NCD Countdown 2030 is a collaboration between the World Health Organization, Imperial College London, The Lancet and the NCD Alliance.



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Despite multiple commitments for NCDs, including the 2011 UN Political Declaration on NCDs and the inclusion of NCDs in Agenda 2030; action at global and country levels has been insufficient and uneven.

NCD Alliance is a proud partner for NCD Countdown 2030 which is a collaboration together with The Lancet, WHO, and Imperial College London, together with technical experts from international institutions.

NCD Countdown 2030 offers a mechanism for independent accountability and will provide impartial evaluation of government, multinational and donor progress on NCD prevention and control, raise public awareness, and inform evidence based advocacy to help countries accelerate progress on the NCD commitments made in 2015 as part of the 2030 Agenda for Sustainable Development.

One of the recommendations of the WHO Independent High Level Commission on NCDs was that WHO should simplify the existing NCD accountability mechanism and establish clear tracking and accountability for the highest impact programmes that can lead to achievement of SDG target 3.4, including a harmonised Countdown 2030 for NCDs and mental health - this collaboration delivers on this recommendation.

NCD Countdown 2030 will complement WHO's existing monitoring and surveillance work by analysing and critically assessing country-level trends in NCD mortality their key risk factors and related policies.

The first product from NCD Countdown 2030 will include a major article published in The Lancet which tracks progress made in 186 countries, and reveals which are on track to meet SDG target 3.4 of a ⅓ reduction in NCD mortality by 2030 - and which are far off track towards meeting this deadline.

The highest risk of mortality from NCDs are in LMICs. NCD Countdown 2030 reveals that less than half of countries are on track to reduce premature deaths from NCDs one third by 2030. The majority of countries (86 countries for women and 97 countries for men) will not reach the SDG 3.4 target even by 2040 and require policies that substantially improve premature death rates. This includes China and India, the two most populous countries in the world, where premature mortality from the four major NCDs has declined but not sufficiently quickly to meet SDG target 3.4. Cancers, cardiovascular diseases, chronic respiratory diseases, and diabetes were responsible for 12.5 million deaths among people aged 30-70 years worldwide in 2016.

NCD Countdown 2030 will extend beyond 2018 and produce regular reports. Analyses will expand to incorporate advances in availability of data, including on treatment coverage, and the positioning of NCDs in the wider health and development landscape.

NCD Countdown 2030 builds on a previous initiative, NCD Countdown 2025, which was directed towards the target in the WHO Global Action Plan on NCDs to reduce NCD mortality 25% by 2025; the '25x25' target. A Lancet comment on NCD Countdown 2025 is accessible below.

More information on NCD Countdown 2030 can be found at www.ncdcountdown.org [1].

Related Resource: [NCD Countdown 2025: accountability for the 25 x 25 NCD mortality reduction target](#) [2]
[NCD Countdown 2030: worldwide trends in non-communicable disease mortality and progress towards Sustainable Development Goal](#) [3]
[NCD Countdown 2030: strengthening accountability](#) [4]

Panel Image Link: <http://www.ncdcountdown.org>

Source URL: <https://old.ncdalliance.org/what-we-do/global-accountability/ncd-countdown-2030>

Links

[1] <http://www.ncdcountdown.org>

[2] <https://old.ncdalliance.org/resources/ncd-countdown-2025-accountability-for-the-25%E2%80%88%C3%97%E2%80%8825-ncd-mortality-reduction-target>

[3] [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31992-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31992-5/fulltext)

[4] [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)32253-0/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)32253-0/fulltext)