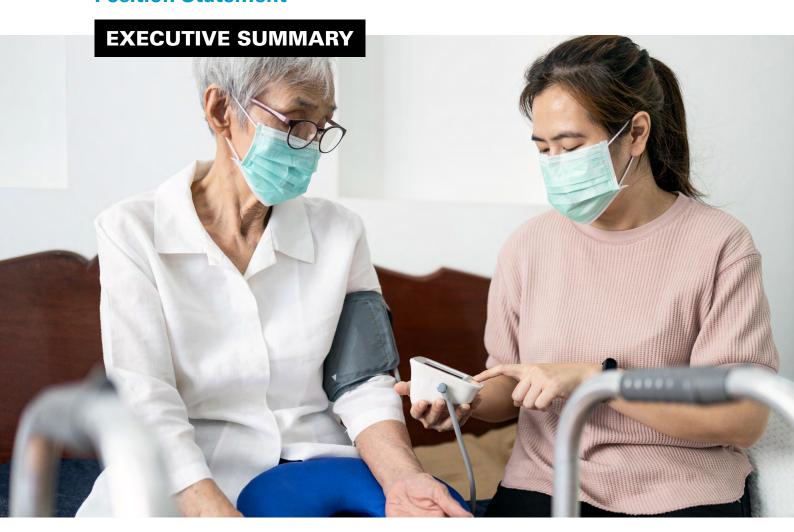
WHO Civil Society Working Group on NCDs **Position Statement**



Resilient systems for 'building back better'

Health and other system requirements for the prevention and control of noncommunicable diseases and COVID-19





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We would like to thank the following individuals for their contributions to this position paper:

Lead author. Prof Trevor Shilton.

Members of the WHO Civil Society Working Group on NCDs, Advocacy and Communications Work Stream Co-Chairs: Prof Trevor Shilton, Ms Leslie Rae Ferat, Dr George Msengi.

Members of the WHO Civil Society Working Group on NCDs: Dr Monika Arora, Dr Svetlana Akselrod, Prof Naby Baldé, Mr Stephane Besançon, Mr Enzo Bondioni, Ms Beatriz Champagne, Dr Stephen Connor, Ms Katie Dain, Dr Mitra Rouhi Dehkordi, Dr Ulysses Dorotheo, Dr Ibtihal Fadhil, Dr Mychelle Farmer, Sir Trevor Hassell, Mr Chris Lynch, Princess Dina Mired, Mr Christophe Ngendahayo, Ms Leslie Rae Ferat, Ms Johanna Ralston, Prof Trevor Shilton, Dr Tara Singh Bam, Ms Kristina Sperkova, Ms Charlene Sunkel, Ms Kate Swaffer, Prof Gerald Yonga, Dr Yoshitake Yokokura, Ms Kwanele Asante, Ms Chantelle Booysen, Ms Alva Finn, Mr Juan Núñez Guadarrama, Mr David Kalema, Dr Mwai Makoka, Ms Narcisa Mashienta, Dr George Msengi, Ms Belen Ríos, Ms Anjali Singla, and Ms Phaeba Thomas.

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Design and layout: Mar Nieto



NCD Alliance | 31-33 Avenue Giuseppe Motta | 1202 Geneva, Switzerland www.ncdalliance.org

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Executive Summary

Purpose

This Position Statement provides a framework and checklist for using a systems approach to implementing timely and effective responses to the ongoing epidemic of noncommunicable diseases and the pandemic of COVID-19. It describes the requirements for effective health care policy in conjunction with a 'whole-of-society' and 'whole-of-government' approach to this syndemic across political, policy and other enabling dimensions.

Audience

The primary audience is politicians and decision makers at all levels of government. The paper may also be used as an advocacy tool by civil society organisations, health professionals and cross-sector actors, donors and private sector partners, implementation partners and consumers including people living with NCDs.

Systems-based approaches are required

The COVID-19 pandemic has demonstrated more than ever the need for global and national leadership in supporting resilient health and other systems, and the reality that health, economy and better societies are inextricably linked. This, combined with learning from NCD prevention and control implementation failures and successes, shines an important light on the need for robust, system-wide approaches and sustainable implementation at national and regional scale.

A systems approach enables a holistic view of complex problems bringing in evidence and views from multiple actors to identify and implement solutions (Catalan 2018). Such an approach is essential to mobilise preparedness, rapid response, and recovery to 'build back better'. This paper describes a systems approach and provides a framework of requirements to support all actors to more effectively and collectively address two of the major health issues of our time: NCDs and COVID-19.

A checklist of health and other system requirements for successful implementation

Levers for preparedness, rapid response and building back better for prevention and control of NCDs and COVID-19

A

Political requirements

1. Strengthen high-level political commitment and leadership

The COVID-19 pandemic has demonstrated more than ever the need for global and national leadership in supporting resilient health systems. Equally important is the role of political leaders in mobilising non-health policies and systems to enable a cross-society response. This response needs to engage governments with actors at all levels - in finance, logistics, public communication, the private sector and civil society to meet these challenges together.

Governments have a responsibility to protect their citizens and should be accountable for ensuring delivery of services across each of the system requirements in this paper. Governments can facilitate a cross sector response, establishing and adhering to goals and targets, and securing resource procurement and mobilisation. Political leaders can also ensure commitment to include NCDs in national COVID-19 plans and build important policy bridges between NCDs and emergency responses.

Governments must ensure NCD and COVID-19 responses take into account the principles outlined in this Position Paper (see Figure 1), and they have a special responsibility to provide leadership in facilitating and strengthening a culture that is supportive of a united effort across society.



B

Policy requirements

2. Design and implement at scale comprehensive National Action Plans for prevention and control of NCDs and COVID-19, and ensure governments integrate the core measures of their National NCD Action Plans into COVID-19 response strategies

Member States have committed to the United Nations and World Health Organization resolutions relating to NCD prevention and control, Universal Health Coverage (UHC) and COVID-19. In September 2020, as part of the Omnibus Resolution, the United Nations committed to calling for "a comprehensive and coordinated response to the coronavirus disease (COVID-19) pandemic" (document A/74/L.92).

Four key measures for Member States to include in National Action Plans for NCDs and COVID-19, as outlined by WHO are:

- A comprehensive and coordinated response to the COVID-19 pandemic, including its interface with NCDs is established and implemented.
- Robust National Strategies and Action Plans for NCD prevention and control are established and implemented.
- Comprehensive National Action Plans to ensure governments can prepare for, respond to and recover from COVID-19 and other infectious disease outbreaks are established and implemented.
- Core measures in National NCD Action Plans are integrated into COVID-19 response strategies and implemented.
- Sufficient resources are allocated to ensure the above.

Effective responses to COVID-19 and future outbreaks and emergencies also require robust, system approaches. The 2021 74th World Health Assembly agreed resolution 74.7 which calls for Member States to work towards achieving strong and resilient health systems and universal health coverage, as an essential foundation for effective preparedness and response to public health emergencies.

To achieve ambitious NCD targets and healthy communities, national commitments need to go beyond the mere existence of policy to ensure the robust, comprehensive and sustained implementation of explicit strategies and action plans.

3. Invest in scaling up evidence-based and cost-effective interventions for NCDs

Complement National Action Plans by investing in WHO Global Strategies and in the revised WHO Best Buys and Other Recommended Interventions for NCDs at sufficient scale for national impact. Revised 'best buys' should factor in NCD prevention and control to epidemic preparedness and public health / infectious disease resilience. The World Health Organization's NCD Global Action Plan on NCDs (WHO, 2013) details important guidance for NCD Action Plans by Member States. This is complemented by related strategies such as the Framework Convention on Tobacco Control and the Global Action Plan on Physical Activity.

4. Minimise disruption to existing health services during pandemics or large-scale emergencies

One important lesson from COVID-19 is that pandemics have the potential to completely disrupt the entire health system. Services such as emergency and intensive care are overwhelmed, while other services such as surgery and rehabilitation are postponed or cancelled to 'free up' hospital resources. This has led to delays in diagnosis and treatment, including essential surgeries, and limited access to rehabilitation and palliative care services for people living with NCDs. Specific and practical guidance is required to ensure access to and continuity of essential health and community services for NCDs.

C

Enabler requirements to support implementation

5. Identify and allocate sustainable financing including innovative funding options, such as levies on companies that cause harm

Mobilizing robust responses to prevention and control of NCDs and COVID-19 is dependent on addressing current underinvestment in NCDs. Mechanisms to support increased and sustained investment should be identified and supported, with the funds raised being earmarked for the NCD policies and interventions with proven effectiveness.

There are various potential mechanisms for this, such as establishing new international funding models and partnerships for NCDs, including allocation of specific funds for NCDs and mental health; for example, the Multi-Partner Trust Fund to catalyse in-country action for NCDs, and multi-lateral agreements that help ensure support and engagement from UNDP and UNICEF. Other measures can include enacting national legislation that quarantines recurrent funding for NCD prevention and control as part of contingency funding for infectious disease outbreaks, and consideration of levies and removal of subsidies on products that cause harm (tobacco, sugary drinks, alcohol and junk foods, fossil fuels) with a dedicated allocation for prevention and control of NCDS and COVID-19 programmes.

6. Strengthen or establish national and sub-national institutions for the prevention and control of NCDs and COVID-19

Policy development, research and programmes are greatly strengthened when national and sub-national institutions are in place, adequately resourced and charged with responsibility for implementation. These include governmental institutes and centres for disease control, and dedicated institutions that support health promotion, prevention and primary care agencies. These institutions need to be strengthened in countries where they exist and established where they do not exist. It is also vital that Governments connect with civil society institutions including those that represent people living with NCDs and health professionals.



Haitian nurse based in New York, works to serve local children as a volunteer nurse during the S.O.S. Medical and Relief Mission in Philippines, after Typhoon Yolanda (Haiyan) devastated the area.

7. Appoint high-level leaders in the institutions responsible for the prevention and control of NCDs and COVID-19

For the prevention and control of NCDs and COVID-19 to be effective, the leaders of the institutions responsible for implementation need to be appointed at the highest level of public service within the health sector. In addition, to allow systems approaches to be implemented, there must be a response from other sectors; for example, the education sector and business schools that develop degrees and provide training in 'Healthy Public Management.' This is not just a matter for the health sector, but for all those educational institutions that prepare civic, social and business leaders.

8. Support and enable the health workforce

The COVID-19 pandemic has highlighted the enormous burden taken on by health workers at the front line. It is vital that healthcare and prevention workers are well-resourced to do their job effectively and are also protected from risk of infection and from violence against them. Health workers also need to have secure employment, career pathways, and adequate remuneration. In addition, initiatives must be implemented to ensure health workers are supported in their own health, well-being, and mental health.

To attract and retain urgently needed health workers, there needs to be a positive practice environment that supports excellence, provides decent work conditions, enables quality patient care and strengthens the health sector as a whole. Governments and Departments of Health can stand up for Positive Practice Environments as outlined by the World Health Professionals Alliance (WHPA 2020). Lessons from COVID-19 will focus attention on competency requirements of a post-COVID-19 workforce, demanding adequate training, education, and competency development. This applies across specialised disciplines and multidisciplinary teams in integrated-care delivery systems.

9. Co-design and implement solutions with input from civil society, consumers and people living with NCDs

For the most effective responses in primary care and community health settings, national and sub-national governments need to ensure mechanisms are in place for the meaningful engagement of stakeholders, consumers and civil society organisations in the design and implementation of policies, programmes and services. Civil society must also be engaged and further empowered and resourced through partnerships with government to ensure impactful and efficient programme and service delivery and policy implementation.

WHO has supported strong engagement with civil society through its NCD Global Coordinating Mechanism and the WHO Civil Society Working Group on NCDs. Successful implementation of NCD policy and COVID-19 responses will require the mobilisation of strong community engagement and partnerships, including the participation of major NCD non-governmental agencies. It is equally important to value and facilitate the participation of individuals, households, communities (urban and rural) and people living with NCDs in the development and delivery of initiatives.

10. Strengthen investment in prevention and health promotion

Health promotion and prevention are chronically underfunded and are critical to ensuring healthy and resilient populations. Healthier societies will be supported by full implementation of the WHO Global Action Plan on NCDs and related Plans and Conventions, such as the WHO Global Action Plan on Physical Activity, WHO Global Strategy to Reduce the Harmful Use of Alcohol, the WHO Framework Convention on Tobacco Control, the WHO Best Buys and Other Recommended Interventions; as well as robust National Action Plans. These policies and plans should be implemented in conjunction with the other system requirements to ensure that health promotion and prevention is supported by sustainable financing, dedicated institutions, high-level leaders, and a strengthened workforce.

11. Establish clear rules of engagement with the private sector to maximise benefits to health while tackling the commercial determinants of ill-health.

The private sector plays an important role in promoting and supporting health and wellbeing through delivery of services, funding research and development, and implementing pro-health policies and programmes in the workplace. From a productivity and profitability standpoint, the private sector will benefit from measures to ensure a healthier workforce.

However, it is important to differentiate those industries that cause harm and explicitly exclude them from dialogue, funding and opportunities to influence public health policy, direction or delivery. A robust approach to prevention and control of NCDs and COVID-19 must include tackling the commercial determinants of health and holding to account companies that cause harm. The tactics of industries which profit from unhealthy commodities, including tobacco, alcohol, ultra-processed food, sugar-sweetened beverages, breast milk substitutes and fossil fuels, are directly at odds with the fundamental right of every human being to enjoy the highest attainable standard of health. (WHO CSWG on NCDs, May 2020).

The voices calling for governments to cease inappropriate partnerships with industry have increased during the COVID-19 pandemic, and there is increasing demand from national governments for WHO guidance in this regard (NCD Alliance Sep 2020).

12. Strengthen investment in evidence generation, guidelines, evaluation and monitoring to ensure quality and accountability

To underpin NCD prevention and control and effective health and other system responses to COVID-19, governments need to invest in quality and accountability, and build a strong evidence base for action, monitoring, and evaluation of impacts and outcomes. We have seen how the lack of registration systems, contact tracing and other data capture methods is seriously hampering COVID-19 responses in many LMICs. Access to timely, accurate and reliable data is critical. Therefore, governments must commit to investing in systems to collect, disaggregate, and analyse health data - to identify vulnerable groups and to track the impact of policy responses.

Other data and evidence that can help underpin system responses includes:

- Guidelines, developed in a national context and derived from global evidence,
- Evaluation to determine impact and cost-effectiveness of investments,
- Establishing and monitoring national goals and targets, contextualised from WHO guidance and from this establishing a monitoring and accountability framework for the delivery of NCD prevention and control action plans and the achievement of targets,
- Support to innovation and translational research.

Fast-tracking responses on limited budgets

The COVID-19 pandemic has highlighted limitations in the ability to mobilise at national scale in health emergencies. It has also shone a light on inequalities and lack of resources in LMIC contexts.

The following are programmatic and policy responses that countries must prioritise in order for populations to survive and recover rapidly in health emergencies.

In clinical settings, this includes:

- Constructing temporary infrastructure for health care,
- Ensuring robust pathways for procurement, supply and delivery of vaccines and for health equipment and supply of health equipment such as personal protective equipment and ventilators, and distribution of essential medicines and vaccines,
- Establishing mechanisms to avoid disruptions to treatment, including to essential medicines, technologies, surgery and rehabilitation and palliative care services for people living with NCDs,
- Rapid mobilisation and innovation of technology in health care, including tele-health and remote medicine.

In non-clinical and community settings, this includes:

- Engaging traditional and digital media to diffuse consistent public education messages on prevention and protection, and to build a supportive culture in the face of challenges,
- Ensuring food security, including access to a safe and affordable food supply,
- Urban planning and environment changes (temporary and permanent) to create more urban space for walking and cycling and reducing traffic and the speed of cars,
- Creating enhanced spaces for family and community life, exercise and outdoor dining,
- · Extending smoke-free spaces to outdoors,
- Ensuring safe practices; i.e. social distancing, hand washing/sanitising, and safe food practices,
- Protecting local communities from influences of industries that cause harm.

Conclusions

Health and other systems approaches such as those outlined in this paper are required to address the two most important health issues of our time, NCDs and COVID-19. In this paper, we have described the requirements to implement effective health care policy approaches and coordination across various dimensions, providing a road map and checklist for politicians, decision makers, advocates and others to adopt a systems approach to address the syndemic of NCDs and COVID-19. A systems approach can assist with improving preparedness, rapid response, and recovery to 'build back better' across both infectious disease pandemics and the ongoing 'slow-epidemic' of NCDs.

The COVID-19 pandemic has demonstrated more than ever the need for global and national leadership in supporting resilient health systems. Equally important is the mobilisation of non-health sectors through policies and programmes to enable a 'whole-of-society' and 'whole-of-government' response. In many cases, this will require much more in-depth and coordinated engagement with key actors in finance, logistics, public communication, the private sector and civil society.

The effectiveness of these actions can be further enhanced if they are applied in alignment with key principles, including working across the continuum of care, engaging civil society and people with NCDs, addressing inequalities, working across the life course and respecting human rights. Political leadership is critical, including in addressing past implementation failure and accelerating progress in proven interventions. It falls on Heads of State, Health Ministers and other politicians to demonstrate the leadership that is required for robust national NCD policy and action plans and COVID-19 responses.



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From the devastation of COVID-19 comes a moment when leaders can choose to build a healthier, more productive and sustainable future for the world. Success in addressing NCDs and in building back better from COVID-19 is a prerequisite to achieving the vision of the 2030 Sustainable Development Goals. The WHO Civil Society Working Group on NCDs calls on all member states to embrace these system requirements as part of robust and funded strategies for the prevention and control of noncommunicable diseases and COVID-19.



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