

NCD Alliance Analysis: Report of the UN Secretary-General Progress on the prevention and control of NCDs March 2018

Summary

The UN Secretary-General's Report in advance of the 2018 UN High-Level Meeting on NCDs (UN HLM) takes a decidedly direct tone, deviating from previous diplomatic tone of reports prior to the 2011 and 2014 UN HLMs on NCDs. The report calls for bolder commitments (para 52) and makes recommendations (from para 53 onward) on key NCDA campaign priorities such as the urgent need for greater investment for NCDs and scaling-up implementation of WHO's Best Buys for the prevention and control of NCDs (para 10 and in the recommendations section in para 53), including fiscal measures such as taxation of tobacco, alcohol and sugar-sweetened beverages (SSBs). The report addresses key barriers to progress such as weak political action at the highest level and the consequent lack of policy coherence across government sectors and insufficient integration of NCDs into national plans and strategies for sustainable development, resulting in insufficient resource mobilization - domestically and internationally.

The report places a significant focus on action needed to address the commercial determinants of NCDs, including the interference of industry with the implementation of WHO's Best Buys, and the impact of upstream economic, investment and trade policies. In this regard, it is important to see among the report's recommendations emphasis placed on policy coordination and coherence, including highlighting the role of the UN system in working across the intersection of health, economic policies, investment promotion, trade, law and the commercial determinants of NCDs.

The report also calls for greater attention to the inclusion of **mental health** in the NCD response seeking to better integrate interventions to promote mental health and well-being into national NCD responses.

We commend the UN Secretary-General for the report, which we believe provides a sound basis for review and discussions among Member States to build consensus on the way forward in the lead up to the 2018 UN High-Level Meeting on NCDs. A 'paradigm shift' as called for by the report is indeed needed to boost NCD investment and accelerate implementation of WHO's Best Buys and other recommended interventions within the context of Universal Health Coverage and the 2030 Agenda for Sustainable Development.



Comments on specific sections

Section II - National Efforts

This section sets out the current status of national efforts to address the prevention and control of NCDs. Progress across the board is uneven and insufficient, and in 2015, 47 percent of all premature deaths occurred in low-income and lower-middle-income countries. The report notes that in order to reach SDG 3.4, the existing political commitments on NCDs made in 2011 and 2014 must be dramatically scaled up.

Paragraph 10 of the report highlights that implementation of the 16 WHO Best Buys can largely prevent or delay premature death from NCDs. This paragraph is extremely important as we know that several Member States object to mention of the Best Buys and reference to regulatory or fiscal measures of commodities beyond tobacco.

The lack of progress on the time-bound commitments agreed in the outcome document of the 2014 HLM on NCDs is described in paragraph 14; 138 Member States demonstrated very poor or no progress towards implementing the commitments.

The challenges to implementation of the Best Buys are described in Table 3, and include political choices, health systems, national capacities, international finance, and industry interference. For each of these challenges, the table elaborates specific obstacles and those responsible. This is the first time we have seen the challenges to implementation of the WHO Best Buys laid out in detail in a report on NCDs by the UN Secretary-General, further emphasizing the need for urgent action. The points made in Table 3 are further expanded upon throughout the rest of the report, culminating in the UN SG's recommendations for Member States at the end of the document.

Section III - Global action to accelerate national efforts

The 2018 UN HLM on NCDs is the first time NCDs will be reviewed following the adoption of the 2030 Agenda for Sustainable Development. This is particularly important as it is an opportunity to demonstrate how NCDs are a cross-cutting issue throughout the 2030 Agenda and require high-level coordination and a multisectoral response.

Paragraphs 16-18 describe the global commitments made within the 2030 Agenda for Sustainable Development, including the adoption of the Addis Ababa Action Agenda, the Sustainable Development Goals, and the Decade of Action on Nutrition. The Addis Ababa Action



Agenda recognized that tobacco taxation is an effective means to reduce consumption and a revenue stream for countries.

The report details the efforts WHO has taken at the global level to address NCDs. The intermediate targets under paragraph 19 and the technical assistance packages in Table 4 are taken from WHO's new General Programme of Work, and further reinforce the need for a coordinated approach. This section also highlights the status of various assignments given to WHO by the General Assembly and the World Health Assembly.

In preparation for 2018, the UN SG's report highlights several meetings and documents that may serve as input into the 2018 UN HLM on NCDs. These include a report from a meeting convened by WHO together with the Graduate Institute of International and Development Studies in Geneva, the Montevideo Road Map 2018-2030 adopted at the WHO Global Conference on Non-Communicable Diseases, a co-chair's statement on the roles of non-State actors in supporting governments and national efforts to reach SDG 3.4, and the forthcoming report from the WHO Independent Global High-level Commission on NCDs.

Paragraphs 25-29 present the work of the WHO Global Coordination Mechanism on the Prevention and Control of NCDs, including convening dialogues, establishing working groups on specific topics related to advancing NCD prevention and control, and launching a global communications campaign to raise awareness about reducing the burden of NCDs. The statement that resulted from the GCM Dialogue on the role of non-State Actors also called for investment to build NGO capacity, in order to ensure full and active participation of civil society in national NCD responses.

The work of the UN Inter-Agency Task Force on NCDs is reported in paragraphs 30-38. In 2017, over 60 percent of UN agencies that are members of the Task Force had included NCDs in their mandates, an increase from 30 percent in 2014. The Task Force organizes joint programming missions to countries to support UN country teams in scaling up their technical assistance to Governments to develop and implement national NCD plans. The NCD Alliance has been invited to join several of these joint programming missions to help connect UN country teams with local civil society partners.

Only six members of the Development Assistance Committee of OECD have integrated NCDs into their international development policies (para 44), further highlighting the lack of attention to NCDs within development policies. However, the Committee has approved purpose codes to track development funds for NCDs. These will first be reported in 2019 on data collected in 2018.



We welcome paragraphs 45-48 on engagement of philanthropic foundations, non-governmental organizations, and private sector entities. Achieving the NCD commitments made in 2011 and 2014, at WHA, and in the 2030 Agenda require a multisectoral and whole-of-society approach. Pro-active engagement with civil society and people living with, at risk of and affected by NCDs, in particular, can ensure that the voices of those hardest to reach and of those most vulnerable are included in policy-making discussions.

However, we encourage caution when engaging with private sector partners, as not all partners can be treated the same, specifically those whose core business negatively impacts health and contributes to the growing burden of NCDs.

Section IV - Recommendations

The sense of urgency conveyed in the UN SG's report cannot be understated; the world is reaching an inflection point at which significant action is required in order to stem the growing burden of NCDs. Without this, the world will not reach SDG target 3.4 or commitments on NCDs made in 2011 and 2014, and we will have let the opportunity to prevent avoidable human suffering and disastrous economic burden slip.

The call for bolder commitments in paragraph 52 cannot be emphasized enough. The report highlights that those forces that impede progress, including large multinational corporations and industry actors, will remain largely unopposed unless countries work together and place the health and development of their people and societies at the forefront.

We urge that the Report's recommendations (paragraphs 53-81) be reflected as concrete action-oriented, time-bound commitments in the outcome document of the 2018 UN HLM on NCDs, and particularly support the call for an integrated and holistic approach to addressing NCDs within the context of the 2030 Agenda and universal health coverage.

Recommendation 53b is of particular importance as it calls for implementation of the WHO Best Buys to reduce tobacco use, harmful use of alcohol, unhealthy diets and physical inactivity as a central component of national responses to NCDs.

Other recommendations include integrating mental health and well-being interventions into national NCD responses, breaking down disease-specific silos to broaden universal health coverage approaches, and improving engagement with non-State actors. The report also calls for recognition of the evidence on taxation of unhealthy commodities to reduce consumption, strengthen health systems, and increase domestic revenue for health.



We strongly support recommendation 54b, that calls upon countries to ensure NCDs are included and prioritized in the development of national SDG responses as the cross-sectoral and co-benefit nature of interventions to reduce NCDs advances both health and well-being and sustainable development overall.

While there is a mention of the need to address financing for NCDs in the report, we encourage greater attention to this aspect, as it is essential for the successful implementation of NCD prevention and control policies. NCD financing must be understood as a strategic, long-term investment in health security, social cohesion and economic development. Concrete, action-oriented commitments in the 2018 UN HLM Outcome Document to boost NCD Investment will be critical. To this end we recommend that Member States consider the forthcoming chair's statement from the WHO Global Dialogue on Partnerships for Sustainable Financing of Noncommunicable Disease Prevention and other reports such as of the Bloomberg Task Force on Fiscal Policy for Health .

We also would encourage MS to give due attention to industry interference as a barrier to progress for addressing NCDs. As the report outlines, industry interference actively impedes implementation of the WHO Best Buys and unhealthy commodities industries routinely interfere with health policymaking by employing tactics similar to those of the tobacco industry, including discrediting proven science and pursuing legal action to oppose national progress. At the same time, domestic commercial interests may also be promoted/protected by Member States themselves, often contradicting development imperatives and resulting in lack of coherence across domestic and international policies and investment.

Many of the recommendations focus on the need for strengthened international collaboration and policy coherence, and engagement of non-State actors such as civil society. We applaud the focus on the need for urgent, coordinated and multisectoral action on NCDs that delivers on the integrated nature of the 2030 Agenda for Sustainable Development.