

# NCD Alliance Webinar

11 May 2016



**NCD Alliance**

PUTTING NON-COMMUNICABLE DISEASES  
ON THE GLOBAL AGENDA

# Agenda

- **Preparations for the 69<sup>th</sup> World Health Assembly**  
Alena Matzke, NCD Alliance
- **Update on the WHO GCM/NCD Working Groups**  
Bente Mikkelsen, World Health Organisation
  - **GCM/NCD Report on Financing for NCDs**  
Rachel Nugent, RTI International
  - **GCM/NCD Report on Private Sector Engagement**  
Sir Trevor Hassel, Healthy Caribbean Coalition
- **Nutrition at the 69<sup>th</sup> World Health Assembly**  
Francesco Branca, World Health Organisation
- **2030 Agenda follow-up and review**  
Priya Kanayson, NCD Alliance

# Preparations for the 69<sup>th</sup> World Health Assembly

Alena Matzke,  
Advocacy Manager, NCD Alliance

# WHA Hot Topics

## CAUSES OF ANTIBIOTIC RESISTANCE

Antibiotic resistance happens when bacteria change and become resistant to the antibiotics used to treat the infections they cause.

- Over-prescribing of antibiotics
- Patients not finishing their treatment
- Over-use of antibiotics in livestock and fish farming
- Poor infection control in hospitals and clinics
- Lack of hygiene and poor sanitation
- Lack of new antibiotics being developed

www.who.int/antibioticresistance  
AntibioticResistance  
World Health Organization



## THE GLOBAL STRATEGY FOR WOMEN'S, CHILDREN'S AND ADOLESCENTS' HEALTH (2016-2030)

# NCD-related Agenda Items

## Item 11: WHO Reform

- 11.3 FENSA

## Item 12: Noncommunicable Diseases

- 12.1 Maternal, infant and young child nutrition
- 12.2 Report of the Commission on Ending Childhood Obesity
- 12.3 Draft global plan of action on violence
- 12.4 NCDs – Preparations for the 2018 HL Review
- 12.5 Strengthening synergies between WHA and FCTC COP
- 12.6 UNGASS on the world drug problem

# NCD-related Agenda Items

## Item 13: Promoting Health Across the Life Course

- 13.2 Health in the 2030 Agenda for Sustainable Development
- 13.3 Global Strategy on Women's, Children's and Adolescents' Health
- 13.4 Draft global plan of action on ageing and health
- 13.5 Draft road map on air pollution
- 13.6 Role of health sector in sound management of chemicals

## Item 14

- 14.7 Promoting the health of migrants

## Item 16: Health Systems

- 16.4 Addressing the global shortages of medicines

# Daily Timetable



## Monday 23 May

- Opening of the Assembly
- Invited Speaker / Address by WHO Director-General
- WHO Reform (set up of drafting group) (item 11)

## Tuesday 24 May

- WHO Reform (item 11)
- Promoting health through the life course (item 13)

## Wednesday 25 May

- Preparedness, surveillance and response (item 14)

# Daily Timetable

## Thursday 26 May

- Preparedness, surveillance and response (continued)
- Promoting health through the life course (continued)
- Communicable Diseases (item 15)
- **Noncommunicable Diseases (item 12)**

## Friday 27 May

- Communicable Diseases (continued)
- **Noncommunicable Diseases (continued)**

## Saturday 28 May

- Finalization of Reports/Resolutions
- Closure

Click [here](#) for the WHA Journal. WHA Documents are available [here](#).

# 12.4 Prevention and Control of NCDs

Report not available yet; will include updates on:

- *Progress Report on GAP implementation & attainment of nine global targets*
- *Update of GAP Appendix 3*
- *Purpose code to track ODA for NCDs*
- *Approach to register contributions by NSAs in the NCD response*
- *GCM/NCD Progress Report*
- *Progress Report UNIATF on NCDs*
- *Outline of 2017 UNSG Report*

**ACTION:** Adoption of [EB138.R4](#), which:

- Urges acceleration of implementation of national commitments, incl. strengthening of surveillance systems in lead up to 2018 UN HL Review
- Endorses process to:
  - Update Appendix 3 of NCD GAP (*consultations in June - TBC*)
  - Develop an approach to register and publish contributions of NSAs

# 12.4 Prevention and Control of NCDs

## NCD Alliance advocacy messages:

- **WHA resolution should note the reports of the WHO GCM/NCD Working Groups on *Financing for NCDs* and *Engagement of the Private Sector* to encourage implementation of their recommendations at the national level**
- **Insufficient progress on 9 global targets – time to get serious!**
- **Preparations for the 2018 UN HL Meeting start now:**
  - Fast-track implementation of 4 time-bound commitments
  - Prioritize strengthening of monitoring and surveillance systems
  - Support technical work underway to develop NCD purpose code in OECD's Creditor Reporting System
  - Preparations must include comprehensive consultative process, including regional and civil society consultations

# NCDs & Nutrition

## 12.1 Maternal, infant and young child nutrition

1. New WHO Guidance on ending the inappropriate promotion of foods for infants and young children

NCD Alliance advocacy messages:

- **Urge Member States to support draft resolution to endorse the proposed guidance** and recommend reporting every two years on implementation
2. Decade for Action on Nutrition ([A69/7 ADD2](#)) – forthcoming NCD Alliance/WCRFI advocacy brief

## 12.2: Report of the Commission on Ending Childhood Obesity

NCD Alliance advocacy messages:

- **Develop comprehensive implementation plan** to ensure full implementation of the comprehensive, integrated package of policy actions recommended by the commission including a robust monitoring and accountability framework
- **Involve civil society** closely in the development of the plan

# Health in the 2030 Agenda

## The report ([A69/15](#)):

- Links achievement of all health-related goals to realizing UHC
- Notes that population ageing and antimicrobial resistance must be addressed
- Urges govts to capitalize on existing synergies to promote coherence and engage non-health sectors (finance, trade, etc.)
- DAH and ODA must continue, accompanied by increased domestic resource mobilization (benefits of taxation)
- Acknowledges challenges regarding availability of data
- Notes the role of civil society in follow-up and review and promoting accountability
- **ACTION:** WHA invited to adopt draft resolution [EB138.R5](#)

# Women's, children's & adolescents' health

## The report ([A69/16](#)):

- Notes Health in All Policies approach requires strong country leadership to break out of siloed programmes
- Recommends govts to:
  - Use targets in GS to update national policies, strategies, and budgets
  - Develop a sustainable health financing strategy
  - Strengthen health systems
  - Harness the power of partnership
  - Enhance accountability mechanisms
  - Achieve UHC
- Notes reporting and reviews to be conducted annually
- Accountability framework to minimize reporting burden
- **ACTION:** WHA invited to note report and adopt a **resolution** to endorse implementation of the GS, incl. biannual reporting

# Health & Environment

## 13.5 Draft road map on air pollution (2016-2019) – Report [A69/18](#)

- Intended to enable the health sector to take a leading role in raising awareness of impacts and sustainable solutions to air pollution across sectors
- Forthcoming report with new data on human exposure to air pollutants, including investment case & scale of investment needed to implement the activities in the proposed roadmap (incl. WHO technical support to countries)

**ACTION:** WHA to endorse the roadmap

*More on this topic NCD Alliance policy brief [NCDs and Climate Change: Shared Opportunities for action](#)*

## 13.6 Sound management of chemicals – Report [A69/19](#)

- Growing body of evidence suggests exposure to harmful chemicals leads to increased likelihood of developing NCDs, including cancer and mental and neurological disorders

**ACTION:** Note report and adopt a draft resolution proposing the development of a roadmap for adoption by 70<sup>th</sup> WHA

# WHO FENSA

## 11.3 WHO's Framework for Engagement with NSAs

- Central element of WHO's governance reform – lack of clarity on NSA engagement of has posed great challenges to WHO's work on NCDs
- Consists of overarching framework and separate policies for NGOs, Academia, Philanthropic Foundations and Private Sector
- April Intergovernmental meeting finalized majority of text; pending work on:
  - Paragraphs: 12a, 13, 14 and 38 of private sector policy
  - Question of implementation; could involve reconsideration of paragraphs: 17, 27, 32, 34, 35, 38 and 38bis (agreed 'ad ref')

**ACTION:** Establishment of a drafting group to finalize text and resolution for adoption of FENSA at WHA

### NCD Alliance advocacy messages

- **Adopt FENSA at 69<sup>th</sup> WHA** with evaluation of its implementation in 2018
- **Welcome provision for secondments from NGOs and academia**
- **Retain paragraphs 44bis and footnote to paragraph 33** of private sector policy

# Other relevant items

## 12.5 Strengthening synergies between WHA and FCTC COP

**ACTION:** Adopt WHA Resolution [A69/11](#) to include outcomes of FCTC Conference of the Parties (COP) on WHA agenda & vice versa

## 13.4 Draft global strategy and plan of action on ageing and health

Plan of Action (2016-2020) Goals:

1. Five years of evidence-based action to maximize functional ability that reaches every person.
2. By 2020, establish evidence and partnerships necessary to support a Decade of Healthy Ageing from 2020 to 2030

**ACTION:** Consider and endorse the draft strategy and plan [A69/17](#)

## 16.4 Addressing the global shortages of medicines

**ACTION:** Note the report [A69/42](#) and adopt draft resolution [EB138/CONF./3REV.1](#)

# WHA Technical Briefings

**All briefings will take place from 12.30-14.15 in Room XII:**

- Tuesday 24 May: **Health in the 2030 Agenda for Sustainable Development: intersectoral action**
- Wednesday 25 May: **Survive, Thrive, Transform: implementing the Global Strategy for Women's, Children's and Adolescents' Health**
- Thursday 26 May: **Health emergencies in practice**
- Friday 27 May: **Migration and Health**

Click [here](#) for the full list of official WHA Side Events and Technical briefings.

# NCD Alliance Side Events

## Making the Case for NCDs: Sustainable Investments, Smarter Financing

Monday 23 May, 19.00-20.30, Intercontinental Hotel

### Speakers:

- Dr Matshidiso Moeti, Regional Director, WHO Africa Region
- Dr Janette Loreto-Garin, Secretary of Health, Department of Health, Republic of the Philippines
- Dr Philippe Douste-Blazy, UN Special Advisor on innovative financing for development (TBC)
- Dr Rachel Nugent, Vice President, Global NCDs, RTI International
- Honorable Suresh Kumar, Executive Vice President, External Affairs, Sanofi

## Accelerating Progress on Tackling Child Obesity & Undernutrition

Monday 23 May, 17.45-19.15, UN Palais des Nations, Room XXIV

**Host: Finland** supported by 12 Member States, UNSCN, GNR and 12 CSOs

### Speakers:

- Dr Margaret Chan, Director-General, WHO
- Jamie Oliver, Chef and Campaigner
- Juha Rehula, Finnish Minister of Family Affairs and Social Services
- Nahas Angula, Former Prime Minister of Namibia



**LAUNCH of joint NCDA & WCRFI Advocacy Brief:** *Ambitious, SMART Commitments to address NCDs, Overweight & Obesity: Make the UN Decade of Action count for all forms of malnutrition*

# WHA 69 NCD-related Side Events

Date	Time	Session/Event Title	Event Host	Location
Sunday 22 May	16:00 – 18:00	NCD Alliance NGO WHA69 Pre-Briefing ( <i>CSOs only</i> )	NCD Alliance	Salle Mont-Blanc, Warwick Hotel
Monday 23 May	12.45-14 .15	Ministerial panel on dementia	Austria, Canada, Dominican Republic, Ethiopia, Germany, Japan, Luxembourg, Malta, Monaco, Netherlands, Panama, the Republic of Korea, Switzerland, UK, USA, and Zambia	UN Palais des Nations, Room VII
	12.00-14 .00	Health and the SDGs: Addressing Quality, Access, Accountability and Inclusion	MSH	Geneva Press Club
Tuesday 24 May	8:00 – 10:00	Country Collaborations for NCDs – Bringing Together CSOs, Youth, and Government	NCD Child, UNICEF, American Academy of Pediatrics, International Pediatric Association	Restaurant Vieux-Bois
Wednesday 25 May	7:30 – 9:00	Realising the potential of workplaces to prevent and control NCDs: How public policy can stimulate business and governments to work together	NCD Alliance, Bupa	Intercontinental <i>Invitation only</i>
	12:00 – 13:45	Tackling CVD through Primary Health Care: Strengthening National CVD Plans	World Heart Federation	Intercontinental <i>Invitation Only</i>
	14.00-16 .00	Ministerial roundtable - No more epidemics: Advancing the global health security	MSH, Ministry of Health of the Republic of Uganda; the Ministry of Health of the Federal Democratic Republic of Ethiopia; the Ministry of Health of Peru; the United States Government; and the Government of Finland	Intercontinental
	18:00 – 19:30	Towards the right to health: Possibilities of a Framework Convention on Global Health and Harmonized Civil Society Platforms for UHC	Alliance for Health Promotion, Global Health council, IPPF, Save the Children, World Heart Federation, World Vision International	UN Palais des Nations, Room IX
	18.30-20 .30	From Plan to Action: Combating Ageism to Achieve Healthy Ageing	IFRC, HelpAge International, International Federation on Ageing	ICRC Humanitarium

# WHA 69 NCD-related Side Events

Date	Time	Session/Event Title	Event Host	Location
Thursday 26 May	TBC	Roundtable on Rheumatic Heart Disease (RHD)	World Heart Federation	Intercontinental
	17:45 – 19:15	Are we making the right investments for optimal cancer control? A global dialogue	Malaysia, Honduras, India, Jordan, Korea, Kuwait, Peru, Zambia, WHO Dept Management of NCDs Disability Violence and Injury Prevention, UICC, ESMO, WHPCA, IOMP, ISR	UN Palais des Nations, Room VIII
	17:45 – 19:15	Ending Childhood Obesity: Securing the future of our children	Ghana, Malaysia, Mexico, New Zealand, Zambia	UN Palais des Nations, Room XII
	18:30 – 20:00	Global Dialogue for Citizen-led Accountability for Women’s, Children’s, and Adolescents’ Health	Bangladesh, Sweden, Zambia, PMNCH, World Vision, IPPF, Save the Children, White Ribbon Alliance	Save the Children Office
Friday 27 May	12:15 – 13:45	Healthy Ageing: innovative approaches to promote health across the life-course	Australia, Japan, India, Netherlands, Norway, Thailand, USA	UN Palais des Nations, Room IX
	18:00 – 19:30	G7 activities for HSS and UHS	Germany and Japan	UN Palais des Nations, Room XII
	18:00 – 19:30	Reducing 7 million deaths from air pollution: implementing WHA 68.8 (2015) through actions at country, city, and household level	Norway and Zambia	UN Palais des Nations, Room VIII

Click [here](#) for the full NCD Alliance calendar of NCD-related side events  
 Email [info@ncdalliance.org](mailto:info@ncdalliance.org) to share relevant events

# Advocacy Messages in a nutshell

- **Insufficient progress on 9 global targets – time to get serious!**
- **Preparations for the 2018 UN High-Level Review on NCDs start now:**
  - Fast-track implementation of 4 time-bound commitments
  - Prioritize strengthening of monitoring and surveillance systems
  - Note the WHO GCM/NCD Working Group Reports
  - **Involve civil society every step of the way**
- **Urgently mobilise sustainable resources for NCDs and improve tracking of resources:**
  - Strengthen domestic financing, including via taxation of unhealthy products
  - Integrate NCDs into multilateral and bilateral development assistance
  - Develop a purpose code for NCDs in OECD Creditor Reporting System (CRS)
- **Take bold action to end childhood overweight & obesity:**
  - Endorse new WHO Guidance on Inappropriate Marketing of Infant Foods
  - Develop a robust plan of action & accountability framework to implement the comprehensive set of recommendations of the WHO ECHO Commission

Q & A

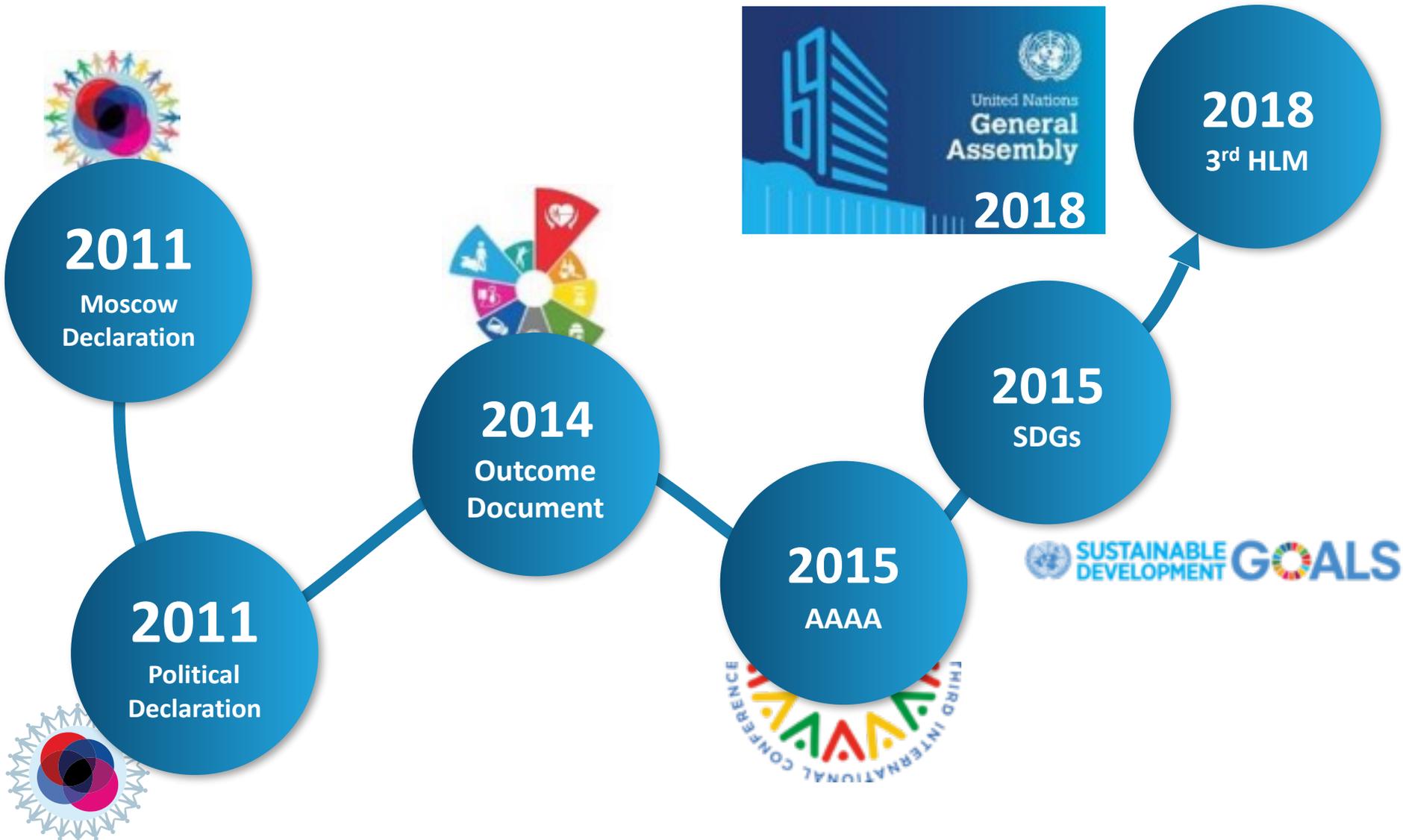


# Updates on WHO GCM/NCD Working Groups 2015-2016



Dr Bente Mikkelsen  
Head a.i., Secretariat of the  
WHO Global Coordination Mechanism for NCDs

# WHO's strategy to raise the priority accorded to NCDs on global agendas



# WHO's strategy to raise the priority accorded to NCDs on national agendas

By 2030, reduce by one third premature mortality from NCDs

2030 milestone: NCD-related targets in the SDGs

2025 milestone: 9 voluntary global NCD targets

2018 milestone: Four time-bound commitments

## *Components of national NCD responses*

Governance

Risk factors

Health systems

Surveillance

2011 UN  
Political  
Declaration on  
NCDs

2014 UN  
Outcome  
Document on  
NCDs

WHO Global  
NCD Action  
Plan 2013-2020

WHO Regional  
NCD Action  
Plans

Sustainable  
Development  
Goals

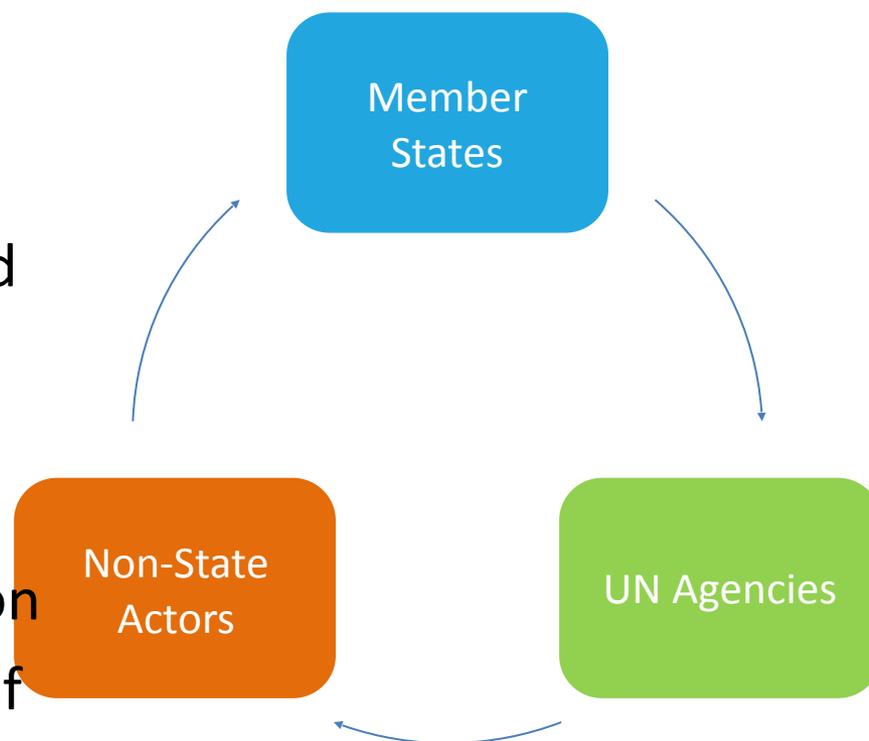
# WHO Global Coordination Mechanism on NCDs

## Scope and purpose:

Facilitate and enhance the coordination of activities, **multi-stakeholder engagement and action** across sectors at the local, national, regional and global levels, in order to contribute to the implementation of the WHO Global NCD Action Plan 2013 – 2020.

## Five functions:

- Advocating and raising awareness
- Disseminating knowledge and information
- Encouraging innovation and identifying barriers
- Advancing multisectoral action
- Advocating for mobilization of resources





## Purpose and Terms of Reference for Working Groups

- In May 2014, the 67<sup>th</sup> WHA endorsed the GCM/NCD terms of reference and noted its 2014-2015 work plan, including establishment of two Working Groups.
- The TORs for the two Working Groups spelt out (i) the process for nominating and appointing experts to the WGs; (ii) that Co-Chairs would be from developed and developing Member States; and (iii) the working procedures
- The WHO GCM/NCD Working Groups are tasked with providing recommendations to the WHO Director-General on ways and means of encouraging countries to realize the commitments made by Heads of State and Government at the 2011 UN General Assembly High-level Meeting on NCDs.
- The Working Groups can consult with relevant intergovernmental organizations and non-State actors in their work.



### Working Group 5.1

Established to recommend ways and means of encouraging Member States to realize the commitments included in paragraph 45(d) of the 2011 Political Declaration on the commitment of Heads of State and Government to explore the provision of resources for NCDs through domestic, bilateral and multilateral channels

### Working Group 3.1

Established to recommend ways and means of encouraging Member States to realize the commitments included in paragraph 44 of the 2011 Political Declaration, on the call of Heads of State and government upon the private sector to take action in five specific areas

The Co-Chairs for WG 3.1 and 5.1 submitted their final reports to the WHO DG who has made these publically available on the following WHO GCM/NCD webpage: <http://www.who.int/global-coordination-mechanism/working-groups/wg-final-report-comments/en/>

# Recommendations for governments emerging from the two GCM Working Groups

## 2011 UN H-L Political Declaration Paragraph 44 (Private sector)

1. Establish sound national statutory and regulatory frameworks to enable more concrete contributions from the private sector
2. Establish a multi-stakeholder platform for engagement on, and implementation, monitoring and evaluation of NCD responses
3. Develop a robust accountability mechanism to review and ensure effective delivery of the commitments and contributions from the private sector
4. Better align private sector incentives with national public health goals
5. Protect national NCD policies from conflict of interests

## 2011 UN H-L Political Declaration Paragraph 45.d (Financing)

1. Mobilize and allocate resources for national NCD responses
2. Expand domestic public resources to implement national NCD responses
3. Seek catalytic ODA investments to complement domestic resources
4. Promote financing from the private sector
5. Achieve policy coherence across sectors

# WHO GCM/NCD Working Groups 2016-17

*Working Groups to recommend ways and means of encouraging Member States and non-State actors to:*

- promote the **inclusion of the prevention and control of NCDs** within responses to **HIV/AIDS** and programmes for **sexual and reproductive health and maternal and child health** as well as other communicable disease programmes, such as those on **tuberculosis**, including as part of wider efforts to strengthen and orient health systems to address the prevention and control of noncommunicable diseases through **people-centred primary health care** and **universal health coverage**;
- align **international cooperation on NCDs with national plans on NCDs** in order to strengthen aid effectiveness and development impact of external resources in support of NCDs;
- promote **health education and health literacy for NCDs**, with a particular focus on populations with low health awareness and/or literacy, and taking into account the cost-effective and affordable interventions for all Member States contained in Appendix 3 of the WHO global NCD action plan.

# Expectations from 1<sup>st</sup> meeting of the first two GCM Working Groups

## WG on the inclusion of NCDs into other programmatic areas

1. Reemphasize political commitments made by Member States (2011, 2014, SDGs) and the many guidelines already available and translate them into action at country level
2. Identify a set of pre-requisites for effective integration at country-level
3. Identify a clear definition of integration
4. Build a business case for integration, tailored for different audiences, including clear language for policy makers
5. Identify convergences and commonalities between NCDs and specific programme areas and also across integrative initiatives; identify co-morbidities and address shared risk factors between NCDs and other programme areas
6. Integration of vertical programmes must be complemented by horizontal, community-based health system integration
7. Recommendations need to be country-led and country adaptable: ownership is essential
8. Recommendations should consider evidence-based innovations

## WG on the alignment of international cooperation on NCDs with national NCD plans

1. Articulate clear recommendations that are easily adaptable to different country contexts
2. Define international cooperation broader than traditional donor-recipient model to include collaboration across sectors and multi-stakeholder partnerships
3. Advise on mechanism/platforms of engagement of international donors, as well as NGOs, civil society organizations and other relevant non-state actors, including the private sector
4. Develop a guidance document that will address implementation challenges
5. Provide innovative solutions using specific examples and sharing experiences from the WG members' countries

## Possible areas for further development for the two GCM Working Groups

### WG on the inclusion of NCDs into other programmatic areas

1. Local and community level focus: de-specialization towards community level integrated service delivery, where appropriate
2. Help governments form strong business cases for integration, targeting policy-makers, patients and health professionals
3. Encourage strong Civil Society engagement, including patient advocacy, to help hold governments accountable
4. Integration of NCDs should not be into but rather with other programme areas
5. Draw on the strong HIV framework/platform/achievements
6. Focus on social determinants of health in order to identify integrative entry points
7. Guide on providing an integrated, comprehensive service delivery; entry points should be population based rather than program based
- 8.

### WG on the alignment of international cooperation on NCDs with national NCD plans

1. Political power (e.g. laws and regulation)
2. Social power (e.g. social movement, civil society engagement, activism, advocacy)
3. Knowledge power (e.g. research, information, best practices, partnerships North-South, South-South)
4. Mutual accountability (shared responsibility between donors and governments)
5. National capacity building for integrated approaches
6. Donor coordination mechanisms



## WGs 2016 Meeting Schedule Overview

### 1<sup>st</sup> meeting: April 2016



- ✓ Collating additional information for 2<sup>nd</sup> meeting
- ✓ Contact parties for hearings during the 2<sup>nd</sup> meeting
- ✓ Public comment on background papers , collect country cases and call for papers

### 2<sup>nd</sup> meeting: 20-23 June 2016

- Hearing with stakeholders and experts, including relevant non-State actors
- Further discussion on WG's recommendations



- ✓ Circulation of interim report for comments by WG members
- ✓ Teleconference(s) if required to discuss draft report
- ✓ Circulate interim report with draft recommendations for public comments

### 3<sup>rd</sup> meeting: 26-29 September

- Discussion on the draft report
- Adoption of the report and submission to the Director-General of WHO

4th meeting : virtually if required

Q & A



WHO GCM/NCD Working Group on  
*How to Realize Governments'  
Commitments to Provide Financing  
for NCDs*



Dr Rachel Nugent  
Vice president, Global NCDs Initiative, RTI International

## Members of the Working Group

1) Two co-chairs representing developed and developing countries.

- Dr Indrani GUPTA, Head of the Health Policy Research Unit, Institute of Economic Growth, India
- Mr Colin McIlff, the Senior Health Attaché at the U.S. Mission in Geneva

2) Twelve members, two from each WHO region

Dr Hassan AGUENAOU (Morocco)	Dr Nabil KRONFOL (Lebanon)
Dr Gene BUKHMAN (USA)	Dr Outi KUIVASNIEMI (Finland)
Dr Jane CHUMA (Kenya)	Dr J. Jaime MIRANDA (Peru)
Ms Sue ELLIOTT (Australia)	Dr Hasbullah THABRANY (Indonesia)
Dr Amiran GAMKRELIDZE (Georgia)	Dr Senendra UPRETI (Nepal)
Dr Fastone GOMA (Zambia)	Dr Mitsuhiro USHIO (Japan)



World Health  
Organization

World Health



## 5 Recommendations

- **Recommendation 1**

**Mobilize and allocate significant resources** to attain the NCD-related targets included in the Sustainable Development Goals by 2030, and the nine global voluntary NCD targets included in the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020 by 2025.

- **Recommendation 2**

Effectively and efficiently utilize and expand **domestic public resources** to implement national NCD responses, including by making greater use of revenue from tobacco and other health-related taxes to achieve national health objectives.

- **Recommendation 3**

Complement domestic resources for NCDs with **official development assistance (ODA)** and catalyse additional resources from other sources to increase health expenditure on the prevention and control of NCDs, consistent with country priorities.

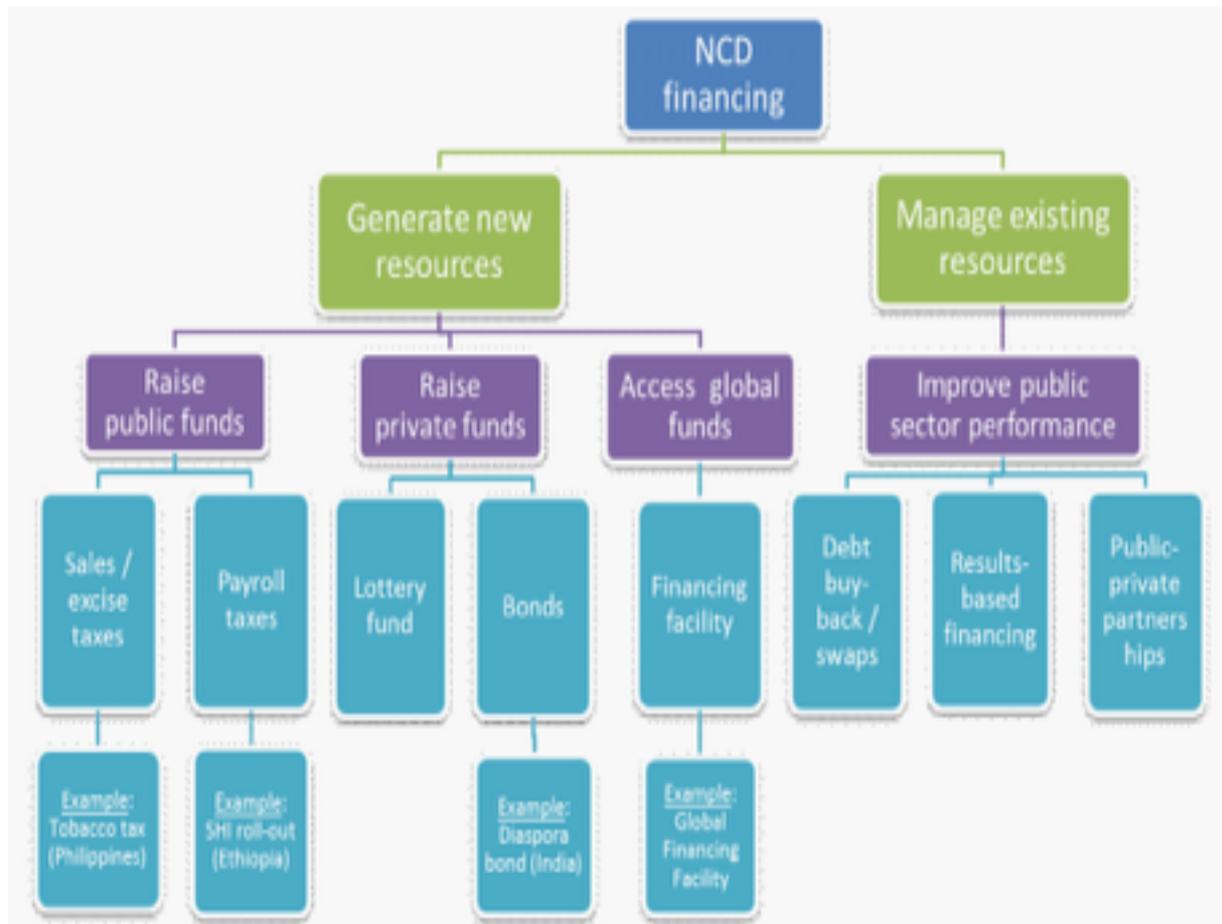
- **Recommendation 4**

Promote and incentivize **financing and engagement from the private sector** to address NCDs, consistent with country priorities on NCDs.

- **Recommendation 5**

Enhance **policy coherence across sectors** in order to ensure that the expected outcomes of national NCD policy are achieved, including by assessing the health impact of policies beyond the health sector.

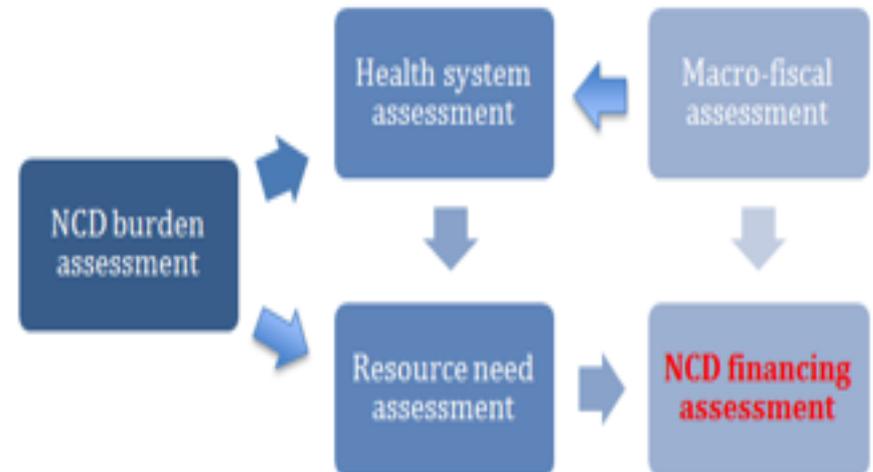
# Example of blended financing



## Approaches and tools for assessment and implementation of national NCD financing options

### A five-step process for assessing NCD financing options

1. Step 1: NCD disease and risk factor burden assessment
2. Step 2: National health system assessment
3. Step 3: Domestic macroeconomic and fiscal assessment
4. Step 4: Assessment of resource needs for national NCD prevention and control
5. Step 5: Identification and selection of financing mechanisms



## Possible Country Scenarios of Financing Options

	<b>Resource setting</b>	<b>Disease burden / resource needs</b>	<b>Health system profile</b>	<b>Macro-fiscal situation</b>	<b>Policy options</b>
1	Low-income country	Modest but growing NCD burden	Poor service coverage and access and high out-of-pocket spending NCDs a low priority	Weak and reliant on external development assistance High debt-to-GDP ratio	Raise revenues (enhance tax base) Increase prepayment and revenue pooling International financing loan and development bond
2	Lower middle-income country	Modest but growing NCD burden NCD plan has been costed	Low service coverage; moderate financial protection Policy commitment to integrate NCDs into primary care	Favourable (high economic growth) Relatively low spending on health	Raise revenues (excise via excise taxes, allocate more money for health from general revenue taxes) Strengthen financial protection Improve service efficiency (via task sharing)
3	Upper middle-income country	High and escalating Resource needs not estimated	NCD services not well integrated Relatively high (or full) financial protection	Stagnant economy, but open to investors High and rising debt levels	Raise revenues (via greater tax compliance) Pursue market-based financing (ineligible for ODA)

## Conclusion and next steps to support countries to implement NCD financing options

Countries are encouraged to undertake actions under each of the five recommendations, as well as to review and to share experiences that strengthen national capacity to use the available tools set out in the report for assessing needs and capacity for financing NCD prevention and control.

Countries can use a stepwise process to facilitate financing for NCDs at a country level and to increase capacity and knowledge to use all available tools.

The WHO GCM/NCD and partners will further explore ways to create an enabling environment and address the information and knowledge gaps (chapter 5), namely:

- identify and share information on country demand and existing and potential sources of finance and cooperation mechanisms;
- develop technical assistance to evaluate capacity and prepare NCD needs assessments;
- develop a comprehensive investment framework for NCDs;
- create a global investor platform (“marketplace”);
- further support advocacy, set up a community of practice and develop knowledge sharing.

Full report can be found [here](#)

Q & A



# WHO GCM/NCD Working Group Report on Engagement with the Private Sector



Sir Trevor Hassel  
Barbados National NCD Commission and  
the Healthy Caribbean Coalition

# Members of Working Group 3.1

## 1) Co-Chairs from a developed and developing country

- HE Carole Lanteri, Ambassador and Permanent Representative, Permanent Mission of the Principality of Monaco to the United Nations Office and other International Organizations in Geneva
- Dr Jarbas Barbosa da Silva, Secretary for Science, Technology and Strategic Products, Ministry of Health, Brazil
- Professor Ambrose Isah, College of Medical Sciences, University of Benin, Nigeria was Acting Co-Chair 17/18 June

## 2) Twelve members from each region of WHO

Dr Palitha ABEYKOON (Sri Lanka)  
Dr Mariam AL-JALAHMA (Bahrain)  
Professor Sergey BOYTSOV (Russian Federation)  
Dr Vang CHU (Lao PDR)  
Dr Jalila EL ATI (Tunisia)  
Sir Trevor HASSELL (Barbados)

Professor Ambrose ISAH (Nigeria)  
Professor Mary R. L'ABBÉ (Canada)  
Dr Urvashi D MUNGAL-SINGH (South Africa)  
Ms Anne Lise RYEL (Norway)  
Dr Thaksaphon THAMARANGSI (Thailand)  
Hon. Dr Leao Talalelei TUITAMA (Samoa)

# 2011 United Nations General Assembly Political Declaration on NCDs

- In 2011 the United Nations General Assembly adopted the Political Declaration of the High-level Meeting of the United Nations General Assembly on the Prevention and Control of NCDs (resolution A/RES/66/2)
- Heads and representatives of States and Government committed to call on the private sector to strengthen its contribution to non-communicable disease prevention and control in five specific areas (paragraph 44):
  - producing and promoting more food products consistent with a healthy diet
  - reducing the use of salt in the food industry
  - reducing the impact of the marketing of unhealthy food and non-alcoholic beverages to children
  - promoting and creating an enabling environment for healthy behaviours among workers
  - improving access to affordable NCD medicines and technologies

## Key Findings

- There is an urgent need to scale up the contribution of the diverse range of private sector entities to national level NCD prevention and control
- It is important that governments are clear about the role and contribution of different private sector entities in NCD prevention and control
- Need to be much more discerning when considering varied roles of the range of private sector entities to differentiate the contributions that different entities make, and therefore the nature of engagement with these entities
- Governments need to safeguard public health interests from undue influence by any form of real, perceived or potential conflict of interest to effectively prevent and control NCDs
- Many private sector entities have no direct conflict of interest in being involved in NCD prevention and control and in fact have objectives that align closely with those of governments

## Key findings

Building blocks of effective government engagement on NCD prevention and control with the diverse range of private sector entities are:

- Strong regulatory frameworks, both statutory and self-regulatory
- A multi-stakeholder platform for implementation, monitoring and evaluating
- A robust mechanism to review and ensure effective commitments and contributions
- The use of measures, including incentives, to encourage a strong private sector contribution
- Transparent management of conflict of interest
- Sharing of knowledge and data to support collective national and global action

## Overarching recommendations, 1 - 3

- Governments need to establish sound national statutory and regulatory frameworks to enable more concrete contributions from the diverse range of private sector entities to NCD prevention and control goals and targets
- Governments should establish a multi-stakeholder platform for engagement on and implementation, monitoring and evaluation of NCD prevention and control that involves all relevant stakeholders, including relevant private sector entities
- Governments should develop a robust accountability mechanism to review and ensure effective delivery of the commitments and contributions from the diverse range of private sector entities to national NCD responses and achievement of NCD targets

## Overarching recommendations, 4 - 6

- Governments should better align private sector incentives with national public health goals to encourage and facilitate a stronger contribution to NCD prevention and control from the diverse range of private sector entities
- Heads of State and Government must protect their national policies for the prevention and control of NCDs from undue influence by any form of vested interest in order to harness contributions from the full range of private sector entities; real, perceived or potential conflicts of interest must be acknowledged and managed
- Countries need to share knowledge and data to support collective action on NCD prevention; this includes pledges and commitments made by transnational corporations to ensure that these are applied consistently across the world, not just in high-income countries, and are tailored for local relevance.

# Marketing to children: specific recommendations, 7

- Governments should set a strong regulatory framework to underpin engagement with the wide range of relevant private sector entities to protect children from marketing of unhealthy foods and non-alcoholic beverages, so as to support the full implementation of the WHO set of recommendations on the marketing of foods and non-alcoholic beverages to children

- Governments should elicit clear time-bound commitments from the diverse range of private sector entities involved in the food supply chain to reduce salt, sugar, fat and trans fat in processed foods, aligned with relevant WHO guidelines and agreements
- Governments should work with relevant stakeholders, including private sectors entities, to provide consistent, coherent, simple and clear messages, to the public, private sector and politicians, to improve understanding of the harms of products high in salt, sugar and fats, including through accurate, standardized, comprehensible and readable front-of-pack labelling

- Governments should engage with the diverse range of private sector entities and other relevant stakeholders in promoting and creating an enabling environment in order to develop comprehensive workplace health programmes combining occupational health and safety, health promotion, and health coverage, in both the public and private sectors.
- Governments should implement a strong regulatory framework to achieve greater coherence for national workplace health initiatives in both the public and private sectors, taking into account existing international obligations to protect workers' health in workplaces

## Improving access to and affordability of medicines and technologies in the prevention and control of NCDs: specific recommendations, 12 - 13

- Governments should recognize that a wide range of private sector entities are important stakeholders for the supply of essential medicines and technologies in public and private sectors, and should engage with them to ensure that safe, effective, affordable and quality-assured products are available on a sustainable basis, and that data on market share to support planning and service delivery are also available.
- Governments should actively explore opportunities through public–private partnerships to increase access to safe, effective, affordable and quality-assured essential NCD medicines and health technologies to support achievement of the targets of the Global Action Plan on NCDs and contribute to universal health coverage.

# Engagement beyond the private sector

A clear message from the Working Group is that other non-State actors (NGOs) also have a key role to play in generating a more significant private sector contribution to NCD prevention and control:

- influencing individual behaviour and social norms
- delivering prevention programmes and health services
- representing public health and consumer interests
- increasing public knowledge and awareness
- community mobilization around NCD prevention and control
- building capacity and providing technical support
- establishing and supporting partnerships
- facilitating collaboration between countries and sharing of experience and monitoring, for example to ensure that food products actually contain the sugar, fat or salt content stated
- monitoring, to hold the private sector and policy-makers to account

## Annexes to the WHO GCM/NCD Report on Engagement with the Private Sector

- Bottlenecks and challenges to faster progress
- Prerequisites and considerations for government engagement on NCD prevention and control with the diverse range of private sector entities.
- Alignment of country cases on engagement with the private sector with multiple recommendations from WHO GCM/NCD Working Group 3.1.
- The diverse range of private sector entities and their potential contributions to NCD prevention and control.
- Resolutions adopted by the United Nations General Assembly and the World Health Assembly that are relevant to the work of the GCM/NCD Working Group on how to realize governments' commitments to engage with the private sector for the prevention and control of NCDs.

Q & A



# Nutrition at the 69<sup>th</sup> World Health Assembly



Dr Francesco Branca  
Director of Nutrition for Health and Development  
World Health Organisation

# Topics

- WHA 67/9 - Maternal, infant and young child nutrition
- WHA 67/9 Add1 – Ending inappropriate promotion of complementary food – resolution expected
- WHA 67/9 Add2 – Decade of Action on Nutrition – resolution/decision expected

# Progress in global targets

**Stunting.** In 2014, 159 million children under 5

**Anaemia.** In 2011 533 million women of reproductive age

**Low birth weight.** In 2005–2010 15% of neonates <2500 gm

**Overweight.** In 2014 41 million children under 5

**Breastfeeding.** In 2007–2014, 36% of infants under 6 months of age were exclusively breastfed.

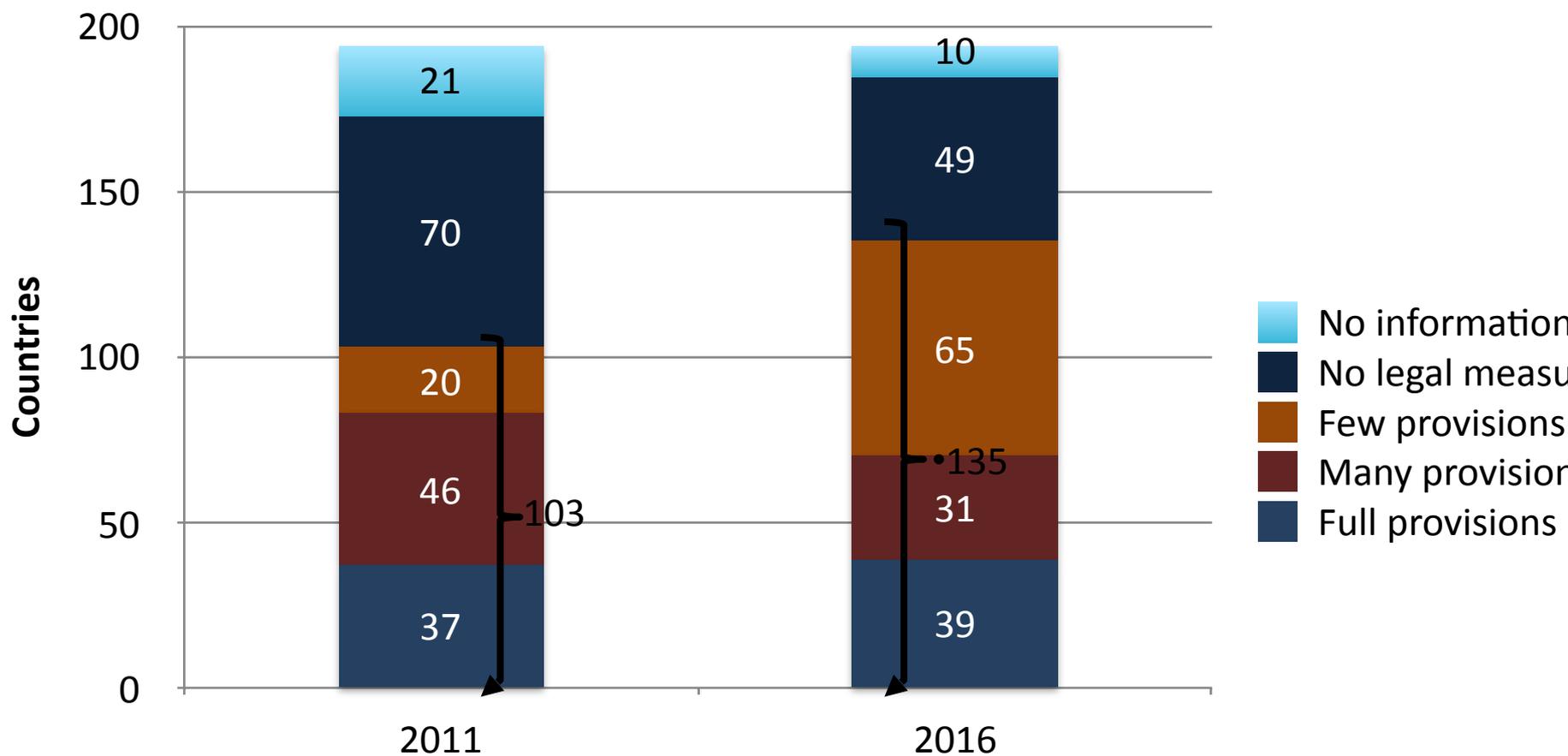
**Wasting.** in 2014 50 million children under 5 (16 million severely wasted).

**MARKETING OF  
BREAST-MILK  
SUBSTITUTES:  
NATIONAL  
IMPLEMENTATION  
OF THE  
INTERNATIONAL  
CODE STATUS REPORT 2016**



**SUMMARY**

# Changes in Code Legal Status, 2011-2016



# Ending inappropriate promotion of food for infants and young children

- In 2010, World Health Assembly called on Member States to “end inappropriate promotion of food for infants and young children”
- In 2012, WHA requested clarification and guidance on what constitutes inappropriate promotion and how to end it. In 2014, WHO provided clarification and WHA requested development of guidance
- Scientific and Technical Advisory Group (STAG) convened in 2013 and 2015 to develop recommendations



## Key concerns identified—Interference with Breastfeeding

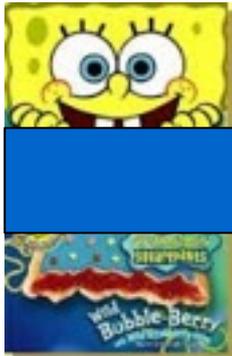
- Follow-on formula, growing-up milk, toddler milk
  - Covered by International Code?
  - Codex Alimentarius
- Cross-promotion through other complementary food products
  - “Stages”
  - Similar logos, designs, etc.



# Key concerns identified—Obesity & NCDs



- Complementary foods high in sugars, trans fat, saturated fat, salt

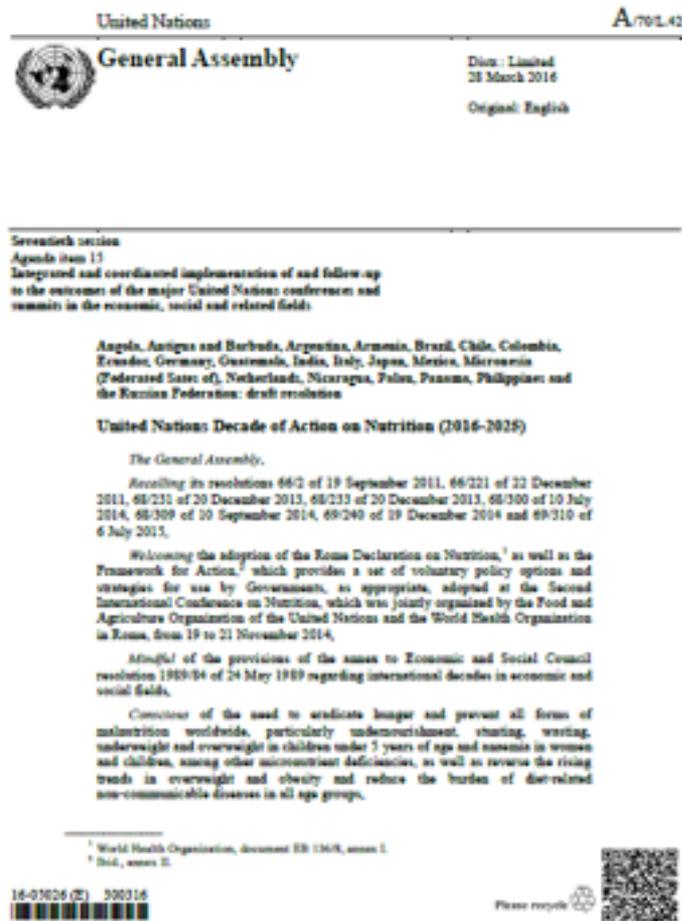


- Foods marketed for older children

# RECOMMENDATIONS

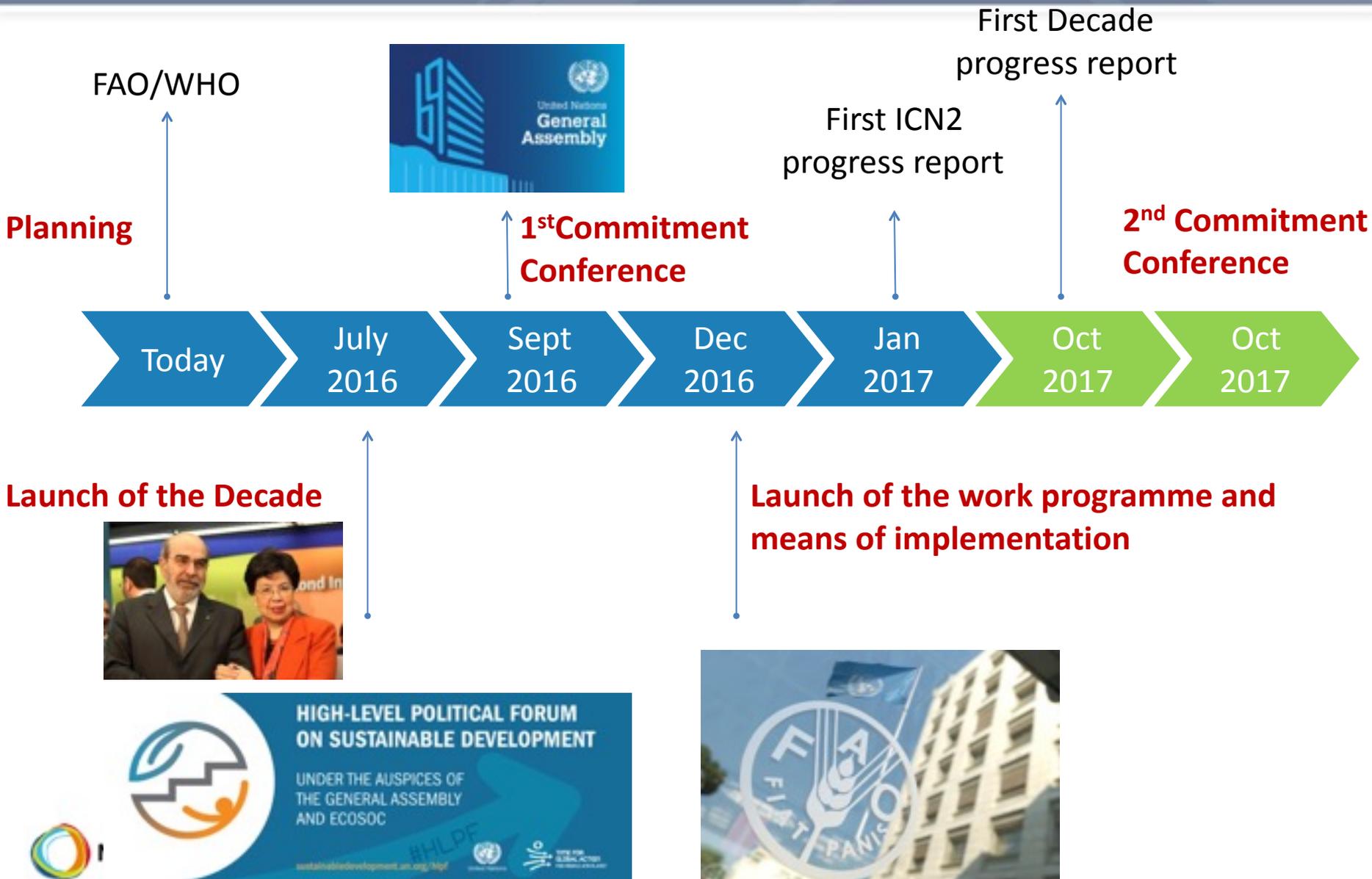
- **Recommendation 1.** Optimal infant and young child feeding should be promoted based on the Guiding principles for complementary feeding of the breastfed child<sup>1</sup> and the Guiding principles for feeding non-breastfed children 6–24 months of age
- **Recommendation 2.** Products that function as breast-milk substitutes should not be promoted.
- **Recommendation 3.** Foods for infants and young children that are not products that function as breast-milk substitutes should be promoted only if they meet all the relevant national, regional and global standards for composition, safety, quality and nutrient levels and are in line with national dietary guidelines.
- **Recommendation 4.** The messages used to promote foods for infants and young children should support optimal feeding and inappropriate messages should not be included.
- **Recommendation 5.** There should be no cross-promotion to promote breast-milk substitutes indirectly via the promotion of foods for infants and young children.
- **Recommendation 6.** Companies that market foods for infants and young children should not create conflicts of interest in health facilities or throughout health systems.
- **Recommendation 7.** The WHO set of recommendations on the marketing of foods and nonalcoholic beverages to children<sup>1</sup> should be fully implemented,

# The UN General Assembly proclaims 2016-2025 the Decade of Action on Nutrition



**Goal:** Increase activities conducted at the national, regional and global levels to **implement the recommended actions included in the ICN2 Framework for Action** aimed at achieving the global **targets** for improving maternal, infant and young child nutrition and for NCD risk factor reduction to be achieved by 2025 and the corresponding SDG targets to be achieved by 2030

# Roadmap for the UN Decade of Action on Nutrition 2016-2025



# Making SMART commitments

**Specific, Measurable, Achievable, Relevant and Time-bound (SMART)** so that they can be tracked and monitored taking into account existing indicators

## Example

FFA R29: Adapt and implement the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly resolutions

The Head of Government/Minister of Health will acknowledge adequate breastfeeding as the highest priority for the Government to combat the double burden of malnutrition and makes the following commitment(s) :

- Example 1– By 2017, a legislation will be established that introduces the provisions of the International Code of marketing of breastmilk substitutes
- Example 2 - By 2017, a functional unit will have been established (in the Ministry of Health) to effectively and actively monitor, implement and enforce sanctions in case of violations, with a first report produced by the end of 2018.

## Reporting on ICN2 and Decade of Action : timelines

- 1<sup>st</sup> report to WHA – May 2017 (WHA68.19)
- 1<sup>st</sup> report to FAO Assembly – July 2017
- 1<sup>st</sup> report to the UNGA – October 2017 (A/RES/70/259)

# Reporting on ICN2 : content of reports

1. Register of the actions that Member States commit to implement
2. Reporting on the progress, policies and programmes underway to implement the national commitments
3. Indicators for nutrition outcomes, the nutrition policy environment, and nutrition programme implementation, including the WHA endorsed Global Nutrition Monitoring Framework.

Q & A



# Follow-up and Review of the 2030 Agenda



Priya Kanayson  
NCD Alliance

# Follow-up and Review Process

## Background

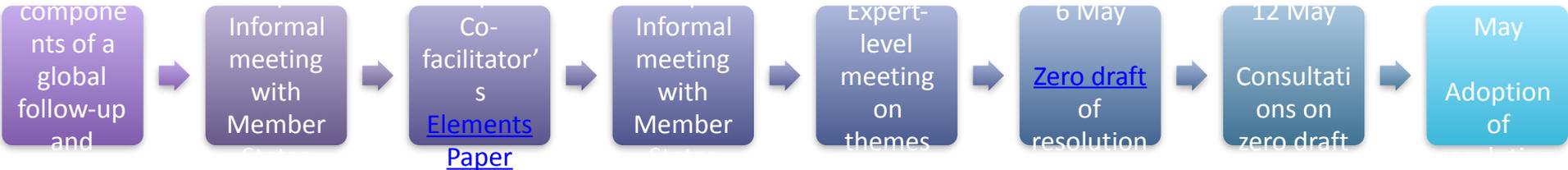
- The 2030 Agenda recognized follow-up and review as a critical component of successful implementation
- Established the High-Level Political Forum (HLPF) under ECOSOC would be the platform for this review
- Co-facilitators (Belize and Denmark) to hold consultations with Member States to develop a framework for review



# The Road to a Framework for Follow-up and Review

## UNSG's Report

components of a global follow-up and



# Key Components of Zero Draft

- Goal 17 (Mol) reviewed annually and cluster others into 3 groups
  - 2017 Theme: Ensuring food security on a safe planet by 2030
    - SDGs 1, 2, 6, 13, 14, 15
  - 2018 Theme: Making cities sustainable and building productive capacities
    - SDGs 7,8,9,11,12,17
  - 2019 Theme: Empowering people and ensuring inclusiveness
    - SDGs 3 4 5 10 16 17



# Key Components of Zero Draft

- Emphasis on voluntary nature of reviews
- All countries encouraged to carry out 2 reviews by 2030
- Include Major Groups and other Stakeholders
  - In line with existing resolutions
  - Unclear how contributions will be included
- Web-based platform and other innovative arrangements to enable diverse regional and organizational involvement



Q & A



# Upcoming NCD Cafés and Dialogues



**WORLD HEART  
FEDERATION®**

**World Congress of Cardiology  
& Cardiovascular Health**

4-7 June 2016

| Mexico City, Mexico

*25x25: Shaping the future of global heart health*

Lower fee until 13 May

[www.worldcardiocongress.org](http://www.worldcardiocongress.org)

THE 47<sup>TH</sup> UNION  
WORLD CONFERENCE  
ON LUNG HEALTH

26-29 OCTOBER 2016  
LIVERPOOL, UK

Early bird rate until 10 May

[liverpool.worldlunghealth.org](http://liverpool.worldlunghealth.org)



**Paris, France**  
31 Oct - 3 Nov 2016

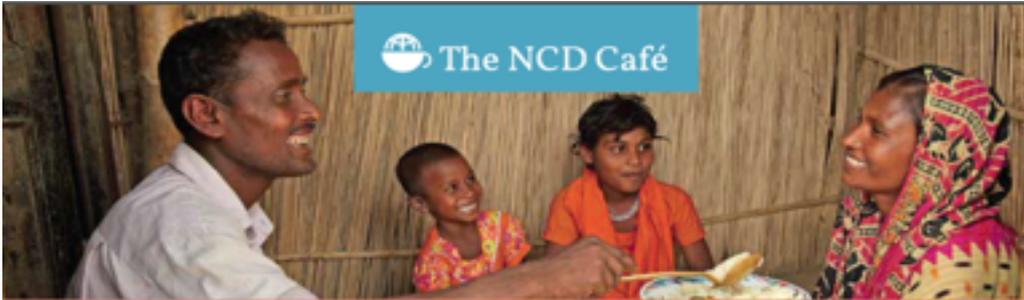
**Mobilising  
Action  
Inspiring  
Change**



Reduced rate until 31 May

[www.worldcancercongress.org](http://www.worldcancercongress.org)

# NCD Café at WHF Congress 5-7 June



The NCD Café: Spirit of Partnership  
Collaborating to Achieve 25X25  
for Cardiovascular Disease and  
Other Non-communicable Diseases

**Join us during lunchtimes from 5-7 June**  
for stimulating and interactive discussions on cardiovascular disease  
and other NCDs, accompanied by healthy refreshments!

Organised by NCD Alliance Supporters:



**Session 1: Building Civil Society Capacity in Latin America: Lessons Learned in Tobacco Control and NCDs**

**Session 2: On the Front Line: The Role of Front Line Health Workers in Preventing and Treating Cardiovascular Disease and NCDs**

**Session 3: Sustainable Financing for CVD and NCDs: Scaling Up the Response**

**Session 4: Urban Opportunities: How can we address CVD and NCDs in Sustainable Cities?**

**Session 5: Patients at the Centre: Engaging People Living with CVD and NCDs in the Response**

**Session 6: Leave No-one Behind: Strategies to Reduce the Burden of Cardiovascular Disease and NCDs in Vulnerable Populations**

# NCD Sessions at Women Deliver 16 – 19 May

## Session 1

Tackling NCDs: The Key to Improving the Health of Girls and Women

*Wednesday 18 May 10:30 – 12:00*

## Session 2

NCDs and RMNCAH: Adopting a Common Agenda

*Wednesday 18 May 13:30 – 4:30*

Forthcoming NCDA /  
Women and NCDs  
Taskforce policy piece on  
Women and NCDs

## Session 3

Engaging Youth for a Healthier Future: The NCD Perspective

*Thursday 19 May 13:30 – 14:30*

*\*Co-hosted by NCD Alliance, Management Sciences for Health, Novo Nordisk*

**WOMEN DELIVER**

4th Global Conference

16-19 May 2016 | Copenhagen, Denmark

#WD2016



# Thank you!

Please visit our website:

[www.ncdalliance.org](http://www.ncdalliance.org)

@ncdalliance

