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Working for a World Free of Poverty









































WHO and processes at the global arena

Bente Mikkelsen 14. March 2014





- Where do we stand?
- Mental Health GAP, NCD GAP and Global monitoring framework
- Outcomes of formal meetings with Member States in November 2013
- Outcomes of WHO Executive Board in January 2014
- Ongoing discussions on the UNGA NCD Review 2014
- Implementation of the NCD GAP
- Some dilemmas, challenges and possibilities

Where do we stand?

- The Global monitoring framework
- Outcomes of formal meetings with Member States in November 2013
- Outcomes of WHO Executive Board in January 2014
- Ongoing discussions on the UNGA NCD Review 2014
- From planning to implementation
- SDG post 2015





GBD 2010

	Proportion of total DALYs (95% UI)	Proportion of total YLDs (95% UI)	Proportion of total YLLs (95% UI)
Cardiovascular and circulatory diseases	11-9% (11-0-12-6)	2.8% (2.4-3.4)	15-9% (15-0-16-8)
Diarrhoea, lower respiratory infections, meningitis, and other common infectious diseases	11.4% (10.3-12.7)	2-6% (2-0-3-2)	15·4% (14·0-17·1)
Neonatal disorders	8.1% (7.3-9.0)	1-2% (1-0-1-5)	11-2% (10-2-12-4)
Cancer	7.6% (7.0-8.2)	0-6% (0-5-0-7)	10-7% (10-0-11-4)
Mental and substance use disorders	7.4% (6.2-8.6)	22-9% (18-6-27-2)	0.5% (0.4-0.7)
Musculoskeletal disorders	6.8% (5.4-8.2)	21-3% (17-7-24-9)	0.2% (0.2-0.3)
HIV/AIDS and tuberculosis	5-3% (4-8-5-7)	1-4% (1-0-1-9)	7.0% (6.4-7.5)
Other non-communicable diseases	5.1% (4.1-6.6)	11-1% (8-2-15-2)	2-4% (2-0-2-8)
Diabetes, urogenital, blood, and endocrine diseases	4.9% (4.4-5.5)	7-3% (6-1-8-7)	3.8% (3.4-4.3)
Unintentional injuries other than transport injuries	4.8% (4.4-5.3)	3.4% (2.5–4.4)	5-5% (4-9-5-9)

DALYs=disability-adjusted life-years. YLDs=years lived with disability. YLLs=years of life lost.

Table: Proportion of YLDs, YLLs, and DALYs explained by the ten leading causes of total burden in 2010





Global targets for mental health conditions

To be attained by 2020

Preliminary unofficial estimates for 2030 are included in brackets (under development)

80%

National mental health policy/plan

(100% in 2030)

(2030)

80%

Core set of mental health indicators (100% in 2030)

-10%

Suicide rate (-25% in 2030) **50%**

National mental health law (100% in 2030)

+20%

Service coverage (+50% in 2030)

80%

≥ 2 national mental health programmes (100% in 2030)





Cross-cutting principles

- 1. Universal health coverage
- 2. Human rights
- 3. Evidence-based practice
- 4. Life course approach
- 5. Multisectoral approach
- Empowerment of persons with mental disorders and psychosocial disabilities



Objective 3



To implement strategies for promotion and prevention in mental health



Targets

Objective 3 (mental health promotion and prevention)

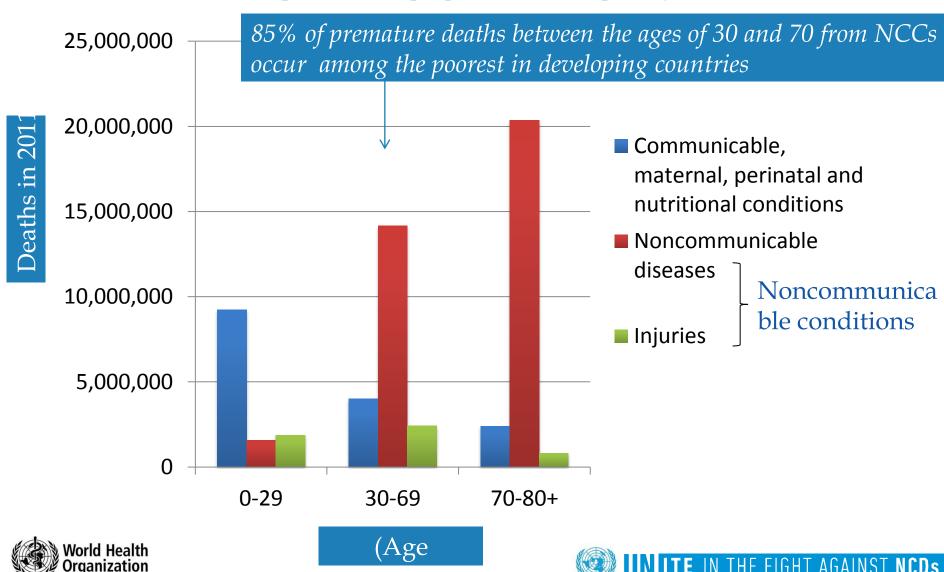
- 80% of countries will have at least two national, multisectoral mental health <u>promotion and</u> <u>protection programmes</u> functioning by year 2020
 - One universal
 - One targeted on vulnerable groups
- Rates of suicide in countries will be reduced by 10% by year 2020

Four types of NCDs are largely preventable by means of effective interventions that tackle shared modifiable risk factors for NCDs

		Causative risk factors			
		Tobacco use	Unhealthy diets	Physical inactivity	Harmful use of alcohol
Non-communicable diseases	Heart disease and stroke	√	√	√	✓
	Diabetes	√	✓	√	✓
	Cancer	√	√	√	✓
	Chronic lung disease	√			

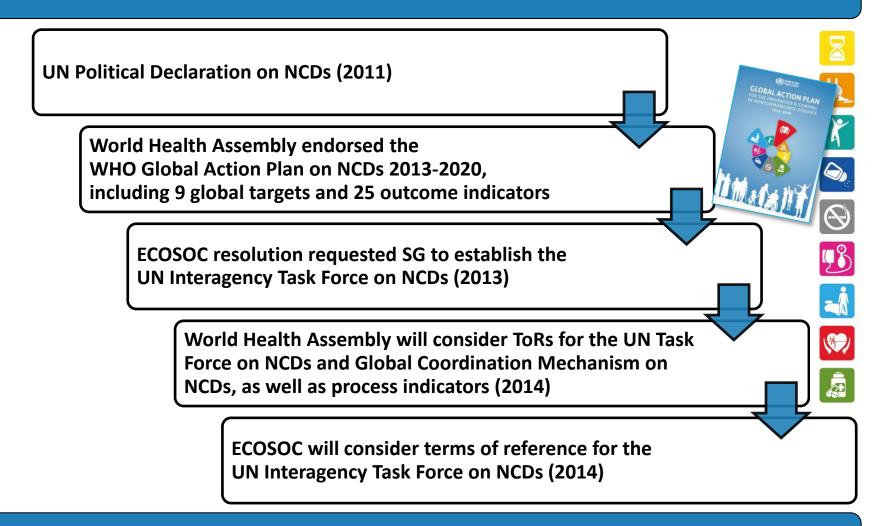
Why does WHO care so much about NCDs?

NCCs bring immense untold suffering, billions of dollars in losses of national income and trap millions of people into chronic poverty



World leaders mobilized a global response in September 2011. In 2014, the world will receive progress made in realizing the global response.

UNGA High-level Meeting on NCDs (2011)



UNGA NCD Review 2014

Realizing the commitments made in the Political Declaration on NCDs

> Progress made by WHO

1	WHO Global NCD Action Plan 2013-2020	
2	Nine global targets for NCDs to be attained by 2025	
3	25 outcome indicators for NCDs to measure progress towards the attainment of the nine global targets	
4	9 NCD action plan indicators to inform reporting on progress made in the process of implementing the WHO Global NCD Action Plan 2013-2020	
5	WHO Global Coordination Mechanism on the Prevention and Control of NCDs ("NCD-GCM")	<u> </u>
6	UN Interagency Task Force on the Prevention and Control of NCDs	
7	Report of the United Nations Secretary-General and the WHO Director-General on the progress made in realizing the commitments included in the UN Political Declaration on NCDs	
8	WHO Country Capacity Assessment on NCDs	
9	WHO Global Status Reports on NCDs in 2011 and 2014 (and 2010 global baseline)	
10	Technical assistance to developing countries based on a One-WHO work plan on NCDs	



Realizing the commitments made in the Political Declaration on NCDs

> Progress made by UN System, NGOs and the Private Sector

Commitment (UN Political Declaration on NCDs)	Progress since September 2011
 UN agencies: Call on UN agencies to work together in a coordinated manner to support national efforts (paragraph 51) 	ECOSOC resolution E/RES/2013/12 requested SG to establish the UN Interagency Task Force on NCDs
 NGOs: Foster partnerships between governments and civil society to support the provision of services (paragraph 55) 	Progress not measured by WHO
Private sector:Call on the private sector to take measures (paragraph 44)	Progress not measured by WHO



- Where do we stand?
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A set of Objectives...

Objective 1 To raise the priority accorded to the prevention and control of NCDs in global, regional and national agendas and internationally agreed development goals, through strengthened international cooperation and advocacy

Objective 2
To strengthen
national
capacity,
leadership,
governance,
multisectoral
action and
partnerships to
accelerate
country
response for the
prevention and
control of NCDs

Objective 3
To reduce
modifiable risk
factors for NCDs
and underlying
social
determinants
through
creation of
healthpromoting
environments

Objective 4 To strengthen and orient health systems to address the prevention and control of noncommunicab le diseases and the underlying social determinants through peoplecentred primary health care and universal health coverage

Objective 5
To promote and support national capacity for high-quality research and development for the prevention and control of NCDs

Objective 6
To monitor the trends and determinants of NCDs and evaluate progress in their prevention and control















Global Monitoring Framework 9 targets for 2025 **Premature** mortality from NCDs Harmful use 25% reduction **Essential NCD** of alcohol medicines and 10% reduction technologies 80% coverage **Physical** inactivity 10% reduction **Drug therapy** and counseling 50% coverage Salt/ sodium intake 30% reduction Diabetes/ obesity 0% increase Raised blood Tobacco use pressure 30% reduction Mortality and Morbidity 25% reduction Risk Factors for NCDs National Systems Response



Global Monitoring Framework 25 indicators

Mortality & Morbidity

Unconditional probability of dying between ages 30 and 70 years from cardiovascular diseases, cancer, diabetes or chronic respiratory diseases

Cancer incidence by type of cancer

Risk Factors

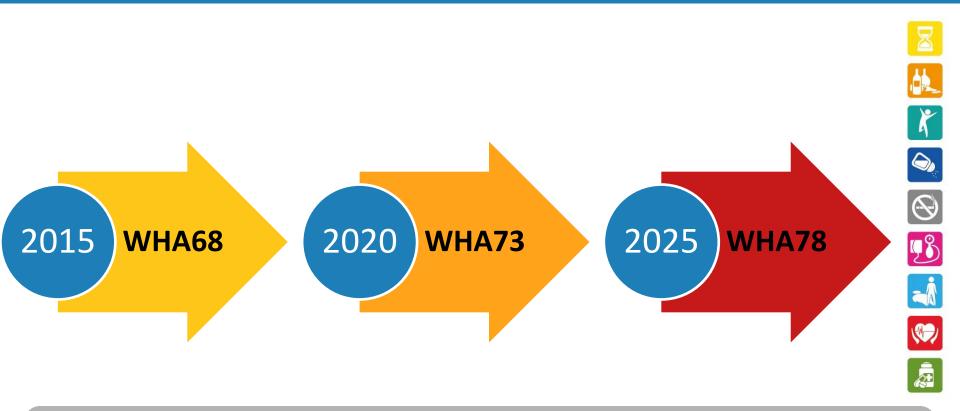
Harmful use of alcohol (3)
Low fruit and vegetable intake
Physical inactivity (2)
Salt intake
Saturated fat intake
Tobacco use (2)
Raised blood glucose/diabetes
Raised blood pressure
Overweight and obesity (2)
Raised total cholesterol

National Systems Response

Cervical cancer screening
Drug therapy and counseling
Essential NCD medicines & technologies
Hepatitis B vaccine
Human Papilloma Virus vaccine
Marketing to children
Access to palliative care
Policies to limit saturated
fats and virtually eliminate
trans fats



Reporting on indicators



2010 baseline





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Global NCD action plan (process) indicators

What is the current status following discussions at the WHO Executive Board?

- Formal meeting of Member States (Geneva, 15 November 2013) reached consensus on 9 action plan (process indicators)
- WHO Executive Board endorsed the process indicators

Number of countries with:

- At least one operational NCD plan
- A NCD unit
- Policy to reduce harmful use of alcohol
- Policy to reduce physical inactivity
- Policy to reduce the burden of tobacco use
- Policy to reduce unhealthy diets
- National guidelines for management of NCDs
- National policy on NCD-related research
- National NCD surveillance system
- Next steps:
 - 67th World Health Assembly will consider the indicators (May 2014)





Realizing the commitments made in the Political Declaration on NCDs

> Progress made by UN Agencies







Terms of reference for the UN Interagency Task Force on NCDs

What is the current status following discussions at the WHO Executive Board?

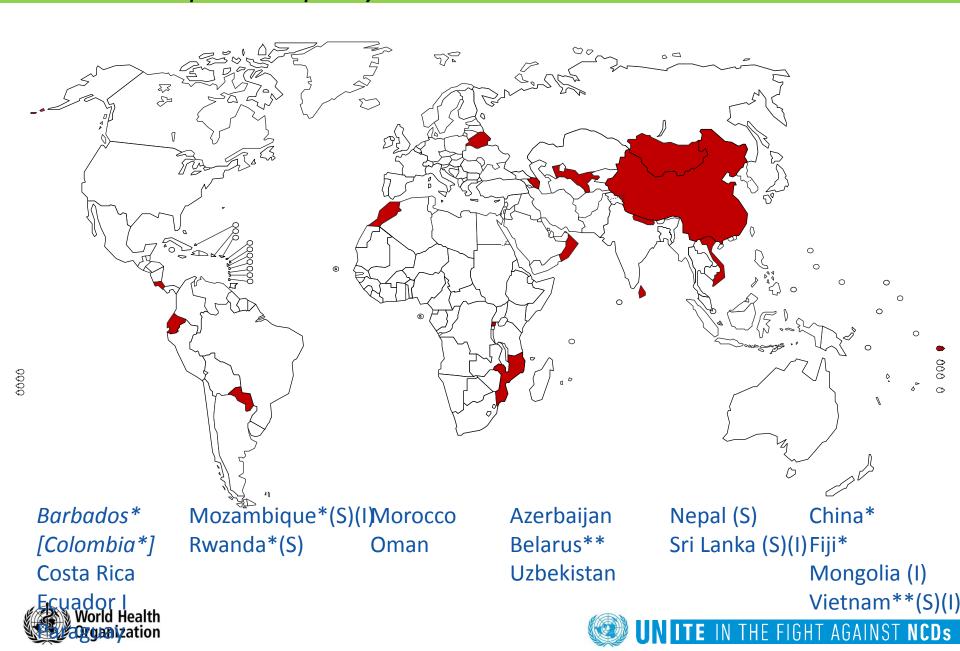
- Formal meeting of Member States (Geneva, 13-14 November 2013) reached consensus on ToR and division of tasks and responsibilities
- WHO Executive Board (20-24 January 2014) noted the consensus achieved
- Functions for the UN Interagency Task Force for NCDs (see document EB134/14 for full text):
 - Enhance and coordinate technical support
 - Facilitate information exchange about plans, strategies, programmes and activities
 - Facilitate information exchange about available resources to support national efforts
 - Strengthen advocacy
 - Ensure that tobacco control continues to be duly addressed
 - Strengthen international cooperation
- Next steps:
 - 67th World Health Assembly will consider the ToR (May 2014)
 - ECOSOC will consider the ToR (12-13 June 2014)





Phase I Countries

Upstream policy advice and technical assistance



UN Interagency Task Force – Work plan for the next 24 months

(under development)

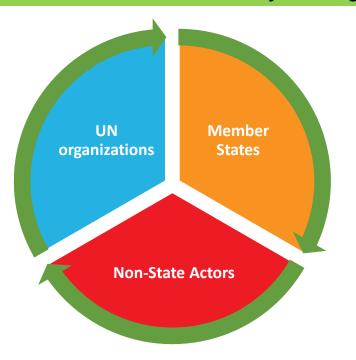
	Country level	Regional level	Global level
Governance	 Foster joint country analysis to build the business case for investment in NCDs in y countries Establish a "UN Thematic Group on NCDs" (in x countries) Engage as one UNCT in x "in-depth" (Phase I) countries to provide upstream policy advice and technical assistance on priority actions for Member States (see "Annex 6") using a standard protocol (see "slide") Strengthen (existing) national coordination mechanism on NCDs 	Reporting and advocacy at regional level	 Request OECD/DAC to establish a Creditor Reporting System Code to track ODA on NCDs Develop and disseminate a series of "how to" notes Develop a policy brief on NCDs and the right to health
Reduce risk factors and enable health systems to respond	 Map existing and planned activities Encourage the provision of technical assistance to address gaps, based on the mapping 	 Scale up national HPV immunisation programmes in 20 countries (WHO, UNICEF, GAVI as the leads). 	 Develop of a global joint programme for cancer control (WHO including IARC, IAEA, UNFPA as the leads). IATF contribution to NCD chapter in the UNICEF Facts for Life publication (UNICEF as the lead).
Monitor and measure results	 Encourage the provision of technical assistance to strengthen civil registration and vital statistics systems Encourage the provision of technical assistance to integrate NCD indicators into national information systems IdentififyNCD-relevant data and share as part of global reporting requirements 		 Work with the IATF Secretariat to finalise UN SG's reports to ECOSOC. Contribute to the comprehensive review and assessment by the UNGA of the progress achieved in the prevention and control of NCDs. Interface with the UN Statistical Division to promote the exchange of NCD-related data





Global Coordination Mechanism on NCDs

What is the current status following discussions at the WHO Executive Board?



Agreement on the objectives:

- Advocate for the urgency to implement the WHO Global NCD Action Plan 2013-2020
- Disseminate knowledge on best practices
- Provide a platform to identify barriers and share innovate solutions
- Advance multisectoral action
- Share information on existing and potential sources of finance and cooperation mechanism
- WHO Executive Board (20-24 January 2014) noted the work under way
- Further consultations of Member States in March or April 2014 on:
 - Responsibilities of participants
 - Working groups
 - WHO's role as the Secretariat
 - Work plan
 - Administrative arrangements
 - Accountability
 - Conflict of interest



Priority actions recommended for Member States

As noted by the WHO Executive Board

Action area	List of short-term commitments from governments for 2014-2015
Governance	 Set national targets for 2025 based on national situations (taking into account the 9 global targets for NCDs and WHO's efforts to collect data on outcome and process indicators in 2015) Develop national multisectoral policies and plans to achieve these targets in 2025, taking into account the WHO Global NCD Action Plan 2013-2020 Prepare for the United Nations General Assembly NCD Review in 2016
Reduce exposure to risk factors for NCDs	 Implement very cost-effective and affordable interventions (included in Appendix 3 of the WHO Global NCD Action Plan 2013-2020) as part of national NCD plans
Enable health systems to respond	 Implement very cost-effective and affordable interventions (included in Appendix 3 of the WHO Global NCD Action Plan 2013-2020) as part of national NCD plans
Measure results	 Strengthen national surveillance systems or NCDs Integrate surveillance systems for NCDs into the national health information systems, to ensure to ensure collection of data on the 25 indicators and progress toward the 9 voluntary global targets for NCDs Contribute information on trends in NCDs to WHO coordinating country reporting with global analyses.



New global assignment for WHO

Proposed by the WHO Executive Board to the World Health Assembly

- Resolution endorsed by the WHO Executive Board
- Resolution will be presented to the World Health Assembly in May 2014
- Requests the WHO Director-General to prepare, for the consideration, by the Sixty-eighth World Health Assembly (2015), in consultation with Member States, United Nations organizations, and other relevant stakeholders, as appropriate, a Framework for Country Action, for adaptation to different contexts, taking into account the Statement of the 8th Global Conference on Health Promotion (Helsinki, 2013), aimed at supporting national efforts to improve health, ensure health protection, health equity and health systems functioning, including through action across sectors on determinants of health and risk factors of for noncommunicable diseases, based on best available knowledge and evidence.

- Where do we stand?
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- First round of informal consultations (New York, 29 January 2014)
 - Date(s)
 - Level of participation
 - Format and duration
 - Scope
 - o Outcome
- 10 February 2014: UNGA reviewed the SG/DG's progress report on the implementation of the Political Declaration NCDs
- 6 March 2014: Co-Facilitators circulated a "zero draft" modalities resolution
- 18 March 2014: Final round of informal consultations on the modalities resolution



UN General Assembly NCD Review 2014

Possible elements for an outcome document: What we hear from Member States



Set national targets

Member States to consider, by 2015, the development of national targets for 2025 based on national situations, taking into account the 9 voluntary global targets adopted by the 66th World Health Assembly (May 2013), and building on guidance provided by the World Health Organization, to focus on efforts to address the impacts of NCDs



Develop national plans

Member States to develop, by 2015, multisectoral national policies and plans for the prevention and control of NCDs to attain national targets, taking into account the 2013-2020 WHO Global Action Plan for the Prevention and Control of NCDs.



Reduce exposure to risk factors

Member States to implement, by 2015, as part of a national multisectoral plan, "best buys" and very cost-effective interventions to reduce the exposure to risk factors for NCDs as part of these national plans.



Enable health systems to respond

Member States to implement, by 2015, as part of multisectoral national polices and plans, "best buys" and very cost-effective interventions to enable health systems to respond to the NCD challenge of epidemic proportions



Measure results

Member States to implement, by 2015, the WHO Framework for NCD Surveillance covering (i) monitoring of risk factors and determinants; (ii) outcomes (mortality and morbidity) and (iii) health system response, as well as to integrate NCDs into the national health information systems, and develop national indicators taking into account the global ones.



UN General Assembly NCD Review 2014

Possible elements for an outcome document: What we hear from Member States



Global tracking

Member States to assess the national progress made in the prevention and control of NCDs in 2015 and report progress to the WHO Secretariat for reporting to the 68th World Health Assembly in 2016.



Global leadership

Reaffirm WHO's leadership and coordination role in promoting and monitoring global action against NCDs in relation to the work of other relevant UN agencies, development banks and other international organizations.



New global assignment for WHO related to missing piece of normative guidance: Call upon the World Health Organization, with the full participation from Member States, and in collaboration with United Nations organizations, building on continuing efforts, to develop, before the end of 2014, a country framework for action to engage non-health sectors in the prevention and control of NCDs.

One WHO Work Plan 2014-2015 What is it?

- Method of work for WHO to implement the actions for the WHO Secretariat included in the WHO Global NCD Action Plan 2013-2020 in a coordinated manner, including:
 - Across the three levels of WHO
 (Country Offices, Regional Offices, Headquarters)
 - Across the WHO Categories included in the WHO Programme Budget 2014-2015 (e.g. communicable diseases, maternal health, emergencies)



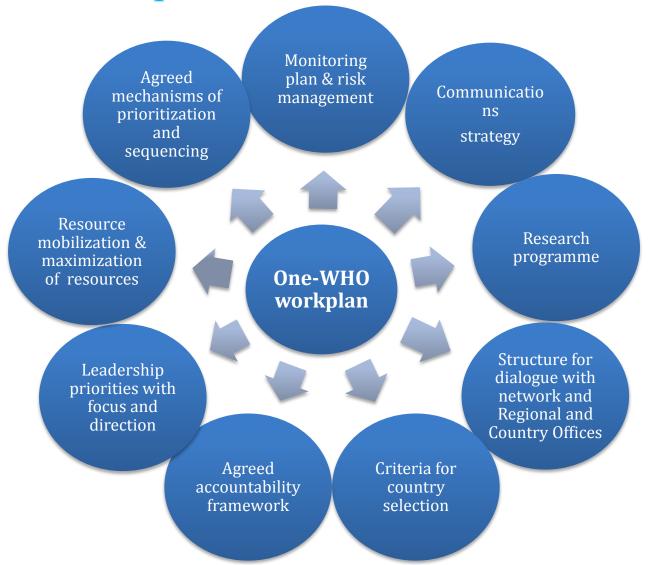
How One-WHO workplan aligns with the WHO reform

Three distinct and interconnected fields of work driving the WHO Reform:

- 1. Programmes and priority setting
- Governance reform
- 3. Managerial reform



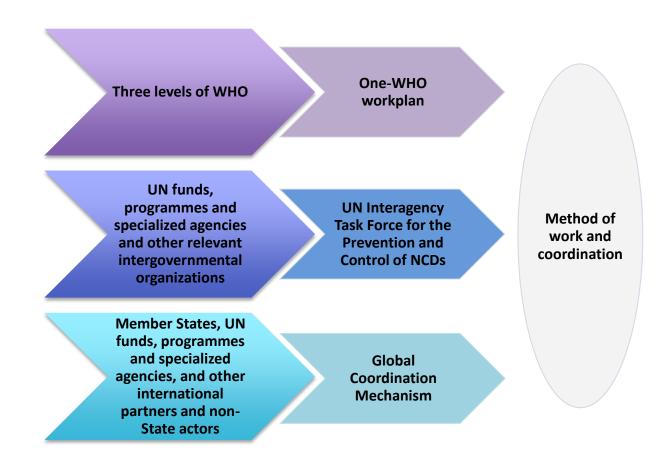
One-WHO workplan as method of work







Three synergistic methods of work and coordination







Major achievements in 2012-2013

Noncommunicable diseases:

- WHO Global NCD Action Plan 2013-2020
- WHO Global Action Plan for the Prevention of Avoidable Blindness.

Mental health and substance use:

WHO Comprehensive Mental Health Action Plan 2013-2020

Violence and injuries:

- UN Decade of Action for Road Safety 2011-2020
- Global Campaign for Violence Prevention

Disabilities and rehabilitation:

 Outcome Document of the UN High-level Meeting on Disability and Development

Nutrition:

 WHO Comprehensive Implementation Plan on Maternal, Infant and Young Child Nutrition 2012-2025





Major milestones in 2014-2015

Noncommunicable diseases:

- Support governments in setting national NCD targets, developing national multisectoral NCD plans to attain these targets, measuring results and integrating NCDs into UNDAF roll out processes
- WHA67: Terms-of-reference for the Global Coordination Mechanism on NCDs
- ESOCOC: Terms-of-reference for the UN Interagency Task Force on NCDs
- UNGA: NCD Review 2014
- WHA68: Framework for Country-level Action to engage non-health sectors in addressing NCDs

Mental health and substance use:

- Collect base-line indicators
- Support governments in setting national targets and developing national plans
- World Report on Suicide Prevention (2014)

Violence and injuries:

- UN Decade of Action for Road Safety 2011-2020 2nd Ministerial Conference
- Global Campaign for Violence Prevention 1st ever Global Status Report
- WHA68: Global Action Plan to combat interpersonal violence

Disabilities and rehabilitation:

WHA67: WHO Global Disability Action Plan 2014-2021

Nutrition:

- Global nutrition monitoring framework (for 2012-2025 Comprehensive Plan)
- Support governments in setting national targets and developing national plans





From planning to country action

- Multisectorial plans
- Engagement of other actors
- Speed of action
- Country action
- Integrated action
- Social movement



THANK YOU





