

The NCD Alliance

Putting non-communicable diseases
on the global agenda

NCD Alliance Morning Webinar Thursday 21 March 2013



Moderator:

Johanna Ralston, CEO, World Heart Federation

Speakers:

Mandana Kooijmans, NCD Alliance

Sania Nishtar, Heartfile

Katie Dain, NCD Alliance

Opening Remarks

Agenda

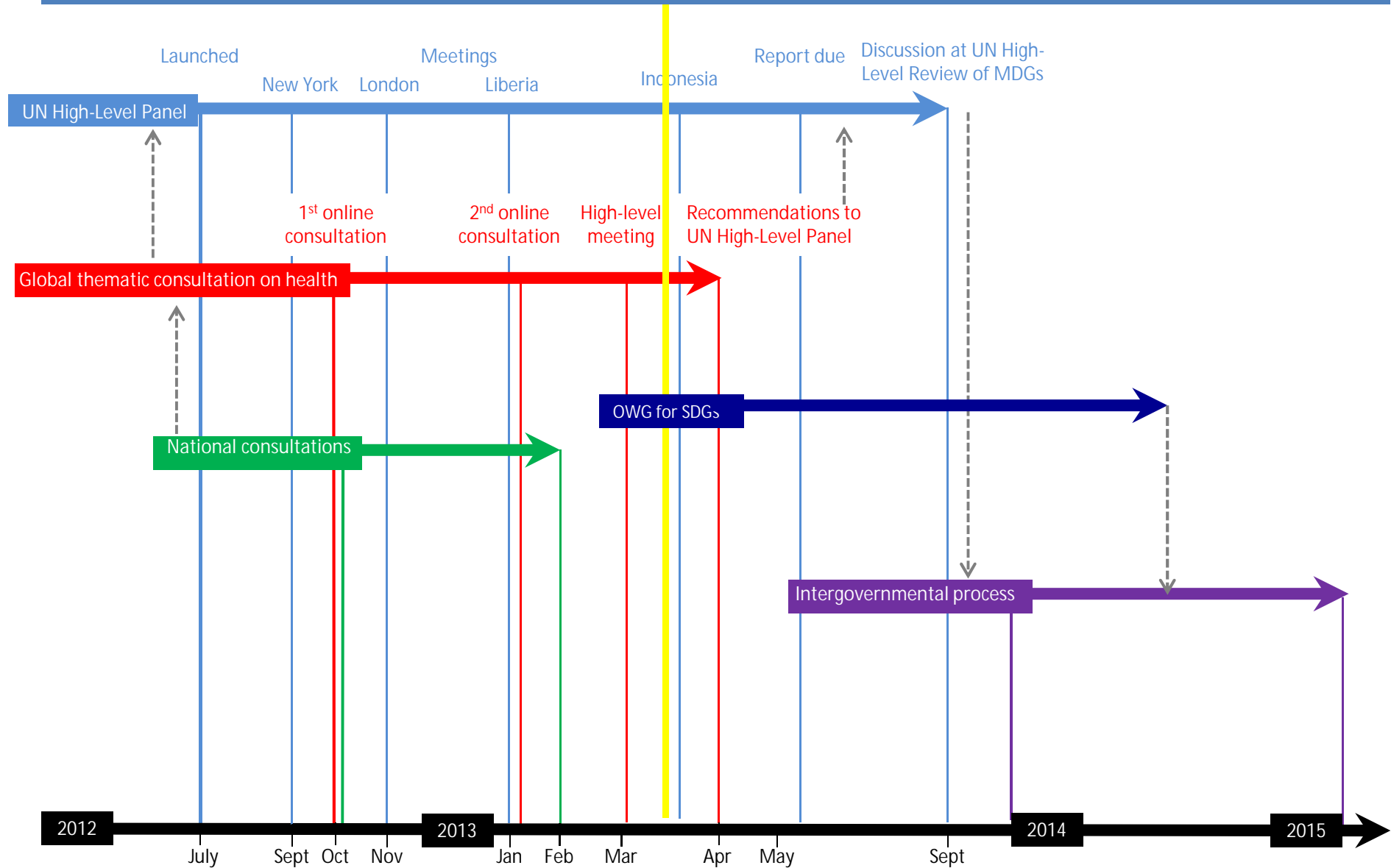
1. Global Development Campaign Update
 - Post-2015 process
 - Outcomes of Botswana High-Level Dialogue
 - Next steps
2. Global NCD Framework Campaign Update
 - Outcomes of WHO consultations on Global NCD Action Plan 2013-2020
 - Next steps
3. World Health Assembly

Global Development Campaign Update

Outline

- Update on the post-2015 process – Mandana Kooijmans, NCDA
- Outcomes of Botswana High-level Dialogue on Health in Post-2015 - Dr Sania Nishtar, Heartfile
- NCDA position and next steps – Mandana Kooijmans, NCDA

Post-2015 Development Timeline



UN High-Level Panel on Post-2015

- Next meeting: 25-27 March in Bali, Indonesia
- Theme of the meeting: Global partnership and cooperation for development
 - Focus on strategies/means of implementation
 - MDG 8: Global partnership for development
 - A post-2015 framework that is “post-MDG 8”
- Draft report in mid-May
- Final report due end of May
 - Likely to have framework, priorities for post-2015 agenda

More information on the Bali meeting can be found here:

<http://www.balipost2015.org/>

Open Working Group on Sustainable Development Goals (SDGs)

- Outcome of Rio+20
- Established 22 January 2013
 - 30 seats for Member States, some seats shared
- Began work 14 March 2013
- Discussion:
 - MDGs, focus on poverty eradication as starting point
 - Address all 3 pillars of sustainable development
 - Consider HLP recommendations in OWG outcomes
- A single, coherent development agenda
- Ready to discuss SDGs by Q3 2014

More information on the OWG can be found here:

<http://sustainabledevelopment.un.org/index.php?menu=1549>

Global Thematic Consultations Common Themes

- MDG priorities as a starting point
 - Retain focus on poverty eradication
 - A few goals that are clear, concise, universal in nature and national in application, time-bound
 - Core values:
 - Human rights, equity, sustainability, gender equality, governance/democracy
 - Means of implementation will underpin framework
- <http://www.worldwewant2015.org>



Health Thematic Consultation Process

- Online consultations, Nov-Dec
- Draft synthesis report on health in post-2015, 28 Feb:
 - Available here: <http://www.worldwewant2015.org/health>
 - NCD Alliance submission: <http://ncdalliance.org/un-global-thematic-consultations>
- High-Level Dialogue, Botswana, 5-6 Mar:
 - NCD community representation: Sania Nishtar/Srinath Reddy
- Final report on health in post-2015 due April:
 - Will draw from draft synthesis report, High-level dialogue, online, national, and regional consultations.


High-Level Dialogue on Health in Post-2015 Botswana, 5-6 March



Dr Sania Nishtar, Heartfile



Overview

- Gabarone, Botswana: 5-6 March
 - 50 participants from government, UN agencies (H8), civil society, and private sector
 - Objectives:
 - Stimulate discussions on health in the post-2015 agenda
 - Develop shared understanding
 - Examine current and future priorities
 - Outcome:
 - An understanding on health in the post-2015 agenda, to inform the HLP's report
- 



Structure of Discussions

- Lessons learned from health-related MDGs
 - Role of health in post-2015 development agenda
 - Health priorities for post-2015
 - Framing the future agenda for health – principles, goals and indicators
 - How key stakeholders and partners can best position health in post-2015
- 




Taking Stock on the Health MDGs

Strengths:


- Transformed political agendas and commitment
- Platform to develop partnerships between governments, donors and civil society

Weaknesses:

- MDGs contributed to siloed top-down technocratic approach to health which undermined health systems
 - Omission of certain health priorities, specifically NCDs.
 - Lack of attention to broader determinants of health including a life-course approach.
- 



Health Priorities for Post-2015

- Current health-related MDGs (4, 5 and 6)
 - Sexual and reproductive health
 - Youth and adolescents
 - Non-communicable diseases, including mental health
- 



Principles for Health in Post-2015


- Measurable, time bound and outcome-based
- Universal
- People-centred and rights-based
- Focus on the marginalised
- Life course approach
- Social determinants
- Equity “hard-wired” into goals and targets

Challenge: aspirational yet pragmatic, universally accepted yet adaptive to specific circumstances





Potential Framework

- Overarching goal
 - Maximizing health at all stages of life (HLE)
 - Health sector goals
 - Accelerating progress on the health MDGs
 - Reducing the burden of major NCDs
 - Key contributor
 - Universal Health Coverage
 - Health-related targets across other dimensions
- 



Debated Issues

- Healthy life expectancy or healthy years life lost?
- Universal health coverage or universal health access?
- UHC a means or an outcome?



Q&A

NCD Alliance Position

- Health remain central in post-2015 framework
- Health integrated across all dimensions, health-sensitive indicators beneath all goals
- Lifecourse approach
- An overarching goal focused on healthy life expectancy, to capture wellbeing
- Measurable targets on prevention and control of NCDs toward achievement of “25 by 25” goal
- Link to NCD global monitoring framework, including 9 targets agreed in November 2012
- UHC as an enabler to achieve health goal

Read full NCDA position here:

<http://ncdalliance.org/un-global-thematic-consultations>

Next Steps

NCDA policy brief on NCDs and post-2015:

- Ad-hoc task team to advise/support NCDA position
- Soliciting input from network member on specific areas

Catalysing dialogue at WHA:

- NCDA high-profile event on NCDs in post-2015
- Road-testing recommendations

Uniting with other global health NGOs/alliances:

- Content of post-2015 and the global health architecture required to deliver it

Global NCD Framework Campaign Update

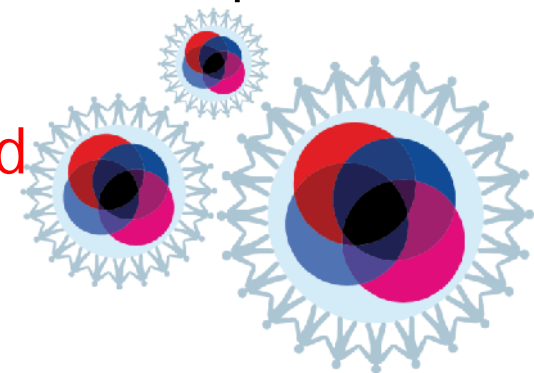
Outline

- Global NCD Action Plan 2013-2020:
 - Overview of GAP process
 - 3rd round of WHO informal consultations on GAP:
 - Scope and purpose
 - Costing and resources
 - Content
 - Appendices
 - Global coordination mechanism
 - UN Task Force on NCDs
 - Reporting Cycle
 - Summary of NCDA headline messages on GAP
 - Next steps

Global NCD Action Plan 2013-2020

Overview of Process

- 11 Jan: WHO first draft of GAP published
- 21/22 Jan: WHO Executive Board discussion on first draft
- 11 Feb: WHO revised draft of GAP published
- 11 Feb-10 Mar: WHO online consultation (open to NGOs and private sector)
- 6-13 Mar: WHO informal consultations with NGOs, private sector and member states
- 15 Mar: WHO updated draft GAP published
- 15-29 Mar: WHO online consultation (open to NGOs and private sector)



NCD Alliance Response

NCD Alliance Detailed Submission (NCD Alliance Task Team)

The NCD Alliance
 Ending non-communicable diseases on the global agenda

NCD Alliance response to the revised draft Global Action Plan for the Prevention and Control of Non-Communicable Diseases 2013-2020

The NCD Alliance welcomes the revised draft of the Global Action Plan for the Prevention and Control of Non-Communicable Diseases 2013-2020 and acknowledges the significant progress since the previous iteration. The revised draft Global Action Plan (GAP) under the leadership of the WHO Director-General, acknowledges the need for integration of NCDs into global development processes and focuses on a multisectoral approach to the prevention and control of NCDs.

In this document, we as a collective propose a number of changes to the draft document to ensure that the revised draft, like the original document, supports four overarching goals of the forthcoming WHO Instrumental Consultation:

- Leadership, alignment**
 - The plan is approved by the WHO, led by the WHO Director-General and endorsed by all relevant UN agencies and international partners to harness the power of the entire UN system.
 - The plan of the GAP as an implementation plan for the Political Declaration will be achieved through greater specificity and concrete action-oriented language. Support the development of a number of plans for illustrative purposes to indicate concrete understanding of action required across a range of sectors.
 - The GAP must be implementable and applicable in all countries. It should include priority actions for both low and middle income countries (LMIC) and high income countries (HIC).
- Integrating objectives and action points**
 - Support further integration of the overarching principles and approaches (including human rights, universal equity, equity in gender equality, financial and environmental) into the operational action points.
 - Support a table to provide overarching goals, objectives and action points. Use this table to link the objectives to action points, risk reduction and early detection/curative services, primary care, and developing a fully integrated health workforce and create clear pathways and mechanisms to deliver, implement and evaluate services in secondary and tertiary care.
- Measuring and accountability**
 - To achieve intended results, the GAP needs to be fully funded and adequately resourced. Support a new section in the GAP on "financing", with a strong, WHO focused and administrative implications, and also for resource mobilization.
 - The plan should propose mechanisms to engage and mobilize stakeholders to support implementation, including a global coordination mechanism (GCM) (described in 4 in the GAP) in line with NCDs recommendations in the relevant countries.
- Measuring progress, reporting and accountability**
 - Each of the six objectives should have dedicated targets and indicators to measure progress, including drawing from the set of targets in the Global Monitoring Framework (GMF) and additional process indicators.
 - Low and middle income countries reporting system to measure progress and also any action to achieve support annual reporting to the World Health Assembly (WHA) on implementation of the GAP. Annual reporting under the GMF, and reporting to the UN General Assembly on a regular basis.
 - Leverage the UN Secretary-General's Progress Report on the Political Declaration in 2013 and the UN High Level Panel of Experts' report on NCDs to ensure progress against the GAP.

The NCD Alliance was founded by:

NCD Alliance Advocacy Handout

The NCD Alliance
 Ending non-communicable diseases on the global agenda

The Global Action Plan for the Prevention and Control of NCDs 2013-2020

The WHO Alliance welcomes the progress made by WHO and Member States over the last year in defining the pathway towards the Global Action Plan. With the agreement of the Global Monitoring Framework (GMF) and a set of country global NCD targets, we now have a clear and ambitious plan for what we want to achieve. Now Member States have an opportunity to shape a Global Action Plan for NCDs 2013-2020 that will provide a roadmap for operationalizing that vision and a global coordination mechanism (GCM) that will provide the means to establish a global action plan for the prevention and control of NCDs.

The NCD Alliance calls on Member States to support the pathway towards the Global Action Plan (GAP):

- Leadership, alignment and support**
 - Ensure the global action plan is led by the WHO Director-General and endorsed by all relevant UN agencies and international partners to harness the power of the entire UN system.
 - The plan of the GAP as an implementation plan for the Political Declaration will be achieved through greater specificity and concrete action-oriented language. Support the development of a number of plans for illustrative purposes to indicate concrete understanding of action required across a range of sectors.
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The proposed structure for the Global Coordination Mechanism for NCDs:

NCD Alliance Participation in WHO Consultations



<http://ncdalliance.org/revised-draft-global-ncd-action-plan-2013-2020>

3rd Round of Informal Consultations on GAP

Timetable:

- 6 Mar – NGO consultation
- 7 Mar – Private sector consultation
- 11-13 – Member state consultation

Items for Discussion:

- Scope and purpose of GAP (aim, vision, principles)
- Costing and Resources
- Content of GAP (objectives and action points)
- Appendices (appendix 3 and 4)
- Global Coordination Mechanism
- Reporting cycle



Scope and Purpose

Main Discussion Points:

- Aim - political vs. implementation
- Focus - Universal vs. low- and middle-income country focus
- Length of document (shorter companion doc)
- Principles: rights; international cooperation and solidarity; universal health coverage; multisectoral; conflict of interest; life course
- Actions vs. policy options



Costing and Resources

Actions for Secretariat:

- GAP 2008-2013: \$120 million per biennium
- GAP 2013-2020: \$240 million per biennium*

* Includes \$6 million per biennium for Global Coordination Mechanism

Actions for Member States:

- \$11.4 billion: Average yearly cost to implement core set of interventions for all low- and middle-income countries*

* WHO scaling up action report

Actions for International Partners:

- Not costed

Estimated Proposed WHO Programme Budget 2014-2015

- Category 2 NCDs: US\$ 320 million
- NCDs only: US\$160 million

Content

	1 International Cooperation + Advocacy	2 National Capacity + Multisectoral Action	3 Reduce Risk Factors	4 Strengthen Health Systems	5 Research and Development	6 Monitoring + Evaluating Progress
Member States	National/ regional development agendas	Function not form	Social determinants	Palliative care TRIPS language		
WHO Secretariat	Removal of human rights agencies	Global coordination mechanism				Mid-term evaluation
Int'l Partners		Removed actions for international partners (reference paras under objective 1)				

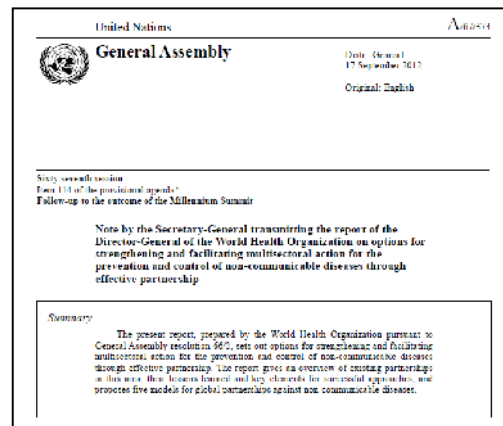
Appendices

- Appendix 1 – Synergies:
 - Alzheimer’s disease added
- Appendix 3 – Priority Actions:
 - Applicable to all countries – collapsed appendix 3 and 8
 - Implementation section
 - Combines best buys and an expanded set of actions
 - Living document
 - Significant inconsistencies – level of detail across objectives; policy options/cost-effective interventions/summary of text
- Appendix 4 – Initial Division of Labour for UN Agencies:
 - Similar to UNAIDS - to mobilise the UN system to work “as one”
 - Being developed by UN Task Force on NCDs
- Deleted previous Appendix 4 (Global Coordination Mechanism) and 6 (Process Indicators)

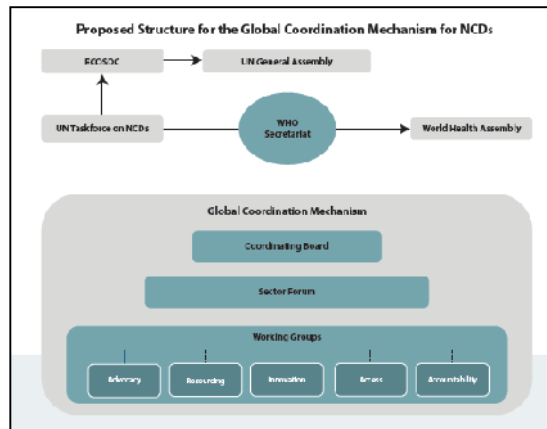
Global Coordination Mechanism

- Mandated in the UN Political Declaration on NCDs
- WHO consultation process started a year ago
- UNGA discussion in November 2012

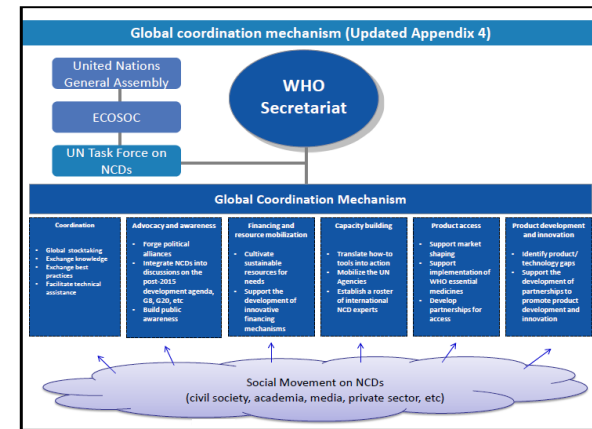
Options and Proposals:



UN Secretary General Report, Oct 2012



NCD Alliance GCM Proposal, Nov 2012



WHO GCM Proposal, Feb 2013

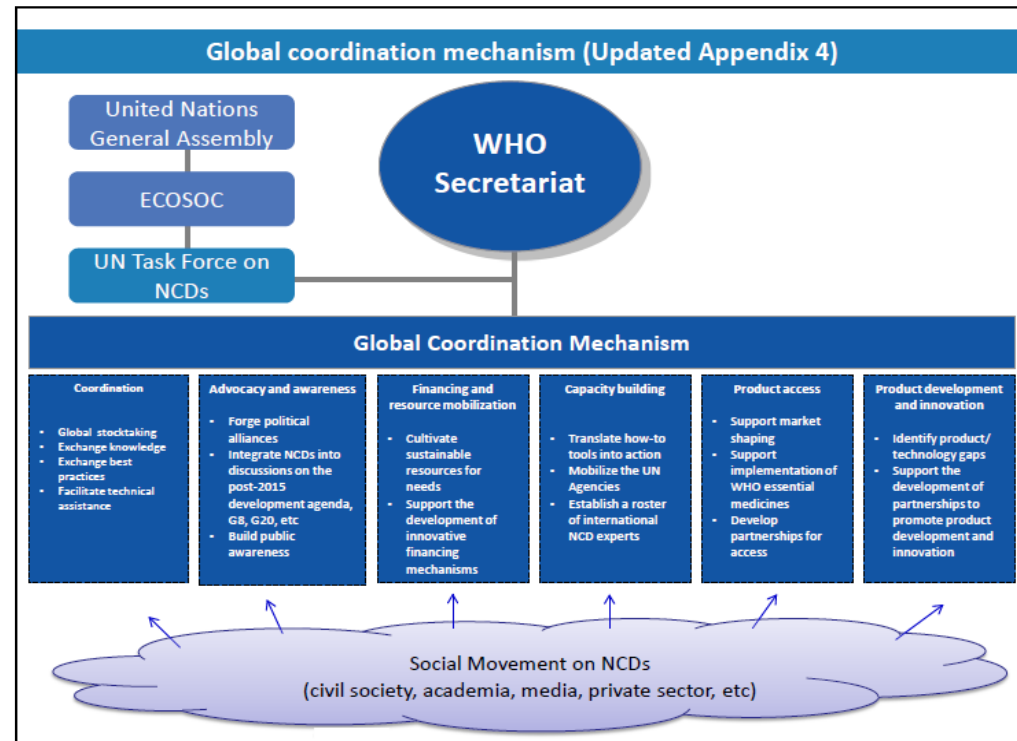
Global Coordination Mechanism

WHO Proposal:

- Options 2 and 3 of UNSG report (coordinated network + social movement)
- Light-touch mechanism, housed within WHO
- Focusing on 6 functional gaps
- Modelled on WHO NCDnet and UN Road Safety Collaboration

Key Discussion Points:

- Recognition of the need for a GCM
- Leadership role of WHO
- Reporting
- Questions around social movement
- Focus on principles – not structure



WHO GAP, 11 Feb: Appendix 4

Global Coordination Mechanism

Remaining Issues:

- Formal vs. informal
- Resourcing and leadership
- Translating global coordination to regional and national levels
- Timeline for establishing GCM

UN Task Force on NCDs

- Informal interagency meetings since December 2011
- Met five times, most recently in Geneva in last week
- Catalysed joint programmes on NCDs – including WHO/UNDP; WHO/UNAIDS; ITU; IAEA
- Plans to formalise task force at ECOSOC in Geneva in July, potentially merging with UN Task Force on Tobacco Control
- The UNTF will have strong linkages with the GCM
- UNTF reporting into ECOSOC
 - Likely the vehicle for regular reporting on NCDs to the UN General Assembly, including GCM reporting

Recent UNTF report: http://www.who.int/nmh/events/2013/4th_meeting.pdf

Reporting Framework

	UN General Assembly	WHO Secretariat	World Health Assembly			Advocacy	
	Progress report on the Political Declaration on NCDs	Evaluation	Progress report on the implementation of the Action Plan	Progress report on Global Monitoring Framework	Performance assessment reports on Programme Budgets	WHO Global Status Report on NCDs	World Health Report
2013	✓					✓	
2014	★						✓
2015			✓	✓			
2016					✓	✓	
2017		Mid-term					
2018			Ad-hoc		✓		
2019						✓	
2020			✓	✓	✓		
2021		Final					
2025				✓			

Summary Points on GAP

- Revise principles – particularly rights, gender, equity
- “Actions” not “policy options” for member states
- Include actions for international partners across all 6 objectives
- Strengthen description of global coordination mechanism – scope aligned to GAP
- Improve Appendix 3 – priority actions; consistent across objectives
- Reporting cycle - every two years for GMF on targets; interim targets for 2015 and 2020; regular reporting to UN (UNSG report and review)

Next Steps

- WHO online consultation:
 - Revised draft available here:
http://www.who.int/nmh/events/2013/consultation_201303015/en/index.html
 - Deadline 29 March - ncdactionplan@who.int
- NCD Alliance response:
 - Headline messages – Monday 25 March
 - Detailed submission - Wednesday 27 March
 - Coordinated advocacy across cross-regional discussions
- Actions:
 - Send your comments on GAP to info@ncdalliance.org
 - Send submission / main points to your government and WHO

Q&A

World Health Assembly Update

World Health Assembly

- WHA, Geneva – 20-25 May 2013
- A major milestone for the global NCD response
- NCD “Omnibus Resolution” could:
 - Adopt Global monitoring framework (GMF)
 - Adopt Global Action Plan 2013-2020 (GAP)
 - Describe Global Coordination Mechanism (GCM)
 - Recommend reporting cycle (including process indicators)
 - Reference post-2015 and UHC
- Negotiations starting now!
- NCD Alliance event: NCDs in the post-2015 development agenda
 - Monday 20 May 2013, Geneva Press Club

The NCD Alliance

Putting non-communicable diseases
on the global agenda

Thanks for joining the call.
Please visit our website:
www.ncdalliance.org

