

NON-COMMUNICABLE DISEASES (NCDs): CENTRAL TO THE POST-2015 DEVELOPMENT FRAMEWORK

The NCD Alliance

Summary

The full integration of NCD prevention and control into the post-2015 framework will result in:

- Acceleration of progress towards the achievement of existing development goals;
- Improved long-term health outcomes;
- Sustainable human and economic development.

Background

The poverty and development context has changed dramatically in the past two decades. Significant progress has been made across many of the Millennium Development Goals (MDGs), but global trends and patterns of inequality, demography, migration, urbanization, consumption and production are creating new challenges that threaten to derail development. UN Member States are in consensus that one of these major challenges to development is the growing epidemic of non-communicable diseases (NCDs).¹ The UN High-Level Meeting on NCDs in September 2011, coupled with the unanimous adoption of the Political Declaration on the Prevention and Control of NCDs², clearly posits NCDs as a development priority. NCDs affect all areas of human and economic development and are threatening progress towards existing development goals.

The Burden in Low- and Middle-Income Countries (LMICs)

NCDs account for two out of three deaths and half of all disability worldwide.³ NCDs are now exacting a heavy and growing toll on the physical health and economic security of LMICs.

- Increasing fastest in LMICs: NCDs are now the leading cause of death in LMICs, representing 29 million of the 36 million NCD deaths every year. In absolute terms, deaths from NCDs in LMICs are projected to rise by over 50% by 2030, with the largest increase in Sub-Saharan Africa and South Asia.⁴
- Affecting populations in LMICs at a younger age: NCDs kill at a younger age in LMICs, where nearly 30% of NCD deaths occur before the age of 60, compared to 13% in high-income countries.⁵
- Disproportionately impacting on vulnerable and marginalized populations: NCDs such as diabetes impact disproportionately on vulnerable populations such as indigenous people and slum dwellers.

The Impact on Economic Development

NCDs are more than just a health issue, impeding on economic growth at the global and national level by adversely affecting labor supply, productivity, and investment. They also cause and sustain impoverishment at the household level.

- Foregone national income: NCDs are estimated to cause cumulative economic losses of nearly \$500 billion USD per year, for a total of \$47 trillion USD by 2030. This loss is equivalent to approximately 75% of the 2010 global GDP.⁶
- Household poverty: Out of pocket payments for NCD treatment and care can trap poor households in cycles of catastrophic expenditure, impoverishment, and illness, particularly in LMICs that lack social and health insurance. NCDs diminish household earnings and hinder a family's ability to provide for and educate children.⁷

¹ For the purposes of this paper, "NCDs" refers to four main diseases: cardiovascular disease, cancer, chronic respiratory disease, and diabetes. These diseases share four common risk factors: tobacco use, unhealthy diet, physical inactivity, and the harmful use of alcohol. A broader definition of NCDs includes mental and neurological disorders (including Alzheimer's Disease and dementia), oral, renal, eye, and other diseases.

² A/66/L.1 Political declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases. Sept 2011

³ Beaglehole R, et al. UN High-level Meeting on Non-communicable Diseases: addressing four questions. The Lancet. 13 June 2011.

⁴ World Health Organization, Global Status Report on Noncommunicable Diseases 2010, April 2011.

⁵ Ibid.

⁶ World Economic Forum and Harvard School of Public Health, The Global Economic Burden of Non-communicable Disease, September 2011.

⁷ Adeyi O, Smith O, Robles S. Public policy and the challenge of chronic non-communicable diseases. Washington: World Bank, 2007.

- Lost productivity: In many LMICs, NCDs are affecting populations at younger ages, resulting in longer periods of ill health, early death of the main income earner, and a greater loss of productivity that is vital for development.⁸

The Impact on Human Development

NCDs are linked to and affected by all aspects of human development, including poverty, gender equity, and other health issues such as infectious diseases and maternal health. NCDs also share many risks and solutions with sustainable development issues such as climate change, urbanization, food security, clean energy, and water and sanitation. Because of the cross-cutting, multi-sectoral nature of NCDs, investing in NCD prevention and control is proven to deliver significant and measurable benefits for a number of human development indicators. Here are some examples of the linkages between NCDs and existing development goals:

- MDG 1: Poverty: NCDs can be caused by poverty and contribute to impoverishment. A reduction of adult NCD mortality promotes poverty reduction,⁹ and subsidized NCD care reduces impoverishment.¹⁰
- MDG 3: Gender equity: NCDs are the leading cause of death in women in most countries. Prevention of NCDs promotes women's health, and the provision of care for NCDs increases opportunities and promotes empowerment for women and girls.
- MDG 4 + 5: Maternal and child health: Poor maternal health and undernutrition increases the risk of NCDs (particularly diabetes and cardiovascular disease) in future generations, and certain NCDs (gestational diabetes) if undiagnosed can be life-threatening maternal health issues.
- MDG 6: Infectious diseases: NCDs are strongly linked with infectious diseases, including HPV causing some cervical cancer; tobacco use increasing the risk of TB and diabetes increasing new cases of TB;¹¹ and people living with HIV/AIDS often having high rates of NCDs.¹²
- MDG 7: Environmental sustainability: Policies for NCD prevention, including public transport, walking, and cycling, have a positive effect on climate change.¹³ Environmental pollution increases cancer and lung disease incidence rates.

Implications for the Post-2015 Development Framework

For the post-2015 development framework to safeguard progress made on the MDGs and drive sustainable and equitable development, health must be at the heart of the framework. The definition and approach to health must however be redefined in order to reflect the current health landscape and priorities of LMICs in 2015. By doing so, the impact of health on the other human development indicators will be greater.

- Definition of health: The evidence and political momentum clearly demonstrate that NCDs are one of the major health challenges for LMICs. To date, the definition of health in the MDGs has focused on infectious diseases and maternal and newborn child health. The revision of the development framework should therefore be seen as an important opportunity to improve and expand this definition to encompass NCDs and better reflect the health landscape of LMICs.
- Approach to health: Integrating NCD prevention and control into the post-2015 development framework will drive a new approach to health, underpinned by multi-sectoral action and health system strengthening, that will benefit people across their life course and across all health issues. While the MDGs have undoubtedly driven progress in health in LMICs, they have resulted in a disease-specific, vertical, and siloed approach. Impressive gains have been made in certain diseases at the expense of others, and LMICs are now faced with distorted health systems that are ill-equipped to respond to the NCD burden and people with multiple conditions.

⁸ World Bank, *The Growing Danger of Non-Communicable Diseases - Acting Now to Reverse the Course*, September 2011.

⁹ Stuckler D, Basu S, McKee M. Drivers of inequality in Millennium Development Goal progress: a statistical analysis. *PLoS Med* 7(3):e1000241. doi:10.1371/journal.pmed.1000241

¹⁰ Shi W, Chongsuvivatwong V, Geater A, et al. Effect of household and village characteristics on financial catastrophe and impoverishment due to health care spending in western and central rural China: a multilevel analysis. *Health Res Policy Syst* 2011; 9: 16.

¹¹ Creswell J, Raviglione M, Ottmani S, et al. Tuberculosis and noncommunicable diseases: neglected links and missed opportunities. *Eur Respir J* 2011; 37: 1269–82.

¹² Blanco F, San Román J, Vispo E, et al. Management of metabolic complications and cardiovascular risk in HIV-infected patients. *AIDS Rev* 2010; 12: 231–41.

¹³ Woodcock J, Edwards P, Tonne C, et al. Public health benefits of strategies to reduce greenhouse-gas emissions: urban land transport. *Lancet* 2009; 374: 1930–43.

By prioritizing NCD prevention and control within the future development framework, the international community will improve the health of vulnerable populations, mitigate the economic impacts of these diseases and accelerate progress toward poverty eradication, and create circumstances favorable to sustainable development.