
October 2012

Eminence¹ and Non Communicable Diseases Forum (NCD-F)² jointly congratulates World Health Organization (WHO) for its leadership position to develop the 2013 – 2020 Action Plan and the Global Monitoring Framework. The joint collaboration from Eminence and NCD-F also welcomes the opportunity given by WHO to provide comments on this crucial document.

Being a member of the NCD Alliance, World Heart Federation, Union for International Cancer Control, NCD Child and NCD Roundtable, this joint statement endorses the position statements and responses given by all aforementioned entities. However, with the experience of working on the ground in a developing country – Bangladesh – this joint statement reinforces some of the aspects.

1. Purpose and Goal

We – Eminence and NCD-F – support the fact that the purpose of the plan is to define a “roadmap for implementation of the commitments in the UN Political Declaration on NCDs”. However, we feel that the involvement from whole of UN system is required to realize this plan.

We certainly agree that this plan of action aims to achieve the global target of reducing premature deaths from major by 25% by the year of 2025. However we feel that to achieve this goal this plan must identify specific actions and interventions. Moreover to realize this aim and goal there has to be an effective and time bound mechanism engaging all relevant stakeholders, including whole of the government, whole of the UN, civil society, media and NGOs. We also feel the necessity of involving the private sector and corporate, through careful analysis to avoid any conflict of interest.

We agree that this plan needs to be relevant to countries like Bangladesh and its development agenda, because such countries bear 80% of the diseases burden. Therefore ample scope are needed for country level relevance by covering existing global political commitments where the countries like Bangladesh has given their consent. This would ensure country specific development agenda even after the post 2015 development goals as well as upcoming sustainable development goals.

2. Principles and Approaches

We – Eminence and NCD-F – support the principles of equity and sustainability of this document, however we also feel that there needs to be specific mention of patient rights by empowering them, covering across all age, sex, geographical location as well as ethnicity and would request for a mechanism to end the discrimination for all people with NCDs.

¹ A Bangladesh based organization providing community based solutions to the prevention, control, monitoring and surveillance of NCDs. Details of the organization can be found at www.eminence-bd.org
² Non Communicable Diseases Forum (NCD-F) emerged as a platform for the professional bodies of Bangladesh who works for the prevention, control and management of non communicable diseases (NCDs) in Bangladesh; with its brand name “NCD-F” to reach out the people suffering from NCDs. This platform also acts like as a policy advocate and pressure group for the revitalization, formulation and activation of NCD policies through advocacy in the country. Details about the forum can be found at http://www.ncdf.info/
With this joint statement we offer our support towards the multisectoral approach to strengthening health systems; as well as integration of NCDs in all relevant programs and services including primary health care level. We also support the aspect of increasing human resources for health, task shifting as well as adaptation of life-course perspective to achieve universal access to health. However, in this aspect we feel that we agree with NCD-A for having a more crosscutting issues identified to support implementation, including leadership, resources, partnerships, integration, evaluation and accountability.

3. Implementation

We – Eminence and NCD-F – agree with the point that leadership at country level is very important and countries like Bangladesh needs to have a country specific time bound national strategy and action plan with shared responsibility covering all of the stakeholders.

With the context of working in a developing country, we feel the necessity of this plan to be outlaid and sufficiently resourced. As well as there are needs to have actions for ensuring sustainable backing for the prevention aspect of NCDs.

We feel that until the countries can cope with this tsunami of burden the national capacity needs to be strengthened and this should include both technical and financial support. The plan should encourage the countries like Bangladesh the importance of collaborative partnerships.

We also feel the importance of prioritized and need based research, with a focus on action research, innovation research as well as a mechanism to translate the research to policy action as well mass program implementation.

4. Objectives

We – Eminence and NCD-F – as a whole agree with all aspects of the objectives stated in the Plan of Action. However, we also have some comments based on our experience of working in a developing country.

a. Reinforce political commitment to NCDs as a health and development priority and increase public awareness

We urge to have a global monitoring agenda to address country or at least region specific most prevalent NCDs and associated risk factors. We also advocate having a global pressure to the member states so that national leaders take ample measures to integrate NCDs as a part of all national development agenda as well as all relevant social and economic strategies, policies and sector wide approaches. In this aspect we agree with NCD-A’s recommendation of increasing public and political understanding and acceptance of the links between NCDs and the social determinants of health; the negative impact NCD risk factors have on health and wellbeing; the economic effects of NCDs at the macro and micro levels. We also encourage for mechanisms for empowering at risk and living with NCDs within the aspect having the right to have maximum standard of health as well as ways to reduce stigma associated with NCDs. Here we urge the importance of having special focus on young
population especially children and adolescents, therefore urges for a national plan of action for these groups.

b. Improve international cooperation to mobilize resources for NCD prevention and control

We – Eminence and NCD-F – believe that this partnership needs have national champions and icons as well as political leadership for NCD prevention and control. We strongly believe that the global partnership needs to include mechanisms to support countries like Bangladesh – both technically and financially. We believe that a national level coordination mechanism is compulsory to act as a knowledge-sharing platform as well as coordinate the activities and commitments made by all stakeholders. At national level we believe that only policy level activities are not adequate and there is a need for mass awareness and activation.

c. Strengthen national capacity to design and deliver whole-of-government, multisectoral NCD plans, policies and programs

We strongly agree with NCD-Alliances recommendation of having an option for having strengthened capacity in countries like Bangladesh for developing, implementing, monitoring and evaluating policies, plans and programs emphasizing life-course approach. We also agree with the point that there is a need for synergies between NCD response and existing and future policies, programs and systems, including social determinants of NCDs with particular reference to: health in early childhood, the health of the urban poor, fair financing and equitable access to primary health care services. We absolutely agree with the point that countries like Bangladesh needs to increase domestic resources for preventing and controlling NCDs, however there is also need for external assistance – both technical and financial.

d. Reduce NCD risk factors and create sustainable and health-promoting environments

We – Eminence and NCD-F – agree with NCD alliance that countries like Bangladesh needs to increase health literacy from community to policy makers. In countries like Bangladesh where we have high prevalence of tobacco use we believe that national actions for reducing tobacco consumption by speeding up the implementation of the WHO Framework Convention on Tobacco Control as well as the MPOWER package. In countries like Bangladesh due to open market strategy there is no control over unhealthy diets and sugary drinks, therefore we strongly urge for global pressure to implement the Global Strategy on Diet, Physical Activity and Health, and the recommendations on the Marketing of Foods and Non-Alcoholic Beverages to Children. Unfortunately as a nation the urban parts of Bangladesh does not give the mass population to have ways to exercise. Therefore we strongly urge for urban planning, safe biking options and walking paths, and ways to introduce physical activity within the working area as well as implementation of the WHO Global Recommendations on Physical Activity for Health.
e. **Improve care for people with NCDs through strengthened health systems toward universal health coverage**

In countries like Bangladesh, people living with NCDs are just tip of the iceberg, because of not having primary level and population based screening facilities. Therefore we – Eminence and NCD-F – urges to have primary level and population based screening facilities in addition of care giving facilities for people living with NCDs.

For people living with NCDs we agree with the points raised by NCD Alliance about the access to quality affordable care, including through universal health coverage and through facilitating self-care. In this aspect it is important to note that in Bangladesh majority of the health expenditure is out of pocket, therefore the need of high-quality primary care services as well as effective and referral, patient management and care and making synergies with other health services is essential. Here the private sector involvement for innovative procurement mechanisms for sustained availability of health services can come handy. However in case of every steps of involving the private sector the issue of conflict of interest should be taken into consideration.

f. **Implement the prioritized NCD research agenda and improve NCD surveillance and reporting systems**

For this agenda we – Eminence and NCD-F – agree with NCD Alliance that special focus should be given to populations living in hard to reach areas, slums and conflicted areas as well as the poor and marginalized populations. Countries like Bangladesh needs to have country-specific monitoring systems for risk factors, disease burden, time trends and their economic and social costs and impact of open market regulation, rapid urbanization, urban planning, and mass behaviors. We also reinforce the issue that countries like Bangladesh should have options for conducting need based, intersectoral and multidisciplinary research to understand and influence the macroeconomic and social determinants of NCDs and exposure to NCD risk factors.