

# Information session on the Preparatory process for the 4<sup>th</sup> High Level Meeting on NCDs: the Road to 2025 Accelerating progress on NCDs in SIDS NCD and Emergency

**Dr Bente Mikkelsen, NCD Department**

Monday 24 October 2022 from 16:00-17:30 CET



# Agenda

**1 Welcome remarks**

**Dr Minghui Ren, ADG UCN, WHO  
Dr Naoko Yamamoto, ADG HEP, WHO**

**2 Preparatory process leading to the 4<sup>th</sup> High Level Meeting on NCDs – the Road to 2025 – Accelerating progress on NCDs in SIDS**

**Dr Bente Mikkelsen, Director, NCD/HQ  
Dr Naoko Yamamoto, ADG HEP, WHO  
Dr Maria Neira, Director, ECH/HQ, WHO  
Dr Anselm Hennis, Director, NMH/AMRO  
Dr Devora Kestel, Director, MSD/HQ**

**3 NCD and Emergency**

**Dr Bente Mikkelsen, Director NCD/HQ,  
Dr Asmus Hammerich, Director NMH/EMRO  
Dr Slim Slama, Unit Head, MND/NCD/HQ**

**4 Moderated discussion with Member States**

**Dr Guy Fones, Unit Head, GCM/GNP/HQ**

**5 Wrap up and end of session**

**Dr Bente Mikkelsen, Director, NCD/HQ  
Dr Altaf Musani, Director, WRE/HEI/HQ**

# Welcome Remarks

**Dr Minghui Ren, Assistant Director  
General UHC Communicable &  
Noncommunicable Diseases, WHO**

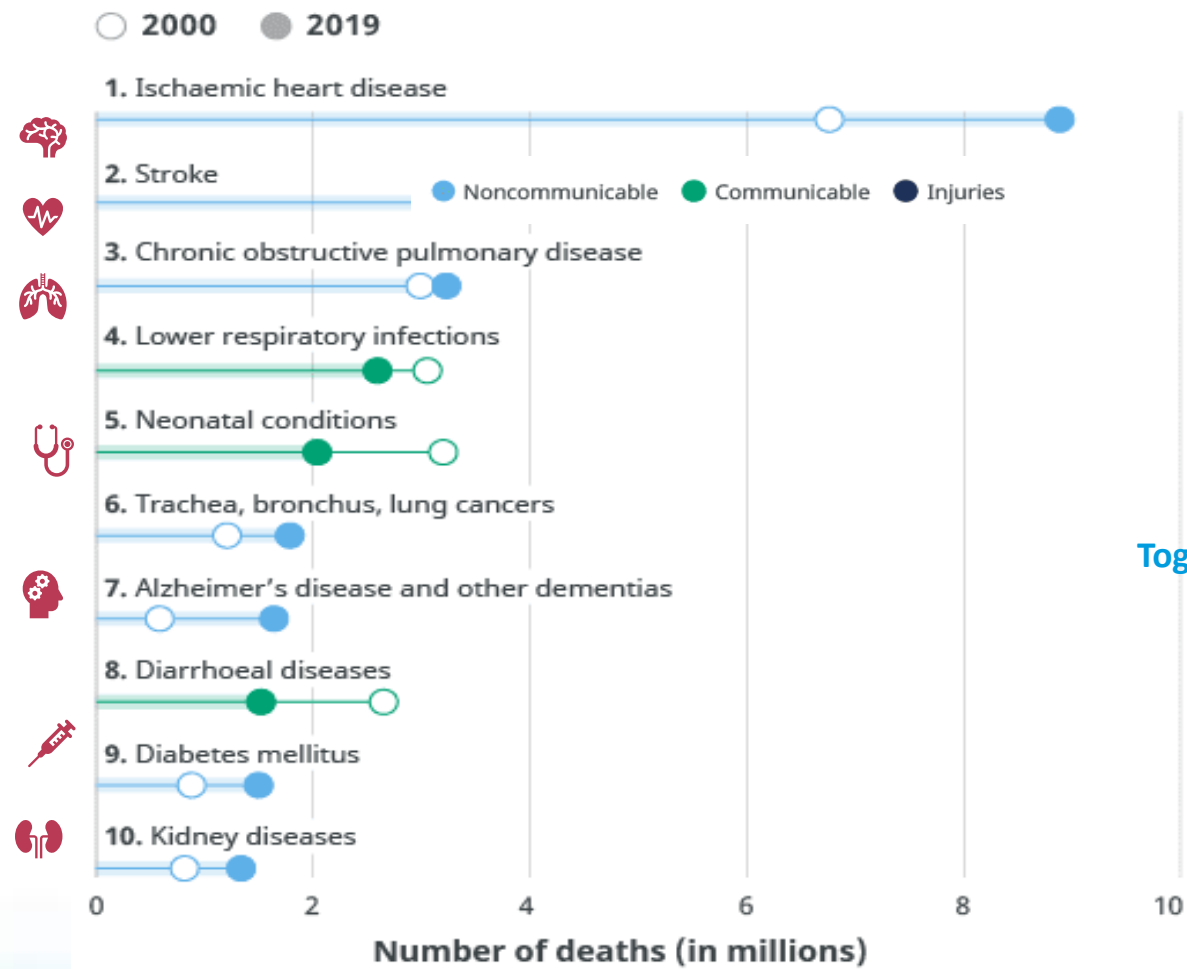


**Dr Naoko Yamamoto, Assistant  
Director General Healthy  
Population, WHO**



- 1. Overview of the preparatory process for the 4th High Level Meeting on NCDs**
- 2. Outcome of High-Level meetings and consultations in 2022-2024: International Strategic Dialogue, Ghana, First Gathering of Heads of States, UNGA New York – Invisible numbers and data portal**
- 3. High-level technical meeting and Ministerial Conference on NCD and Mental Health in Small Island Developing States**
- 4. WHO Global High-level meeting, regional meetings and Global high-level meeting on NCD in emergencies**
- 5. Other evolving events and timeline**

## Leading causes of death globally



<https://www.who.int/news-room/fact-sheets/detail/the-top-10-causes-of-death>

# 74%

Together, all NCDs accounted for 74% of deaths globally in 2019

# NCDs are leading causes of death worldwide

3/4 

Almost 3/4 of all deaths in the world are from an NCD



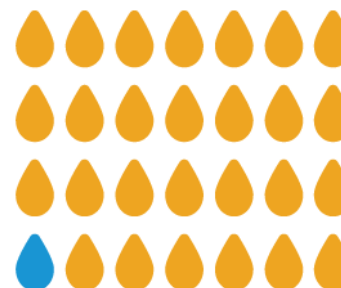
Cardiovascular diseases cause 1 in 3 deaths



Cancers cause 1 in 6 deaths



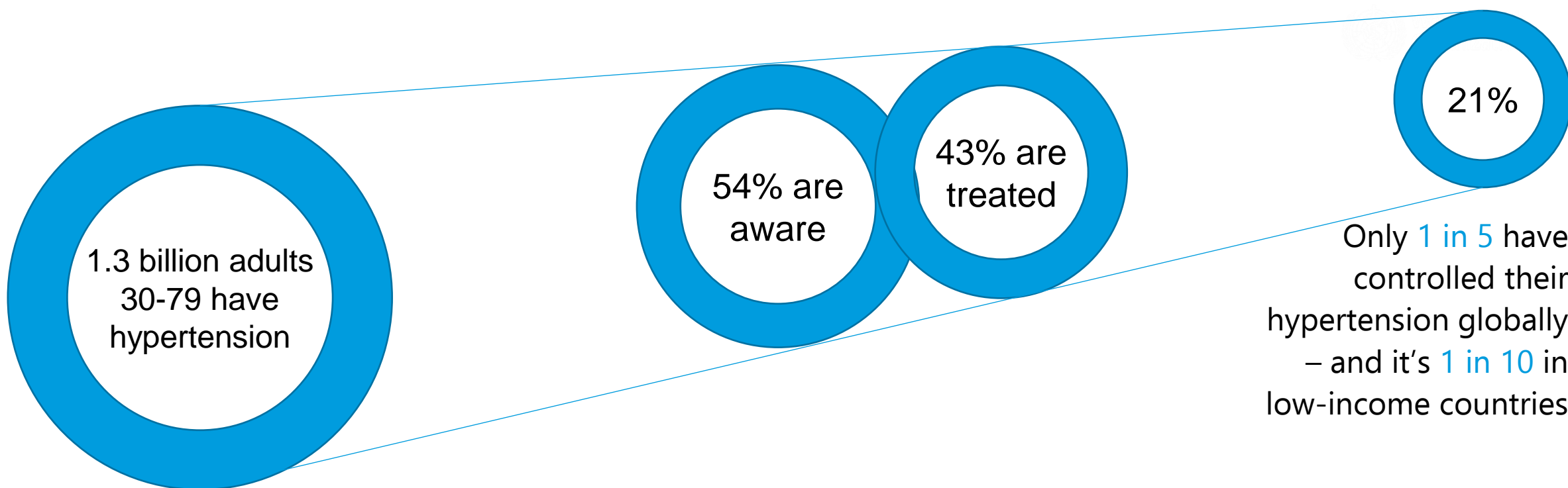
Chronic respiratory diseases cause 1 in 13 deaths



Diabetes causes 1 in 28 deaths

# NCD services are key to achieving UHC

**EXAMPLE; High systolic blood pressure** causes 54% of cardiovascular deaths worldwide



Data Sources: NCD-RisC (2021) and the 2019 Global Burden of Disease Study (2020).

# Countries are not on track to meet the SDG target on NCDs

If past trends continue, only **14** countries will reach the SDG target to reduce premature NCD mortality by a third.

With extra spending of **18 billion per year** -- equivalent to 0.6% of LMICs' gross national income per capita, 90% of LMICs could meet the target **and prevent or delay 39 million deaths**.



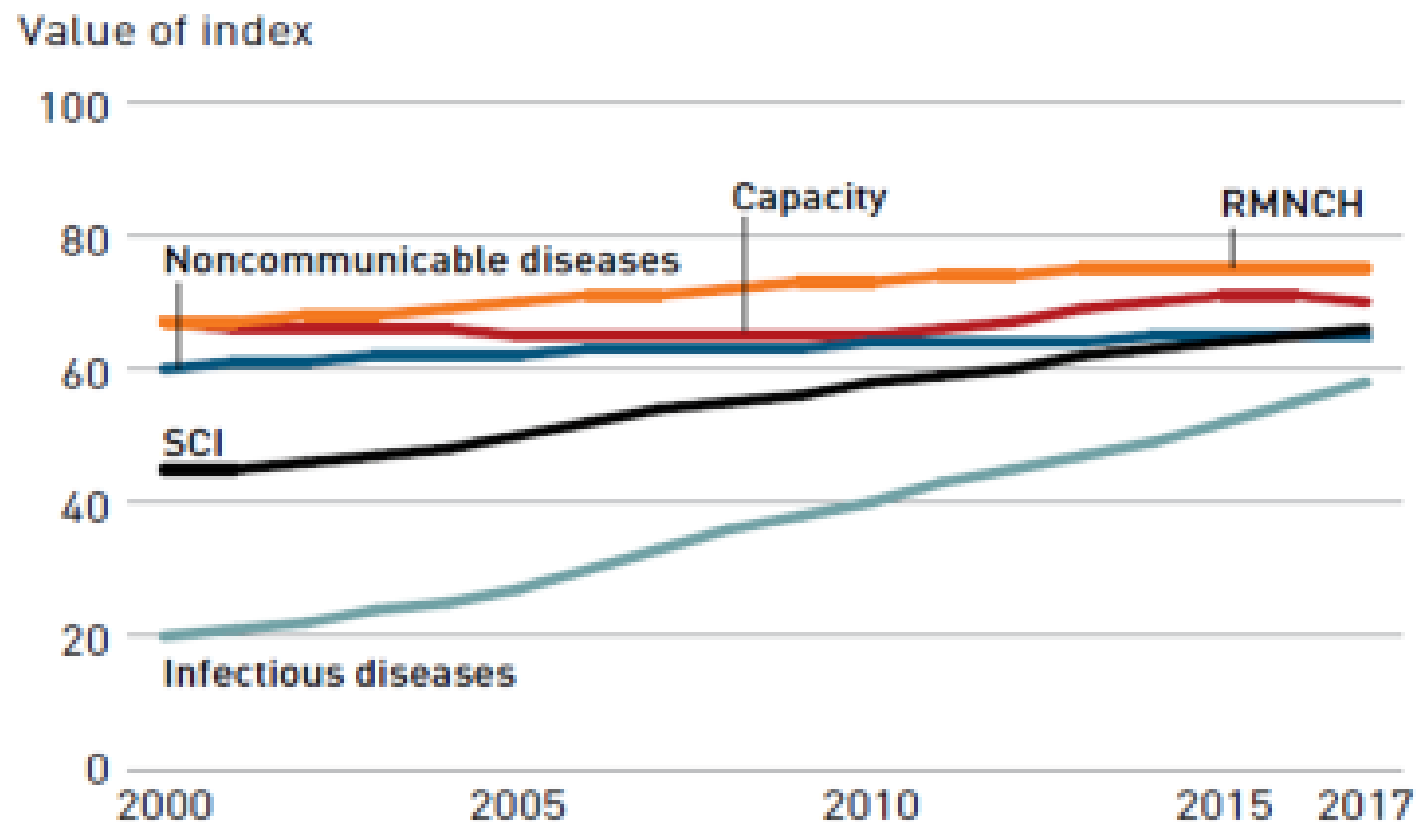
**With sufficient investment, 90% of LMICs could meet the SDG target to reduce premature deaths from NCDs by a third by 2030**



## The coverage of NCDs in UHC benefit packages is stalling

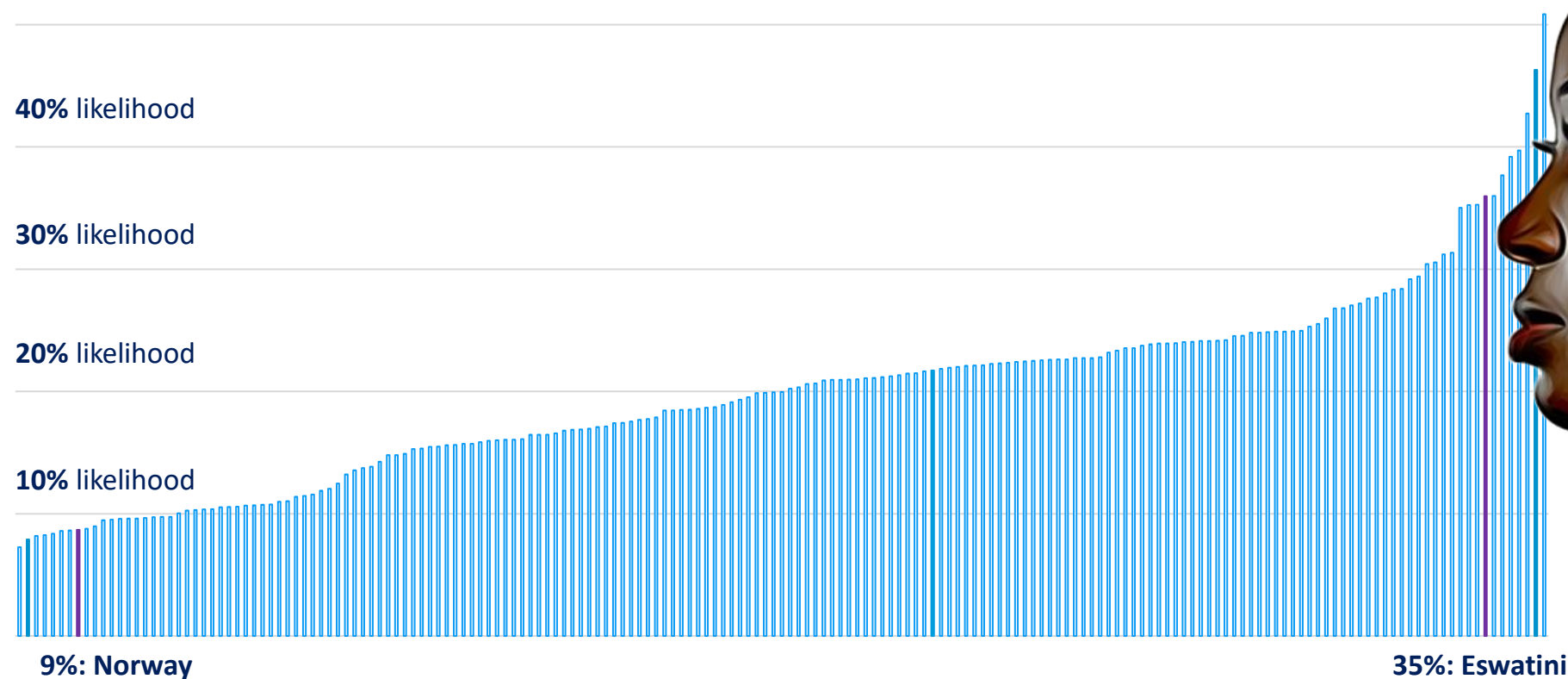
Since 2000, we have seen rapid improvements in the coverage of infectious diseases in universal health coverage benefit packages

But for NCDs, we have gained little ground...

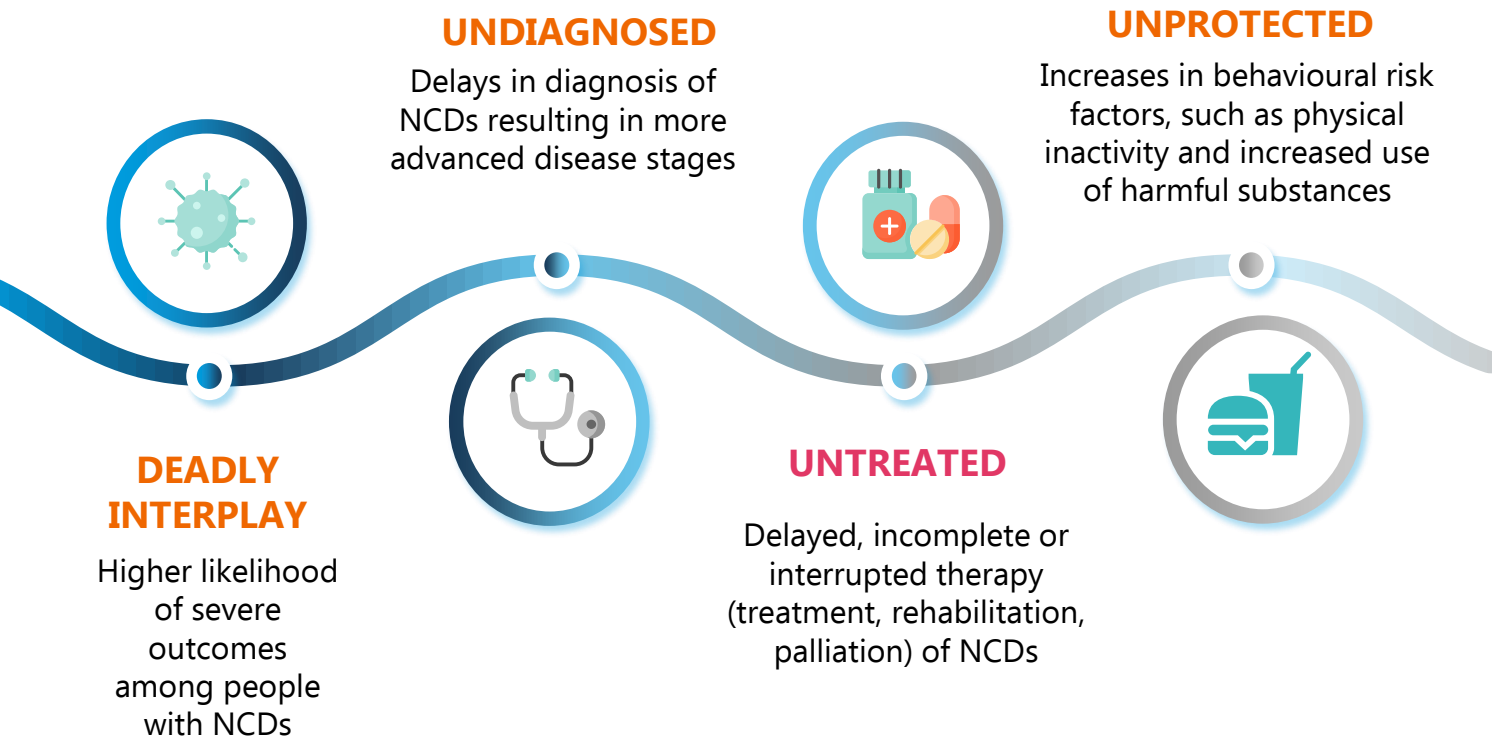


Primary Healthcare on the road to UHC, 2019 Monitoring Report

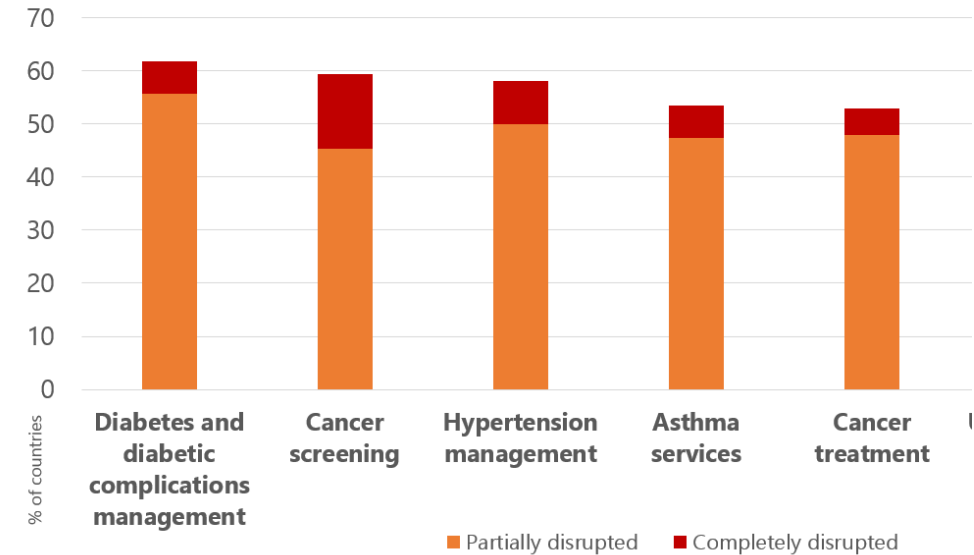
# Huge national inequalities remain in the likelihood of dying prematurely from a major NCD



# Addressing NCDs as a foundation for Preparedness



**136 countries** reported NCD services were disrupted in May 2020



“COVID-19 has preyed on people with NCDs such as cancer, cardiovascular disease, diabetes and respiratory disease. Globally, NCDs and their risk factors are increasing vulnerability to COVID-19 infection and the likelihood of worse outcomes, including in younger people. The pandemic has underscored the urgency of addressing NCDs and their risk factors.”



# **Implementation road map 2023–2030 for the global action plan for the prevention and control of noncommunicable diseases 2013–2030**

- Accelerate national response based on the understanding of NCDs epidemiology and risk factors and the identified barriers and enablers in countries
- Prioritize and scale-up the implementation of most impactful and feasible interventions in the national context
- Ensure timely, reliable and sustained national data on NCD risk factors, diseases and mortality for data driven actions and to strengthen accountability

# Preparatory process for the 4th High Level Meeting on NCDs, 2025



## A75/10 Add.5 (Annex 11)

Outlined in document A75/10 Add.5 (Annex 11) submitted for and noted by WHA75

- ❑ UNGA resolution on the **scope, purpose and modalities** of the 4<sup>th</sup> HLM, to be negotiated by Member States with the support of 2 co-facilitators appointed by the President of the United Nations General Assembly
- ❑ **Outcome document** to be adopted at the 4<sup>th</sup> HLM will be also negotiated by Member States under the auspices of the same two co-facilitators
- ❑ **The preparatory process** includes meetings and consultations co-sponsored by WHO and relevant partners, which may serve as:
  - input into the negotiations among Member States on the “modalities” resolution and the outcome document
  - contribute to the development of recommendations that may be included in the 2024 progress report of the United Nations Secretary-General to the United Nations General Assembly on the prevention and control of NCDs.

A75/10 Add.5

### ANNEX 11

#### PREPARATORY PROCESS LEADING TO THE FOURTH HIGH-LEVEL MEETING OF THE GENERAL ASSEMBLY ON THE PREVENTION AND CONTROL OF NON-COMMUNICABLE DISEASES IN 2025

##### Mandate

1. Paragraph 50 of the political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases requests “the United Nations Secretary-General in consultation with Member States, and in collaboration with the World Health Organization and relevant funds, programmes and specialized agencies of the United Nations system, to submit to the General Assembly, by the end of 2024, for consideration by Member States, a report on the progress achieved in the implementation of the present political declaration, in preparation for a high-level meeting on a comprehensive review, in 2025, of the progress achieved in the prevention and control of non-communicable diseases and the promotion of mental health and well-being”.<sup>1</sup>
2. The preparatory process leading to the fourth high-level meeting of the General Assembly on the prevention and control of non-communicable diseases was first set out in paragraph 44 of document A74/10 Rev.1, which was noted by Member States at the Seventy-fourth World Health Assembly.
3. The purpose of this Annex is to provide an update on that preparatory process.

##### Scope, purpose and modalities

4. Premature deaths caused by NCDs can be prevented when countries take legislative and regulatory measures and implement policies to respond to the needs of people living with or at risk of cardiovascular diseases, cancers, diabetes, chronic respiratory diseases or mental health conditions, including preventive, curative, palliative and specialized care. Some 85% of all premature deaths occurs in low- and middle-income countries. A large proportion of the global population live in low- and middle-income countries where the social, economic and physical environments afford lower levels of protection from the risks of NCDs, such as tobacco use, the harmful use of alcohol, unhealthy diets, physical inactivity and air pollution. In addition, during the COVID-19 pandemic, NCDs and mental health services have been the most commonly disrupted among all essential health services.
5. Many countries are still lacking the capacity to fulfil the commitment, as set out in paragraph 17 of United Nations General Assembly resolution 73/2, to provide strategic leadership for the prevention and control of NCDs by promoting greater policy coherence and coordination through whole-of-government and Health in All Policies approaches and by engaging stakeholders in appropriate, coordinated, comprehensive, integrated and bold whole-of-society action and response.
6. Engagement between governments and non-State actors for the prevention and control of NCDs has proven to be challenging in the context of non-State actor compliance with public health policies and regulations, particularly in finding common ground to optimize the complementary expertise and

<sup>1</sup> United Nations General Assembly resolution 73/2.

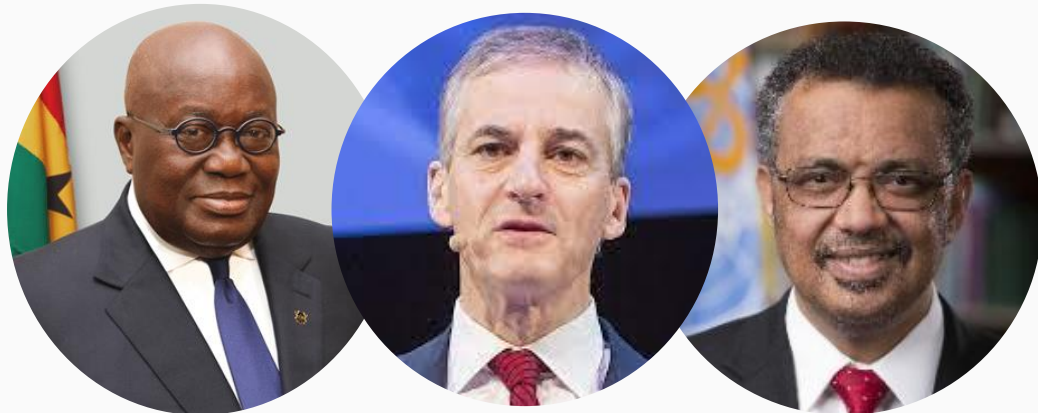
---

# International Strategic Dialogue on NCD and SDG

14 April 2022, Accra, Ghana

## Co-hosted by

- President of Ghana,
- Prime Minister of Norway,
- DG WHO



## Objective

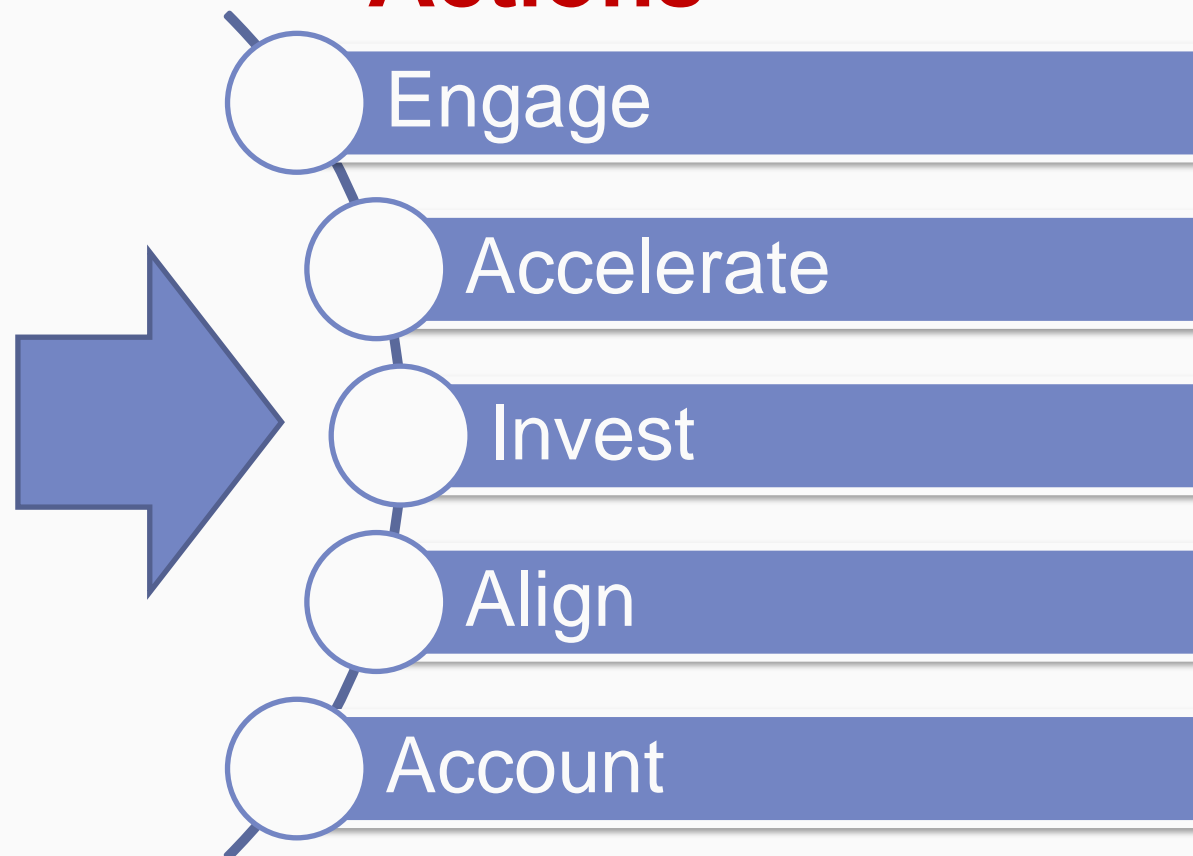
- **To raise the priority** on NCDs
- **To bring together national and international actors and partners** to exchange knowledge and ideas on what would it take globally for LMICs to achieve SDG 3.
- **To raise the political visibility** of Heads of State and Government who are providing a strategic leadership role in the prevention and control of NCDs to a global level.

# Global NCD Compact 2020–2030

## Five Commitments

1. <b>Save lives</b> of 50 million people from dying prematurely of NCDs.	3. Cover all people with quality <b>essential health services and medicines</b> and health products for NCD prevention and control by integrating NCDs into PHC and UHC.
2. Protect lives of 1.7 billion people living with NCDs during <b>humanitarian emergencies</b> , through preparedness and health emergency risk management.	4. Cover all countries with <b>comprehensive NCD surveillance and monitoring</b> actions.
	5. <b>Meaningfully engage 1.7 billion people living with NCDs</b> and mental health conditions to encourage Governments to develop more ambitious national NCD responses.

## Actions



# Global Group of Heads of State and Government for the Prevention and Control of NCDs

- An initiative of political leaders that are intensifying their efforts to deliver on the promise to PLWNCs.
- An informal, voluntary and collaborative arrangement.
- A collective effort to take ownership in implementing the first operative paragraph of the 2018 Political Declaration of the UNGA on NCDs.
- Inspiring bold political choices and commitment on NCD, and promoting the WHO Best Buys



## How to Join

- Any Head of State or Government of a WHO Member State who is **actively engaged in the process of creating ownership** at the national level to achieve SDG target 3.4 can **signal their intention of joining** the Group by responding to the invitation to join and speak at the annual meeting.

## Governance

- **Chairperson** will chair the annual meeting of the Group. The first Chairperson is the President of Ghana.
- **Regular reporting** to WHA and UNGA and further develop the NCD Compact during its annual meeting at the start of the General Debate at the United Nations General Assembly in September in New York.



---

# First Gathering of Global Group of HoSG for NCD

## Objective

To convene members of the Global Group of Heads of State and Government to:

**Raise the priority** accorded to the prevention and control of NCDs within the national and international SDG response

**Deliberate on the Global NCD Compact 2020-2030** and showcase national and international actions on NCD and the SDGs

**Discuss on how to leverage the collective** to inspire and support global action on NCDs and the SDGs

## Event details

- 77th UNGA in New York
- 21 September 2022, 7:30 – 8:30am, The Plaza Hotel
- Breakfast event hosted by Global Ambassador for NCDs and injuries, Michael Bloomberg
- Chaired by President of Ghana



---

# Key issues raised by HoSG



## WHO Director General

With the current trends, we will not reach the SDG 3.4 target without dramatic action and dynamic leadership at the highest political level.



## WHO Global NCD Ambassador

World leaders to begin taking bold action, otherwise another 150 million people will die prematurely, from preventable deaths from NCDs over the next 10 years.



## President of Ghana

Let's do what is necessary to fulfil the five specific time-bound commitments and actions in the Global NCD Compact 2020-2030 towards achieving related SDGs.

---

# Key issues raised by HoSG



**President of Ghana**

We need to finance the policies being discussed and involve our spouses, the community and everyone in this important endeavor



**Prime Minister of Barbados**

“We are paying more lip service than attention. When 2025 comes, let it not be a summit which seeks to figure out what we might do in the future, but let us commit here this morning that we will walk the walk and talk the talk.”



**State Secretary of Germany**

“COVID-19 pandemic has shown the importance of a strong and sustainable health care system, and access to pharmaceuticals, things like vaccinations, diagnostics, and health technologies. This is not only the case for NCDs and things causing premature death, but also for communicable diseases.”

---

# Key issues raised by HoSG



## Prime Minister of Tonga

There is a need to address the commercial determinants of Health and empower the people with skills and knowledge



## Prime Minister of Mauritius,

The importance of sensitization campaigns, backed by legislative frameworks and partnerships. Importance of “those that have the know how and technology to cooperate with smaller countries with lesser means



## Prime Minister of Samoa

The extension and strengthening of the healthcare systems to deliver NCD services through primary health care is critical and we need to maximize the use of innovation and technology where appropriate.

---

## Outputs

- **Launch of NCD report**, “Invisible Numbers: The true scale of noncommunicable diseases,” and a **data portal tracking** NCDs in all 194 WHO Member States.
- **Call to action for countries to do what is necessary to fulfil the five commitments** and to Engage, Accelerate, Invest, Align and Account for actions on NCDs towards achieving related SDGs as contained in the Global NCD Compact 2020-2030.
- **Emphasis on the need to bridge inequities** in access to prevention, screening, treatment and control for Non-Communicable Disease to ensure access to medicines and diagnostics including local production.
- Prepare for the **Second Gathering of the Heads of State and Government Group during UNGA 2023** – committed to the NCD Global Compact

# Invisible numbers

The true extent of **noncommunicable diseases**  
and what to do about them

Read the report

[https://www.who.int/publications/  
item/9789240057661](https://www.who.int/publications/item/9789240057661)

Access the NCD Data Portal

<https://ncdportal.org/>

# Data portal on NCDs

## Noncommunicable Diseases Data Portal

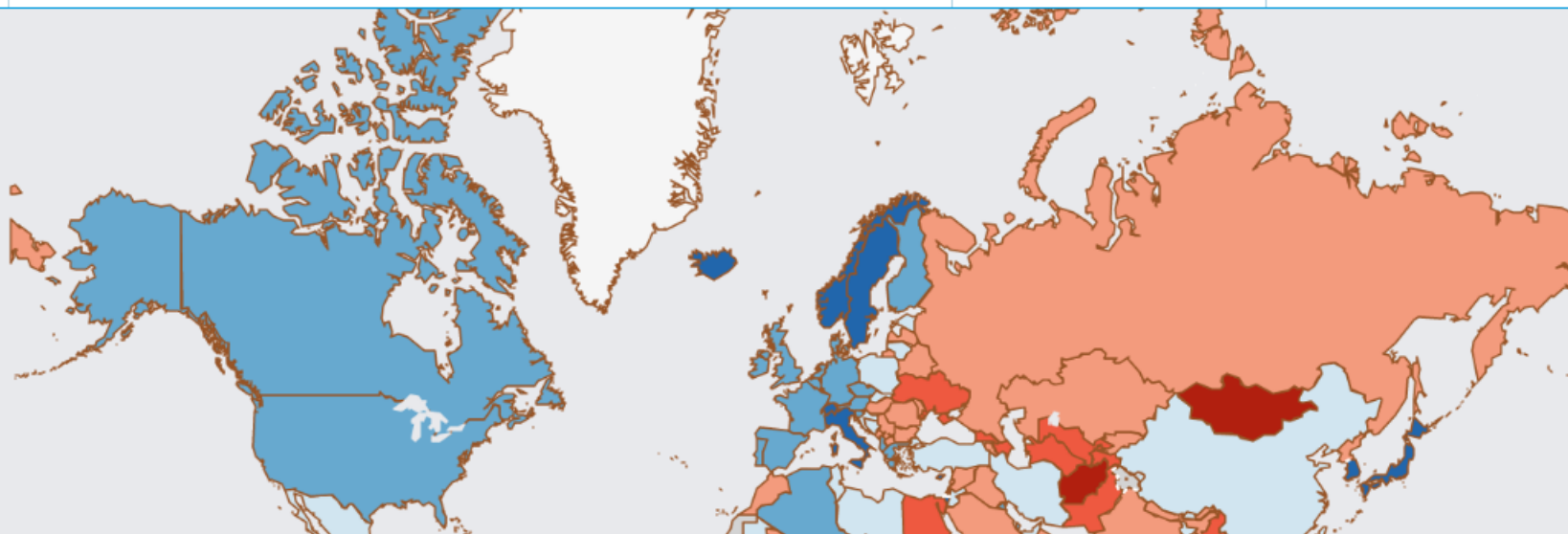
Noncommunicable diseases (NCDs) – chief among them, cardiovascular diseases (heart disease and stroke), cancer, diabetes and chronic respiratory diseases – cause nearly three-quarters of deaths in the world. Their drivers are social, environmental, commercial and genetic, and their presence is global. Every year 17 million people under the age of 70 die of NCDs, and 86% of them live in low- and middle-income countries.

Users can explore the data below by country, accessing detailed information on noncommunicable diseases and their key risk factors:

## Noncommunicable Diseases & Key Risk Factors

-  Cancer
-  Cardiovascular diseases (CVDs)
-  Chronic respiratory diseases (CRDs)
-  Diabetes
-  Harmful alcohol use
-  Obesity / Unhealthy diet
-  Physical inactivity
-  Tobacco use

Diseases & Risk Factors								Gender			Indicators	
 NCDs	 Alcohol	 Cancer	 CRDs	 CVDs	 Diabetes	 Obesity / Diet	 Physical Inactivity	 Tobacco	 Total	 Males	 Females	Probability of premature mortality ... ▾
Search country <input type="text"/>												



# Outcome of High-Level meetings and consultations in 2022-2024





---

# **SIDS: HIGH-LEVEL TECHNICAL MEETING AND MINISTERIAL CONFERENCE ON NCDS AND MENTAL HEALTH**

## **OVERVIEW**

For a **healthy resilient future** in Small Island Developing States

# SIDS SUMMIT FOR HEALTH: 28-29 JUNE 2021



## Aims:

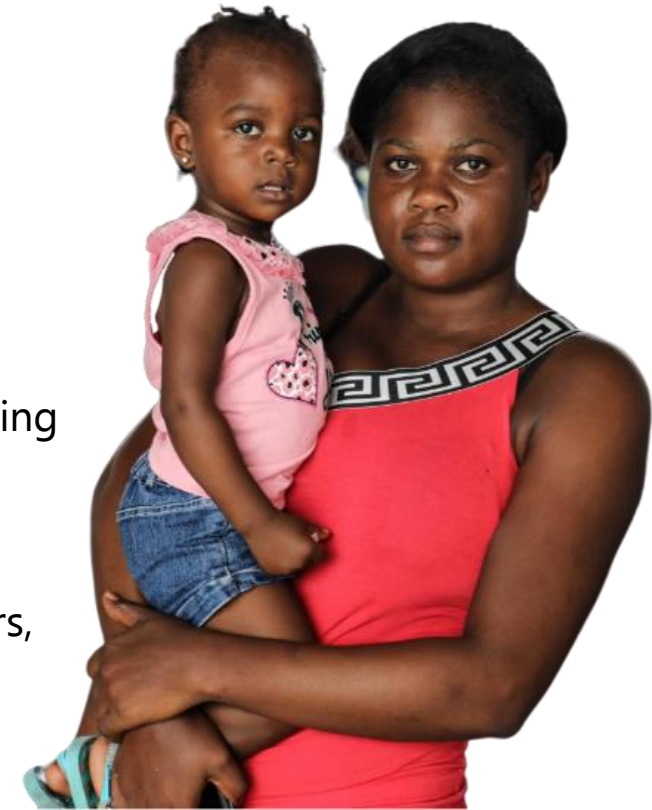
- Support and promote the voices of SIDS leaders and communities on key these global health threats;
- Advance SIDS health strategies and partnerships
- Galvanize support for innovations and solutions to speed up SIDS progress towards universal health coverage, health security and healthier populations.

## Outcomes:

- Increased **targeted financing** for key ongoing SIDS health priorities and initiatives;
- **Partnerships** to improve speed of implementation and access to innovations;
- **A joint statement** of priority short-term actions to help drive results at the
  - UN Food Systems Summit in September 2021,
  - 26th Climate Change Conference in November 2021,
  - Nutrition for Growth Summit in December 2021, and key meetings in 2022, including on NCDs

## Format:

- One leaders' dialogue, and four ministerial/partner panels over 28-29 June, including one evening (CEST) panel to maximize engagement in time zones that work for Ministers, and closing.



# Follow-up to SIDS SUMMIT FOR HEALTH



**SIDS SUMMIT FOR HEALTH:**  
For a healthy and resilient future  
in Small Island Developing States  
28-29 June 2021



## POLICY BRIEF Noncommunicable Diseases and Mental Health Conditions in SIDS

### The Challenge

As a group, Small Island Developing States (SIDS) share a disproportionately high burden of the risk factors, morbidity and premature mortality caused by non-communicable diseases (NCDs) and mental health conditions and their determinants.

- **NCDs are a leading cause of premature mortality**, with 52% of people with NCDs in SIDS dying prematurely (aged 30-69 years). In the Pacific, NCDs account for approximately 70% of mortalities.
- **Mental health conditions are common in SIDS.** According to the latest Global Burden Disease (GBD) 2019 estimates, 15.2% of the Caribbean population has a mental disorder; this is an estimated 11.2% in the Pacific.
- **Suicide rates are high in SIDS**, with Kiribati and Micronesia (Federated States) having the 5<sup>th</sup> and 6<sup>th</sup> highest age standardized suicide rates globally.
- **The risk factors for NCDs and mental health in SIDS are strikingly high:** 28% of adults aged 18 years and above do not engage in enough physical activity, 23% smoke tobacco, 56% are overweight with half of them obese.
- **Unhealthy diets and physical inactivity mean Pacific island countries and territories (PICTs) account for eight of the world's ten most obese nations, and seven of the ten with the highest rates of diabetes.**
- **SIDS have some of the highest rates of tobacco use in the world.** Five Pacific SIDS are among the top 10 countries in the world for smoking prevalence.
- **Alcohol use in many SIDS is high.** In eight Pacific Island Countries and territories, over 60% of the population reported using alcohol.<sup>1</sup>
- **Experiencing violence is a risk factor for mental illness.** Globally, 1 in 3 (35%) of women will experience interpersonal violence in their lifetime. In Pacific Island countries, the rate is much higher; in some of these countries, it is as high as 50%.<sup>2</sup>



## Global/Regional Events

**Aug-Oct  
2021**

-AFRO,  
SEARO,  
AMRO/ PAHO,  
WPRO

Regional  
Committees  
and  
Subregional  
Bodies (PIF,  
CARICOM etc.)

**Sep  
2021**

UN  
Food  
Systems  
Summit

**Nov  
2021**

UNFCCC  
COP26

**Dec  
2021**

Nutrition  
for  
Growth  
Summit

**Jan 2023**

SIDS Technical  
Meeting on  
NCDs and  
Mental health

**June 2023**

SIDS Ministerial  
Conference on  
NCDs and  
Mental health

# Progress on climate change and health in SIDS



## **WHA 75 Resolution on Health in SIDS**

Recognizes that climate change impacts disrupt health determinants and treatment, including for NCDs

## **New Alliance resulting from UNFCCC COP26**

61 countries in new Alliance for Transformative Action on Climate and Health, including many SIDS

## **Major new projects on climate health in SIDS**

Funding from EU, Global Environmental Facility and bilateral donors covering >10 SIDS in Pacific and Caribbean

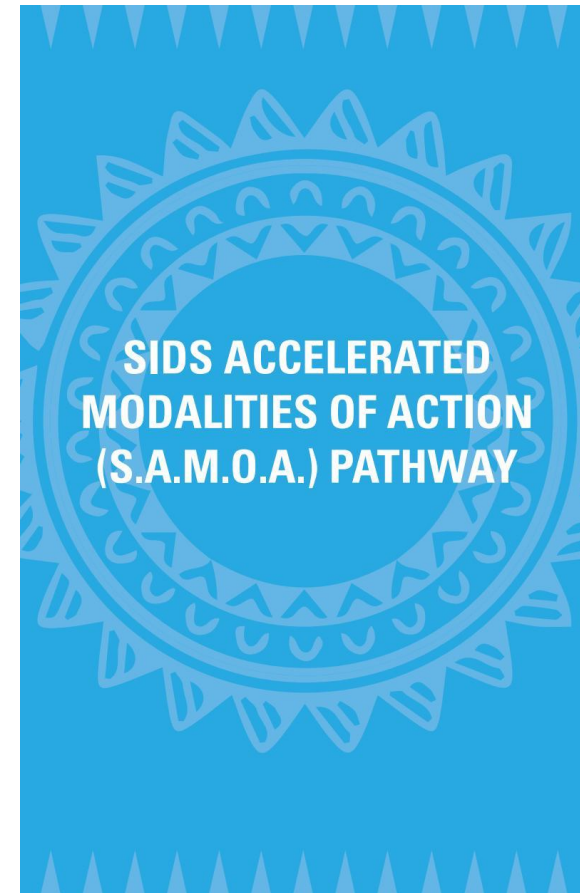
# SIDS NEED TO BE A GLOBAL HEALTH PRIORITY

## SIDS are a special focus for sustainable development

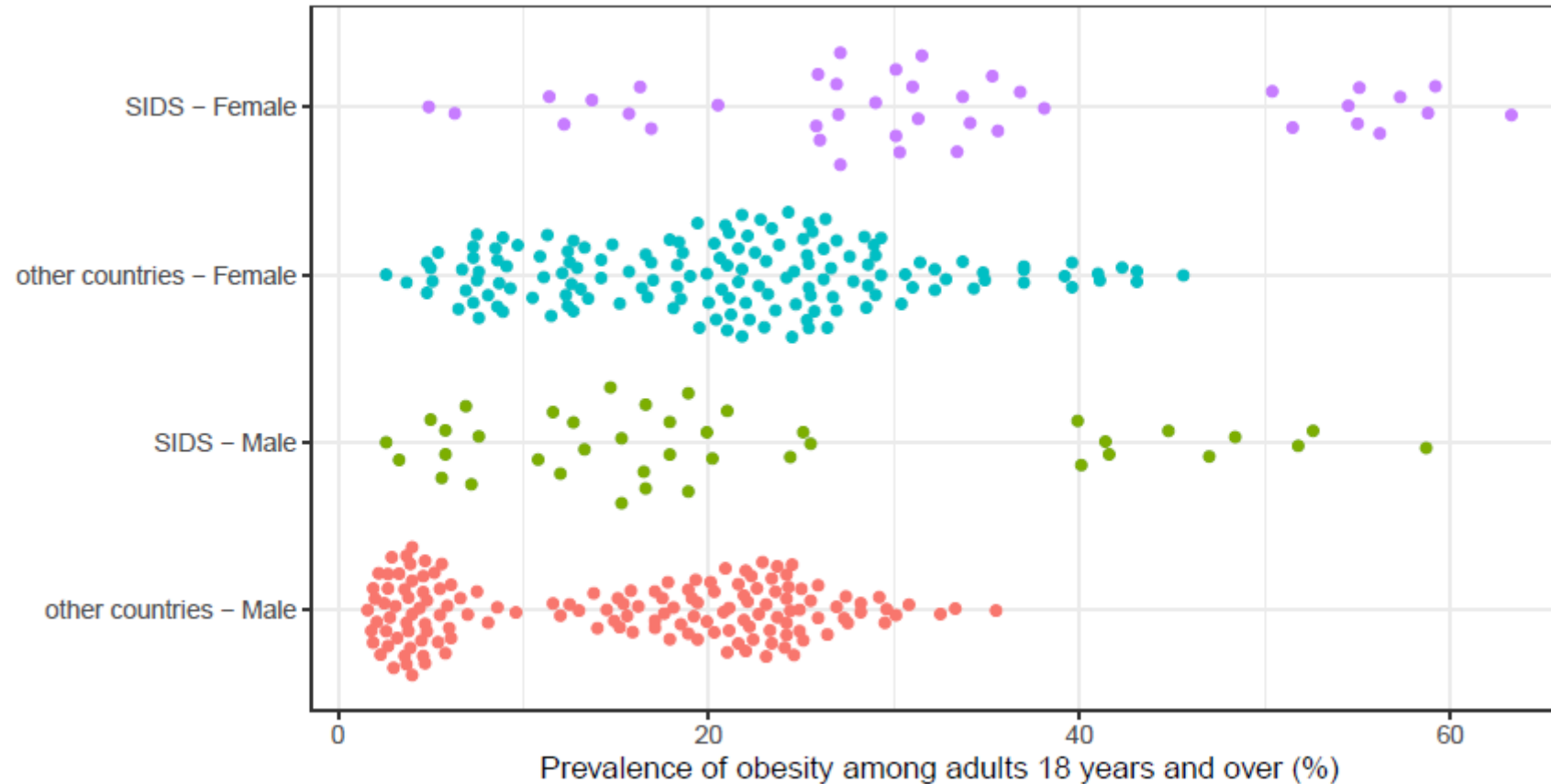
- **Climate change** represents an existential threat for SIDS, requiring sustained and whole-of-society action – health must be an essential pillar of the response
- **NCDs and malnutrition** represent fundamental threats – need to address determinants and integrated care and prevention
- **COVID-19** has presented a dire economic and health crisis for SIDS
- **Remoteness**, small economies & workforce and high unit costs hamper PHC and UHC, data systems inhibited, and procurement complex
- **Highly dependent** on international relationships, e.g. as primarily net food-importers
- **Under-representation** in international mechanisms because of their economic or population size – including in the “triple billion” targets of GPW13.



# Building on strong leadership Port of Spain Declaration and SAMOA pathway

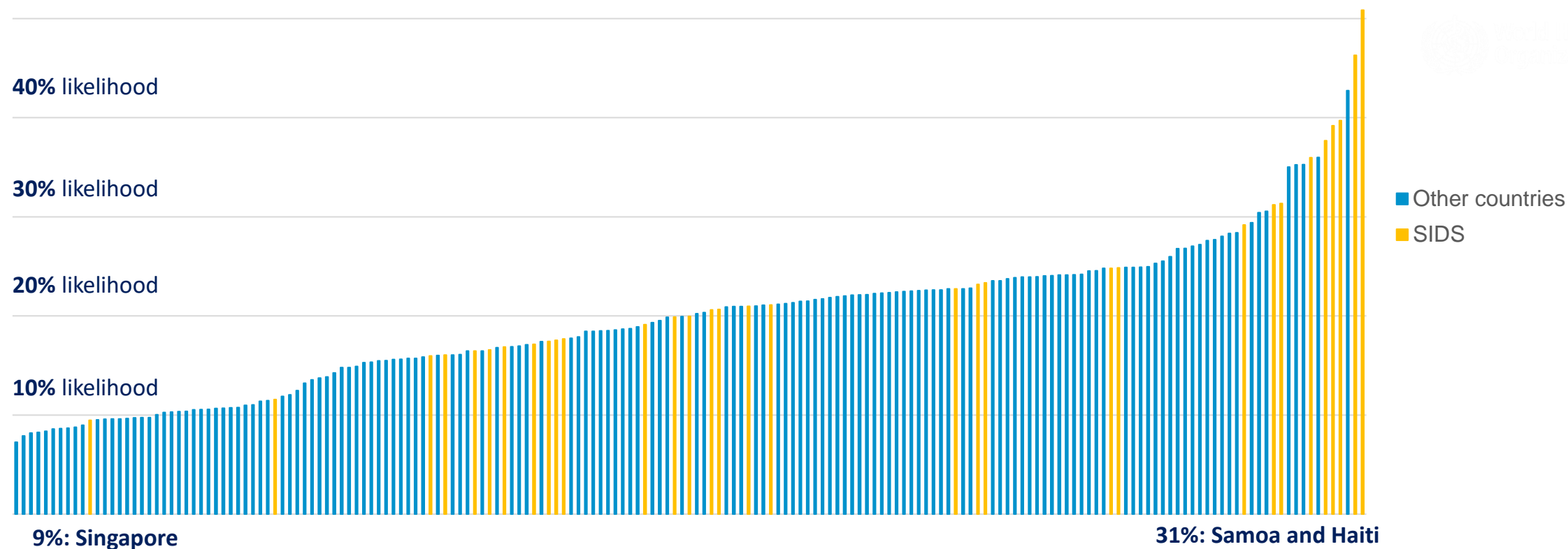


# The highest obesity rates worldwide are found in SIDS



The 10 countries with the highest obesity prevalence worldwide are SIDS – all exceeding 45% (both sexes combined)

# SIDS are overrepresented among countries with the highest likelihood of dying prematurely from NCDs

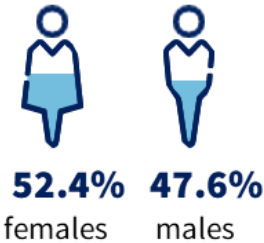




# Mental health - Epidemiology



**1 in 8**  
**people** live with a  
mental disorder



**14%** of the world's  
adolescents



**1 in 100**  
**deaths** are suicides

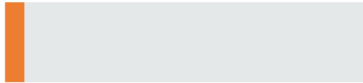
**58%**

suicides happen  
before the age of 50



**1 in 6**  
**years lived with disability** are  
attributable to mental disorders

Mental disorders account for  
**129 million** DALYs



or **5.1%** of the  
global burden

# Mental health: Key Gaps

## INFORMATION GAP



- Data and research on mental health are **lacking**

## GOVERNANCE GAP



- Few countries' implement plans that comply with **human rights**

## RESOURCES GAP



- On average 2% of countries' **health budgets** goes to mental health

## SERVICES GAP



- Most people with mental health conditions go **untreated**



# Mental health in SIDS

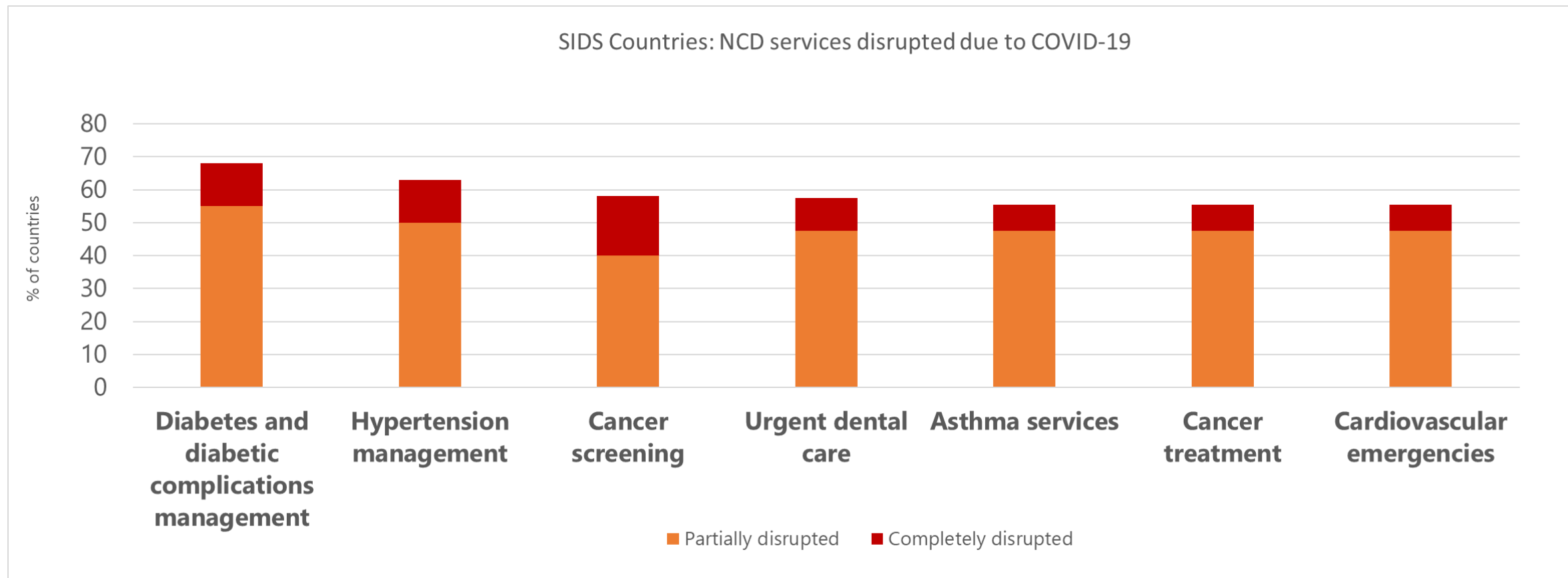
Suicide mortality is SDG indicator 3.4.1 for mental health



Suicide mortality is under-recorded in many countries due to stigma or legal reasons

# NCD services were disrupted by COVID-19 in SIDS

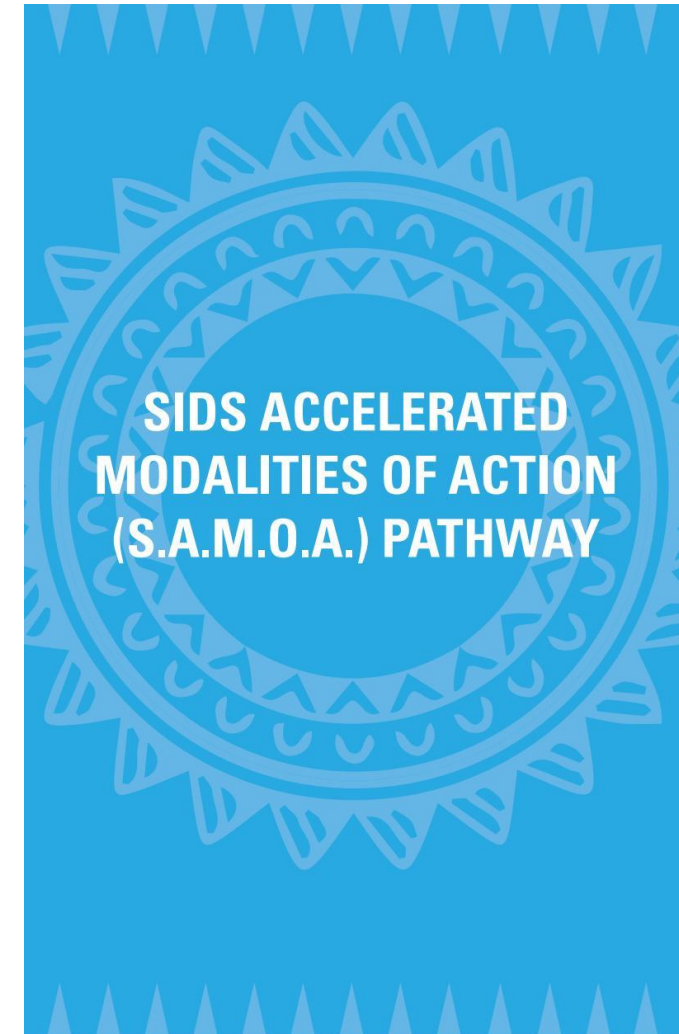
Data from May 2020



Source: WHO NCD country capacity survey 2020

# SIDS Ministerial Conference on NCDs and Mental health (Tentative: 14-15 June 2023)

- paragraph 75(e) of resolution A/RES/69/15 (SIDS Accelerated Modalities of Action (SAMOA) Pathway, which includes a commitment to **“enable cooperation among Small Island Developing States on diseases by using existing international and regional forums to convene joint biennial meetings of ministers of health and other relevant sectors to respond in particular to NCDs”**.



# SIDS Ministerial Conference on NCDs and Mental health (Tentative: 14-15 June 2023)

## ***Building on:***

Outcomes of **WHO SIDS Summit for Health: For a Healthy and Resilient Future in Small Island Developing States** WHA Resolution 75.18

**Evaluation of the NCD GAP** and the progress to achieve SDG 3.4 and other related SDGs.

***To set out an ambitious agenda*** to transform the SIDS into a more nimble, innovative set of countries, more effective and efficient and delivering health outcomes of NCDs, and a trusted partner for reaching target 3.4 on NCDs by 2030.

**The outcome document** of the Conference in 2023 will serve as an input into the preparatory process leading to the fourth High-level Meeting of the United Nations General Assembly on NCDs in 2025.

# MINISTERIAL ENGAGEMENT ON NCD AND MENTAL HEALTH IN SIDS



CARICOM Summit 2007



All attentive...New Zealand Prime Minister John Key at the Pacific Leaders Summit in Auckland last month. Photo: Brendan O'Hagan

Pacific in  
NCD crisis

"The war needs  
mitment of power  
and the assistance  
bodies. Pacific le  
we must take up  
Simon Young

Pacific Island Forum Leaders Meeting 2011

- To build and pursue a **collective vision and action for accelerating progress towards SDG target 3.4 on NCDs and 3.8 on UHC on the road to 2025.**
- To share experiences from high-level technical representatives of SIDS Ministries of Health on the decline of premature mortality from NCDs and **to present the feasibility of implementing this in other countries.**
- To discuss **concrete additional actions** to achieve more together by 2030.

# SIDS High-level Technical Meeting on NCDs and Mental health

## 17-18 January 2023 - Barbados



### Purpose

To build **political momentum** for the Ministerial Conference in 2023 and **promote domestic action** on NCDs and mental health in SIDS

### Objectives

Discuss progress on NCDs and mental health as part of the commitments made under SIDS Health Summit 2021 and the SIDS Accelerated Modalities of Action (SAMOA) Pathway

Present and discuss WHO NCD Implementation roadmap 2013/2030 and its application to SIDS countries to accelerate national responses towards SDG target 3.4 on NCDs and mental health

Share experiences from SIDS countries on tackling premature mortality and disability associated with NCDs and mental health conditions, and to present the feasibility of adapting and applying these experiences in other countries

### Expected Outcome

A meeting report that will serve as input for the outcome document to Ministerial Conference of SIDS on the Prevention and Control of NCDs and Mental Health in June 2023

### Technical Materials

- Background Document
- SIDS NCD Profiles Report





## Thematic areas



### Collaborative **governance for multisectoral and multistakeholder** action to **accelerate NCD responses in SIDS**

- NCD Implementation Roadmap 2023-2030 in SIDS
- Multistakeholder collaboration to scale up action for SDG target 3.4 in SIDS
- Cross-regional opportunities/platforms for dialogue and mutual action and advocacy (SIDS Voices, SIDS Leaders, Friends of SIDS)
- Strengthened coordinated country support (UN agencies and other stakeholders)

### **Sustainable financing** for NCD prevention and control (and climate change action)

- Economic impact of NCDs, and return on investments in NCDs
- Innovative financing

### **Climate change**, biodiversity and environmental health

All hazards **emergency preparedness and responses** and post COVID-19 recovery

Healthy, sustainable and resilient **food systems**

Reorienting **health systems with primary health care as a resilient foundation** for universal health coverage

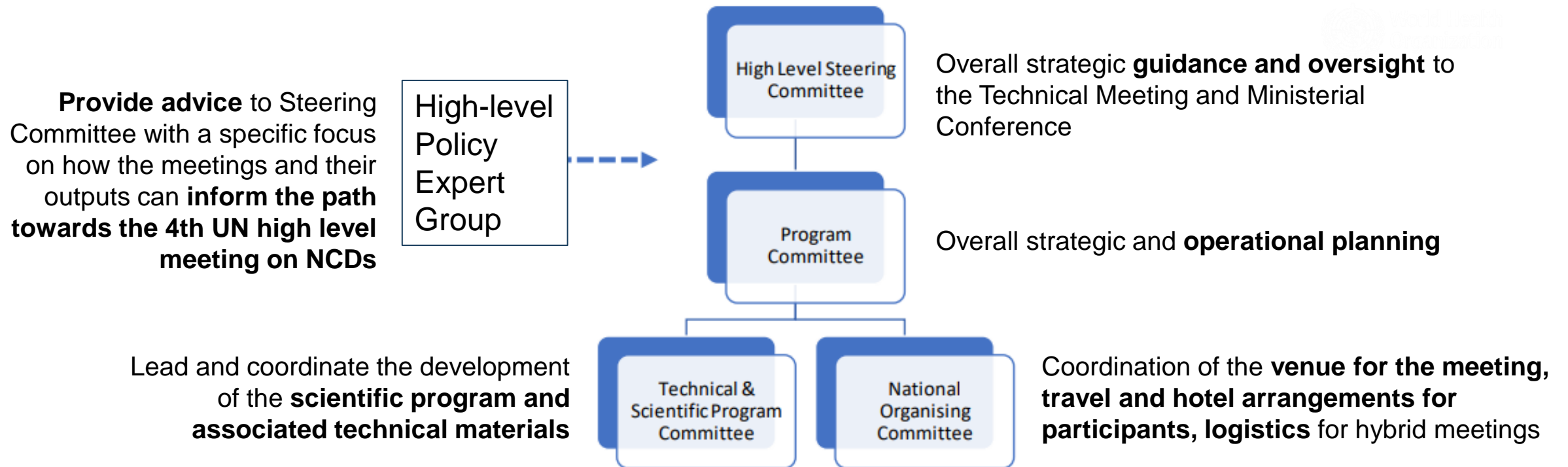
- WHO PEN/HEARTS in SIDS
- Global Diabetes Compact and Obesity Acceleration Plan
- Global Cancer initiatives
- Access to quality-assured medicines and medical supplies

### **Human resources for Health**

- Addressing HRH shortage in SIDS
- WHO Global Competency based Framework and NCDs

### **Mental health and psychosocial support**

# Management, Roles and Responsibilities for Preparation of SIDS High level meetings





WHO Priority actions to improve  
the integration of NCDs in  
response to humanitarian  
emergencies

# WHO Global High-level meeting on NCD in emergencies



**Date and venue (provisional): 27-28 June 2022, Copenhagen, Denmark**

## Objectives:

1. present WHO efforts to strengthen the integration of NCDs as part of emergency and preparedness response
2. review current NCD- related responses in countries during COVID-19 pandemic and other emergencies
3. recommend a strategic approach to improve WHO technical assistance to countries across preparedness, response, and recovery phases and agree on practical steps to operationalize the NCD in emergencies approach in various the WHO Regions (based on a series of regional consultations to be held between Q4 2022-Q2 2023) with the support of other UN agencies and key stakeholders

## Expected Outcomes:

1. High advocacy for a better integration of the needs of people with NCDs across the humanitarian programme cycle with a better understanding morbidity and mortality patterns, the specific needs of people with noncommunicable diseases and priority actions to better address NCDs into Humanitarian Responses Plans (HRPs) and guide donor investment cases
2. Contribution to the development of recommendations for the NCD 2024 UNGASS report

# Regional consultations on NCDs in emergencies

## Objectives

1. present WHO efforts to strengthen the integration of NCDs as part of emergency and preparedness response.
2. review current NCD- related responses in countries during COVID-19 pandemic and other emergencies.
3. recommend a strategic approach to improve WHO technical assistance to countries across preparedness, response, and recovery phases and agree on practical steps to operationalize the NCD in emergencies approach in various the WHO Regions

## Dates

- ❑ **Global kick-off and 1<sup>st</sup> regional technical meetings from 13-15 December 2022, Cairo, Egypt**
- ❑ Series of other Regional meetings across all WHO Regions being discussed
- ❑ Global High-level meeting planned for June 2023

# Overview of WHO's work on NCD in humanitarian emergencies



1. Positioning NCD in humanitarian settings on the global health and security agenda
2. Technical products
3. Country support and lessons learned



# Positioning NCD in humanitarian settings on the global health and security agenda

Recommendations on how to strengthen the design and implementation of policies, including those for resilient health systems and health services and infrastructure, to treat people living with NCDs and to prevent and control their risk factors in humanitarian emergencies

endorsed by WHA75



[https://apps.who.int/gb/ebwha/pdf\\_files/WHA75/A75\\_10Add2-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_10Add2-en.pdf)

## ANNEX 4

### RECOMMENDATIONS ON HOW TO STRENGTHEN THE DESIGN AND IMPLEMENTATION OF POLICIES, INCLUDING THOSE FOR RESILIENT HEALTH SYSTEMS AND HEALTH SERVICES AND INFRASTRUCTURE, TO TREAT PEOPLE LIVING WITH NONCOMMUNICABLE DISEASES AND TO PREVENT AND CONTROL THEIR RISK FACTORS IN HUMANITARIAN EMERGENCIES

1. Paragraphs 31, 46 and 48 of the NCD-GAP call for ensuring the continuity of essential NCD services, including the availability of life-saving technologies and essential medicines, in humanitarian emergencies. Also, in paragraph 40 of United Nations General Assembly resolution 73/2 (2018), Member States reaffirmed their commitment to "strengthen the design and implementation of policies, including for resilient health systems and health services and infrastructure, to treat people living with NCDs and prevent and control their risk factors in humanitarian emergencies, including before, during and after natural disasters, with a particular focus on countries most vulnerable to the impact of climate change and extreme weather events".
2. To provide initial guidance to Member States, the Secretariat submitted Annex 9 of document EB148/7 (2021), which describes the process the Secretariat is following to support Member States in their commitment to strengthen policies to treat people living with NCDs and prevent and control their risk factors in humanitarian emergencies.
3. Building on this initial guidance, this annex suggests recommendations for Member States, international partners and WHO to ensure essential service provision for people living with NCDs in humanitarian emergencies by investing in and building longer-term NCD emergency preparedness and responses during the COVID-19 pandemic and beyond, as part of "build back better" through a multisectoral all-hazards approach.

#### CHALLENGES AND OPPORTUNITIES

##### THE COVID-19 PANDEMIC: A PERSISTING DEADLY INTERPLAY WITH THE NCD EPIDEMIC

4. In December 2020, the United Nations General Assembly adopted resolution 75/130, "noting with concern that non-communicable diseases, notably cardiovascular diseases, cancers, diabetes, chronic respiratory diseases, as well as mental disorders, other mental health conditions and neurological disorders, are the leading causes of premature death and disability globally, including in low- and middle-income countries, and that people living with non-communicable diseases are more susceptible to the risk of developing severe COVID-19 symptoms and are among the most affected by the pandemic, and recognizing that necessary prevention and control efforts are hampered by, inter alia, lack of universal access to quality, safe, effective, affordable essential health services, medicines, diagnostics and health technologies, as well as a global shortage of qualified health workers".
5. Lack of functioning civil registration and vital statistics systems as well as different processes to test and report COVID-19 deaths make it difficult to account for accurate, complete and timely data on causes of deaths and comorbidities, including from COVID-19 among people living with or at risk of NCDs.

# Technical products and tools

## For all NCDs

- ❑ Global Landscape review on WHO's support to member states for noncommunicable diseases in humanitarian emergencies (2022)
- ❑ Contribution to the High-priority package of Health services in Humanitarian settings (H3 package) (2021)
- ❑ Operational Manual on NCD in Humanitarian settings (2023)
- ❑ NCD emergency kit revision (2021) and training modules (2023)
- ❑ NCD and COVIDs briefs, impact modelling (diabetes, cancer)

## For diabetes

- ❑ Clinical guidance for insulin therapy in adults with type 1 diabetes (T1D) within resource-limited and/or humanitarian settings
- ❑ Implications of using insulin stored at temperatures higher or lower than those specified by the manufacturer



# NCD emergency kit revision 2021

Developed by WHO in 2016 after extensive consultations with MS and humanitarian organizations.

Since introduction to April 2021, **over 7,500 kits delivered equivalent to over \$27M USD**

**Purpose:** focus primarily on most common NCD amenable to PHC management: hypertension/CVD, Diabetes, Chronic respiratory diseases plus selected mental health and neurological conditions

**Target:** covers a population of 10'000/ 3 months  
Intended use for primary health care setting only

## Kit content

**Basic module medicines:** medicines to treat diabetes, hypertension, cardiovascular disease, and chronic respiratory diseases, also some drugs for mental health and epilepsies

**Cold chain medicines:** 3 types of insulin (long, rapid and mix 70/30), Glucagon hypo kit, Insulin syringes

**Equipment:** glucometer, stethoscope, otoscope, ophthalmoscope, peak flow meter, thermometer, blood strips



# Responding, documenting and building on countries' experiences

- ❑ Global Landscape review on WHO's support to member states for noncommunicable diseases in humanitarian emergencies across all WHO regions, covering 30+ countries, with all types of graded emergencies
- ❑ Country case studies
- ❑ Global, regional and national WHO meetings to discuss implications of these findings for WHO regional work plans and agree priority actions, as part of the high-level meeting on the road to 2025




**Ukraine crisis**  
Public Health Situation Analysis – Refugee-hosting countries  
17 March 2022

**Executive summary**  
Population: Ukrainian refugees to neighbouring refugee-hosting countries  
Start date of crisis: Feb/Mar 2014, Escalation: 24 Feb 2022  
Typology of crisis: conflict, displacement, insecurity

**Overview of crisis**  
On 24 February 2022, Russian troops entered Ukraine after weeks of heightened tensions and escalation of the conflict in eastern Ukraine that began in 2014. Major attacks have reported across Ukraine, including in the capital, Kyiv, and multiple other urban centres of significant size. Meanwhile, the pre-existing hostilities in Donetsk and Luhanska oblasts (regions) have significantly intensified. As of 14 March 2022, at least 1,761 civilian casualties had been confirmed, including 636 deaths (48 children) and 1,125 injured (82 children); the real toll is likely higher. Up to 15 March 2022, approximately 2,969,600 million people have left Ukraine, fleeing the ongoing hostilities. UNHCR estimates that over 4 million people could flee from Ukraine and seek protection and support across the Region (1). As of 15 March 2022, 31 reports of attacks on health care have been verified by WHO. 29 of which have a 'confirmed' certainty level, and 2 with a 'possible' certainty level; the certainty is decided based on the level of information available to verify each incident.

Public health risk	Level of risk	Rationale
COVID-19	1	Decreasing trends, but high occupancy for ICU care impact capacity to treat conditions with poor ventilation
Other infectious respiratory diseases, including influenza	2-3	Poor hygiene and sanitation risk of influenza-associated circulation, further reduced
Diarrhoeal diseases	2-3	Poor hygiene and sanitation
Measles	2-3	Increased risk of measles conditions with poor ventilation and low uptake of vaccine
Maternal and neonatal health	2-3	Continued delivery of women in 2019 across unsafe deliveries in primary care
Polio	2-3	Ongoing outbreak of COVID-19, and low uptake of vaccine
Cholera	2-3	Last outbreak in 2011. Poor shelter and changed
STIs	2-3	Poor hygiene and sanitation
Cardiovascular disease (CVD) (e.g. heart attack, stroke)	2-3	Interruption in supply of medicines and limited access to health care, critical for people with uncontrolled blood pressure and/or people at higher risk of stroke, most mortality expected in immediate term.
Chronic respiratory diseases (e.g. COPD, asthma)	2-3	Reduction in chronic medical supplies, limited oxygen availability, and potential stressors from increased risk of respiratory infections due to the living conditions (overcrowding, cold, poor shelter), most mortality expected in immediate term.
Diabetes	2-3	Disruption to essential services and supplies of medicines, particularly insulin, most mortality expected in immediate term.
Cancer	2-3	Disruption of treatment and health care capacity leading to increased risk of negative outcomes for oncology patients. Particularly high risk for individuals under immunosuppressive therapy whose direct link of infection in the context of the crisis.





**INTERNATIONAL WEBINAR**  
**Strengthening Noncommunicable Disease Prevention & Management in Humanitarian Settings**  
- Reviewing the Cox's Bazar approach

Tuesday, 14 September 2021  
2.30 pm - 4.30 pm, Bangladesh Time (UTC +6)

communicable diseases (NCDs) among refugees and change in humanitarian settings. Since the onset of the WHO is supporting Government health authorities and integrate NCD services in primary health care of refugee communities, and thus prevent premature deaths among the efforts to support the NCD response have taken place building, health education, provision of emergency monitoring/supportive supervision, which have continued by the COVID-19 pandemic.

to discuss the NCD programme in the Rohingya refugee highlighting collaborative efforts with partners to deliver care and reflecting practical lessons from its implementation.

Join us for the live webinar on:  
<https://who.zoom.us/j/91627212904>  
password: Non@20211

# Preparatory process for the 4th High Level Meeting on NCDs, 2025



2022

- International Strategic Dialogue on NCD and SDGs, April in Ghana
- First Gathering of Global Group of Heads of State and Government on NCD, September in New York
- Global and East Mediterranean Regional technical meeting on NCDs and Emergencies, Cairo, December 2022

2023

- SIDS High Level Technical Meeting on NCDs and Mental Health, Barbados, January 2023
- SIDS Ministerial Conference on NCDs and Mental Health, Barbados, June 2023
- Second WHO global dialogue on financing national NCD responses
- 2<sup>nd</sup> High-level Meeting of the UNGA on UHC
- 10<sup>th</sup> session of the COP to the WHO FCTC (COP10)
- 3<sup>rd</sup> WHO global meeting of national NCDs directors and programme managers
- Global meeting on NCDs an emergencies and humanitarian crises

2024

- Informal consultations with Member States to finalize the recommendations
- Third WHO global Ministerial Conference on the Prevention and Control of NCDs



# Overview of the preparatory process for the 4th High Level Meeting on NCDs



## 2024 Progress report of the United Nations Secretary-General

### Chapter 1

Introduction

### Chapter 3

Progress made in fulfilling the assignments given to WHO

### Chapter 6

Recommendations for consideration by Member States during the negotiations on the 2025 political declaration on NCDs

### Chapter 4

Progress made in fulfilling the commitments made by Member States

### Annex

Individual county data on the 10 progress indicators set out in the technical note published by WHO on 1 May 2017.

### Chapter 2

Progress towards internationally-agreed targets: Where do we stand? (advances and challenges)

### Chapter 5

Progress made in strengthening international cooperation

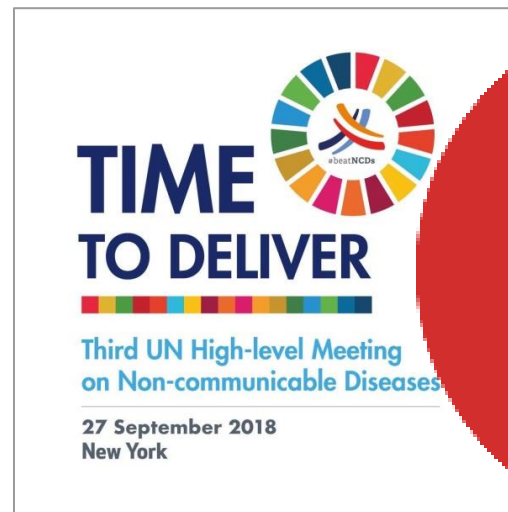


# The fourth high-level meeting on NCD in 2025 will be a time to:

**CELEBRATE** accelerated action at country level to achieve NCD GAP targets and SDG 3.4

**ADOPT** a new, ambitious and achievable Political Declaration on NCDs towards 2050.

**ADVANCE** and accelerate the global NCD response between 2025 and 2030, and place countries on a sustainable path into the next decades.



# Thank You!



Promote **Health** | Keep the World **Safe** | Serve the **Vulnerable**

