

11. NON COMMUNICABLE DISEASE AS A DEVELOPMENT ISSUE

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SUMMARY

In September 2011, Forum Leaders acknowledged that Non-Communicable Diseases (NCDs) are the major cause of premature deaths in the Pacific Islands and declared the Pacific region to be in 'crisis', with the highest NCD rates and associated risk factors in the world. They noted that NCDs (diabetes, cancer, chronic respiratory diseases, heart disease including hypertension and stroke) have reached epidemic proportions in Pacific Island countries (PICs) and are creating a 'human, social and economic crisis', requiring an urgent and comprehensive response.

Pacific leaders have called for effective multi-stakeholder coordination and strategic partnerships that will result in improved health outcomes in the area of NCDs. The challenge is to maximise opportunities for positive synergies between sectors.

Key actions that are required to respond to the Pacific NCD crisis are;

- Strong leadership and mobilisation of all relevant health and non health sectors to respond to the crisis
- PIC ownership and commitment to reducing NCDs
- Establishing institutional mechanisms that bring together all relevant sectors including multilateral and bilateral agencies, governments, NGOs, academia, and others and ensuring strong collective and coordinated action.
- adoption of global targets for the Pacific region (for example, 'the 25 by 25' mortality reduction goal) and invest in robust surveillance system to monitor and measure progress
- inclusion of NCDs into the post-2015 development agenda
- coordination of responses from regional agencies supporting PICs in their efforts to reduce NCDs and,
- adoption and prioritisation of evidence based strategies to prevent and control NCDs using WHO Best Buys interventions (for example compliance with the Framework Convention on Tobacco Control, legislative and regulatory approaches, taxation, healthy trade policy in the Pacific, comprehensive fully funded national plans addressing tobacco use, alcohol, healthy diet and physical activity, and)
- strengthen health system to respond to the NCD crisis through implementation of package of essential NCD interventions

This brief highlights the key regional and international NCD policies and frameworks and provides an overview of key issues that may determine whether or not NCD goals set for 2025 will be achievable in PICs.

KEY ISSUES

Improving Accountability - The key to maintaining the commitment and ensuring resource mobilisation for NCD prevention and control is to ensure accountability. The establishment of a rigorous, independent accountability mechanism will help drive action to meet the global goal of a 25% global reduction in mortality from non-communicable diseases (NCDs) by 2025 (the 25 by 25 goal) and monitor progress towards that goal.

National leadership - explicit support by heads of state and government for NCD prevention and management is essential to progress the issue of NCD Prevention and control. Nationally endorsed NCD plans, goals, and targets, which are fully funded and supported by skilled staff are an essential prerequisite. Given the multi-sectoral nature of NCDs, the expertise and commitment of multiple disciplines needs to be harnessed and national multi-sectoral committees or commissions are seen as one route to ensuring involvement and commitment of other non health players and in having the lead role in monitoring and reviewing progress

towards nationally agreed goals and targets. Accompanying this is the protection from vested interests which is viewed as an essential component.

Improving access – Improving access to health services both in primary and secondary prevention including treatment and counseling continues to be a challenge for the Pacific despite concerted efforts by PICs, regional organisations and development partners.

Policy, planning and regulatory frameworks – Policy, planning and regulatory frameworks are an essential component of NCD prevention and control. Increasingly PICs are utilizing regulatory compliance in line with international conventions and standards (such as the Framework Convention on Tobacco Control) however PICs face many challenges including legal and drafting expertise in developing policies and legislation, sometimes lengthy processes for getting laws enacted and amended, and limitations in human and financial resources, all of which can affect enforcement and strategy implementation. The need for national comprehensive NCD plans which are fully resourced in terms of funding and human resource capacity is key to ensuring effective delivery and implementation of NCD prevention and control programmes.

Financing NCD Prevention and control - A major challenge for PICs is to align health spending with the scale of the NCD challenge. The most sustainable method for raising additional revenue for NCD prevention and management is to develop a health promotion fund (or the equivalent) by substantially and regularly increasing the price of tobacco, alcohol, and other unhealthy products through large phased increases in taxes, otherwise many PICs face the reality of being highly dependent on development partner and other donor assistance. Governments need to commit resources to address the crisis.

Capacity building/supplementation – High staff turnover rate and lack of succession planning in the area of NCD prevention and control and more generally in the area of health services, means that there is an ongoing need for capacity building and supplementation in PICs, especially in smaller island states. As in other development areas, international and regional agencies, with support from donor partners have to some extent focused on filling this gap, although longer term in country placements may be a better solution than short term technical assistance alone.

NCD Surveillance, research, monitoring and evaluation– Although many efforts are underway in PICs to strengthen National Health Information Systems, there are still substantial barriers in providing comprehensive national NCD surveillance that covers mortality data from civil registration systems, morbidity data, population surveys for chronic disease risk factor surveillance, information on policy and regulation, and other data requirements. Often PICs report that they require assistance in improving their overall Health Information Systems (HIS), whilst regional agencies also report difficulties in accessing reliable information in the area of NCDs. Some coordination is already ongoing in this area and this needs to be strengthened to improve data collection and improve access to data for countries.

BACKGROUND

It is well recognised that to tackle the global threat from NCDs and meet such global and regional targets, multi-sectoral partnerships and action across health and other key sectors is critical to tackling the underlying social, economic, political, environmental and cultural determinants.¹

In 2012, the UN conference on sustainable development, Rio+20, referred to non-communicable diseases (NCDs) as “one of the major challenges for sustainable development in the 21st century” emphasising the fundamental link between health and development. The social and system costs of NCDs represent a huge and increasingly burden in low-income and middle-income countries. Tobacco use alone claims millions of lives globally.

Although the full impact of NCDs on development may not yet be fully understood, increasing global attention is being given to NCDs at the political level and among other stakeholders outside the health system.

In September 2011, the UN General Assembly adopted the political declaration on non communicable diseases² which sets global priorities to tackle NCDs. In May 2012, the World Health Assembly approved a global target of

a reduction in NCD associated premature mortality by 25% by 2025. The 2012 UN resolution on global health and foreign policy also recognises the need to address these diseases.

It has long been recognized that the Pacific is experiencing a 'double burden' of disease with the addition of chronic disease to the traditional communicable disease profile. With this comes the need to look at health system responses.

Recognising the importance of NCDs to the wellbeing of Pacific Nations, Pacific leaders, have repeatedly called for greater efforts in NCD prevention and control, endorsing high level regional policies and documents, such as the Global NCD Action Plan 2013–2020, the Pacific Plan, MDG's, Healthy Islands, Regional NCD Framework, the Framework Convention on Tobacco Control, WHO Global Strategy on Diet, Physical Activity and Health and Global Strategy to Reduce the Harmful Use of Alcohol.

In response to these concerns the Secretariat of the Pacific Community, in collaboration with the World Health Organization, funded through Australian and New Zealand development partners established the Pacific NCD Framework and the 2- 1-22 NCD Programme (2 organisations, one team serving 22 Pacific islands and Territories), which operated as the lead NCD regional programme between 2008 - 2012.

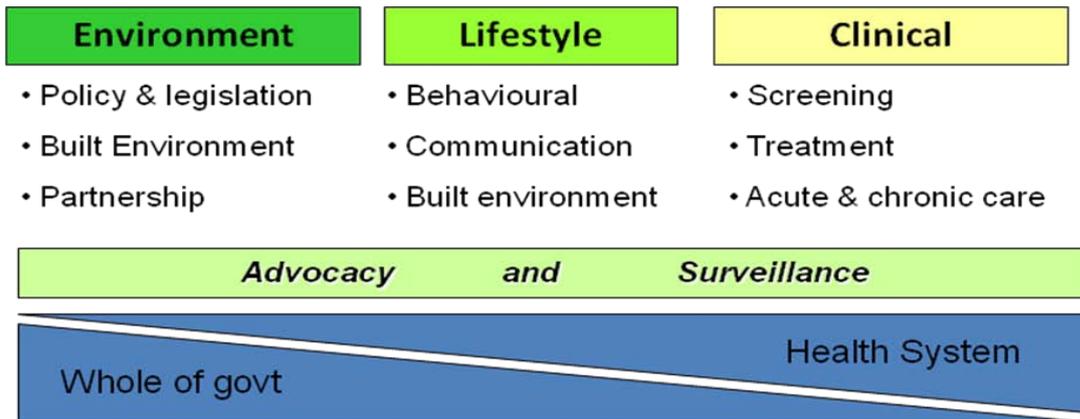
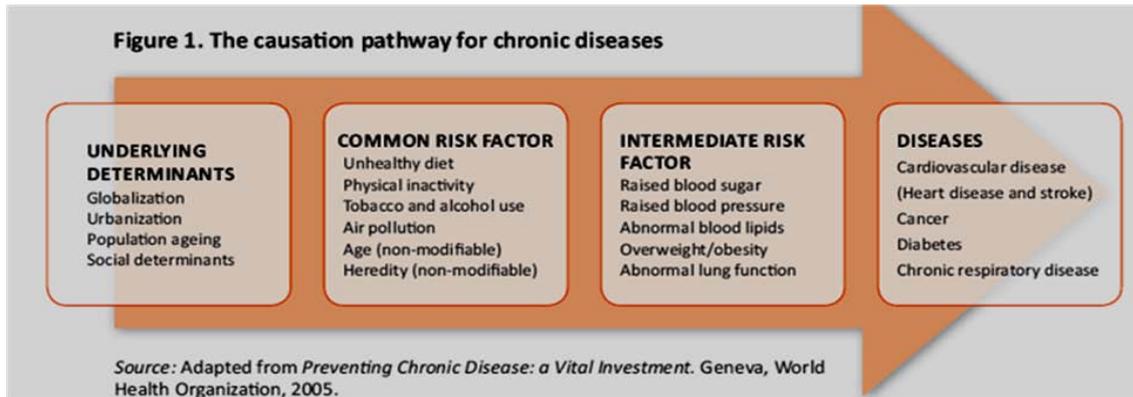
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1. NCDs: a challenge to sustainable human development. The Lancet (Online). February 12, 2013
2. United Nations General Assembly. Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-Communicable Diseases. New York: United Nations, 2011

KEY DOCUMENTS & HYPERLINKS

1. UN Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of NCDs - http://www.un.org/ga/search/view_doc.asp?symbol=A/66/L.1 (accessed February 28th 2013)
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Annex I Pacific NCD Framework



Annex II: WHO BEST BUYS Interventions

Table 2: “Best Buy” Interventions

Risk factor / disease	Interventions
Tobacco use	<ul style="list-style-type: none"> • Tax increases • Smoke-free indoor workplaces and public places • Health information and warnings • Bans on tobacco advertising, promotion and sponsorship
Harmful alcohol use	<ul style="list-style-type: none"> • Tax increases • Restricted access to retailed alcohol • Bans on alcohol advertising
Unhealthy diet and physical inactivity	<ul style="list-style-type: none"> • Reduced salt intake in food • Replacement of trans fat with polyunsaturated fat • Public awareness through mass media on diet and physical activity
Cardiovascular disease (CVD) and diabetes	<ul style="list-style-type: none"> • Counselling and multi-drug therapy for people with a high risk of developing heart attacks and strokes (including those with established CVD) • Treatment of heart attacks with aspirin
Cancer	<ul style="list-style-type: none"> • Hepatitis B immunization to prevent liver cancer (already scaled up) • Screening and treatment of pre-cancerous lesions to prevent cervical cancer

The identified set of strategies form a basis for analysing costs of scaled-up implementation in the LMICs through 2025 (see Box 2)⁹.

Annex III Global Targets for NCD by 2025



