THE MULTI-SECTORAL RESPONSE TO NCDs: PAHO perspective

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Strengthening the multi-sectoral response to NCDs in the Caribbean.
National NCD Commissions
Bridgetown Barbados June 5th 2015
NCD epidemic

Deaths due to Noncommunicable Diseases, Countries of the Americas

Select Sex

All

Select Age Group

30-69

Select Country

All

Select year

2012

Number of deaths by groups of causes

Blue bar represents Noncommunicable diseases (our target causes of death)

- Noncommunicable diseases: 1,498,961 (77.88%)
- Injuries: 278,688 (14.48%)
- Communicable, maternal, perinatal and nutrition: 147,142 (7.64%)

Deaths due to Noncommunicable diseases, breakdown by NCDs subgroups of causes of death

Red bars represent target NCDs causes of death

- Malignant neoplasms (Cancer): 494,784 (33.01%)
- Cardiovascular diseases: 484,898 (32.35%)
- Digestive diseases: 145,233 (9.69%)
- Diabetes mellitus: 120,174 (8.02%)
- Respiratory diseases: 91,617 (6.11%)
- Neuropsychiatric conditions: 61,917 (4.13%)
- Genitourinary diseases: 42,732 (2.85%)
- Endocrine disorders: 25,037 (1.67%)
- Other neoplasms: 12,483 (0.83%)
- Musculoskeletal diseases: 11,078 (0.74%)
- Congenital anomalies: 4,728 (0.32%)
- Skin diseases: 4,041 (0.27%)
- Oral conditions: 148 (0.01%)
- Sense organ diseases: 91 (0.01%)

Source: Regional Mortality Information System, Pan American Health Organization (PAHO/WHO), 2014
NCD – economic dimension

• “Costs of inaction” (from 2011 to 2025): **US$ 7 trillion**;

• **Costs of taking action** (implementing “best buys”)
  o US$ 1 per capita/per year in low income countries
  o US$ 1.5 per capita/per year in lower-middle income countries;
  o US$ 3 per capita/per year in upper middle income countries
Man-made & preventable

UNHEALTHY LIFESTYLES:

- ALCOHOL ABUSE
- TOBACCO USE & EXPOSURE TO SHS
- ULTRA-PROCESSED FOOD
- SUGARY DRINKS
- LACK OF PHYSICAL ACTIVITY
Virginia Slims are slimmer than the fat cigarettes men smoke. And rightly so.

You've come a long way, baby!
PARADIGM SHIFT
Calls for multi-sectoral action

• Port of Spain declaration: Uniting to stop the epidemic of chronic NCDs (2007);
• WHO Framework Convention on Tobacco Control
• Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases (2011);
• Sustainable Development Goals;
• WHO Global Action Plan on NCDs (GMF)
• PAHO Global Action Plan on NCDs
• PAHO Plan of Action for the Prevention of Obesity in Children and Adolescents
Port of Spain Declaration (2007)

• “That we strongly encourage the establishment of **National Commissions** on NCDs or analogous bodies to plan and coordinate the comprehensive prevention and control of chronic NCDs”;
• 36. Recognize that effective NCD prevention and control require leadership and **multisectoral approaches** for health at the government level, including, as appropriate, **health in all policies** and **whole-of-government approaches** across such sectors as health, education, energy, agriculture, sports, transport, communication, urban planning, environment, labour, employment, industry and trade, finance, and social and economic development;
Synergies with other goals and with sustainable development goals overall:

Positive synergies between health and the other sectors, and avoidance of contradictions among sector goals and strategies, might be achieved by framing the goals in such a way that attainment requires policy coherence and shared solutions across multiple sectors.

Source: Issues Brief 10: HEALTH AND SUSTAINABLE DEVELOPMENT/ Available at: https://sustainabledevelopment.un.org/content/documents/1554TST_compendium_issues_briefs_rev1610.pdf
WHO Global Action Plan on NCDs

Global Monitoring Framework

Nine Targets for 2025

1. Establish 80% availability of affordable technology and medicine to treat NCDs
2. Ensure that 50% of people receive preventive therapy for heart attacks and strokes
3. Halt the rise in diabetes and obesity
4. 30% reduction in salt intake
5. 10% reduction in the harmful use of alcohol
6. 25% reduction in prevalence of high blood pressure
7. 30% reduction in tobacco use
8. 10% reduction in prevalence of insufficient physical activity
9. 25% reduction in premature death of people age 30 to 70 from cardiovascular diseases, cancers, diabetes, or chronic respiratory diseases

Successful implementation of the Global Action Plan will contribute to:

Action versus Inaction in developing countries
WHO “Best buys”

There are 15 very cost-effective interventions described by WHO to face NCDs, the implementation of the majority of them resides outside the health sector. (i.e. taxes, restrictions on advertisement, promotion and sponsorship, etc).
Strategic Lines of Action:

Multisectoral policies and partnerships for NCD prevention and control:

• Build and promote **multisectoral action** with relevant sectors of government and society, including integration into development, academic, and economic agendas.
Specific Objective 1.1:

Promote integration of NCD prevention in sectors outside of health, at the government level, and conducted in partnership with a wide range of nonstate actors...
Specific Objective 1.2:

Strengthen or develop national health plans based on multisectoral approaches, with specific actions, targets, and indicators geared to at least the four priority NCDs and the four main main risk factors.
Actions for Member States

• (a) Establish or strengthen, as appropriate, national and subnational mechanisms ... to engage the multiple sectors within government and other public and private stakeholders more widely ...  

• (f) Integrate prevention and control of NCDs in the national development agenda, where relevant, respecting the country context and priorities and emphasizing the link between NCDs and sustainable development.
Actions for PASB

(a) Continue to promote, establish, support and strengthen engagement or collaborative partnerships that enable and leverage collaboration to **catalyze multisectoral approaches** at the regional, subregional, and national levels in a harmonized manner
TOBACCO CONTROL at country level

Ratification WHO FCTC
Tobacco Control legislation

Legislative Branch

Implementing Legislation

WHO FCTC

Judicial Branch

Legal challenges to legislations

Executive Branch

Policies

Implementation of Legislation

M of Health

M of Education

M of Trade

M of Agriculture

M of Environment

M of Labor

M of Finances

Customs

M of Foreign Affairs

International Organizations

WHO/PAHO

Other United Nations agencies: ILO, FAO, UNDAF

Inter American Human Right System

World Bank/ICSID

World Trade Organization

Smoke-free environments (Art. 8)
Health Warnings (Art. 11)
Ban on tobacco advertisement, promotion, sponsorship (Art 13); cessation (Art. 14); Monitoring and Evaluation (Art. 20)
Education and population awareness (Art. 14)

Crop diversification (Art 17)
Environmental protection (Art. 18)

Tobacco Taxes (Art 6)
Illicit Trade (Art 15)
Tools / Processes

- Global Coordination Mechanism on NCDs
- UN Interagency Task Force on NCDs
- Inter American Task Force on NCDs
• PAHO Plan of Action Health in all Policies
• PAHO Guide on Health Impact Assessment
• Guidelines for integration of NCDs in the UNDAFs
Challenges

• Accountability: Goals and targets;

• Governance:
  o Stewardship from MoH;
  o Strengthening the synergies with other sectors;
  o Help to promote the other sector’s agenda, without imposing the health agenda;

• Individual responsibility vs enabling settings vs the role of the State;

• Interference of Industry;

• Necessary link to development (beyond short term economic growth).
CONCLUSIONS

The multi-sectoral approach is needed to ensure:

• A comprehensive response that tackles the "causes of the causes" of the NCDs;
• Policy coherence among governmental sectors;
• Identification of "common grounds" for work;
• Strengthening of synergies among sectors;
• Amplification of the actions of each sector that contribute more to the common objective.
Thank You

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