

Information session on NCDs and mental health in preparation for EB150
Thursday, 21 October 2021

SUMMARY: The WHO Secretariat provided updates on the various documents under the broader agenda item on noncommunicable diseases (NCDs) to be discussed at the 150th session of Executive Board (EB150) from January 24 to 29, 2022. Presentations outlined consultation processes, comments received by WHO, the content of documents being developed ahead of EB150, as well as requests for the WHO Executive Board. Canada intervened to ask further details on the Global Coordination Mechanism on the Prevention and Control of NCDs. Other Member States raised comments on timing for the publication of the EB documents; the incorporation of comments received by WHO; monitoring, reporting and targets; costing and financing; and the format for future meetings.

Speakers:

- Opening remarks: Dr. Ren Minghui, Assistant Director-General, UCN/Communicable and Noncommunicable Diseases, WHO and Dr Naoko Yamamoto, Assistant Director-General, UCN/Healthier Populations
- Dr. Bente Mikkelsen, Director, Department for NCDs, WHO (update on assignments 1, 2, 3, 4, 5, 6)
- Dr. Rudiger Krech, Director, Health Promotion Department, WHO (update on assignment 6)
- Dr. Devora Kestel, Director, Department for Mental Health and Substance Use, WHO (update on assignments 6, 7, 8)
- Dr. Francesco Branca, Director, Department for Nutrition and Food Safety, WHO (update on assignment 9)
- Dr. Svetlana Akselrod, Director, Global NCD Platform, WHO (update on assignment 10)

1. Develop an implementation roadmap 2023–2030 for the global action plan for the prevention and control of NCDs 2013–2030 (NCD GAP 2013-30) (see Decision [WHA74\(10\)](#)) – Annex 1

- The WHO Secretariat shared feedback from **consultations with regional Technical Experts**. Issues that required attention to move the NCD agenda forward were identified during these consultations. These included policy and implementation gaps; the role of the private sector; data collection and surveillance; national multisectoral action plans; financing; and capacity-building. Prioritization of interventions based on the diverse epidemiological profiles as well as socio-economics and health systems were considered important. The regional technical experts also mentioned a need to ensure progress towards the 2030 SDG target agenda for premature mortality. Some called for more granular data, as well as for additional data around co-morbidities. Regions raised the issue of financing, particularly as the COVID-19 pandemic response shifted resources from national NCD plans. New technologies for disease management and new service delivery models, such as task shifting and telemedicine, were also identified due to the impact of COVID-19.
- The roadmap was expected to align with the UHC framework and to include cost-effective mental health interventions. The WHO Secretariat outlined the structure of the implementation roadmap, which would include: i) mandate, scope, purpose and modalities; ii) strategic directions for implementing the WHO Global NCD Action Plan 2013-2030; and iii) recommended actions to be taken in 2022 by Member States, international partners and Secretariat. (see slide 30 for details)
 - **Recommendations for Member States** to be taken in 2022 include the following: strengthen capacity for multi-stakeholder engagement, cross-sectoral collaboration, and

partnerships; strengthen national monitoring with reliable and timely data; and prioritize research.

- **EB150:** The Executive Board is invited to request the Secretariat to conclude the work on the development of an implementation roadmap 2023–2030 (for the global action plan for the prevention and control of NCDs diseases 2013–2030) in conjunction with the planned development of a draft update to the updated appendix 3 of WHO’s global action plan for the prevention and control of noncommunicable diseases 2013–2030, in consultation with Member States and taking into account the views of other stakeholders, before the end of 2022, for consideration by the EB and World Health Assembly in 2023.

2. Develop recommendations to strengthen and monitor diabetes responses within national noncommunicable disease programmes, including considering the potential development of targets in this regard (Resolution [WHA74.4](#)) – Annex 2

- The WHO Secretariat outlined the structure of the report (i.e. challenges/opportunities; targets; recommendations for Member States, partners and WHO).
- The Secretariat also highlighted the five **voluntary global diabetes targets for 2030**: 80% of people with diabetes are diagnosed; 80% of people with diagnosed diabetes have good control of glycaemia; 80% of people with diagnosed diabetes have good control of blood pressure; 60% of people with diabetes of 40 years or older receive statins; 100% of people with type 1 diabetes have access to affordable insulin treatment and blood glucose self-monitoring.
 - *Note: These are the same targets that were proposed in the [draft paper](#) circulated over the summer.*
- **Recommended actions for Member States** include the following: strengthen national capacity, leadership, governance, multisectoral action and partnerships; reduce modifiable risk factors for diabetes and underlying social determinants; strengthen health systems to address prevention and control of diabetes through PHC and UHC; promote research and innovation; monitor trends and determinants of diabetes and evaluate progress. (see slide 33 for details)
- **EB150:** The Executive Board is invited to adopt the recommendations for Member States, international partners, and WHO, as well as the five global diabetes coverage targets and recommend their endorsement at the 75th World Health Assembly.

3. Develop a draft global strategy on oral health (Resolution [WHA74.5](#)) – Annex 3

- The strategy encompasses a vision, a goal to guide Member States, guiding principles, and strategic objectives. The strategy also outlines the role of Member States, partners and the WHO Secretariat. (see slides 35-38 for details)
 - The **goal** of the strategy is to guide Member States to (a) develop ambitious national responses to promote oral health; (b) reduce oral diseases, other oral conditions and oral health inequalities; (c) strengthen efforts to address oral diseases and conditions as part of UHC; (d) consider the development of targets and indicators based on national and subnational contexts, building on the guidance to be provided by the WHO global action plan on oral health, to prioritize efforts and assess the progress made by 2030.
 - The **strategic objectives** touch on 1) oral health governance; 2) oral health promotion and oral disease prevention; 3) the health workforce; 4) oral health care; 5) oral health information systems; and 6) the oral health research agenda.

- **EB150:** The Executive Board is invited to adopt the global strategy on oral health and recommend its endorsement at the 75th WHA.

4. Develop 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 (Resolution [A/RES/73/2](#)) – Annex 4

- The report will note the lack of progress in achieving SDG target 3.4 on NCDs as well as, the impact of the COVID-19 pandemic on the NCD epidemic.
- The report will also provide recommendations for Member States, international partners and WHO (see slides 41-43). **Recommended actions for Member States** include the following (see slide 41 for details): i) integrate and strengthen policies, programs and services to treat people living with NCDs (PLWNCDs) and prevent/control risk factors into national COVID-19 response and recovery plans, in line with the UN Comprehensive Plans; ii) collect and use data to assess the impact of COVID-19 on PLWNCDs; iii) maintain, restore and scale up prevention, early diagnosis and care for PLWNCDs; iv) mobilize COVID-19 and other emergency funding to support the continuity of essential services, including NCD medicines; v) ensure meaningful engagement of civil society, health professionals and PLWNCDs in the planning, implementation and evaluation of national COVID-19 preparedness and response plans; vi) prioritize PLWNCDs in national deployment and vaccination roll-outs for COVID-19 vaccines; vii) raise awareness about the links between COVID-19 and NCDs; viii) work towards resilient health systems with UHC and PHC as an essential foundation for effective preparedness and response to health emergencies.
- **EB150:** The Executive Board is invited to adopt the recommendations and recommend their endorsement at the 75th WHA.

5. Develop a progress report on the implementation of the global strategy to accelerate the elimination of cervical cancer as a public health problem and its associated goals and targets for the period 2020–2030 (Resolution [WHA73.2](#)) – Annex 5

- **EB150:** The Executive Board is invited to note Annex 5. *Note: This item was not covered during the session but information can be found in slides 8-20.*

6. Develop a report on progress achieved in the prevention and control of noncommunicable diseases and the promotion of mental health ([Decision WHA72\(11\)](#)) – Annex 6

- The WHO Secretariat provided a brief overview of progress on **prevention and control of NCDs**. Global deaths from NCDs increased for those 30 years of age and up over the last two decades.
- There have been certain accomplishments, in particular with tobacco control, which saw investments in monitoring and in cessation programs. More countries are also investing in taxation efforts, which have previously resulted in notable reductions of tobacco use. WHO has increased collaboration with the World Bank, OECD, Global Fund, Gavi and IMF on health tax policies and administration, and are collecting best country practices.
- While there have been successes in preventing NCDs, inactivity is an urgent problem to address, particularly among girls. As such, it is necessary to create environments that promote physical activity in society.

- On the topic of **mental health**, the WHO Secretariat noted that the global situation “remains challenging,” with close to 1 billion people experiencing a mental health disorder in 2019 and USD 1 trillion lost annually in economic productivity due to depression and anxiety. COVID-19 has had a significant impact; anxiety disorders increased by 25.6% and depression increased by 27.6% since 2019, with women and young people more affected than others.
- The EB report will note progress on implementing the Comprehensive Mental Health Action Plan 2013-2030, including updated data based on [Mental Health Atlas 2020](#) (released in October 2021), WHO Secretariat activities in response to COVID-19, and updates on the [Special Initiative for Mental Health](#) and other key leadership activities and products. A World Health Report in 2022 is also expected to be announced.
- **EB150:** The Executive Board is invited to note the annex, including its component on the prevention and control of NCDs, and its component on mental health.

7. **Develop an intersectoral global action plan on epilepsy and other neurological disorders in support of universal health coverage (Resolution [WHA73.10](#)) – Annex 7**

- The WHO Secretariat outlined the **vision, goals and guiding principles** of the latest draft Intersectoral Global Action Plan on Epilepsy and other Neurological Disorders (which differ slightly from those in the [June draft of the Global Action Plan](#)) (see slide 57 in attached presentation)
- The WHO Secretariat reminded Member States of the 5 **strategic objectives** of the Action Plan (which each include proposed actions for Member States, WHO Secretariat, international and national partners): 1) prioritization and governance; 2) diagnosis, treatment and care; 3) promotion and prevention; 4) research, innovation and information systems; and 5) public health approach to epilepsy.
- The **global targets**, with revisions since the June draft of the Global Action Plan, were also highlighted (see slide 59 in presentation).
- **EB150:** The Executive Board is asked to: (OP1) ENDORSE the Intersectoral global action plan on epilepsy and other neurological disorders 2022–2031; (OP2) URGE Member States to develop national responses to the overall implementation of the Intersectoral global action plan on epilepsy and other neurological disorders 2022–2031; (OP3) REQUEST the Director-General to submit a report on progress made in implementing this decision to the World Health Assembly in 2025, 2028 and 2031

8. **Develop an action plan (2022–2030) to effectively implement the global strategy to reduce the harmful use of alcohol as a public health priority (Decision [EB146\(14\)](#)) – Annex 8**

- The WHO Secretariat highlighted the **consultation process** on the drafts of the Action Plan, including a web-based consultation from July to September, and an informal consultation with Member States on August 31 and October 8, 2021. Member States were also provided with an opportunity to submit written comments until October 18, 2021, which was considered to be a “useful extension” according to the WHO Secretariat, who received 16 new submissions.
- **EB150:** The Executive Board is invited to consider the draft action plan to effectively implement the global strategy to reduce the harmful use of alcohol and recommend its endorsement at the 75th World Health Assembly.

9. Develop recommendations for the prevention and management of obesity over the life course, including considering the potential development of targets in this regard (Resolution [WHA74.4](#)) – Annex 9

- The WHO Secretariat drew attention to **comments received** on the document (on the analysis, general principles, recommendations, and targets) during the informal and web-based consultations, and how WHO addressed these comments (see slides 66-68).
- With respect to **targets** (see comments and how they were addressed on slide 68), Member States and non-State actors commented that halting the rise of obesity in children was more realistic than reducing obesity, and suggested an intermediate outcome target of reducing children and adult intake of free sugars to <10% of total energy intake. They also proposed increasing the adoption of regulations to control marketing of foods and non-alcoholic beverages; and refining and expanding the target on physical activity. The WHO Secretariat mentioned that there has been a rise in obesity for adolescents and adults and that it is important to increase PHC coverage with better-refined and expanded targets to measure physical inactivity. Other comments on targets may require further consideration or will be specified in the operationalization of target measurement (e.g. including a target on increasing the availability of healthy food in schools, and increasing the coverage of PHC services that include the diagnosis and management of obesity in children and adolescents)..
- The WHO Secretariat emphasized the needs of vulnerable populations, and added that they are developing guidelines that incorporate a risk-based approach (e.g. BMI complemented by other metabolic biomarkers).
- The WHO Secretariat requested that Member States provide their input on a suggestion for a potential roadmap on the reduction of obesity.
- **EB150:** The Executive Board is invited to adopt the recommendations for governments, other societal actors and WHO, as well as the proposed targets and recommend their endorsement at the 75th World Health Assembly.

10. Develop a workplan for the WHO global coordination mechanism (GCM) on the prevention and control of noncommunicable disease (Decision [WHA74\(11\)](#)) – Annex 10

- The GCM has been extended and the WHO Secretariat has been developing a workplan for 2022-2025 that consists of a vision, theory of change, logic model and indicators. The WHO Secretariat indicated that it had consulted Member States and was working closely with different levels in WHO. The GCM was said to have value across 4 of the 5 WHO country-support functions (policy, technical assistance, capacity-building and institutional building), and is underpinned by five **priority areas**: 1) knowledge collaboration and dissemination of innovative multistakeholder responses; 2) support to Member States on engagement with non-State actors; 3) convener of civil society, including people living with NCDs; 4) facilitator for the strengthened capacity of member States and civil society to develop national multistakeholder responses; and 5) global stocktaking of multistakeholder action.
- The draft GCM workplan 2022-2025 covers the three strategic functions of the WHO (leadership functions, technical products and country support) and includes several actions that are each accompanied by activities that identify expected outcomes and performance measures.

- **EB150:** The Executive Board is invited to request the 75th World Health Assembly to take note of the workplan.

MEMBER STATE QUESTIONS/DISCUSSION

Member States commented on the amount of work completed and the comprehensiveness of the update provided. Specific comments were also offered:

- The **US** and **Malaysia** underscored the importance of receiving the **documents as far as possible in advance of Executive Board**.
- The **US** and **Finland** both sought further details on what comments had been incorporated in the documents following consultations.
- The **US** asked that the following be included in the EB report: the **process for establishing targets** to better understand how ambitious and achievable they are; an **outline of monitoring and reporting requirements** for Member States and WHO; and more information about the **process and timing for updating [appendix 3](#)**. Echoing comments on monitoring and reporting, **Malaysia** noted that a more pragmatic approach may be needed for reporting given the number of resources it requires. The WHO Secretariat indicated that they will be able to set out a proposed timeline for appendix 3 “rather quickly” as they plan to have the document ready by September 2022 to present to the Executive Board in 2023. With respect to the diabetes targets, data will be collected from information that is already recorded and, as such, will not represent additional burden for Member States. Speaking on targets and monitoring more broadly, the Secretariat expected to publish a document setting out a global monitoring framework “soon.”
- In speaking to the **GCM workplan**, **Canada** asked whether consideration had been given to developing a mechanism for following up on implementation of guidance regarding engagement with non-State actors (NSAs), particularly as unhealthy diets are driven in part by some private sector actors. Canada was also interested in learning more about the cost and financing of the implementation plan, and more specifically which of the activities would be funded by countries. The WHO Secretariat noted that it was working on independent monitoring of implementation, and that the workplan looks at stocktaking of meaningful contributions from NSAs and leveraging the expertise of NSAs, including their contributions and commitments. The work plan aims to contextualize NSA accountability, resources, implementation, and guidance at the country level. The Secretariat is assessing the impact of different approaches, including regulatory approaches, with the hope to have materials for revision of appendix 3 next year. In terms of financing, the Secretariat is developing the 2022-23 program budget for the implementation roadmap and is conscious of the different levels of funding required for various programs/initiatives. They are focusing on country-level priorities in considering financing models.
- **Finland** believed that the **approach and structure for WHO reporting on NCDs** may require rethinking given the number of resolutions that are addressed at governing body meetings, and requested that the Secretariat organize a consultation on this matter. The WHO Secretariat indicated that they are ready to have an informal consultation to determine a format for the future.

- Recognizing that more face-to-face meetings will be possible in 2022, **Malaysia** hoped that the Secretariat would consider a **hybrid option** that would allow technical experts to participate in addition to Geneva representatives. The WHO Secretariat indicated that the equitable representation of experts around the globe will need to be taken into account moving forward.
- **New Zealand**, recalling the work underway on sustainable financing, highlighted the importance of Member States' understanding of **costing and prioritizing** of proposed actions across the NCD-related proposals. **Norway** hoped that other countries would contribute to NCD work, which is underfunded and merits more resources. The WHO Secretariat mentioned that Norway is currently the only country with a development strategy of NCDs. They also indicated that COVID-19 has shifted funding away from NCDs, and that experts pointed to a need for more granular data to ensure NCDs are incorporated into UHC and emergency situations. The Secretariat further noted that seed money can attract other partners and can provide an opportunity to plan.

Drafted: OIA/Elias, GAC/Song