

A tsunami of noncommunicable diseases can be avoided if action taken now, reports say

Language English



Speakers of the opening plenary, Global NCD Alliance Forum, 9 February 2020, Sharjah (UAE). ©NCDA/Gilberto Lontro

NCD Alliance and the World Health Organization release reports on the first day of major meeting in the United Arab Emirates

Monday, 10 February 2020 (Sharjah, UAE) — Governments around the world must dramatically accelerate their response to the global epidemic of noncommunicable diseases (NCDs) to save millions of lives by 2025, according to two new reports from the World Health Organization (WHO) and the NCD Alliance (NCDA) released at the [Global NCD Alliance Forum](#) [1] taking place in Sharjah, United Arab Emirates this week.

NCDA, a global civil society alliance and co-convenor of the Forum with local organization Friends of Cancer Patients (FOCP), has released a new report, *Bridging the Gap*, which offers a civil society perspective and critique on the status of progress on addressing NCDs.

The WHO [NCD Progress Monitor 2020](#) [2] charts progress by 194 countries against a set of 10 indicators on NCDs. The indicators include setting time-bound targets to reduce NCD deaths; developing all-of-government policies to address NCDs; implementing key tobacco demand reduction measures, measures to reduce harmful use of alcohol and unhealthy diets and promote physical activity; and strengthening health systems through primary health care and universal health coverage.

According to the NCDA report, data from a survey of its member national and regional NCD alliances reflects this stark reality. Only 20 per cent of alliances believe that their country is on track to meet either the 2025 or 2030 NCD targets, considering current NCD prevention and control policies. In 2015, world leaders committed to reduce premature deaths from NCDs by one-third by 2030. Furthermore, only 18 per cent of NCDA survey respondents believe that their country has sufficient accountability mechanisms to ensure these targets are actually met.

"This report confirms what we've long suspected – that the United Nations targets aimed at reducing NCDs are not bearing fruit on the ground," said Katie Dain, CEO of the NCD Alliance. "Unless the gaps in the

response are addressed, we'll be faced in 2030 with a tsunami of disease-related impacts, both human and economic, that could have been avoided."

Noncommunicable diseases are the leading cause of premature death globally. NCDs account for just over 70 per cent of all deaths worldwide. 41 million people die due to NCDs every year, including cardiovascular disease, cancer, stroke, diabetes and respiratory diseases. 15 million of those people are under 70 years old. The majority of these premature deaths and the devastating impact on families and communities all over the world is preventable, said the NCDA.

Both reports highlight a worrying trend of slow and inadequate progress on NCDs at the country level.

Whilst there is a strong body of evidence on what works to prevent or delay most premature NCD deaths, implementation by countries of a package of cost-effective policies lags behind the evidence and economics.

[Bridging the Gap](#) [2]points to five major gaps that are impeding progress – political leadership, investment, care, community engagement, and accountability.

For example, just two countries, Brazil and Turkey, have implemented all five of the tobacco demand reduction measures from the Framework Convention on Tobacco Control. Also, only a small minority of national health systems globally currently have the capacity to provide the necessary treatment and care for everyone living with NCDs: Only one-third of countries, for example, provide drug therapy and counselling to prevent heart attacks and strokes; and just 40 per cent of countries provide palliative care in primary healthcare or in the community. A vast majority of people living with NCDs worldwide cannot access the care they need, either because of lack of availability or because it is unaffordable locally.

Leadership gap

Global commitments on NCDs are not enough – they must be matched with the highest level of political leadership and transformative action at a national level. Deficits in leadership, good governance, planning and multi-sectoral coordination exacerbate NCDs and inequality. To meet national targets and save lives, a whole-of-government and society response to NCD causes, impacts and solutions is required.

Investment gap

Improving health is a long-term strategic investment, yet often seen purely as an expense. Despite the benefits of acting on NCDs outweighing the costs of inaction, the investment gap remains immense. Investment in reducing the NCD burden has been neglected for too long and demands significant, predictable, sustained and trackable financing at domestic, development and donor levels.

Care gap

To achieve health for all, health systems must be reoriented to integrate NCD prevention and care across the life course to ensure adequate and equitable access without incurring catastrophic expenditure. Many health systems remain underfunded, unprepared and ill-adapted to respond to complex care and treatment needs of people living with noncommunicable and chronic conditions.

The community engagement gap

Governments' recognition and meaningful involvement of civil society – including people living with NCDs, organisations and communities – in the NCD response has been too slow and suboptimal. As change agents, civil society plays a critical role in accelerating progress on NCDs – as demand creators, campaigners, drivers of innovation, in monitoring and holding governments to account.

Accountability gap

Accountability, a cyclical process of monitoring, review and action, including data and surveillance systems, is crucial to fill the void between political promises, plans and rights, and effective NCD policy implementation, programmatic change and tangible impact. In addition to global and national processes, independent civil society-led accountability

mechanisms can help close this gap and accelerate effective action.

Minimal progress on NCDs

WHO's [NCD Progress Monitor 2020](#) [2] measures the progress of 194 countries against 10 key indicators:

- National NCD targets and indicators
- Mortality Data
- Risk factor surveys
- National integrated NCD policy/strategy/action plan
- Tobacco demand-reduction measures
- Harmful use of alcohol reduction measures
- Unhealthy diet reduction measures
- Public education and awareness campaign on physical activity
- Guidelines for management of cancer, cardiovascular disease (CVD), diabetes and chronic respiratory disease
- Drug therapy/counselling to prevent heart attacks and strokes

The Monitor's score card reveals little progress made since 2015, and progress is uneven across countries. Not a single country meets all indicators. Half of all countries meet 3 of the 19 indicators and subindicators being measured.

"Countries are still failing to meet basic indicators. If they continue on this path then millions of people will die needlessly from heart attacks, stroke, diabetes, cancers, and respiratory disease." said Dr Ren Minghui, Assistant Director General for UHC/Communicable & Noncommunicable Diseases, World Health Organization, Switzerland

An alarming number of countries are lacking even the most fundamental building blocks of a national response. Roughly a quarter (26%) of all countries do not have a multisectoral national NCD plan in place, and one-third of countries lack time-bound national NCD targets to drive and monitor progress. Furthermore, only 19 per cent of countries have fully implemented tobacco taxes; only 20 per cent of countries are doing well on salt reduction; and only one-third of countries are providing at least basic NCD services, such as drug therapy and counselling to prevent CVD and strokes.

"We know what works — primary health care, with its emphasis on promoting health and preventing disease, is the most inclusive, effective and efficient way to reduce premature mortality from NCDs and promote mental health and well-being. But the evidence before us is indicating that we need to move well beyond the health sector to really make a dent in the epidemic. We need to address the root causes of NCDs, in the food we eat, the water we drink, the air we breathe and the conditions in which people live, work and play," said Dr Minghui.

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Note to Editors

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[Noncommunicable diseases](#) [5]

[report](#) [6]

[accountability](#) [7]

[WHO](#) [8]

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[2] <https://www.who.int/publications-detail/ncd-progress-monitor-2020>

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[4] <http://staging.ncdalliance.org/category/tags/ncds>

[5] <http://staging.ncdalliance.org/taxonomy/term/285>

[6] <http://staging.ncdalliance.org/taxonomy/term/54>

[7] <http://staging.ncdalliance.org/taxonomy/term/28>

[8] <http://staging.ncdalliance.org/taxonomy/term/542>

[9] <http://staging.ncdalliance.org/taxonomy/term/565>