

Report on financial and administrative implications for the Secretariat of resolutions proposed for adoption by the Executive Board or Health Assembly

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| 1. Resolution Prevention and control of noncommunicable diseases: implementation of the global strategy | |
| 2. Linkage to programme budget | |
| Area of work Surveillance, prevention and management of chronic, noncommunicable diseases | Expected result 1. Support provided to countries for framing policies and strategies for prevention and management of chronic, noncommunicable diseases at national level, including integration of primary and secondary prevention into health systems. 2. Advocacy and provision of support for development of multisectoral strategies and plans to promote action on diet and physical activity in priority countries. 4. Effective guidance and support provided for implementation of WHO's surveillance framework for chronic, noncommunicable diseases and their risk factors. 5. Improved quality, availability, comparability and dissemination of data on chronic, noncommunicable diseases and their major modifiable risk factors. |
| (Briefly indicate the linkage with expected results, indicators, targets, baseline) | |
| The resolution will provide a framework for achieving expected results 1, 2, 4 and 5 related to surveillance, prevention and management of chronic, noncommunicable diseases. | |
| 3. Financial implications | |
| (a) Total estimated cost for implementation over the "life-cycle" of the resolution (estimated to the nearest US\$ 10 000, including staff and activities) US\$ 207 075 000 | |
| (b) Estimated cost for the biennium 2006-2007 (estimated to the nearest US\$ 10 000, including staff and activities) US\$ 59 164 000 | |
| (c) Of the estimated cost noted in (b), what can be subsumed under existing programmed activities? US\$ 59 164 000 (all costs) | |

4. Administrative implications

(a) Implementation locales (indicate the levels of the Organization at which the work will be undertaken and identify the specific regions where relevant)

Implementation of the resolution would require participation of all levels of the Organization, while implementation activities would be focused on low- and middle-income countries.

Implementation would especially be focused on the 23 low- and middle-income countries that account for 80% of the burden of chronic, noncommunicable disease in low-income and middle-income countries.

(b) Additional staffing requirements (indicate additional required staff full-time equivalents, noting necessary skills profile)

No additional staffing requirements are foreseen.

(c) Time frames (indicate broad time frames for implementation and evaluation)

Implementation will take place over the period 2007 to 2013.

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