Prevention and control of noncommunicable diseases

Terms of reference for the global coordination mechanism on the prevention and control of noncommunicable diseases

Report by the Director-General

As supplementary information to paragraph 5 of document A67/14, the Director-General has the honour to transmit to the Sixty-seventh World Health Assembly the report of the second formal meeting of Member States to conclude the work on the terms of reference for the global coordination mechanism on the prevention and control of noncommunicable diseases (see Annex), which met in Geneva from 23 to 25 April 2014, pursuant to paragraph 3 of Executive Board decision EB134(1).
ANNEX

REPORT OF THE SECOND FORMAL MEETING OF MEMBER STATES TO CONCLUDE THE WORK ON THE TERMS OF REFERENCE FOR THE GLOBAL COORDINATION MECHANISM ON THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES

(AGREED)

1. The second Formal Meeting of Member States to conclude the work on the terms of reference for the global coordination mechanism on the prevention and control of noncommunicable diseases (GCM/NCD) was held in Geneva from 23 to 25 April 2014, chaired by Ms Maria Luisa Escorel de Moraes (Brazil). The session was attended by representatives of 112 Member States and one regional economic integration organization.

2. The report of the first Formal Meeting of Member States (document A/NCD/GCM/2/2) was considered by Member States.

3. The attached terms of reference for the GCM/NCD (Appendix) resulted from the second Formal Meeting and were agreed by consensus.

4. The second Formal Meeting requested the Director-General to submit a draft work plan for the GCM/NCD covering the period 2014–2015 for the consideration of the Sixty-seventh World Health Assembly.¹

5. The second Formal Meeting called for special attention to be paid to meeting the budgetary provisions related to the activities of the GCM/NCD included in the WHO Programme budget 2014–2015 and subsequent WHO programme budgets.

6. The second Formal Meeting also recommended that reports on progress achieved by the GCM/NCD be included in the reports on progress made in implementing the WHO Global NCD Action Plan 2013–2020, which will be submitted to the World Health Assembly by the Secretariat, as part of the agreed reporting sequencing set out in resolution WHA66.10.

7. The second Formal Meeting requests the Director-General to submit this report and attached terms of reference for the GCM/NCD to the Sixty-seventh World Health Assembly for its consideration.

8. The second Formal Meeting strongly recommends that the Sixty-seventh World Health Assembly consider this report and its attachment, with a view to endorsing the terms of reference for the GCM/NCD.

¹ See document A67/14 Add.3.
Appendix 1

TERMS OF REFERENCE FOR THE GLOBAL COORDINATION MECHANISM ON THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES

(AGreed)

Scope and purpose

1. The scope and purpose of the global coordination mechanism on the prevention and control of noncommunicable diseases (GCM/NCD) are to facilitate and enhance coordination of activities, multistakeholder engagement and action across sectors at the local, national, regional and global levels, in order to contribute to the implementation of the WHO Global NCD Action Plan 2013–2020, while avoiding duplication of efforts, using resources in an efficient and results-oriented way, and safeguarding WHO and public health from any undue influence by any form of real, perceived or potential conflicts of interest.

Overarching principles, approaches and parameters

2. The GCM/NCD will be guided by the overarching principles and approaches as identified, respectively, in paragraph 18, and parameters in paragraph 15, of the annex to resolution WHA66.10.

3. The GCM/NCD will build on country needs and will ultimately aim at supporting country efforts across sectors to implement the WHO Global NCD Action Plan 2013–2020.

Functions of the GCM/NCD

4. Guided by, and in line with, the six objectives of the WHO Global NCD Action Plan 2013–2020, the functions of the GCM/NCD will be as follows:

   - **Advocating and raising awareness:** Advocating for and raising awareness of the urgency of implementing the WHO Global NCD Action Plan 2013–2020; mainstreaming the prevention and control of noncommunicable diseases in the international development agenda; and giving due consideration to the prevention and control of noncommunicable diseases in discussions on the post-2015 development agenda;

   - **Disseminating knowledge and information:** Disseminating knowledge and sharing information based on scientific evidence and/or best practices regarding the implementation of the WHO Global NCD Action Plan 2013–2020, including health promotion, prevention, control, monitoring and surveillance of NCDs;

   - **Encouraging innovation and identifying barriers:** Provide a forum to identify barriers and share innovative solutions and actions for the implementation of the WHO Global NCD Action Plan 2013–2020;

   - **Advancing multisectoral action:** Advance multisectoral action by identifying and promoting sustained actions across sectors that can contribute to and support the implementation of the WHO Global NCD Action Plan 2013–2020;
– **Advocating for the mobilization of resources:** Identifying and sharing information on existing and potential sources of finance and cooperation mechanisms at the local, national, regional and global levels for the implementation of the WHO Global NCD Action Plan 2013–2020.

**Participants**

5. The GCM/NCD will be led by Member States.¹ Other Participants may include, as appropriate:

– United Nations funds, programmes and organizations and other relevant intergovernmental organizations;

– non-State actors.²

**Responsibilities of Participants**

6. Participants should follow WHO normative guidance and technical tools, as appropriate to national circumstances, and their responsibilities will be to:

– support the implementation of the WHO Global NCD Action Plan 2013–2020 through results-oriented efforts;

– support national efforts for the prevention and control of noncommunicable diseases, inter alia through exchange of information on best practices and dissemination of research findings and enhanced North–South cooperation, as well as South–South cooperation, triangular cooperation and regional cooperation mechanisms, with special attention to technical assistance.

**GCM/NCD components**

7. Member States will provide oversight and guidance to the GCM/NCD through the Executive Board and the World Health Assembly, as well as through periodic consultations and/or briefings organized by the WHO Secretariat. National NCD focal points nominated by Member States will facilitate coordination and exchange of information.

8. Other components include:

– the WHO Secretariat;

– the United Nations Inter-agency Task Force on NCDs and individual UN agencies, funds and programmes, as well as other relevant intergovernmental organizations (see document A67/14, Annex 2);

– Working Groups, where required.

¹ And, where applicable, regional economic integration organizations.

² Without prejudice to ongoing discussions on WHO’s engagement with non-State actors, the engagement with non-State actors will follow the relevant rules currently being negotiated as part of WHO reform and to be considered, through the Executive Board, by the Sixty-seventh World Health Assembly. This footnote applies throughout the text where non-State actors are mentioned.
Working Groups

9. The Director-General will establish Working Groups, as appropriate, including their duration and composition, in consultation with Member States, in order to foster results-oriented work under the five functions of the GCM/NCD and in line with the principles and six objectives of the WHO Global NCD Action Plan 2013–2020.

10. The Director-General, in consultation with Member States, will select experts with requisite skills and experience with regards to the subject for which the Working Group is being established. In carrying out their work, Working Groups may consult as needed, including with relevant non-State actors.

11. In determining the composition of the Working Groups, due regard shall be given to gender balance, geographical representation and multisectoriality, while ensuring equitable representation between developed and developing countries.

General meeting

12. The GCM/NCD Participants will meet face-to-face in 2017 in order to facilitate and enhance coordination of activities, multistakeholder engagement and action across sectors at all levels, as well as to promote the WHO Global NCD Action Plan 2013–2020 and assess progress made so far by the GCM/NCD. Member States will determine the modalities for convening this meeting when adopting the GCM/NCD work plan for 2016–2017 and the related WHO Programme budget 2016–2017.

WHO’s role as the Secretariat for the GCM/NCD

13. WHO shall provide the Secretariat for the GCM/NCD within WHO’s Noncommunicable Diseases and Mental Health Cluster, which will report to the WHO Director-General.

14. The main functions of the Secretariat for the GCM/NCD will be, inter alia:

   – to develop draft work plans for the GCM/NCD, as well as the draft terms of reference for any Working Group;

   – to convene, as appropriate, and service the meeting of the GCM/NCD, as well as any Working Group meetings;

   – to support implementation of the functions of the GCM/NCD;

   – to act as a point of enquiries and information regarding the GCM/NCD and to manage a website and virtual forum for the GCM/NCD, including an up-to-date list of Participants, an inventory of the activities related to the GCM/NCD, a virtual practice community and opportunities for virtual consultations;

   – to provide inputs related to the GCM/NCD to the reports on progress made in implementing the WHO Global NCD Action Plan 2013–2020 to the World Health Assembly in 2016, 2018 and 2021;

1 And, where applicable, regional economic integration organizations.
– to facilitate and enhance, as appropriate, coordination of activities, multistakeholder engagement and action across sectors among the Participants of the GCM/NCD, in line with its functions.

**Work plans**

15. The Director-General will submit draft work plans for the GCM/NCD to the World Health Assembly. The work plans will set out the activities of the GCM/NCD, including, as appropriate, any time-bound Working Groups, including their terms of reference. The first draft work plan covering the period 2014–2015 will be submitted to the Sixty-seventh World Health Assembly. The second draft work plan covering the period 2016–2017 will be submitted to the Sixty-eighth World Health Assembly, through the Executive Board. Subsequent work plans covering a two-year period will also be submitted to the World Health Assembly, through the Executive Board, for consideration by Member States.

**Administrative arrangements**

16. Participants will, in principle, be responsible for meeting their own expenses in relation to activities under the GCM/NCD (including, but not limited to, travel and subsistence for attending meetings).

17. Financial provisions for representatives from Member States will follow standard practices at WHO.

18. The WHO Programme budget 2014–2015 includes budgetary provisions to finance the work of the Secretariat for the GCM/NCD. Subsequent WHO programme budgets will include similar provisions.

**Lifespan of the GCM/NCD and evaluation**

19. The lifespan of the GCM/NCD is planned to be from 2014 to 2020, in line with the WHO Global NCD Action Plan 2013–2020. A preliminary evaluation by the World Health Assembly will take place in 2017 to assess results and the added value of the GCM/NCD, taking into account the progress report of the Global Action Plan and the post-2015 development agenda. A final evaluation will be presented for consideration of Member States to the World Health Assembly in 2021, to assess the effectiveness of the GCM/NCD, its added value and its continued relevance to the achievement of the 2025 voluntary global targets, including its possible extension. The GCM/NCD will evolve through the phases outlined below.

<table>
<thead>
<tr>
<th>Year</th>
<th>Phase</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>Establishment of the GCM/NCD, following the approval of terms of reference by the Sixty-seventh World Health Assembly</td>
</tr>
<tr>
<td>2015–2017</td>
<td>Work phase I</td>
</tr>
<tr>
<td>2017</td>
<td>Preliminary evaluation</td>
</tr>
<tr>
<td>2018–2020</td>
<td>Work phase II</td>
</tr>
<tr>
<td>2021</td>
<td>Final evaluation</td>
</tr>
</tbody>
</table>

---

1 See document A67/14 Add.3.
20. The authority of WHO’s governing bodies over the activities under the GCM/NCD will be guaranteed in all instances.


22. Participants who are engaged in the activities of the GCM/NCD will share, as appropriate, their work and results related to the GCM/NCD, including through the GCM/NCD website. Information provided by Participants of the GCM/NCD does not imply endorsement by WHO.