

Scaling up prevention and control of chronic noncommunicable diseases in the South-East Asia Region

Agenda item 5.5

Outline

- NCDs
- health and socio-economic impact
- regional framework and RC resolution
- progress in implementing the framework and RC resolution
- challenges
- way forward

UNDERLYING SOCIOECONOMIC, CULTURAL, POLITICAL AND ENVIRONMENTAL DETERMINANTS	COMMON MODIFIABLE RISK FACTORS	INTERMEDIATE RISK FACTORS	MAIN CHRONIC DISEASES
Globalization	Unhealthy diet	Raised blood pressure	Heart disease
Urbanization	Physical inactivity	Raised blood glucose	Stroke
Population ageing	Tobacco use	Abnormal blood lipids	Cancer
	NON- MODIFIABLE RISK FACTORS	Overweight/obesity	Chronic respiratory diseases
	Age		Diabetes
	Heredity		



Health impact of NCDs in SEA Region

- 54% deaths (largely premature mortality)
- 46% of disease burden
- 21% increase in NCD deaths over 10-years (up to 2015)
- NCD epidemics fueled by
 - demographic change
 - unhealthy behaviours
 - health system failure
- majority of premature NCD deaths preventable with available interventions

Projected Mortality Dynamics – SEAR and Global Picture

Geographical regions (WHO classification)	2005		2006-2015 (cumulative)		
	Total deaths (millions)	NCD deaths (millions)	NCD deaths (millions)	Trend: Death from infectious disease	Trend: Death from NCD
Africa	10.8	2.5	28	+6%	+27%
Americas	6.2	4.8	53	-8%	+17%
Eastern Mediterranean	4.3	2.2	25	-10%	+25%
Europe	9.8	8.5	88	+7%	+4%
South-East Asia	14.7	8.0	89	-16%	+21%
Western Pacific	12.4	9.7	105	+1	+20%
	58.2	35.7	388	-3%	+17%

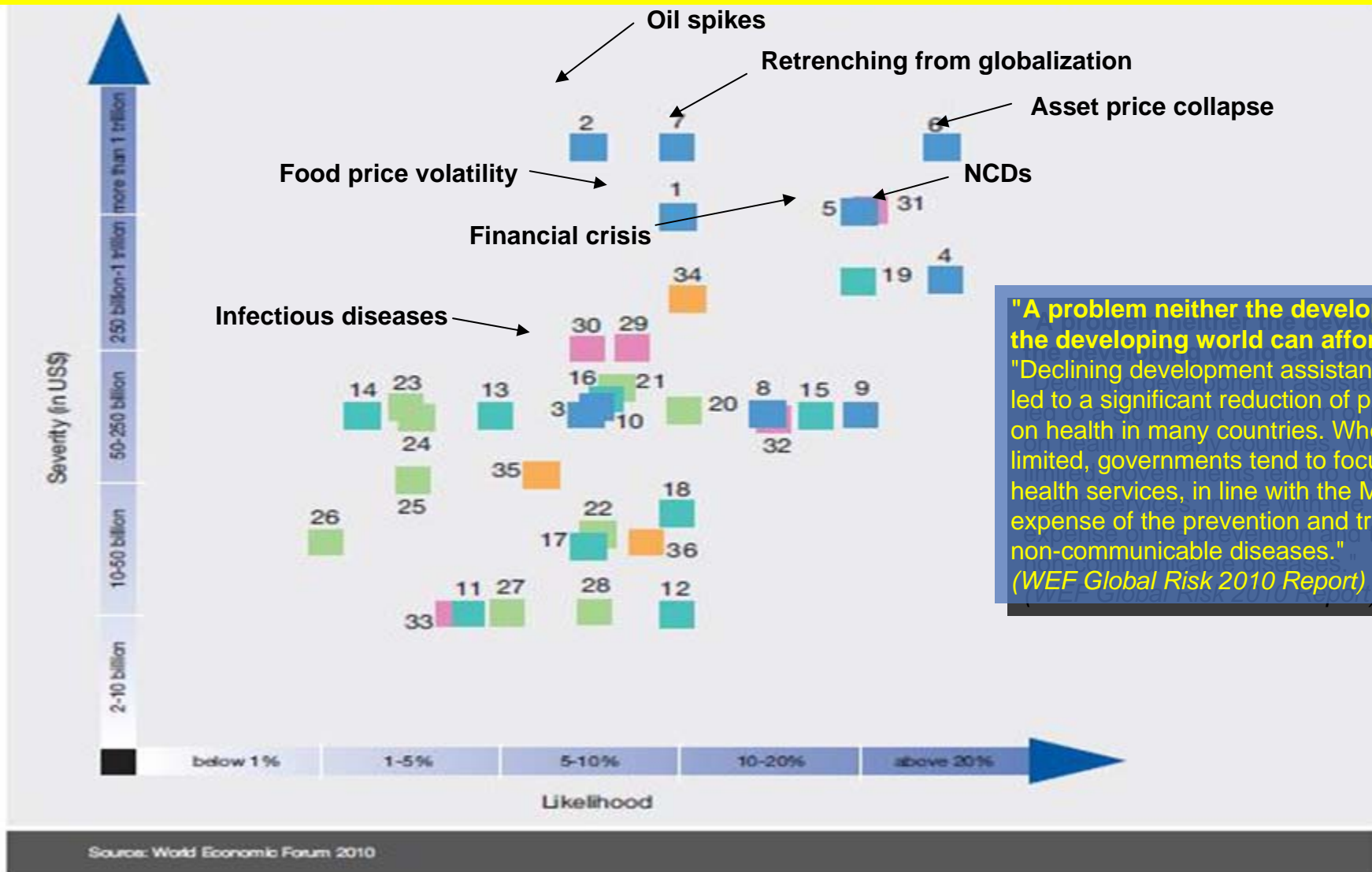
Socio-economic impact

- one of the most serious risks to development
- 4 -10% of GDP foregone in India (WB estimate)
- microeconomic dimension (impoverishment, catastrophic expenses)
- growing inequities (risk factors; disease outcomes)

- no NCDs in MDG
- NCDs recognized as global development and health issue by UN GA in 2010

Global Risks Landscape, 2010: likelihood with severity by economic loss

(source: World Economic Forum 2010)



"A problem neither the developed world nor the developing world can afford"
 "Declining development assistance has already led to a significant reduction of public spending on health in many countries. When funds are limited, governments tend to focus on basic health services, in line with the MDGs, at the expense of the prevention and treatment of non-communicable diseases."
 (WEF Global Risk 2010 Report)

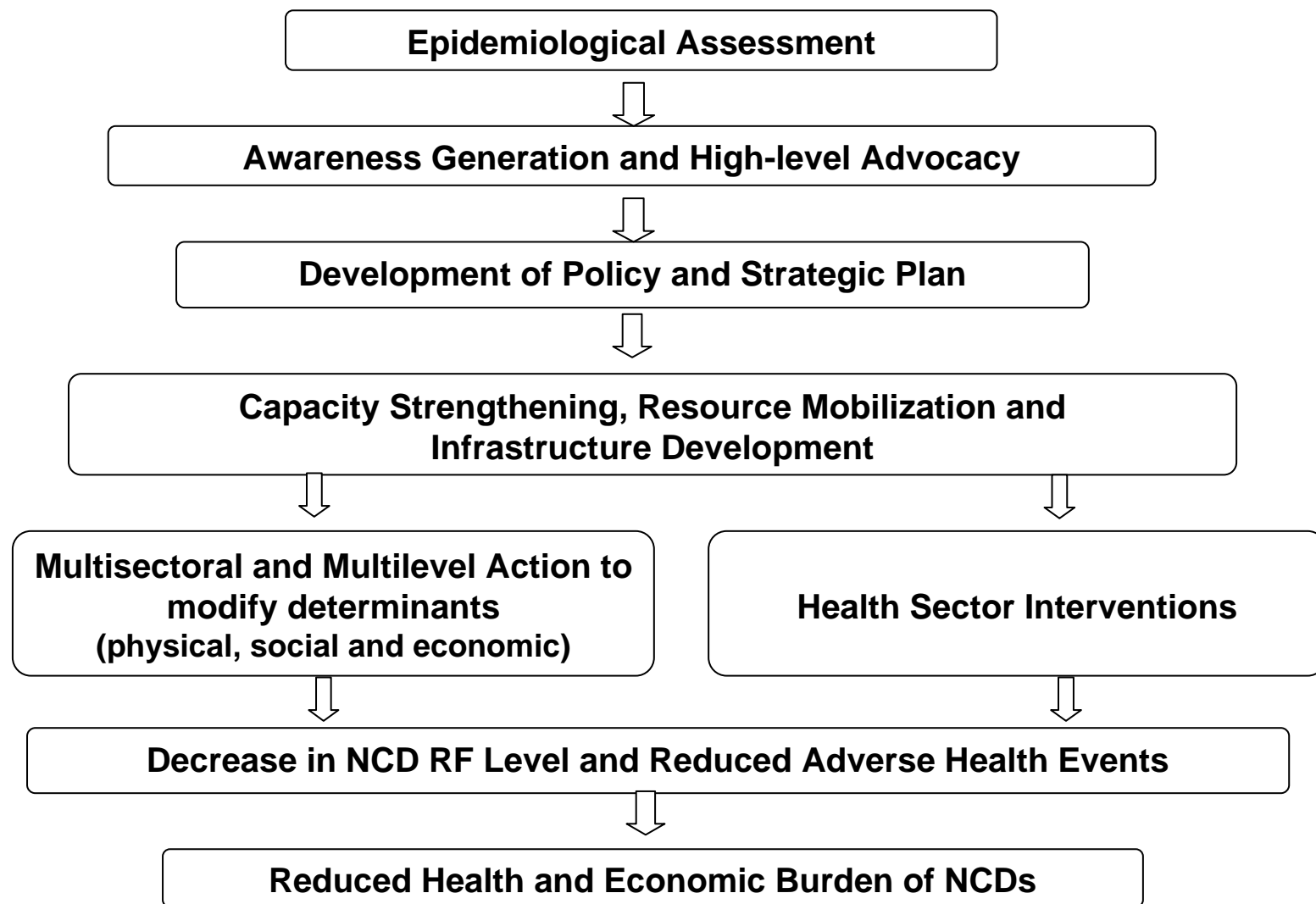
Regional Framework for Prevention and Control of NCDs

- guides NCD work in the Region
- major strategy targets main modifiable NCD risk factors
- focus on surveillance, health promotion and primary prevention

- developed in 2006
- endorsed by RC in 2007
- RC Resolution on scaling up prevention and control of NCDs

- UN GA resolution 2010

Regional Framework



60th Session of the Regional Committee WHO South-East Asia Region

Thimphu, Bhutan, 31 August - 3 September 2007



Endorsed the Regional Framework for Prevention and Control of NCDs

Urged Member States:

- **to initiate appropriate steps to formulate, update and strengthen national policies, strategies and programmes for integrated prevention and control of NCDs**
- **to establish suitable infrastructure and appropriate funding mechanisms for this purpose**
- **to set up mechanisms to promote multilateral, multisectoral, multidisciplinary and multilevel collaboration for integrated prevention and control of NCDs and to facilitate establishment of national and regional networks for NCD prevention and control**

60th Session of the Regional Committee WHO South-East Asia Region

Thimphu, Bhutan, 31 August - 3 September 2007



REQUESTS the Regional Director:

- to provide technical assistance to Member States, and to mobilize necessary resources for developing the capacity to implement national policies, strategies and programmes for integrated prevention and control of NCDs, and to facilitate and coordinate international support of development partners

Progress in implementing NCD framework (2007-2010)

- assessing situation
- capacity strengthening for NCD policy makers and programme managers
- assisting in formulation & implementation of NCD policies, programmes
- measuring progress
- other areas

Gathering core evidence

- standardized NCD risk factor surveys (STEPS approach)
 - surveys Bangladesh, Bhutan, DPR Korea, India, Maldives, Myanmar and Nepal and Sri Lanka
 - first-ever nationally representative datasets on major NCD risk factors in Bangladesh, Myanmar, Nepal and Sri Lanka
- NCD Info-Base
- regional paper “Challenges and Opportunities for NCD Surveillance in the SEA Region of WHO”
- set of core NCD indicators
- regional NCD profile (Bhutan, India, Myanmar, Sri Lanka - core info not easily accessible at national level)

NCD risk factors in STEPS surveys in SEA Region (2004-2009)

(25-64 years, both sexes)

<i>Risk factor</i>	<i>Prevalence (%)</i>
<i>Current daily smokers</i>	<i>5 - 48</i>
<i>Current consumers of alcohol</i>	<i>5 - 37</i>
<i>Eating < 5 servings of fruits & vegetables/day</i>	<i>49 - 99</i>
<i>Physically inactive</i>	<i>4 - 92</i>
<i>Overweight or obese (BMI \geq 25)</i>	<i>4 - 54</i>
<i>Raised blood pressure (\geq 140/90 mm Hg)</i>	<i>12 - 31</i>
<i>Raised fasting blood sugar (\geq 7 mmol/l)</i>	<i>4 - 11</i>
<i>Raised blood cholesterol (\geq 5.2 mmol/l)</i>	<i>19 - 54</i>

Capacity strengthening for policy makers and programme managers

- SEA regional package of NCD capacity strengthening materials developed &
- systematic update and expansion of the package
- national capacity strengthening workshops in Bangladesh, Bhutan, DPR Korea, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka and Thailand
- set of materials to train managers and facilitators of national and sub-national NCD capacity strengthening programmes developed
- training of NCD programme workforce from nine Member States on planning and conducting NCD capacity strengthening activities

Formulating, implementing & evaluating NCD policies, plans and programmes

- review of national NCD policies, strategies, plans, legislation
- progress in Bangladesh, Bhutan, DPR Korea, India, Indonesia, Maldives, Myanmar Nepal, and Sri Lanka
- other countries are in various stages of formulating national policies and strategies for prevention and control of NCDs
- Bangladesh, Bhutan, Indonesia, Maldives and Sri Lanka - important structural adjustments, strengthening NCD units/departments ,
- national DPAS action plans formulated in Indonesia, Myanmar, Nepal, and Sri Lanka

Measuring progress

- regional publication on progress in capacity 2001 - 2006
- national NCD capacity surveys conducted in 2009-2010
- findings:
 - increase in capacity demonstrated
 - presence of NCD units in MoH
 - funding of NCD programmes through regular government budget universal
 - NCD policies/plans
 - progress in developing different components of NCD prevention and control
 - limited progress in establishing regular surveillance system
 - limited availability of guidelines for management of NCDs and their risk factors
 - legislation largely restricted to tobacco

Progress in prevention and control of NCDs SEA Region (2001-2010)

Area	Indicator	No. of countries		
		2001	2006	2010
Infrastructure	Presence of an NCD unit or department in MoH	4	7	11
Financial allocation	Allocation for NCDPC in regular budget of MoH	6	7	11
Policy/programs	National health policy addresses NCDs	3	3	6
	National integrated NCD programme/plan	2	3	9
Target setting	Quantifiable targets set for the country for NCDPC	4	5	10
Surveillance	Inclusion of NCDs in national HIS	9	9	11
	STEPwise approach implemented in the country	0	9	10
	Routine or regular surveillance for NCDs/RFs	1	2	2
National guidelines	Availability of national guidelines for all major NCDs & RF	1	2	4

Other areas of work

- community-based interventions (Bangladesh, India, Indonesia, Sri Lanka and Thailand); guidelines for monitoring
- strengthening prevention & management of NCDs at PHC (implementing WHO PEN package in Bhutan and Sri Lanka; introduction in Maldives)
- building partnerships with stakeholders
 - SEANET NCD
 - national networks (Bangladesh, Indonesia, Maldives, Sri Lanka, Thailand.
 - WHO CC (3 new)
 - collaboration with WB and WDF
- regional NCD research agenda

Challenges

- growing health and developmental challenge
- progressive socioeconomic divide
- persisting gap in allocation of human and financial resources
- insufficient technical and managerial capacity
- application of integrated approaches (involvement of non-health sectors, private sector and civil society)
- health-system adjustment

Way forward

- major shift in policy attention
- need to invest
- institutional and individual capacity building
- application of feasible, low-cost, efficient solutions
- strengthening partnerships with non-health stakeholders
 - establishing coordinating mechanisms
 - empowering partners
 - establishing channels to share information and resources