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The vision and road map for addressing NCDs



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IANPHI Meeting
Mexico City, 1.-2.10.2012

Background and vision

- Health is important for every individual, public welfare and sustainable social and economic development
- Current situation and the future
 - A few chronic non communicable diseases are greatest determinants of public health
 - These NCD's are to great extent and to late in life preventable

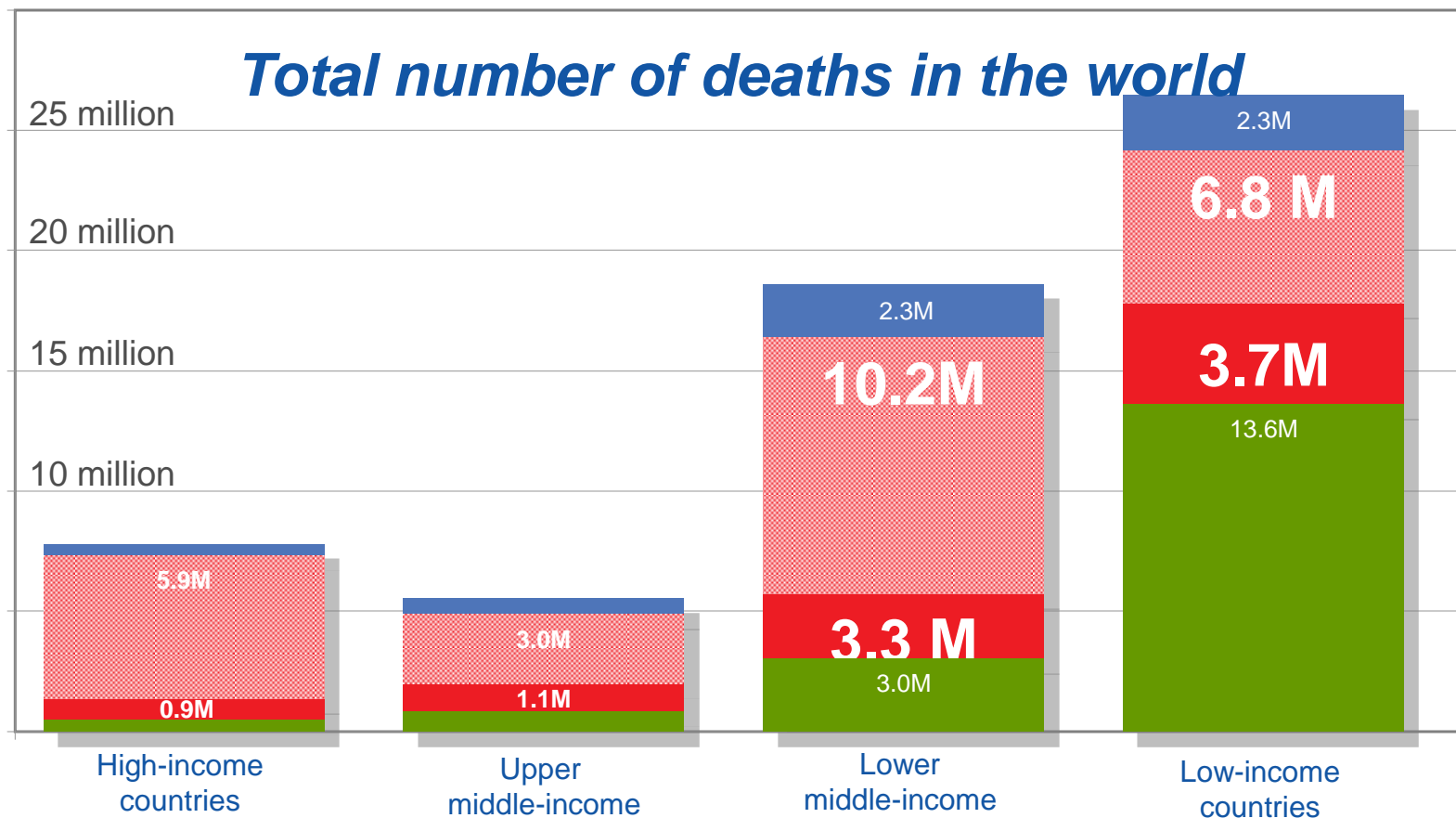


Vision: world free of avoidable NCD's
(=healthy ageing)

Goal: Effective comprehensive action on global, regional, national and local level



90% of premature deaths from NCDs occur in developing countries



- Group III - Injuries
- Group II – Other deaths from noncommunicable diseases
- Group II – Premature deaths from noncommunicable diseases (below the age of 60), which are preventable
- Group I – Communicable diseases, maternal, perinatal and nutritional conditions



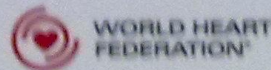
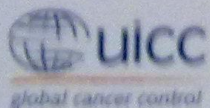
**4 in 5 deaths from NCDs
occur in lower- and
middle-income countries**

**80% of these deaths
can be avoided**

Source: Preventing Chronic Disease: a vital investment. WHO, 2005

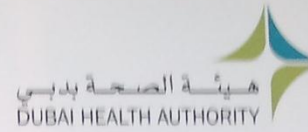
**Health and
Development:
Held Back by
Non-Communicable
Diseases**

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WORLD HEART
FEDERATION®



سلامة قلبك
Safe Heart

بدعم من
Supported by

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RECENT POLITICAL SUPPORT

UN high-level summit on NCDs New York Sept 2011

- Preceded by Ministerial Conference in Moscow (April 2011).
- Political declaration
- Action on global NCD prevention and control”
- WHO’s leadership, intersectoral support



Changing global burden of disease → WHO's NCD strategy in 2000

- NCD prevention and control is a global health priority
- Comprehensive action is needed, but from public health point of view population based prevention is the key (most cost-effective and sustainable)
- Integrated prevention: targeting common, lifestyle related risk factors (tobacco, diet, physical activity, alcohol)



INTEGRATED PREVENTION

Four types of non-communicable diseases are largely preventable by means of effective interventions that tackle shared modifiable risk factors

		Causative risk factors			
		Tobacco use	Unhealthy diets	Physical inactivity	Harmful use of alcohol
Non-communicable diseases	Heart disease and stroke	✓	✓	✓	✓
	Diabetes	✓	✓	✓	✓
	Cancer	✓	✓	✓	✓
	Chronic lung disease	✓			

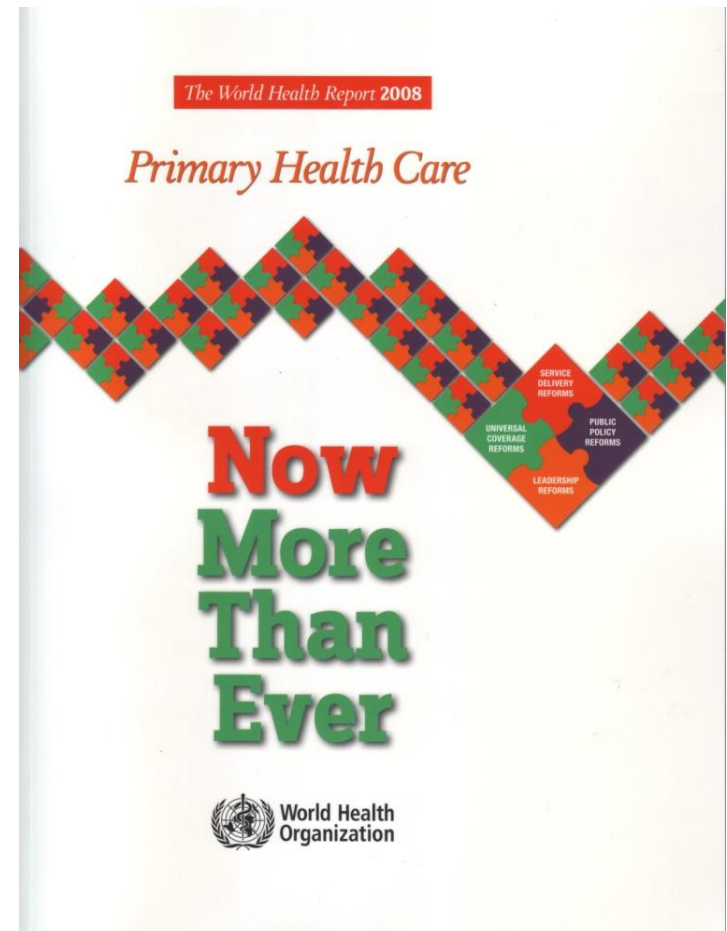
Cornerstones of NCD prevention and control (WHO global strategy)

- Attention to behavioural risk factors
 - Tobacco use
 - Unhealthy diet
 - Physical inactivity
 - Harmful use of alcohol
- Monitoring and surveillance of
 - Risk factors and diseases
 - Preventive actions
- Redirection of health services
 - Prevention (esp. primary health care)
 - Chronic care model



Redirection of health services

- Reorientation and strengthening of health systems
- Primary health care:
 - "Now more than ever"
(WHR 2008)
- Special emphasis for NCDs
 - Chronic care model
 - Preventive practices

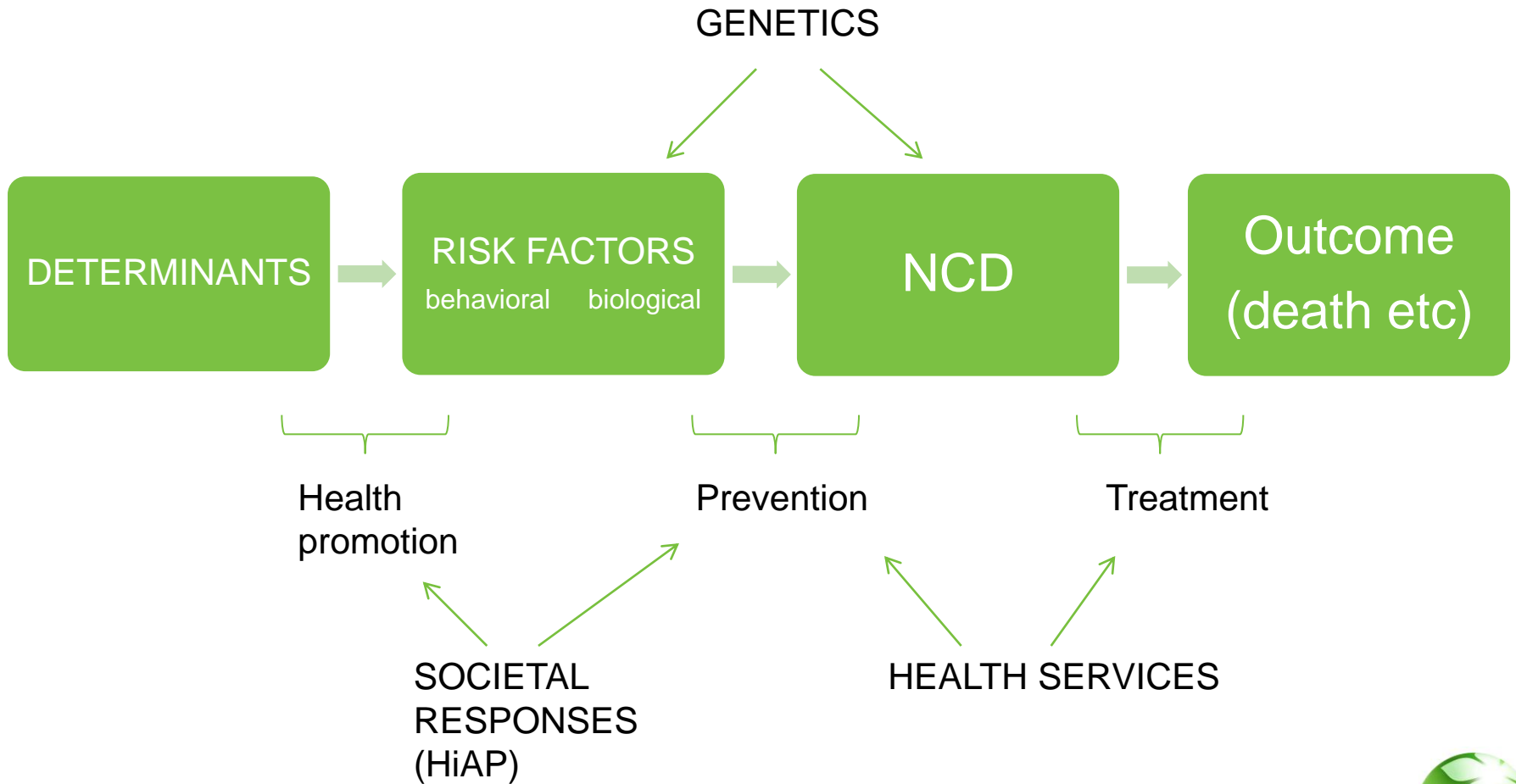


Surveillance/monitoring

- Monitoring of
 - Diseases
 - Risk factors/behaviours
 - Determinants
 - Prevention & control process
(health service response)
- "Best buys":
 - NCD mortality trend
 - Risk factor trends
- National institutional base for surveillance and links with national health monitoring
- International standardization and collaboration
- Active use of surveillance results: Feed-back, communication



NCD FRAMEWORK FOR ACTION/MONITORING



The journey to scale up global action




Action Plan 2007-
2012

#


New Action Plan
in preparation

**Action Plan for the WHO Global Strategy
for the Prevention and Control of
Noncommunicable Diseases.**

1 Raise the priority accorded to noncommunicable disease in development work at global and national levels, and integrate prevention and control of such diseases into policies across all government departments.

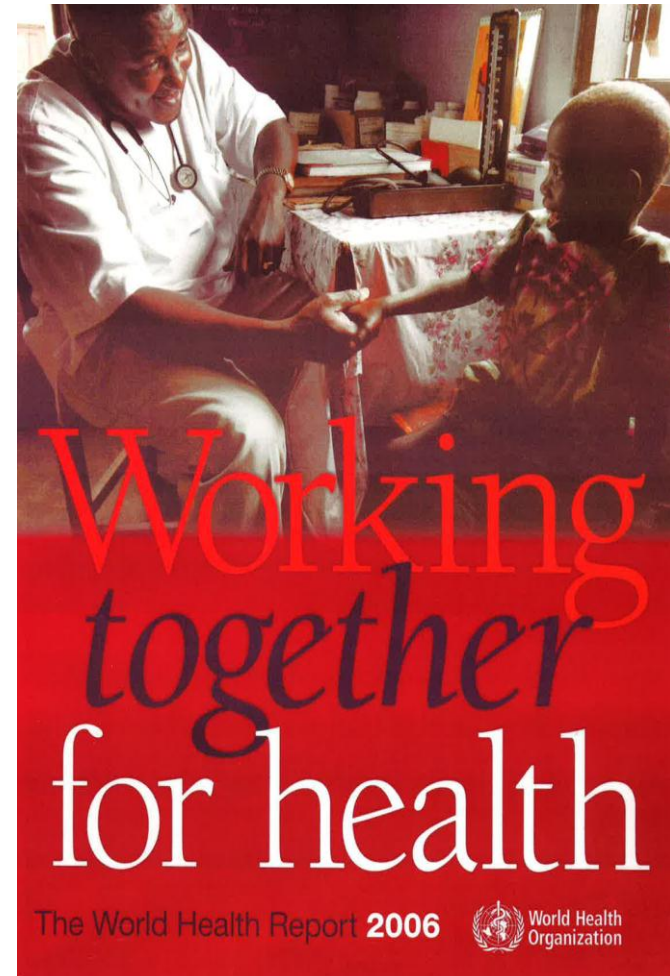


Noncommunicable diseases (NCDs) are a threat to development that neither wealthy nor poor countries can afford. National policies in sectors other than health have a major bearing on the risk factors for NCDs.



Comprehensive action and partnership for national NCD prevention

- Health services
- Governments (national, local)
- Civil society (NGOs)
- Private sector
- Media
- International collaboration



During the last few years a great number of strategies and plans for evidence-based, effective prevention and health promotion have been produced

Many important priorities have been identified



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From priorities to implementation

IDENTIFYING PRIORITIES

- “Less is more”



IMPLEMENTING THEM

- Policy support
- Institutional base
- Media support
- Resources
- Monitoring



NCD prevention is possible!

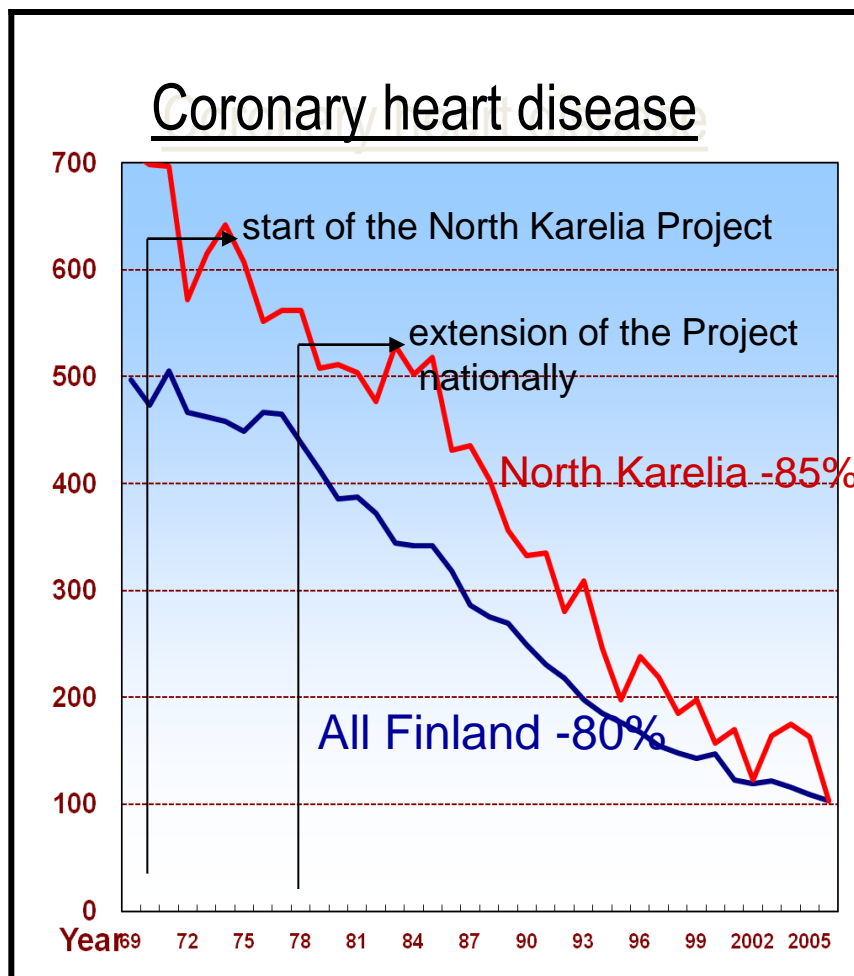
The potential is great

- Quite rapid impact
- Human impact on health and wellbeing
- Impact on health service costs and socioeconomic development



Change in age-adjusted mortality rates

Finland, males aged 35–64 (per 100 000 population)



	Rate per 100 000		
	1969-1971	2006	Change from 1969-1971 to 2006
All causes	1328	583	-56%
All cardiovascular	680	172	-75%
Coronary heart disease	489	103	-79%
All cancers	262	124	-53%

Gain of some 10 healthy years
in Finnish population



Intersectoral work towards prevention - "Health in all policies"

- People's lifestyles are influenced by decisions in different sectors of society (much of them beyond the health sector)
- Health in general and NCD prevention in particular should be taken into account in decisions made by different sectors (health impact assessment)
- Social change process combining government policies, expert guidance, broad health promotion and mobilization of people

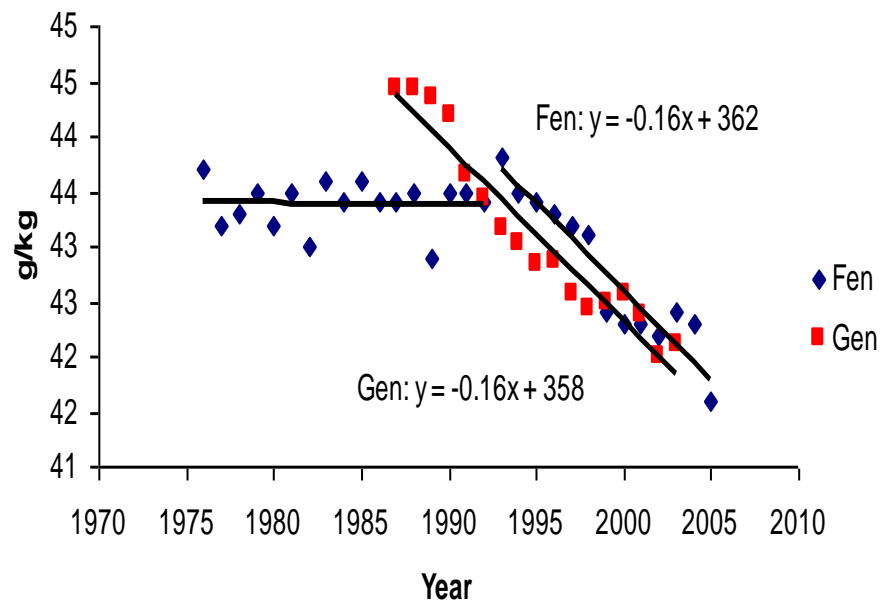


Examples of intersectoral work 1.

Development of Finnish Rapeseed oil



Change in fat content of Finnish cow milk



Examples of intersectoral work 2.

Biscuit example:

- Leading Finnish biscuit manufacturer (LU Finland Ltd) has removed some 80.000 kg of SAFA by changing the fats used
- All trans fats removed and major transfer to rapeseed oil

Meat product example:

HK (Leading Finnish meat company)
since 2007 annually:

- 40.000 kg less salt
- 100.000 kg less saturated fat in their products



High-level Meeting of the UN General Assembly on NCDs

Now important for WHO too:



Provide technical assistance to low- and middle-income countries to support national efforts to address NCDs



Develop a comprehensive global monitoring framework, including indicators, and a set of voluntary global targets



Develop a 2013-2020 Global NCD Action Plan



Develop options for multisectoral action for the prevention and control of NCDs through effective partnerships



Exercise WHO's leadership and coordination role in relation to the work of UN Agencies and development banks



Implement WHO-wide work plan 2012-2013 on NCDs and develop WHO Programme Budget 2014-2015



8th Global WHO Conference on health promotion - “Health in all policies” From Ottawa to Helsinki (June 2013)



Ottawa 1986



Adelaide 1988



Sundsvall 1991



Jakarta 1997



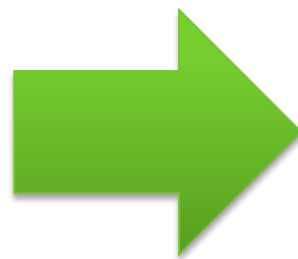
Mexico 2000



Bangkok 2005



Nairobi 2009



8th Global Conference
on Health Promotion
HELSINKI 2013



**THE MAIN CHALLENGE FOR
SUCCESSFUL NCD
PREVENTION IS NOT WHAT
TO DO, BUT HOW TO
IMPLEMENT THE NEEDED
ACTIONS!**



The Future Challenge

To match the public health importance of NCD's and potential health gains with needed attention, resource use and political decision making.



**Ban Ki-Moon:
"We should all work to meet the targets to reduce NCDs"**



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Thank you



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