

WHAT HEADS OF STATE AND GOVERNMENT NEED TO KNOW

Noncommunicable diseases

KEY POINTS

- Noncommunicable diseases (NCDs) constitute one of the major challenges for development in the 21st century.
- Premature deaths from NCDs, and their impacts, are mostly preventable.
- Action on NCDs is not just the right thing to do – it makes economic sense.
- There are five main priorities for Heads of State and Government in confronting NCDs: (i) provide leadership for NCD prevention and control as part of the development agenda; (ii) be held accountable for national progress on NCDs; (iii) fulfil obligations under the WHO Framework Convention on Tobacco Control; (iv) act to ensure no industry interference in government policymaking; and (v) hold the UN System and development partners accountable for providing support on NCD prevention and control.
- Some Heads of State and Government are showing remarkable leadership in tackling NCDs...
- ...but in other cases progress has been insufficient and highly uneven.

1. NCDs constitute one of the major challenges for development in the 21st century

- *There are four main NCDs:* cardiovascular diseases (which include heart disease and strokes), cancers, diabetes and chronic respiratory disease.
- *NCDs are the single greatest cause of preventable illness, disability and mortality worldwide.* They are responsible for 38 million deaths each year –almost 70 percent of deaths worldwide, and more than all other causes combined.¹
- *Every country should be concerned about NCDs.* Nearly three-quarters of NCD deaths occur in low- and middle-income countries (LMICs). Over 80 percent of the 16 million annual *premature* NCD deaths (before the age of 70) occur in LMICs.²
- *Health costs from NCDs are a major burden on national budgets.* It has been estimated that the direct annual cost of diabetes to the world is more than US\$ 827 billion.³ It is cost-effective to prevent NCDs through population-wide policies, and to detect and treat NCDs early in primary care settings. Treatment at secondary and tertiary care is less cost-effective.⁴

Sustainable Development Goal 3 on health and wellbeing includes targets on the prevention and control of NCDs. Achievement of these targets would deliver mutual gains across Agenda 2030, given the multidirectional relationship between NCDs, poverty, inequalities and other goals and targets.

Lost productivity and economic harm from NCDs

Under a 'business as usual' scenario, cumulative economic losses to LMICs from the four main NCDs are estimated to surpass US\$ 7 trillion between 2011-2025, equivalent to approximately 4 percent of their annual output in 2010.⁵

Mounting health care spending, if not managed, will hurt the sovereign creditworthiness of many countries.⁶

The World Economic Forum has declared NCDs a greater threat to global economic development than fiscal crises, natural disasters, and pandemic flu.

A U.S. Council on Foreign Relations Independent Task Force cautions that NCDs will undercut US trade partners and allies, potentially reducing domestic support for foreign governments.⁷

- *NCDs have significant social and economic consequences.* NCDs reduce global and national economic output, strain health systems, drive individuals and households into poverty, and can hamper progress across the 2030 Agenda for Sustainable Development.⁸



1 Global Burden of Disease 2013 Mortality and Causes of Death Collaborators (2015). "Global, regional, and national age-sex specific all-cause and cause-specific mortality for 240 causes of death, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013." *Lancet*, 385: 117–71.

2 WHO (2015). "Noncommunicable diseases fact sheet." <http://www.who.int/mediacentre/factsheets/fs355/en/>

3 WHO (2016). "Global Report on Diabetes." http://apps.who.int/iris/bitstream/10665/204871/1/9789241565257_eng.pdf

4 Maher, D, Ford, N. and Unwin, N (2012). "Priorities for developing countries in the global response to non-communicable diseases." *Globalization and Health*, 8: 14.

5 WHO, WEF (2011). "From burden to 'best buys': reducing the economic impact of NCDs in LMICs." http://www.who.int/nmh/publications/best_buys_summary.pdf?ua=1

6 Standard & Poor's (2012). "Mounting Medical Care Spending could be Harmful to the G-20's Credit Health." Global Credit Portal: RatingsDirect http://www.iscintelligence.com/archivos_subidos/s&p_health_creditworthiness.pdf

7 U.S. Council on Foreign Relations NCDs Task Force (2014). "The Emerging Global Health Crisis: Noncommunicable Diseases in Low- and Middle-Income Countries." Independent Task Force Report No. 72. <http://www.cfr.org/diseases-noncommunicable/emerging-global-health-crisis/p33883>

8 NCD Alliance (2016). "NCDs across the SDGs: A call for an integrated approach." https://ncdalliance.org/sites/default/files/resource_files/NCDs_Across_SDGs_EN_WEB_FV.pdf

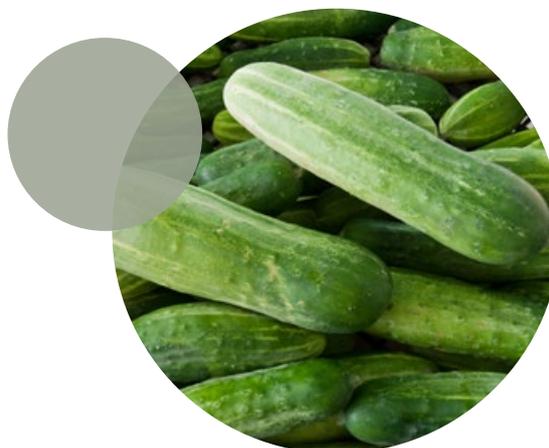
2. Premature deaths from NCDs, and their impacts, are mostly preventable

- *Most premature deaths from NCDs are from four modifiable risk behaviours – tobacco use, harmful use of alcohol, physical inactivity and unhealthy diet.*
- *Population exposure to these risk factors is determined largely by policies in ‘non-health sectors’ such as trade, labour, tax, urban planning and education. This makes achieving policy coherence critical for the prevention and control of NCDs.*
- *Efforts centred on notions of personal irresponsibility will not work.*
- *A number of proven interventions already exist that can reduce the number of people dying prematurely from NCDs while bringing benefits to entire governments. Even the poorest countries can afford these.*

Price and tax measures on tobacco and alcohol products as well as on unhealthy foods and beverages cost little to implement and are effective in reducing NCDs. Such measures can rapidly reduce consumption. They also bring significant resources to government. Raising cigarette excise by US\$ 0.75 per pack in all countries would generate an extra US\$ 141 billion in revenue globally;⁹ countries are forgoing billions in revenue by not taxing alcohol at higher rates.¹⁰

“Can children be blamed for an addiction to nicotine when single cigarettes are sold at the gates of their schoolhouse? Can parents be blamed for their overweight children when cities have no green spaces or the crime rate is so high that children are not safe playing outdoors? For the millions of people living in so-called ‘urban food deserts,’ healthy eating is simply not an option.”
WHO Director-General Margaret Chan, 2015

- *Children warrant specific attention to set them on a healthy and productive life trajectory. Schools offer a major opportunity to reach children *en masse*; special efforts are needed to reach out-of-school youth.*
- *Workplaces need to become healthier in order to maintain a productive workforce and grow economies.*
- *The media have a crucial role to play in encouraging healthy behaviour. They must be engaged as an ally.*



⁹ Goodchild, M, Perucic, A, and Nargis, N (2016). “Modelling the impact of raising tobacco taxes on public health and finance.” *Bull World Health Organ*, 94: 250–257.

¹⁰ See Stenberg, K, et al. (2010). “Responding to the challenge of resource mobilization – mechanisms for raising additional domestic resources for health.” World Health Report.

3. Action on NCDs is not just the right thing to do – it makes economic sense

The costs of inaction on NCDs – to the health of people, companies and economies – far outweigh the investments required to stave off these costs and ensure healthy and productive societies.

Return on investment facts¹¹

Fact 1. The economic consequences of NCDs are enormous.

- Under a 'business as usual' scenario, cumulative economic losses to LMICs from the four main NCDs are estimated to surpass US\$ 7 trillion between 2011-2025, equivalent to approximately 4 percent of their annual output in 2010.

Fact 2. The costs of scaling-up NCD prevention and control are very low compared to their burden.

- Population-based measures for reducing tobacco and harmful alcohol use, as well as unhealthy diet and physical inactivity, are estimated to cost US\$ 2 billion per year for all LMICs – less than US\$ 0.40 per person;
- The most cost-effective NCD interventions for individuals cost US\$ 11.4 billion per year for all LMICs (annual investment ranging from under US\$ 1 per person in low-income countries to US\$ 3 per person in upper middle-income countries).

Fact 3. The returns on scaling up prevention and treatment are massive.

- In economic terms, the returns will be many billions of dollars of additional output. For example, reducing death rates from ischaemic heart disease and stroke by 10 percent would reduce economic losses in LMICs by an estimated US\$ 25 billion per year, which is three times greater than the investment needed for the measures to achieve these benefits;
- In health terms, the returns on investment would be many millions of avoided premature deaths.

4. There are five main priorities for Heads of State and Government in confronting NCDs

- (i) *Provide leadership for NCDs as part of the development agenda.* NCDs are part of the Sustainable Development Goals. Heads of State and Government should ensure that the government is working as one to tackle NCDs.
- (ii) *Be held accountable for national progress on NCDs* at the Third NCD High-level Meeting at the UN General Assembly in 2018.
- (iii) *Fulfil obligations under the WHO Framework Convention on Tobacco Control* if the country is a Party to the Convention; if not a Party, strongly consider acceding.
- (iv) *Act to ensure no industry interference in government policymaking.* Tobacco, food and alcohol industries often present governments with a number of false arguments as to why they should not tax health-harming products, restrict or prohibit the marketing of certain products, or otherwise take actions to promote health.
- (v) *Hold the UN System and development partners accountable* for providing support on NCDs.

Pro-poor taxation measures send a strong message that powerful groups, such as some industries, will not be allowed to monopolize the political process at the expense of those most vulnerable.

¹¹ WHO, WEF (2011). "From burden to "best buys": reducing the economic impact of NCDs in LMICs." http://www.who.int/nmh/publications/best_buys_summary.pdf?ua=1

5. Some Heads of State and Government are showing remarkable leadership in tackling NCDs...

- *2012*: Philippines President Benigno Aquino III passed the country's landmark Sin Tax Reform Law, which taxes tobacco and alcohol and uses revenues to finance universal health coverage and better health care.¹²
- *2013*: Mexican President Enrique Peña Nieto pushed through a 1 peso per litre product-tax on sugar sweetened beverages, leading to a 12 percent decline in consumption by the end of 2014 with an even higher decline (17 percent) among low-income households.¹³ The tax generated US\$ 1.3 billion in revenue for the Mexican government in 2014.
- *2015*: United States of America (USA) Vice President Joe Biden, following the loss of his son to cancer, announced plans to scale up efforts to combat cancer and to find a cure.¹⁴

- *2016*: Palau's President Tommy E. Remengesau Jr. signed a law that sets aside 10 percent of revenues raised annually from alcohol and tobacco taxes to finance NCD prevention, through the country's National Coordinating Mechanism.¹⁵
- *2016*: Uruguay scored a major legal victory against Phillip Morris International in relation to health warnings on cigarette packaging, setting a strong precedent that health does not submit to the profit motives of big industry. The Uruguay court case victory shows other countries that they too can stand up to big tobacco and win.



¹² Briefer on the Sin Tax Law <http://thepafp.org/wp-content/downloads/cpg/com/sintax.pdf>

¹³ Colchero, MA, et al. (2016). "Beverage purchases from stores in Mexico under the excise tax on sugar sweetened beverages: observational studies." *BMJ*, 352: h6704.

¹⁴ Daily Beast (2016). "Joe Biden has already started the war on cancer." <http://www.thedailybeast.com/articles/2016/01/27/joe-biden-has-already-started-the-war-on-cancer.html>

¹⁵ Framework Convention Alliance (2016). "Palau tobacco tax to fight NCDs." <http://www.fctc.org/fca-news/opinion-pieces/1397-palau-tobacco-tax-to-fight-ncds>



6. ...but in other cases progress has been insufficient and highly uneven

A 2014 UN Comprehensive Review and Assessment of the progress made in the prevention and control of NCDs revealed progress to be “insufficient and highly uneven.” In the Outcome Document,¹⁶ countries committed to intensify their efforts.



High-level political commitment for addressing NCDs

In September 2011, the United Nations General Assembly held a ‘High-level Meeting on the Prevention and Control of Noncommunicable Diseases’ – only the second time in its history that the General Assembly convened on a health issue (the first being on AIDS in 2001). In the resulting Political Declaration, Heads of State acknowledged that, “the global burden and threat of non-communicable diseases constitutes one of the major challenges for development in the twenty-first century...” They committed to develop multisectoral national policies and plans and to adopt whole-of-government and whole-of-society approaches in the NCD response.

The 2030 Agenda for Sustainable Development, agreed by Heads of State in September 2015, recognizes NCDs as a barrier to sustainable development. Given the broad and interlinked agenda, and the interrelationship between NCDs and many other sustainable development issues, it is a once-in-a-generation opportunity for countries to push forward on their commitments.

¹⁶ A/RES/68/300. “Resolution adopted by the General Assembly on 10 July 2014: Outcome document of the high-level meeting of the General Assembly on the comprehensive review and assessment of the progress achieved in the prevention and control of non-communicable diseases.” <http://www.who.int/nmh/events/2014/a-res-68-300.pdf?ua=1>

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