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NONCOMMUNICABLE DISEASE PREVENTION AND CONTROL

The four main noncommunicable diseases (NCDs) — diabetes, cardiovascular disease, cancer and chronic respiratory diseases — account for nearly 87% of all deaths in the Western Pacific Region. The impact of NCDs extends beyond ill-health and mortality. It threatens sustainable development by increasing health-care and welfare costs, reducing labour productivity and exacerbating inequities within societies. Unless more intensified and coordinated action is taken today, the burden of NCDs will keep growing, along with their health, social and economic impact.

Investing in NCD prevention and control yields substantial health and socioeconomic gains and is a major development imperative. Member States can take advantage of the opportunities presented by the changing environment today to transform a disease treatment-centred “sick system” into a “health system” in which population’s health and well-being enable socioeconomic development. To do so, Member States are encouraged to reorient the health delivery system into a people-centred health system that prevents ill health and accompanies people through the life course, and accelerate the implementation of evidence-based and cost-effective policy interventions. Member States can also adopt innovative and tailored approaches to tackle NCDs at the community and individual levels.

The Regional Committee for the Western Pacific is requested to consider for endorsement the draft *Regional Action Framework for Noncommunicable Disease Prevention and Control in the Western Pacific*.

1. CURRENT SITUATION

The Western Pacific Region bears a disproportionate burden from noncommunicable diseases (NCDs), primarily diabetes, cardiovascular disease, cancer and chronic respiratory diseases. Though largely preventable, these diseases accounted for 12 million deaths in 2019, or 87% of all deaths in the Region that year. Besides the catastrophic health impact, NCDs hamper economic growth by reducing labour productivity and diverting resources from productive purposes to treating disease. The costs of treatment, combined with loss of income, force millions of people into deeper poverty every year. Today, countries and areas in the Region are experiencing profound and radical changes, such as rapid population ageing, economic growth, urbanization and technological innovations. These changes can exacerbate the already cumbersome NCD burden and its social and economic impacts, including health inequity.

NCDs occur from a combination of genetic, physiological, environmental and behavioural factors over time. Progress in reducing premature NCD mortality in the Region made in the first decade of this century has slowed considerably. In some countries and areas, regressions were noted between 2010 and 2019. Current efforts have not yet adequately addressed the challenges of NCDs. This is due to limited progress in achieving risk factor targets and addressing the social determinants of health. For example, tobacco use is declining across the Region, but the decline is not sufficient to meet the 30% reduction target by 2025. The prevalence of elevated fasting blood sugar and obesity continues to rise, with some of the world's highest rates reported in the Pacific.

Additionally, health systems in most countries and areas in the Region remain treatment focused. NCD prevention and control are often overlooked or underemphasized in health systems agendas. The health system capacity has not kept pace with the demand for NCD services. For instance, undetected cases of hypertension and diabetes are prevalent in most of the Western Pacific Region. Of those diagnosed, however, most do not follow up for care, despite the availability of low-cost medications that significantly reduce the risk of death.

The rapidly changing environment today also presents tremendous opportunities for countries to leapfrog and tackle NCDs with innovative and tailored strategies. For instance, technological advances can be harnessed to reshape the delivery of health-care services and the organization of health data. Population ageing can provide an opportunity to strengthen the support network in communities for older adults to participate in social activities. Emerging evidence on disease dynamics enables precision public health and informs innovations beyond the health sector.

The Regional Committee in October 2021 requested that WHO develop a regional action framework in line with global and regional mandates. Guided by the vision of *For the Future: Towards the Healthiest and Safest Region*, the draft *Regional Action Framework for Noncommunicable Disease Prevention and Control in the Western Pacific* was developed in consultation with Member States and other stakeholders, as well as partners and experts in the Region. The draft Framework, which aligns with the 2030 Agenda for Sustainable Development and the WHO *Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020*, calls for greater investment in NCD prevention and control, recommends the transformation from a “sick system” into a “health system” and encourages the adoption of innovative and tailored approaches to address NCDs.

2. ISSUES

2.1 NCD prevention and control is imperative for sustainable development and requires greater investment.

An increasing NCD burden threatens sustainable development by increasing health-care and welfare costs, reducing labour productivity and exacerbating economic inequities within societies. Investing in NCD prevention and control yields substantial health and socioeconomic gains and is a major development imperative. Allocating an additional US\$ 140 billion on the most efficient package of NCD interventions from 2023–2030 could generate US\$ 2.7 trillion in economic gains by averting 39 million deaths in low- and middle-income countries.

2.2 Tackling NCD requires a shift in focus from “absence of sickness” to “health and well-being”.

Now is an opportune time for Member States to transform a disease treatment-centred “sick system” into a “health system” in which population’s health and well-being enable socioeconomic development. This transformation involves a shift in both social and health systems. First, the health sector should engage non-health sectors in advocating for a social system that promotes health, supports individual healthy behaviours and facilitates longer, healthier and more productive lives.

Specifically, Member States may consider adopting evidence-based and cost-effective policy interventions, such as the *WHO Framework Convention on Tobacco Control* and the “*Best buys*” to prevent NCDs at the population level. These interventions reduce major risk factors – including tobacco use, physical inactivity, the harmful use of alcohol and unhealthy diets – and better manage prevalent NCDs such as cardiovascular disease and diabetes. Second, Member States may consider reorienting

health service delivery from treating acute episodes of diseases to preventing ill health and accompanying people through the life course, so that their health is protected – including through support for management of chronic illnesses such as diabetes and hypertension, as well as rehabilitation and palliative care when needed.

2.3 Strengthened efforts are required at community and individual levels.

Social environments and cultural contexts tend to vary from community to community and from individual to individual within countries and areas. To fully capture opportunities presented by the rapidly changing environment, Member States are encouraged to adopt innovative strategies to provide more specific and tailored interventions at community and individual levels. For example, Member States can engage community leaders and workers to reach vulnerable populations with basic NCD prevention and control services. Member States can also take advantage of technological innovations to provide personalized health information and advice.

3. ACTIONS PROPOSED

The Regional Committee for the Western Pacific is requested to consider for endorsement the draft *Regional Action Framework for Noncommunicable Disease Prevention and Control in the Western Pacific*.