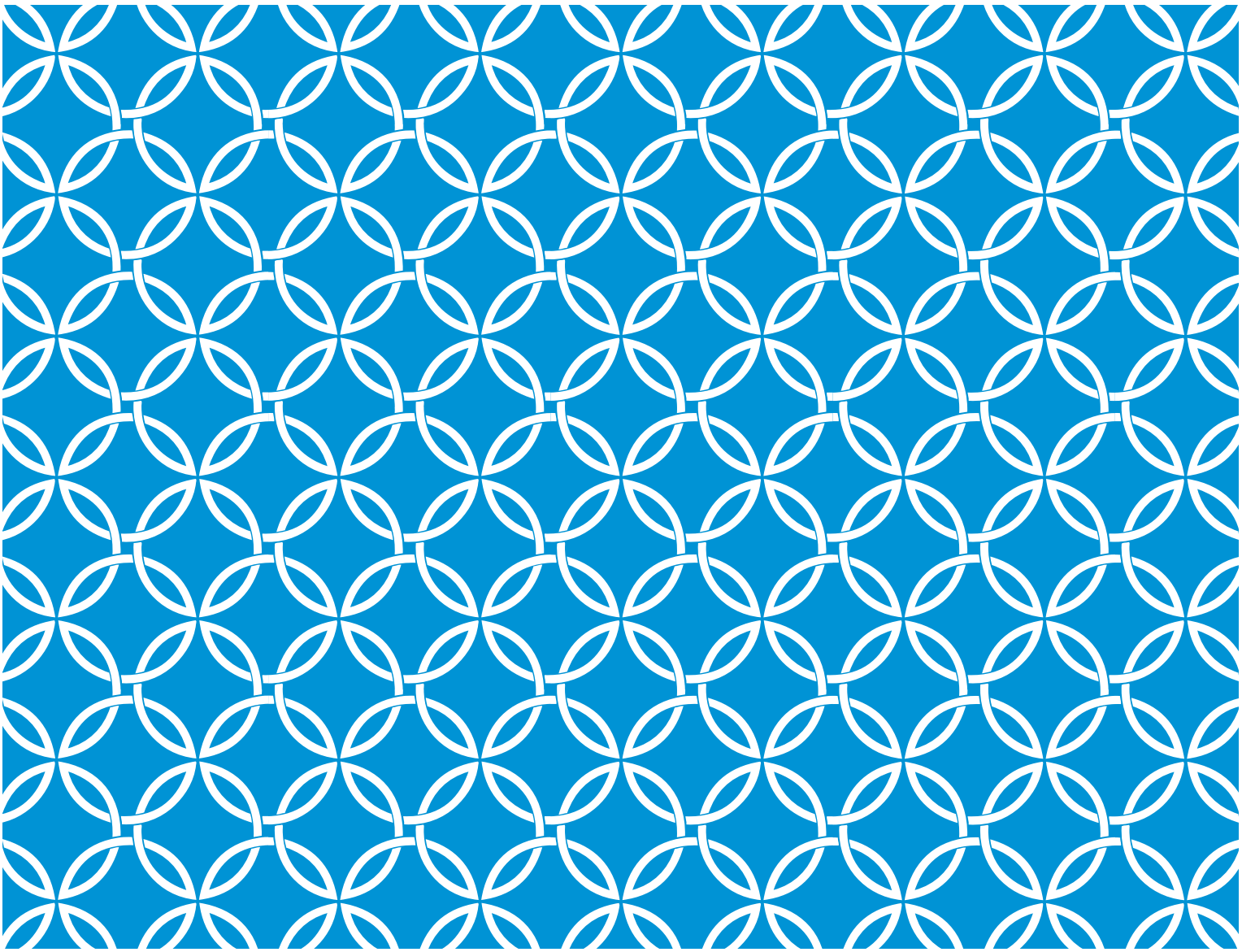
United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases

2019–2021 Strategy



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INTRODUCTION

The United Nations Interagency Task Force on the Prevention and Control of Non-communicable Diseases (NCDs) brings the United Nations system together to support governments tackle NCDs and mental health conditions. It provides a platform for cooperation across the United Nations, governments and non-state actors.[1] The Task Force was established by the UN Secretary-General in 2013.

Over 40 UN agencies, including development banks and other intergovernmental organizations are members of the Task Force, and together they promote whole-of-government and whole-of-society action to respond to the NCD-related Sustainable Development Goals, including Target 3.4 (by 2030 reduce by one-third pre-mature mortality from NCDs through prevention and treatment, and promote mental health and wellbeing).[2] Through its work, it moves countries a step closer towards the 2030 Agenda for Sustainable Development[3] and the triple billion targets in WHO's 13th General Programme of Work.[4]

The impact of NCDs and mental health conditions on the social and economic development of all countries is enormous – and is growing fast. NCDs are the biggest killers in the world, accounting for more than 70% of the death toll, and the cumulative economic loss attributed to NCDs is estimated to surpass USD 7 trillion in low- and middle-income countries over the period 2011–2025, equivalent to approximately 4% of these countries' current annual output.

Countries face many challenges in responding to the rapid rise in NCDs and the need to improve mental health as part of the 2030 Agenda for Sustainable Development. These include: (i) insufficient political action on NCDs; (ii) limited government capacity for policy development, coherence and implementation; (iii) insufficient domestic and international finance; (iv) issues around the impact of economic, market and commercial factors; and (v) weak health systems, including limited progress on achieving universal health coverage.[5]

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[1] i.e. non-government organizations, private sector entities, academia and philanthropic organizations.

[2] In line with recent ECOSOC resolutions on the Task Force, this strategy uses the term NCD-related SDG targets. The Task Force uses NCD-related SDG targets to include those for NCDs, mental health and environmental determinants of NCDs. The 2018 Task Force report to ECOSOC indicates that global joint programmes and thematic working groups led by the Task Force address 12 SDGs and 30 targets (http://undocs.org/E/2018/49).

[3] Resolution A/RES/70/1. Transforming our world: the 2030 agenda for sustainable development. In: Seventieth United Nations General Assembly, New York, 25 September 2015. New York: United Nations; 2015. Available from: http://www.un.org/ga/search/view_doc.asp?symbol=A/RES/70/1&Lang=E.

[4] The triple billion targets are: 1 billion more people with universal health coverage, 1 billion better protected from health emergencies, and 1 billion enjoying better health and well-being primarily through multisectoral policy, advocacy, and regulation.

[5] World Health Organization. Preparation for the third High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, to be held in 2018. Report by the Director-General. 2018. A71/14. http://apps.who.int/gb/ebwha/pdf_files/WHA71/A71_14-en.pdf.

Responding to these challenges requires action beyond the health sector and countries are looking to the United Nations system for support. Countries need to prioritize low-cost, high-impact interventions to prevent and treat NCDs and mental health conditions. These interventions require governments to work as one – and join forces with other key stakeholders across society. The Task Force provides direct technical assistance to countries and mobilizes resources for the NCD and mental health initiatives. The Task Force also encourages new partnerships to support the NCD-related SDG targets, bringing governments, the United Nations system, and non-state actors across health and non-health sectors together to respond to some of the greatest global health challenges of today. The Task Force is committed to ensuring all people can exercise their rights and have equal opportunities to live healthy lives in a world free of the avoidable burden of NCDs.

The United Nations system is at its most effective when working in partnership with the full range of development partners, including non-state actors, while ensuring that its work is protected from undue influence by any form of vested interest.[6]

This Task Force Strategy, 2019-2021 builds on the experience of the 2014–2017 work plans (Annex 1). The strategy has four priorities that are in line with the Task Force's Terms of Reference[7] and mandates provided through United Nations General Assembly Political Declarations and ECOSOC resolutions concerning the Task Force.[8]

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[6] In accordance with the overarching principles and approaches included in paragraph 18 of the WHO Global Action Plan 2013-2020. A specific example is the model policy for agencies of the United Nations system on preventing tobacco industry interference. https://www.who.int/ncds/un-task-force/events/model-policy-agencies-united-nations1.pdf?ua=1.

[7] http://www.who.int/ncds/un-task-force/ToR_UNIATF.pdf?ua=1.

[8] Available at https://www.who.int/ncds/un-task-force/en/.

STRATEGIC PRIORITIES

1. Supporting countries to deliver multisectoral action on the NCD-related SDG targets

The Task Force will respond to the increasing demand for context-specific technical assistance from countries to support national action and capacity building on the NCD-related SDG targets.

The Task Force will:

- Advocate at the highest level of governments for greater investment in the prevention and control of NCDs and support for mental health, including whole-of-government and whole-of-society action.
- Provide and facilitate technical assistance to countries, through global, regional and country joint programming, both directly and through United Nations country teams and their respective regional offices, including identifying and sharing knowledge on best practices on the prevention and control of the NCD-related SDG targets.
- Serve as an entry point for countries to obtain on-demand joint UN technical support.

2. Mobilizing resources

The Task Force will mobilise resources to support the development of national responses to reach the NCD-related SDG targets.

The Task Force will:

- Work with Member States and development partners to launch a financing mechanism(s) to enable governments to catalyse action on NCDs and mental health, including accessing technical support and policy advice from the UN system and other development partners, including non-state actors to reduce the levels of NCDs and improve mental health.
- Build the technical and financial resource base of UN system to support national responses, encouraging its members to increase their individual and collective human and financial resources to make a more effective contribution towards supporting countries in responding to NCDs and mental health conditions.

3. Harmonising action and forging partnerships

The Task Force will support countries by harmonising its work with other global health and development initiatives and forging multi-stakeholder partnerships and alliances at all levels to achieve public health and NCD-related SDG targets.[9]

The Task Force will:

- Identify synergies with relevant global health institutions, partnerships and initiatives and areas of cooperation and joint action within the context of the Global Action Plan for Healthy Lives and Well-being for All, [10] including support for operationalisation primary health care approaches to the prevention and control of the NCD-related SDG targets.
- Expand and develop new partnerships with governments and non-state actors (including, community-led interventions) while ensuring that the Task Force and its members are protected from undue influence by any form of vested interest.[11] These include UN joint programmes, collaborations and thematic groups (see Annex 2).
- Advocate for and support 'making the money work' – ensuring countries' domestic resources and development assistance are optimally planned for and utilized for "best buys" and deliver maximum impact.

4. Being an exemplar for UN reform

In line with the UN Secretary-General's commitment to reposition the UN development system to deliver on the 2030 Sustainable Development Agenda, the Task Force will enable its members, at all levels, to work as one, in supporting governments respond to the NCD-related SDG targets.

The Task Force will:

- Support Task Force members build their own technical and advocacy capacity in accordance with their agency-specific mandates while deepening collaboration between its members at global, regional and country level.
- Promote the inclusion of NCD-related SDG targets and outcomes in United Nations sustainable development frameworks (UNSDFs), policies, strategies and plans at country level and support resource mobilization for their delivery.
- Encourage its Members' governing bodies to consider NCDs and mental health in the context of the triple billion targets and the 2030 Agenda for Sustainable Development.

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[9] in line with E/RES/2018/13.

[10] Towards a Global Action Plan for Healthy Lives and Well-being for All. Uniting to Accelerate Progress towards the Health-related SDGs. https://www.who.int/sdg/global-action-plan/Global_Action_Plan_Phase_I.pdf.

[11] Paragraph 22 of Task Force Terms of Reference https://www.who.int/ncds/un-task-force/ToR_UNIATF.pdf?ua=1.

MONITORING AND EVALUATING RESULTS AND IMPACT

Determining progress at country or global level that is directly attributable to the Task Force is not always possible. Nevertheless, the Task Force can demonstrate its ability to contribute to wider improvements on the NCD-related SDG targets.

INDICATIVE MONITORING FRAMEWORK

Indicator		What success will look like	How will we measure success
Supporting countries deliver multisectoral action			
1.	Number of countries that request and receive policy guidance and technical support from the Task Force with evidence of recommendations being implemented.	30 countries request and receive support from the Task Force or two or more of its members from the global or country level.	Task Force reports that document countries' demands, responses to those demands and recommendations, and their implementation.
2.	Number of UN-led global, regional and country joint programmes[12] in place, resourced and delivering at country level.	5 global joint programmes financed and operational and being financed. Increased numbers of joint UN programmes implemented at country level.	Global joint programme reports and assessments of new and existing joint programmes at country level, including UNSDF budget and plans.
Mobilising resources			
3.	Multi-donor catalytic fund in place and operational.	Fund launched with countries accessing funding and benefiting from the technical assistance made available.	Reports from those governing the fund.
4.	Number of countries with multilateral development bank projects that include the NCD-related SDG targets.	An increase in countries that received development bank projects (baseline TBD).	World Bank and regional development bank reports.
5.	Number of countries that the Task Force has supported, yielding an increase in domestic and/or development assistance funding for NCDs and mental health.	Number of countries where with the Task Force's support, domestic or / and development assistance funding has been mobilized for NCDs and mental health.	Reports and surveys.

[12] Includes those in line with UN Development Group guidance (https://undg.org/document/guidance-note-on-joint-programmes/) as well as other collaborative programmes.

* In line with paragraphs 22-24 of the Task Force's Terms of Reference (https://www.who.int/ncds/un-task-force/ToR_UNIATF.pdf?ua=1).

Each year the Task Force will report to ECOSOC on its results and impact through the WHO Director-General. The set of ten indicators will assist in measuring results and impact over the course of the Strategy.

Indicator		What success will look like	How will we measure success
Harmonising action and forging partnerships			
6.	Number of countries that receive support from the Task Force or/ and its Members to strengthen multistakeholder coordination and action.	An increase in countries that have functional multisectoral coordination mechanisms for NCDs and mental health (baseline TBD).	Global progress monitor. Annual survey.
7.	Operational partnerships between governments and the private sector that have been catalyzed by UN system.*	New partnerships in place at global, regional and country levels.	Task Force reports.
8.	Countries where the Task Force has catalyzed multi-agency/multi-sectoral action for the prevention and control of NCDs and improving mental health.	New partnerships in place at country level.	Task Force reports.
Being an exemplar for UN reform			
9.	Number of countries that have NCDs and/or mental health -related SDG targets in their UNSDFs/or equivalent, with evidence of funds available for joint programming and implementation.	Increase in UNSDFs that include NCDs and mental health with joint funding for action.	Global survey.
10.	Task Force members have prioritised action at country level that is aligned with the WHA-endorsed best buys and effective interventions.	Prioritised actions for each agency available and disseminated.	Published set of prioritised actions.

UNITED NATIONS INTERAGENCY TASK FORCE ON THE PREVENTION AND CONTROL OF NON-COMMUNICABLE DISEASES: LOGIC/CHANGE MODEL

Priority area	Inputs	Activities	Outputs
Supporting countries to deliver multisectoral action	• Mandates and guidance from UN General Assembly, ECOSOC and World Health Assembly • Political and technical contributions from Task Force members • Joint programmes • Thematic working groups • Common set of planning, advocacy and technical tools • Monitoring systems with spotlight indicators	Task Force / UN system agencies providing advocacy, policy guidance and technical assistance to Member States to deliver multisectoral action on NCDs and mental health	Number of countries with national multisectoral NCD and mental health included strategies, policies, (implementation) plans that are costed and budgeted Number of UN country teams with joint UN programming and joint programmes on NCDs & MH, included in UNSDFs
Mobilising resources		Work with Member States and development partners to develop investment plans, increase domestic (and where appropriate development partners') resources for NCDs & MH, and also establish and efficiently utilize a financing mechanism for countries to access to catalyze effective domestic responses to the NCD-related SDGs	Catalytic Fund established and operational. An increase in domestic resources and where appropriate, ODA for NCDs, including through development bank financing
Forging partnerships		Broker and support multi-sectoral partnerships with governments and non-state actors	New multi-sectoral and – stakeholder partnerships / coordination platforms in support of the NCD-related SDGs in place in countries
Being an exemplar for UN reform and leaving no one behind		Work better together across the United Nations system to increase action on NCDs and mental health at country, regional and global levels	UNDAFs include NCD and mental health related SDG targets and outcomes, with resources in place to deliver

[13] See Table 5, WHO. Preparation for the third High-level Meeting. Report by the Director-General. 2018. A71/14. http://apps.who.int/gb/ebwha/pdf_files/WHA71/A71_14-en.pdf

[14] In line with ECOSOC resolution E/RES/2018/13.

Outcomes	Impact statements
Demonstrable progress by governments and their partners in implementing multisectoral actions aligned with national priorities and strategies for NCDs and mental health at country level	Reduction in disease burden and levels of exposure to risk factors
Increased financing available at the country level for NCDs and mental health related SDGs and meeting the triple billion in the context of the 2030 Sustainable Development Agenda	Challenges for implementing the best buys and other recommended interventions overcome[13]
Government led national multisectoral platforms, actions and accountability systems engage health and non-health sectors, civil society, relevant private sector entities, academic institutions and philanthropic foundations	Progress made by Member States in achieving the NCD and mental health-related SDGs and public health goals[14] and in leaving no one behind
Greater UN system coherence, efficiency and capacity in place to support countries in addressing the NCD and mental health-related SDGs as part of the 2030 Agenda	UN system making a clear impact on national multisectoral action on the NCD and mental health agendas

ANNEX 1. EXPERIENCE FROM PREVIOUS WORK PLANS

The **2014–2015 work plan** consisted of 42 actions under four areas: governance, reduction of exposure to NCD risk factors, enabling systems to respond, and monitoring and measuring results in line with the WHO Global NCD Action Plan 2013–2020. Actions in each area were identified for national, regional and global level. For actions to be included they needed to be taken forward by more than one agency. A report was provided at the end of 2014 and 2015.[15] The actions were helpful in encouraging agencies to join up action in support of the Global NCD Action Plan but less so in driving forward the work of the Task Force through the objectives set out in its Terms of Reference.

The **2016–2017 work plan** consisted of two parts: Part 1 provided the overarching strategic actions for the Task Force and Part 2 consisted of a detailed work plan under the Task Force's six objectives.

Overarching strategic actions. These consisted of three elements: (i) fast-tracking action in 12 countries through joint programming missions and follow-up action; (ii) development and roll-out of a series of global joint programmes and thematic groups; and (iii) communication on the work of the Task Force and need for multisectoral action to prevent and control NCDs. For actions to be included they needed to be taken forward by more than one agency. Although there was progress across all three elements, lack of funds prevented the Task Force from maximising the impact for the first two. The Task Force, either through its joint programming missions or its investment case work, now has a footprint in more than 25 countries. The Task Force has received financial support from the Russian Federation and Japan. The Governments of Japan, the United Kingdom and the United States have participated in joint programming missions, and other governments and development partners are committed to joining these missions in the future.

Detailed work plan. This consisted of 66 different activities. It described a range of actions being taken forward by different members of the Task Force. Although some agencies found this helpful in articulating their contribution to the work of the Task Force, the work plan was more a description of ongoing work than a coherent narrative of action across its members. The end of biennium report shows that while many activities have been taken forward, this part of the work plan has probably not made a significant contribution to the overall effectiveness of the Task Force.

[15] http://www.who.int/nmh/ncd-task-force/uniatf-final-report-workplan-2014-2015.pdf?ua=1

ANNEX 2. CURRENT UN GLOBAL JOINT PROGRAMMES, COLLABORATIONS AND THEMATIC GROUPS FOR THE NCD-RELATED SDGS

UN Global Joint Programmes and collaborations*

Catalyzing Multisectoral Action for Noncommunicable Diseases

UN agencies: UNDP and WHO
https://www.who.int/ncds/un-task-force/catalyzing-multisectoral-action-for-ncds-joint-programming-document.pdf?ua=1

The Defeat-NCD Partnership: Scaling up action on NCDs

UN agencies: UNOPS and WHO
https://defeat-ncd.org

FCTC2030: Strengthening WHO FCTC implementation to achieve the SDGs in low- and middle-income countries

UN agencies: FCTC Secretariat, UNDP, WHO
https://www.who.int/fctc/implementation/fctc2030/en/

Joint global programme on cervical cancer prevention and control

UN and multilateral agencies: IAEA, IARC, UNFPA, UNICEF, UNAIDS, UNWomen, WHO, Gavi, Global Fund
https://www.who.int/ncds/un-task-force/cervical-cancer-joint-programming-document.pdf?ua=1

Health for NCDs: BeHe@lthy BeMobile

UN agencies: ITU and WHO
https://www.itu.int/en/ITU-D/ICT-Applications/Pages/mhealth-for-ncd-behealthy-bemobile.aspx

Joint Programme on drug dependence, treatment and care

UN agencies: UNODC and WHO
http://www.unodc.org/unodc/en/frontpage/unodc-and-who-launch-joint-drug-dependence-treatment-programme.html

Global Regulatory & Fiscal Capacity Building Programme: Promoting Healthy Diets and Physical Activity

UN and multilateral agencies: IDLO and WHO
https://www.idlo.int/what-we-do/initiatives/legal-tools-healthy-diets-and-physical-activity

SAFER: Preventing and Reducing Alcohol-Related Harms

UN agencies: UNDP and WHO

https://www.who.int/substance_abuse/safer/en/

Thematic Working Groups

Mental Health

https://www.who.int/ncds/un-task-force/tor-twg-on-mental-health.pdf?ua=1

NCDs and the Environment

https://www.who.int/ncds/un-task-force/tor-twg-ncds-environment.pdf

Nutrition and NCDs

https://www.who.int/ncds/un-task-force/tor-twg-nutrition.pdf?ua=1

Physical Activity

https://www.who.int/ncds/un-task-force/tor-twg-physical-activity.pdf?ua=1

Tobacco Control

https://www.who.int/ncds/un-task-force/ToRs_thematic-Group-on-Tobacco-Control.pdf?ua=1

Communications

NCDs in Humanitarian Emergencies

* Note: Only the names of participating UN agencies are listed. The names of Member State and non-state actor partners are not listed here. Further details can be obtained from the weblinks.

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TASK FORCE ON NCDs
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