

# Ten Measures to Help Ensure a Successful UN Summit on NCDs

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The United Nations will hold its first high-level meeting (HLM) on the prevention and control of non-communicable diseases (NCDs) on September 19-20, 2011, in New York. This is a unique opportunity for all actors involved in better health, development and economic outcomes. Based on several studies supported by the Pan American/World Health Organization (PAHO/WHO) of how best to design a UN summit that works for NCD prevention and control, there are several key measures that participants should encourage, highlight, promote, facilitate and/or commit to in the lead-up to, at and following this summit.

## Ten Steps to a Successful UN NCD Summit

1. **Development, Economic and Broader Health Links.** Highlight the development and economic costs, as well as direct health costs, of NCDs in all countries, developed and developing, with a particular focus on poor and vulnerable people everywhere. In addition to focusing on the four main NCDs and risks, draw out the links between NCDs and mental health, maternal, newborn and child health, climate change, etc., particularly given the co-benefits that can result.
2. **Multi-stakeholder Engagement.** Encourage a wide range of as many participants as possible, from the public and private sectors, to engage at all levels and invest in the summit process (before, during and following the summit). These should include all related government ministries, international and regional health- and development-related organizations, national and international civil society (including non-governmental organizations, professional organizations and academic institutions) and the private sector (including transportation, exercise, food and beverage, agriculture and pharmaceutical sectors). Media and communications are key tools for all stakeholders in raising awareness.
3. **Leader Involvement.** Encourage the attendance at the HLM of the heads of state and government — particularly from countries where implementation of the summit's commitments is critical to the global prevention and control of NCDs.
4. **Leadership Roles.** Promote the assignment of several key countries to leadership roles, notably hosting follow-up HLMs, chairing the accountability mechanisms, and chairing and hosting working groups to encourage the incorporation of international and regional champions for the HLM and beyond.
5. **Outcome Document.** Start drafting the collective outcome document, led by the WHO, as early as possible, based on the emerging consensus of the mandated preparatory regional consultations and taking into consideration those issues and commitments accepted by earlier summits or high-level UN meetings and related international meetings. Codify, reconfirm, elaborate and share the considerable global consensus already achieved, including at the leaders' level.
6. **Implementation.** Craft specific commitments to highlight the catalysts that improve implementation, notably priority placement, references to international organizations and references to civil society, based on relevant lessons from the CARICOM NCD and G8 summits.
7. **Supporting Summits and HLMs.** Place NCDs on the agendas of other summits and at the highest level of relevant bodies, before and after the UN NCD HLM, and secure endorsements and expanding action from those events.
8. **Funding.** Establish an NCD-specific fund with new resources from multi-stakeholders to help with implementation of the HLM's approved program, and in particular to assist willing countries that have limited capacity to comply.
9. **Accountability.** Engage countries in designing, creating and operating a multi-stakeholder accountability mechanism to monitor compliance, to report on implementation publicly and annually, and to ensure rapid self-correction and effectiveness in producing the desired results.
10. **Follow-up HLM.** Encourage follow-up UN NCD HLMs at appropriate intervals to assess progress, take note of what has been successful, make corrections where necessary and build on past success.

Several key steps should be taken before, during and following the UN NCD Summit in September to maximize its success for NCD prevention and control, as follows.

1. Highlight the development and economic implications as well as the direct health implications of NCDs in low-, lower middle-, upper middle- and high-income countries alike, with a particular focus on poor and vulnerable people everywhere. Although the original authorizing UN resolution appropriately noted that the upcoming summit would focus on low- and middle-income countries, NCDs affect all countries and the poor everywhere. A recognition that “we are all in this together” will help engage more actors and the commitments and resources needed to secure results.

NCDs are a global epidemic with global drivers and demand a global response.

It is important to highlight how much money countries, communities, companies and households can save by addressing NCDs, particularly in the current post-crisis economic climate. It is also important to identify the additional development co-benefits that can arise from tackling NCDs, such as improved maternal, newborn and child health (MNCH), mental health, climate change agricultural, food safety and environmental practices.

NCDs are a major barrier to economic, social and sustainable growth and development in developed and developing countries.

2. Encourage as many participants as possible from countries, international organizations (including the World Health Organization, International Monetary Fund, Food and Agriculture Organization, World Food Programme, International Fund for Agriculture and Development, International Labour Organization, Organisation for Economic Co-operation and Development, World Trade Organization and Economic Commission for Latin America and the Caribbean), civil society (including nongovernmental organizations [NGOs], professional organizations and academics) and the private sector (including the transportation, exercise, food and beverage, agriculture and pharmaceutical sectors) — to engage fully and invest in the summit process. Many actors must be involved in an effective NCD response. These include governments that are responsible for providing health care; the food and beverage industry that includes sugar, fat and salt in products; and those that can assist with product reformulation, transparent product information, advertising to vulnerable groups and workplace wellness. It also includes NGOs that support healthy living; international organizations that write international laws to control tobacco; academics and scientists who provide evidence on tackling and preventing NCDs; and individuals who need to take responsibility for their own wellness. A whole-of-society approach is critical for the best possible outcome at the summit. Media and communications are key tools for all stakeholders in raising awareness.

The World Bank and International Monetary Fund play an important role by highlighting the economic benefits of addressing NCDs and creating a fund to assist less capable countries to act.

3. Encourage the summit attendance of heads of state and government — particularly from countries whose faithful implementation of the summit’s commitments is critical to the global prevention and control of NCDs. When a government leader attends a summit, implementation of its commitments tends to be higher. A leader’s attendance indicates a country’s commitment to the issues at hand. Leaders have the most authority and ability to make concrete decisions and ensure their synergistic implementation back home. Civil

society advocates, multilateral organizations and engaged citizens should encourage political leaders to attend the NCD HLM in September.

Leaders matter and should attend the summit. Civil society and the media should encourage their attendance.

4. Encourage several key countries to assume leadership roles for the summit, and its accompanying preparatory process and implementing mechanisms. Jamaica and Luxembourg have been appointed as co-facilitators of the summit. Russia is hosting the first-ever global ministerial meeting on NCDs. Other important countries, such as the United States, China, Brazil and Indonesia, and those from other regions and constituencies should be encouraged to chair or co-chair additional working groups, an accountability mechanism, and follow-up meetings and summits on the subject.

Countries with clear leadership roles in the summit processes will enhance implementation.

5. Start drafting the collective outcome document, led by WHO, as soon as possible, beginning with those issues, priorities, principles and commitments that have been accepted by earlier summits and preparatory meetings. Leaders have made commitments on NCDs at various forums, including CARICOM, the Summit of the Americas, Commonwealth meetings, G20 and the Asia Pacific Economic Co-operation forum. It is important to draw on these past commitments, and to codify, reconfirm, elaborate and share the considerable global consensus already achieved at the leaders' level. Such commitments include signing and ratifying the Framework Convention on Tobacco Control (FCTC), hosting national wellness days and improving NCD surveillance systems.

Drafting the outcome document should start as early as possible, initially focusing on key commitments from past summits.

6. Craft specific commitments to highlight catalysts that improve implementation and downplay those that lower it, based on relevant lessons from the CARICOM NCD and G8 summits. Commitments that are given priority placement in the outcome document (particularly in the preamble), references to international institutions such as the World Bank and WHO, and references to civil society have higher implementation.

The most important commitments should be highlighted in the preamble of the outcome document. This priority placement of high-impact commitments improves compliance.

7. Place NCDs on the agendas of the summits of other bodies and secure endorsements and elaboration from those summits, before and after the UN NCD Summit. This will help to ensure a truly global fight against NCDs. The UN special summit is a critical step in the fight against NCDs, but it should not be seen as an isolated event. Engaging surrounding summits and meetings will emphasize the importance of this issue and keep it on leaders' agendas.

Encourage the adoption of NCD issues on as many international agendas as possible.

8. Establish an NCD-specific fund with dedicated resources from multi-stakeholders to help with implementation and in particular to assist willing but countries with limited capacity to implement their commitments. Often, poor implementation is not due to a lack of political will, but to poor capability and lack of resources.

Setting up an NCD fund is important in ensuring that changes are put in place to tackle NCDs, particularly in poorer and highly-indebted countries.

9. Engage countries in designing, creating and operating a multi-stakeholder accountability mechanism to monitor implementation, report on implementation publicly and annually, and ensure rapid self-correction and effectiveness in producing the desired results. Accountability reporting highlights which countries implement their commitments. It also helps to ensure that course corrections can be made where necessary and to identify which commitments are most cost-effective in producing the desired results.

An accountability mechanism for monitoring implementation is important for ensuring countries act on their commitments.

10. Encourage follow-up UN NCD HLMs at appropriate intervals to take stock of progress, maintain momentum, take note of what has been successful, make corrections where necessary and build on past success. Without a plan to hold a future HLM, countries are less likely to maintain their focus and build on initial advances.

Countries should commit to hold a second UN HLM on NCDs to follow up on their initial one.

These key messages flow from the central conclusions of a recent PAHO-sponsored study of the performance of the CARICOM NCD summit held in September 2007 (available at [www.ghdp.utoronto.ca/pubs/caricom-case-study.pdf](http://www.ghdp.utoronto.ca/pubs/caricom-case-study.pdf)). That summit was the world's first and only one thus far focused fully on NCDs. Participants came from countries at many levels of development and with diverse societies and economies, and from international organizations of various types. Almost four years following the summit, it is possible to assess the impact on NCDs of the various features of the summit process and design and the commitments it made. This assessment is also informed by a recent, more detailed study on preparing the CARICOM summit, its legacy and its lessons for the UN NCD HLM (see Hospedales et al. [2011], "Raising the Priority of Chronic Non-communicable Diseases in the Caribbean," *Pan American Health Journal of Public Health*, in press).

The PAHO-sponsored analysis of the CARICOM summit was conducted using the framework of a similar study of the G8's health commitments and their implementation (available at [www.ghdp.utoronto.ca/pubs/shaping-un-hlm.pdf](http://www.ghdp.utoronto.ca/pubs/shaping-un-hlm.pdf)). The study on the G8 broadened the analysis to the global level and to a three-decade span from 1980 to 2010. The way the G8 Muskoka Summit in June 2010 was able to work with the UN Summit on the Millennium Development Goals in September 2010 in New York to advance MNCH and thus MDGs 4 and 5 offers lessons about how surrounding summits can assist the NCD HLM to deliver effective results.