## Going beyond 2018:

What the political declaration on NCDs means for cancer



On the 27 September 2018, political leaders from around the world came together at the third United Nations (UN) High-level Meeting on noncommunicable diseases (NCDs) to review progress to date and set out a route to reinvigorate action to achieve the global NCD targets. This was the first such comprehensive review since the adoption of the Agenda 2030 (or the Sustainable Development Goals), which include targets 3.4, to reduce premature mortality by one-third, and 3.8, achieving universal health coverage including financial risk protection.

The 2018 political declaration resulting from this meeting was intended to spur on action at country level, while also serving as a global consensus document. Whereas agreements made through bodies like the World Health Assembly urge government action, political declarations made at the UN set out clear commitments. As a result, the preparations for the meeting and negotiations around the declaration text were subject to significant political pressures, requiring the development of consensus language on key issues. The resulting document is one which many civil society organisations, including UICC, feels lacks the necessary ambition and comprehensive thinking required to drive the agenda forward. It does, however offer some opportunities for cancer control advocacy, a number of which have been highlighted below.

## Successes and opportunities

Specific cancer language – Governments have agreed to promote access to affordable diagnostic, screening, treatment and care services, including vaccines. While the 'promote' language is weak, it does build on more specific measures set out in the 2017 World Health Assembly cancer resolution. The declaration also mentions the need for a 'comprehensive approach' to cancer prevention and control; however a direct reference to the cancer resolution (WHA 70.12) is missing. Integration of mental and environmental health (5x5 framework) – For the first time, a UN political declaration on NCDs recognises the burden of mental health, both in isolation and co-morbid with other NCDs including cancer, and challenges Governments to improve mental health nationally. It also highlights the need for action and cooperation to reduce exposure to environmental risk factors, including air pollution.

Inclusion of universal health coverage (UHC) – In line with SDG 3.8 and WHO's General Programme of Work, the declaration calls on governments to strengthen and reorient health systems to deliver UHC. The text includes prevention, screening and control of NCDs, and recognises the need for specialised health services with access to quality essential diagnostics, medicines, vaccines and technologies. While the language is high-level, it does clearly link NCDs to the UHC agenda ahead of a United Nations High-level Meeting on UHC in September 2019. The inclusion of UHC also follows on from a commitment to take necessary measures to recognise the right to enjoy the highest attainable standard of physical and mental health.

**Commits governments to leadership on NCDs** – The declaration opens by re-affirming governments' role and responsibility for, and commitment to, implementing agreed measures to reduce premature mortality from NCDs and meet SDG target 3.4. It strengthens the commitments of Heads of State and Government to provide strategic leadership, a theme which was incorporated in a number of national statements and participation of Heads of State and Government at the meeting itself.

**Civil society involvement in national responses** – The declaration recognises and encourages the meaningful engagement of civil society organisations with particular reference to developing ambitious multisectoral responses to NCDs. Underscoring this, the document commits governments to establish or strengthen multi-stakeholder mechanisms for the implementation of national plans, alongside transparent accountability mechanisms to monitor these.

# Weaknesses and opportunities

The 2018 political declaration falls short of the ambitions set out by civil society organisations and contains a number of challenges. The items listed below are those which UICC feel pose the greatest hurdle to driving improved access to NCD services, as well as potential advocacy positions cancer organisations could take:

Missing the 'Best buys' and other recommended interventions – Despite their adoption at the 70 World Health Assembly in 2017, the updated suite of WHO 'best buys' and other recommended actions are not referenced in the declaration. However, compromise wording was achieved which identified "cost-effective, affordable and evidence-based interventions and good practices, including those recommended by the World Health Organization."

#### Example advocacy actions:

- Emphasise the WHO 'Best Buys' and other recommended actions as the key resource containing cost-effective and evidence-base recommendations for national NCD strategies.
- Urge the inclusion of relevant cancer control interventions from the 'best buys' and other actions within your national cancer response.

**Prevention** – A number of the paragraphs focus on key NCD risk factor reduction strategies such as the full implementation of the WHO FCTC. However the highlevel language used in the political declaration could move discussions on risk reduction backwards, for example by omitting measures like limiting marketing of unhealthy products to children. Moreover, much of the language on prevention is very high level, focusing on 'empowering individuals to make healthy choices' thereby shifting the emphasis from promoting effective and evidence-based national legislative and fiscal measures to individual choices.

#### Example advocacy actions:

- Re-emphasise the effectiveness of public health policies to reduce risk factor exposure through health-promoting environments.
- Signpost to WHO recommendations, including policy measures, such as MPOWER, ACTIVE, SAFER and resources like the NOURISHING framework.

#### **Development of national investment cases for NDCs** – The declaration calls on governments to

develop national investment cases 'as appropriate' in order to raise awareness about the burden and inequities that characterise NCDs, as well as the returns on investment in NCD prevention and control services. Notably, this section is missing a clear call to governments to cost-out and budget national NCD plans. The commitment to mobilise sustainable resources for implementation also lacks a clear strategy or timeline.

#### Example advocacy actions:

- Call on your national government to ensure that national cancer control plans are budgeted.
  Following on from the 2017 cancer resolution,
  WHO and partners are developing a tool to assist governments to develop national investment cases. This tool should be available late 2019.
- Explore existing investment case resources such as the saving lives, spending less report, Lancet Oncology commission on radiotherapy, Lancet Oncology commission on cancer surgery, Lancet commission on economics and NCDs, as well as individual national resources such as Cancer Council Australia's 'Economics of Cancer Prevention' report.

Access to essential products – While the declaration does recognise the importance of access to essential medicines, technologies and vaccines, the language on these aspects is very high level. The declaration commits governments to 'promote' access, without recognising advances in support or policy guidance for this, such as the national essential medicines or technology guidelines. Similar weak language is contained in the paragraphs relating to the role of the private sector. The declaration invites companies to strengthen their commitments, including 'contributing to further improving access to and the affordability of safe, effective and quality medicines and technologies' without providing any further detail on issues of access and affordability.

#### Example advocacy actions:

- Call for regular and transparent reviews of national essential medicines lists and the inclusion of costeffective medicines for priority national cancers.
- Urge the inclusion of essential medicines, technologies and vaccines in national cancer control plans, including their procurement and allocation of sufficient and sustainable resources to cover these.
- Leverage national and international mechanisms, including TRIPs flexibilities where appropriate, to help secure affordable prices for essential cancer medicines, technologies and vaccines.

**Timelines** – Unlike previous political declarations, this document only contains one time-bound target regarding another comprehensive review in 2024, ahead of a fourth High-level Meeting in 2025. Without another major milestone before 2025 there are serious concerns that NCDs will drop down national political agendas, meaning that governments will not take the urgent action required to curb exposure to NCD risk factors and improve access to cancer and NCD services.

#### **Example advocacy actions:**

- Call on governments to plan NCD and cancer responses through to 2025, aiming for a 25% reduction in premature mortality by this date.
- Urge periodic reporting back on national progress through to 2025, leveraging national reporting mechanisms and meetings, as well as international tools like the WHO NCD progress monitor.
- Encourage participation in the UN High-level Political Forums when reviewing SDG 3 on health, positioning 2025 as an important milestone en route to achieving SDG3.4.

Private sector engagement – The document recognises the critical importance of multisectoral engagement to effective action on NCDs; however language around private sector engagement represents a step back in comparison to previous UN declarations. As an employer, the role of the private sector in ensuring healthy workplaces is important, but the declaration fails to identify other opportunities for constructive engagement. There was also a need for clearer language on appropriate measures to safeguard and promote public health within multistakeholder partnerships.

#### Example advocacy actions:

 Push for the establishment and use of national multisectoral engagement mechanisms, such as national cancer control committees, with transparent selection criteria and conflict-ofinterest policies to support the implementation of national cancer control and NCD plans.



## **2018 Political declaration**

## on NCDs at a glance

The table below provides an at-a-glance summary of key paragraphs in the 2018 declaration. Please refer to the full political declaration for the original text as some have been shortened for design purposes, moreover this summary reflects the core commitments as they relate to cancer control.

## Improved cancer data for public health use

- P27. Invest in research, including on public health measures, new treatment options, prevention and cost-effective therapies.
- P45. Establish or strengthen national accountability mechanisms, taking into account existing national and global mechanisms.



#### Timely and accurate treatment

 P35. Strengthen and reorient health systems towards the achievement of universal health coverage and improvement of health outcomes, including access to safe, affordable, effective and quality essential diagnostics, medicines, vaccines and technologies, and palliative care.

## Comprehensive cancer prevention

- P20. Scale up of prevention-related commitments made in 2011 and 2014 (including those in the WHO Global Action Plan on NCDs).
- P21. Promote and implement policy, legislative and regulatory measures to minimise the impact of the main risk factors for NCDs.
- P22. Accelerate the implementation of the FCTC.
- P23. Implement cost-effective and evidence-based measures to halt the rise in overweight and obesity.
- P33. Encourage the adoption of a holistic approach to health through regular physical activity and promotion of healthy lifestyles.
- P34. Empower individuals to make informed choice through an enabling environment, mass and social media campaigns and improved health literacy education.

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Access to early detection and diagnosis

• P38.Promote access to affordable diagnostic, screening, treatment and care as well as vaccines that lower the risk for cancer, as part of the comprehensive approach to its prevention and control, including cervical and breast cancers.



### Supportive and palliative care

- P29. Take measures to better prepare the health systems to respond ageing population needs, including preventive, curative, palliative and specialised care.
- P35. Strengthen and reorient health systems towards the achievement of universal health coverage and improvement of health outcomes, including access to safe, affordable, effective and quality essential diagnostics, medicines, vaccines and technologies, and palliative care.



### Accelerating national action

- P24. Develop a national investment case for prevention and control of NCDs, include the social and economic burdens, inequities, and returns on investment in lives saved and economic benefits.
- P25. Establish or strengthen national multistakeholder dialogue mechanisms for the implementation of national NCD plans.
- P42. Promote meaningful civil society engagement to encourage the development of ambition national multisectoral responses and to contribute to their implementation.
- P46. Commit to mobilise and allocate adequate, predictable and sustained resources through domestic, bilateral, and multilateral channels including ODA, continue to explore voluntary innovative financing mechanisms and partnerships.