

International dialogue on sustainable financing for noncommunicable diseases and mental health

Web-based consultation | Feedback template

Organization: NCD Alliance

Type of organization (please add X next to your selection):

Member States

UN agencies, programmes and funds, and other multilateral organizations

Non-State actors

- nongovernmental organizations, including those representing lived experience of health conditions
- philanthropic foundations
- academic institutions
- other (specify):

Please extend each of the boxes as needed to provide feedback:

Draft summary of the technical background papers

Document of the draft emerging messages that will inform the outcome document of the International financing dialogue

NCD Alliance Comments
Emerging Messages to Inform the Outcome Document of the
International Dialogue for the Sustainable Financing
of Noncommunicable Diseases and Mental Health
May 2024

We welcome the set of technical background papers and the document of emerging messaging to inform the outcome document of the international dialogue for the sustainable financing of noncommunicable diseases and mental health (hereinafter “financing dialogue”), prepared by the WHO and World Bank. The background papers are a useful and comprehensive resource addressing many of the issues in NCD and mental health financing and we appreciate the good work and wide range of expertise covered by the authors and the External Technical Expert Group in the development of these papers.

The emerging messages document adequately and accurately captures the critical information delivered through the dialogue’s technical background papers, and we welcome the reiteration of best practices and technical tools that already exist for health and NCDs and mental health (NCD/MH¹) financing.

We express concern, however, that current recommendations, outcome messages, and calls to action from the background papers are not sufficiently clearly stated. Also, we note with concern that some of the key recommendations from civil society and other stakeholders for bold action on NCD/MH financing that would help to accelerate progress on efforts for NCD and mental ill health prevention and control are omitted.

In particular, we welcome:

- In Paragraph A, the emphasis on **health-in-all-policies approaches** to address NCDs, mental ill health, and their risk factors in the most comprehensive way possible. We also welcome the recognition of the importance of including the **meaningful participation of civil society and people with lived experience** in policymaking processes and the critical role they play in ensuring a whole-of-society response.
- Acknowledgment that there is an under-explored opportunity to leverage Official Development Assistance (ODA) for NCDs to facilitate **catalytic and sustainable** external funding for NCD/MH due to a lack of national plans and priorities (Paragraph B). We also appreciate the recognition of the continued dominance of

Millennium Development Goal agenda items in development for health, and of the shared responsibility all actors have in integrating NCD/MH into their respective strategies. Analysis from *Tracking NCD Funding Flows: Urgent Calls and Global Solutions* (Global Alliance for Tobacco Control, NCD Alliance, 2024), shows that there are large financing gaps that ODA and other forms of development assistance for health (DAH) can assist in closing for NCD/MH in LMICs. For example, tobacco control faces an annual funding gap of \$8.4 billion for proper implementation of the WHO FCTC, and alcohol use, while causing 5.3% of mortalities, only receives US\$50 million per year.

- We strongly welcome the “win-win” message presented in Paragraph F, through its reiteration of the success and importance of **fiscal measures** for health in not only increasing fiscal space but also serving as a **preventative** measure against NCDs and mental ill health **by reducing risk-factor exposure**. These strategies are well-evidenced and there is room for expanding the range and role of fiscal measures as an upcoming report from NCD Alliance, *Getting Fiscal Policies Right*, demonstrates as it explores the range of fiscal measures to deliver a “win-win” situation including taxes, levies, and subsidies.

However, we express concern that:

- The emerging messages for the financing dialogue do not mention nor propose the **development of NCD/MH financing targets**. Unlike other global health agendas, such as HIV/AIDS or tuberculosis, NCD/MH does not have politically agreed specific and measurable financing targets. Since the inception of the global AIDS response, there have been targets on the corresponding funding gap and the level of investment required both globally and in LMICs. Targets can be and have been impactful tools for accelerating action; it’s clear that **what gets measured gets managed**. Without a clear understanding of the optimal funding and targets necessary for the adequate financing of NCD/MH, investment will continue to stagnate or lag.
- Despite the emphasis placed on increasing and mobilizing financial resources, the main messages for the dialogue do not include accompanying **calls for enhancing data collection, monitoring, and accountability** mechanisms for NCD/MH spending, outside of a brief reference to health financing mechanisms in Paragraph E. All stakeholders should be encouraged to create and/or improve the reporting on indicators across national health accounts, OECD indicators, and ODA budget lines. It is likely that some NCD/MH investment is hiding in plain sight, with governments and donors initiating NCD-related projects under general headings (such as “health systems strengthening,” or “essential medicines”) without effectively tracking, examining, or using this information to inform strategic investment planning. NCDA’s forthcoming paper, *Building Momentum for Change through the G20*, argues that a global monitoring standard for NCD financing is necessary for both delivery of, and accountability for, global action against NCD/MH.
- The current outline of the outcome document does not include nor reaffirm the main messages and outcomes from the 2018 *Global Dialogue on Partnerships for the Sustainable Financing of NCD Prevention and Control*, which highlighted the important **role of multi-sector partnerships and innovative funding mechanisms** to increase the fiscal space for NCDs. Governments have the primary responsibility in delivering on their commitments to reducing NCD mortality and achieving UHC, but unlocking these resources is essential to driving progress on NCD/MH financing.

We also offer the following recommendations to further strengthen the outcome document:

- We welcome the recognition in Paragraph I, that households affected by NCDs and mental ill health are subject to **high levels of out-of-pocket spending (OOP)**, increasing their risk for financial hardship and non-adherence to treatment. As such, we recommend that the outcome document include a rationale that links the strengthening financial and social protection policies to **the achievement of Universal Health Coverage (UHC)** and the triple billion targets, and important principles such as health **equity** given that NCDs and mental ill health disproportionately impact people of lower socio-economic status.s
- **Strengthening linkages across the broader Sustainable Development Agenda**. NCDs and mental ill health are not just a health issue; they are a human rights, gender, equity, and economic issue. Providing SDG-related rationale will provide messaging and justification to stakeholders not participating in the financing dialogue, which will be important in **encouraging political leadership and political will to address NCDs and mental health**. Transforming the good frameworks and technical guidance that already exist into meaningful action links closely to the earlier point on the need for whole-of-society and whole-of-

government responses, which cannot be done without a common and comprehensive understanding of the issue.

- Strengthening and clarifying the messages around **information systems** in Paragraph E. The enhancement of information systems for the collection of routine health information is a critical investment to improve and integrate patient care and we suggest that main messages also include recognition that these enhanced systems can also contribute to data collection on disease prevalence, the effectiveness of interventions, and patient needs to facilitate that can **be used in national resource planning and financing strategies** to ensure that resources are purchased strategically and allocated based on need.

The above statement is written by NCD Alliance and supported by the following organizations:

Alianza ENT Uruguay
Australian Chronic Disease Prevention Alliance (ACDPA)
Bangladesh NCD Forum
Burundi NCD Alliance
Cancer Research UK
CLAS Coalition for Americas' Health
Eminence Associates for Social Development
European Federation for Neurological Associations (EFNA)
Ghana NCD Alliance
Healthy Caribbean Coalition (HCC)
Healthy India Alliance
International Federation of Psoriasis Associations
International Society of Nephrology (ISN)
Japan NCD Alliance
McCabe Centre for Law and Cancer
NCD Alliance East Africa
NCD Alliance Malawi
NCDI Poverty Network
OMIS (Multidisciplinary Organization for Social Integration)
OneNeurology
Rwanda NCD Alliance
South East Asia Regional NCD Alliance
Tanzania NCD Alliance (TANCODA)
The Africa NCDs Network
The Cameroon Civil Society NCD Alliance
The George Institute for Global Health
The International Association for Dental Research (IADR)
The Zambia NCD Alliance (ZANACODA)
Unesco University Committee/Club for the Fight Against Drugs and other pandemics (CLUCOD)
United for Global Mental Health
Wale Action Sante Population
World Cancer Research Fund International
World Stroke Organization

¹ In line with the inclusion of mental health conditions in WHO's '5x5' approach to NCDs, we refer throughout this document to the need for financing of NCDs including mental health conditions as NCD/MH. Where mental health is not specifically mentioned, it should be assumed that it is not included in the corresponding text.

1. Health spending on NCDs and mental health: What can national health accounts tell us?

- We welcome the recommendation that there is a need to develop guidance on NHAs for NCD/MH to facilitate a better understanding of spending patterns, and that WHO can promote tracking expenditure by disease.
- We welcome the acknowledgment of the role digitization and technology can play in monitoring and tracking spending and other financial trends.

- We recommend reframing the key messages to be action-oriented recommendations, particularly as initiating and strengthening data collection for NCD/MH in health accounts in LMICs will challenge the capacity of these governments to collect accurate and detailed data. While it is important to know what is being spent, it is equally important that financial flows can be better tracked, monitored, and analyzed to support national decision-making and that bottlenecks in selected areas can be addressed to support increased service delivery.
- Moreover, we would recommend contextualizing the importance of the collection and disaggregation of NCD/MH data through a health and development lens, noting that without information on current NCD/MH spending, the development of global funding targets to achieve SDG 3.4 is not possible.

2. External financing for NCD and mental health: What is the role of the Development Assistance for Health?

- We welcome the promotion of the use of DAH to catalyze sustainable domestic research mobilization for NCD/MH
- We caution against the use of generalizations throughout the paper without caveat. One such example is on page 5: “the NCD conversation has stayed very much in the technical/technocratic space. There is a lack of counterpart actors in the other dimensions of agenda-setting, e.g., advocacy, policy champions, rights (with mental health being an increasing exception), and development.” This ignores the interest and engagement of civil society groups such as Access Accelerated, City Cancer Challenge, NCD Alliance, PATH, the Union for International Cancer Control, United for Global Mental Health, and the World Diabetes Foundation, among others, which have prioritized NCD/MH financing in their advocacy work, as well as the successful investment cases of the UNDP and the three UN High-Level Meetings on NCDs.
- We recommend building stronger links between this paper’s discussion on advocacy and civil society engagement with the key messages in Paper 7, as well as emphasizing the need to recognize and build champions, a key consideration for building political will and leadership.
- We recommend bringing forward the point around the complexity of tracking DAH contributions for specific diseases and the need for standardized definitions and reporting mechanisms to improve transparency and accountability in health

3. Domestic financing for NCDs and mental health: What is the role of health taxes and other fiscal measures?

- We welcome the key messages and recommendations for this paper and offer our full support of its key messages and findings.
- A forthcoming report from NCDA on fiscal measures provides a comprehensive overview of the various taxation and subsidy measures governments can take beyond direct taxes on health-harming products. We see these two papers as complementary in this discussion, and we recommend that our report be considered as additional reading for dialogue participants and considered as an input in the development of the final outcomes document.

4. Domestic financing for NCDs and mental health: priorities, purchasing and provider payments

- We welcome the emphasis on greater money for health and NCD/MH-informed decision-making in PHC and UHC efforts.
- We also welcome the presentation of key messages from the case studies in Section 2.
- In Section 3, we recommend creating better links with background paper 7 and including similar points from the “emerging messages” document around the engagement of civil society and people with lived experience.
- We encourage the introduction of a recommendation section to bring together the various ways this paper discusses how to enhance domestic financing.

5. Financial protection for NCDs and mental health: Why and how?

- We welcome the continued recognition that OOP spending is a barrier to seeking care for NCD/MH and can lead to financial hardship and that financial protection is a key component of UHC
- We recommend using the discussions around OOP and its ripple effects, as an opportunity to bring in links to other SDGs and how addressing NCD/MH can accelerate action on these other goals, as outlined in our response to the “emerging messages” document.
- We recommend the development of sharper messaging in the two “strategies” subsections to create an actionable recommendation section. Much of the useful information is obscured in its current format.

6. Human resources for health: How to increase workforce inputs to address NCDs and mental health conditions?

- We welcome this paper and have no further comments at this time

7. Galvanizing investment, action and accountability in NCDs and mental health: the role of civil society

General comments relevant to multiple papers:

- We recommend developing a standard definition across all background papers for “NCDs and mental health” as it is often unclear whether this formulation also consistently includes neurological conditions. Terminology and acronyms should be consistent throughout.
- NCD Alliance has consistently introduced “NCDs” as an inclusive term, “including mental health and neurological conditions”. We appreciate that this is a complex issue, and we appreciate that statistics and data used can vary in terms of the specific diseases used in their calculation. We have used “NCD/MH” to reflect the title of the dialogue in this instance but recommend that an inclusive approach to the NCD agenda be taken as the road to 2025 continues. We would welcome further development of the conceptualization of co-morbidities and the relationship between physical and mental health being factored into the ongoing development of UN HLM on NCDs’ 5x5 agenda and how this is communicated.

Last, does your organization have any suggestions for new commitments from Heads of Government regarding sustainable financing for noncommunicable diseases and mental health?

Building upon our comments above, we encourage Heads of Government/State to commit to:

- Developing and/or enhancing the tracking of public spending on NCD/MH in national health accounts and development budgets and indicators.
- Recognizing and committing to the fulfilment of a set of global financing targets, as developed by the WHO and World Bank, for NCD/MH as a health and development issue in the Political Declaration on NCDs in 2025.

Please send this completed form to OnTheRoadTo2025@who.int during the period 1–26 May 2024.