

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

Geneva, 4-5 March 2020

Fourteenth meeting of the United Nations Interagency Task Force on the Prevention and Control of Non-Communicable Diseases, Geneva, Switzerland, 4-5 March 2020

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This publication contains the collective views of the Fourteenth meeting of the United Nations Inter Agency task Force on the Prevention and Control of Noncommunicable Diseases and does not necessarily represent the decisions or policies of WHO.

Contents

INFORMAL SUMMARY OF THE FOURTEENTH MEETING
A. OBJECTIVES, PARTICIPATING AGENCIES, REVIEW OF THE SUMMARY OF THE THIRTEENTH MEETING AND UPDATE ON GLOBAL EVENTS AND ASSIGNMENTS
B. DRIVING FORWARD ACTION AT COUNTRY LEVEL
C. TOBACCO CONTROL
D. UPDATES FROM THE COLLABORATIONS AND INITIATIVES ACROSS THE UN SYSTEM 4
E. ECOSOC 2020 report5
F. 2020 UNIATF Awards5
G. Dates and venues for future Task Force meetings and other key events for the Task Force and
Task6
H. Finalization of action points and recommendations 6
Annex 1. List of Participants
Annex 2. Agenda for the Fourteenth Meeting of the UN Task Force on the Prevention and

INFORMAL SUMMARY OF THE FOURTEENTH MEETING

A. OBJECTIVES, PARTICIPATING AGENCIES, REVIEW OF THE SUMMARY OF THE THIRTEENTH MEETING AND UPDATE ON GLOBAL EVENTS AND ASSIGNMENTS

- 1. The Fourteenth Meeting of the United Nations Interagency Task Force on the Prevention and Control of Non-Communicable Diseases was held at the International Labour Organization, Geneva on 4 to 5 March 2020. The following members participated: FAO, IAEA, IARC, IDLO, ILO, OECD, UNICEF, UNAIDS, OHCHR, UNDP, UNEP, UNESCO, UNHRC, UNITAID, UNFPA, UNSCN, WBG, WFP, WIPO, WTO, WHO and WHO FCTC.
- 2. The main objectives of the meeting were (i) to review progress of the 2019-2021 Task Force Strategy in line with recent developments across the UN and broader global health and development agenda; and (ii) to review progress on the various work streams of the Task Force.
- 3. Members reviewed the summary of the Thirteenth Task Force Meeting (22 to 23 October 2019) and noted that progress has been made across most of the actions that had been agreed. Opportunities to share the Agencies' contribution on the Task Force website were discussed following returns received by the Secretariat. It was agreed that the website would be structured by subject areas with relevant publications/resources from different agencies under each subject area.
- 4. The Task Force received an update on global events and assignments since the Thirteenth Meeting.

Actions

A1. Complete outstanding actions from the 13th meeting

- Update the analysis of how many UN country frameworks include NCDs (Task Force Secretariat).
- Develop a short briefing paper for governments on opportunities to encourage greater action on NCDs from UN country teams at the country-level (Task Force Secretariat in collaboration with selected Task Force members).
- A2. Based on the returns received, Members' activities to be included on the website by subject area. Final list of subject areas to be developed by the Secretariat and shared with all members for populating before being collated by the Secretariat for publication/linked on the web.

B. DRIVING FORWARD ACTION AT COUNTRY LEVEL

5. An update was provided on joint programming missions and follow up activities and how to encourage UN country teams to take forward collective action to follow up recommendations. The discussion focused on the alignment between the Task Force Strategy 2019-2021 and the Global Action Plan Healthy Lives and Well-being for All (GAP), and the methodology in place to encourage the prioritization of NCD multisectoral action across WHO Country Cooperation Strategies (CCS) and UN

Sustainable Development Cooperation Frameworks (UNSDCF). A draft paper that maps out linkages between the GAP accelerators and the strategy and work of the Task Force was presented and discussed.

- 6. The Task Force Secretariat briefed participants on recent country missions undertaken from December 2019 to February 2020 in Uganda, Nigeria and the Philippines. Members were briefed on the teleconference recently held between the World Bank and Regional Development Banks (RDBs). The Banks looked at opportunities for synergies, selecting one or two countries for coordinated, targeted work with other UN agencies. Several initiatives on which agencies and RDBs can work together were identified (e.g. supporting countries to document the burden of disease from NCDs; to identify cost-effective best buy interventions to fund; and to analyze the socio-economic and health benefits of investing in NCDs).
- 7. Agencies expressed some concern that WHO had still not come out with a clear position regarding the multi-partner trust fund. Agencies asked WHO to expedite this as a matter of urgency, taking into account that ECOSOC, the World Health Assembly and the WHO Independent Coalition on NCDs had all called for such a Fund. Agencies were still of the strong view that WHO should be the lead agency in establishing and operating the Trust Fund, that WHO should chair the oversight and decision-making body (Steering Group), that the Secretariat of the Task Force should serve as the Secretariat for the Trust Fund and the United Nations Multi-Partner Trust Fund Office should be the fund administrator.

Actions

Update on the Global Action Plan for Healthy Lives and Well-being for All

B1. Finalise the draft paper that maps out linkages between the GAP accelerators and the strategy and work of the Task Force (Task Force Secretariat).

UN system action

B2. Liaise with the relevant departments at the UN Development Coordination Office to update the Guidance Note on Integrating NCDs into UNSDCFs (UNDP and the Task Force Secretariat).

The role of the UN in implementing WHO CCS

B3. Review work covered by the Task Force across WHO priority CCS and map this with CCS/equivalent from other UN system agencies and other major development partners in a selection of countries (Task Force Secretariat).

Work that individual agencies are developing in line with the recently published briefs

B4. Agencies that have developed briefs to disseminate them to their country offices. Task Force Secretariat to disseminate the full pack of agency briefs to UNRC offices alongside further dissemination of sector briefs. Agencies that have yet to complete agency briefs to consider doing so. (Task Force Secretariat and relevant agencies).

Joint programming missions and follow up

B5. Build on the example of the NCD and TB mission to Nigeria to use the Task Force as a platform for joining up NCD and mental health joint programming missions with other relevant areas to encourage whole-of-government, whole-of-UN and whole-of-society approaches to the health-related SDGs and UHC and maximise efficiencies (Task Force Secretariat).

- B6. Develop a blueprint for joint programming missions that combine NCDs and other areas, building on the experience of Nigeria (Task Force Secretariat in collaboration with relevant agencies).
- B7. Develop a strategy/approach to strengthen the Task Force's engagement with and support to civil society at the country level (Task Force Secretariat).

Multi-Partner Trust Fund

B8. WHO to expedite the establishment of the Multi-Partner Trust Fund through the UN Multi-Partner Trust Fund Office (WHO, including Task Force Secretariat).

World Bank and Regional Development Bank discussion

B9. World Bank, Regional Development Banks and Task Force Secretariat to continue discussions along with other selected Task Force members on taking forward joint targeted activities and actions among a small number of priority countries. Examples of work could include: (i) the importance of investing in NCDs, building on investment cases undertaken to date; (ii) what should be done — taking into account the WHO best buys and again the investment cases; (iii) estimation of the socioeconomic benefits; and (iv) core results monitoring. Countries selected could be linked to those where governments are engaging with the WBG on loans and projects, assuming there is government interest.

C. TOBACCO CONTROL

8. WHO and the Convention Secretariat provided an update on the work of the Thematic Group, including the Alternative Livelihood for Tobacco Farmers project. There was a discussion on tobacco control among school-aged children, 100% smoke free UN, non-smoking hotels and venues for UN meetings. The Convention Secretariat also provided updates on the FCTC 2030 joint programme and encouraged Members of the Task Force to apply for observer status to the Meeting of the Parties to the Protocol and register for upcoming MOP2 and COP9.

Actions

- C1. Alternative Livelihood for Tobacco Farmers programme to continue its activities and develop the toolkits for the developing, including conducting country pilot work in promoting alternative livelihood for tobacco farmers, especially in the countries where funding mechanism are already in place (e.g. Philippines, Vietnam) (Thematic Group).
- C2. Finalise data collection and mapping existing strategies and initiative to enable the cooperation regarding tobacco control among school-aged children and explore ways forward (Thematic Group, UNICEF, Convention Secretariat, WHO, WFP, UNODC).
- C3. The WHO Director-General, working with the WHO FCTC Head of Secretariat, could formally communicate with all UN common system Executive Heads to encourage them to use the Guide for a Smoke-Free Campus in order to create smoke-free workplaces (WHO and Convention Secretariat).

- C4. Develop guidelines to ensure that events and meetings in hotels convened or co-hosted by UN common system organizations are tobacco free and ensure that hotel rooms for meeting participants are smoke-free, especially rooms paid for by the UN common system organization (Convention Secretariat and WHO).
- C5. Re-lobby the Global Compact Secretariat to ensure that guidance regarding tobacco industry funding is being implemented in line with the model UN policy (Convention Secretariat, WHO and WHO Office in New York).
- C6. Task Force members are encouraged to apply for observer status to the WHO FCTC and register for upcoming MOP2 and COP9 (All Task Force members).

D. UPDATES FROM THE COLLABORATIONS AND INITIATIVES ACROSS THE UN SYSTEM

- 9. The Task Force received updates from the following joint programmes and initiatives currently being undertaken by members of the Task Force; (i) NCD 2030; (ii) FCTC2030; (iii) Be Healthy Be Mobile; (iv) Cervical cancer; and (v) SAFER.
- 10. The Task Force discussed the outcomes of the meeting convened by WHO, the Task Force Secretariat and PATH on how to scale up strategies to improve access to NCD drugs and diagnostics in line with ECOSOC resolution E/2019/L.16.¹ The exploratory, brainstorming meeting focused on scaling up access to diagnostic tools, treatment, and care for NCDs and what lessons can be learnt from HIV, tuberculosis, malaria and reproductive health. A list of possible case studies was produced at the end of the meeting. Task Force members will further explore opportunities in this space and process with developing the case studies.
- 11. Updates were received from the following thematic working groups and workstreams: (i) nutrition; (ii) the Health and Environment Climate Change Coalition (HECCC); (iii) NCDs and humanitarian emergencies; (iv) mental health; (v) and working with parliamentarians. Members were updated on the WHO Special Initiative on Mental Health and explored ways to adapt the action plan of the thematic group on mental health to support the Special Initiative and to avoid duplication of effort.

Actions: Joint programmes

D1. NCD 2030: Taking into account that national economic and institutional context analyses are an important, but not sufficient, advocacy tool to encourage scaling up NCD interventions, NCD 2030 could follow up with a small number of countries to build on the investment case work to date, in order to: (i) evaluate the incremental financial cost of scaling up cost-effective NCD interventions; (ii) assess the cost-effectiveness of integrating NCD services into primary healthcare; (iii) develop additional tailored tools to respond to countries' specific requests (i.e. developing health taxes).

¹ OP7 requests the Task Force to further support Member States in the prevention and treatment of NCDs, as well as support for research and development of vaccines and medicines and the provision of access to safe, effective, quality and affordable essential medicines and vaccines for all, as well as strengthening regulatory systems, pursuing good supply -chain management and strengthening health systems for the prevention and control of NCDs.

- D2. <u>Be He@Ithy</u>, <u>Be Mobile</u>: BHBM to continue discussions with UNICEF for supporting the programme. Steering Group should be reconvened as soon as possible.
- D3. <u>Cervical cancer</u>: Cervical cancer Global Joint Programme agencies to agree with WHO the most effective way of supporting the WHO-led cervical cancer elimination strategy, taking on board interest from other partners (e.g. UNITAID and IDLO).
- D4. <u>SAFER</u>: Now that SAFER is well established as a global initiative, it needs to move swiftly into country action and identify funds for this work.

Actions: Thematic groups

- D5. <u>Nutrition</u>: TWG to continue its work, taking into account synergies with other programmes to maximize impact and avoid overlap, and consider exploring refinement of the nutrition guidance for country missions. UNIATF Secretariat explore a group to develop a joint programme on healthy diet and make it operational to provide technical assistance to Member States.
- D6. <u>HECC</u>: Finalize the 2020 action plan in order to assist Member States in scaling up action across NCDs, environment and food system.
- D7. Mental health: Re-evaluate leadership of this group and in the first instance review and revise the group's action plan.
- D8. NCD, law and human rights: WHO, IDLO, OHCHR to work together and with other relevant Task Force members to propose the approach that should be taken across the UN system for working in this area, taking into account the findings of the questionnaire. Task Force members that have yet to provide returns to the questionnaire to do so as soon as possible.

Actions: Other initiatives

D9. <u>Scaling up access to diagnostic tools, treatment, and care for NCDs</u>: Build on the PATH-WHO-Task Force workshop to explore joint initiative(s) on NCD management (Task Force Secretariat with WHO and other interested Task Force members).

E. ECOSOC 2020 report

12. Progress on the 2020 report on the work of the Task Force to ECOSOC was provided. The report needs to be submitted to DESA by 20 March 2020.

Action

E1. Task Force Secretariat to share a close to final draft for comment in the next few days and share report with UN/DESA.

F. 2020 UNIATF Awards

13. Task Force members discussed the timeline for this year's awards. Members highlighted the importance to encourage nominations from youth groups.

Actions

- F1. The Task Force Secretariat to follow up with members for nominations to be part of the Selection Committee.
- F2. Call for proposals to encourage nominations from youth groups.

G. Dates and venues for future Task Force meetings and other key events for the Task Force and Task Force members from Secretariat

14. The World Bank agreed to explore options for hosting the Fifteenth meeting of the Task Force in October or November 2020, possibly in their Paris office, as this would be convenient for most task force members. IAEA will consider hosting the Sixteenth meeting in February 2021 and one of the Rome-based agencies will consider hosting the Seventeenth meeting autumn 2021.

Action

G1. Calendar of Task Force/TWGs/joint programme events/meetings to be developed to support efficient working and collaboration.

H. Finalization of action points and recommendations

15. Members agreed a draft set of action points. This would be finalized and included in the summary of the meeting.

Annex 1. List of Participants

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Annex 2. Agenda for the Fourteenth Meeting of the UN Task Force on the Prevention and Control of NCDs, 4-5 March 2020

Hosted by International Labour Organization, Route des Morillons 4, 1211, Geneva

Co-Moderators

Werner Obermeyer, Director, WHO Office at the United Nations, New York Manal Azzi, Coordinator and Senior Specialist on Occupational Health, International Labour Organization, Geneva

Co-chairs

Joaquim Pintado Nunes, Branch Chief, Occupational Health, International Labour Organization, Geneva Mubashar Sheikh, Director, Office of the Deputy Director-General, World Health Organization, Geneva Svetlana Axelrod, Director, Global NCD Platform, World Health Organization, Geneva

DAY 1: Wednesday 4 March 2020

Time	Agenda item
09:00 – 09:15	Welcome and introductions
09:15 – 09:30	Opening remarks from WHO and ILO
Agenda item 1	Review of actions agreed at the 13 th Task Force meeting
09:30 – 10:00	
Agenda item 2	Update on global events and assignments since the 13th Task Force meeting
10:00 – 10:45	
10:45 – 11:15	Coffee break
Agenda item 3	Driving forward action at country level
11.15 – 13.00	 Update on the Global Action Plan for Healthy Lives and Well-being for All
	UN system action (UNDP)
	The role of the UN in implementing WHO CCS
	 Work that individual agencies are developing in line with the recently
	published briefs
	Multi-Partner Trust Fund
	Joint programming missions and follow up
13:00 - 14:00	Lunch
Agenda item 3	Driving forward action at country level
14:00 - 14.30	continued
Agenda item 4	Tobacco control
14:30 - 16:30	 Updates on Alternative Livelihood for Tobacco Farmers project
Including	Review of work coming out of the thematic group
coffee break	 Tobacco control among school-aged children
	o 100% smoke free UN
	 Non-smoking hotels and venues for UN meetings
	• FCTC 2030
	COP9 and MOP2
	 Updates and ongoing commitments of Members + Model UN policy,
	including issues around Global Compact

DAY 2: Thursday 5 March

Time	Agenda item
Agenda item 5	Updates from collaborations and initiatives across the UN system
09:00 - 12:30	Joint programmes
Including	• NCD 2030
coffee break	Be He@lthy, Be Mobile
	Cervical Cancer
	• SAFER
	 Alternative livelihoods for tobacco farmers (see agenda item 4)
	Thematic working groups
	 Tobacco (see agenda item 4)
	Nutrition
	HECC/NCDs and the Environment
	Mental Health
	Humanitarian emergencies
	Otherworkstreams
	NCD management across the UN system
	NCD, law and human rights
	Working with parliamentarians
12.30 – 14.00	Lunch
Agenda item 6	ECOSOC 2020 report
14:00 – 14:30	
Agenda item 7	2020 UNIATF Awards
14.30 – 14.45	
Agenda item 8	Dates and venues for future Task Force meetings
14.45 – 15.15	
	Other key events for the Task Force and Task Force members from Secretariat
Agenda item 9	Finalization of action points and recommendations
15.15 – 16.15	



