



UN INTERAGENCY
TASK FORCE ON NCDs



World Health
Organization



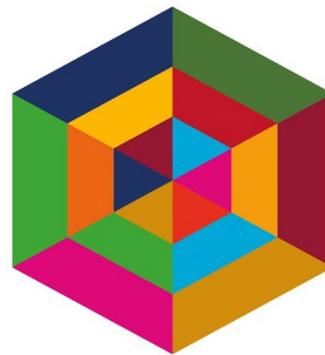
unicef

Powered by



United Nations
MPTF Office

UNITED NATIONS
**Health4Life
Fund**



Fifth Steering Committee Meeting of the United Nations Health4Life Fund

Meeting held by email between 11 December 2025 – 19 January 2026

Summary report

WHO/PPC/NMH/CAI/UNIATF/2026.1

© World Health Organization 2026

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: “This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition”.

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization (<http://www.wipo.int/amc/en/mediation/rules/>).

Suggested citation. Summary report of the fifth steering committee meeting of the United Nations Health4Life Fund. Geneva: World Health Organization; 2026 (WHO/PPC/NMH/CAI/UNIATF/2026.1). Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at <https://iris.who.int/>.

Sales, rights and licensing. To purchase WHO publications, see <https://www.who.int/publications/book-orders>. To submit requests for commercial use and queries on rights and licensing, see <https://www.who.int/copyright>. Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Table of Contents

A. Objectives and participants.....	3
B. Welcome and introductions	3
C. Review of actions from decisions arising from the 4th Steering Committee meeting	3
D. Progress during 2025	3
E. 2025 financial report and proposed budget for 2026.....	5
F. Secretariat and Core Team activities for 2026	5
G. Any other business	6
Annex 1: Agenda for the Fifth Steering Committee Meeting of the United Nations Health4Life Fund	7
Annex 2: Report on Actions on Decision Points from the Fourth Steering Committee	8
Annex 3: Health4Life Fund Progress Report 2025	9
Annex 4: Financial Reporting 2025 and Budget for 2026.....	16
Annex 5: Secretariat and Core Team Project 2026	18

A. Objectives and participants

1. The Fifth Steering Committee Meeting of the United Nations Health4Life Fund (H4LF)¹ was held as an e-meeting through email between 11 December 2025 – 19 January 2026. The meeting was chaired by Jeremy Farrar, Assistant-Director General, World Health Organization (WHO) and Fouzia Shafique, Associate Director-Health, UNICEF on behalf of UNICEF’s Director of Health, Helga Fogstad. The following H4LF Steering Committee members and observers provided responses to the agenda and decision points issued by the co-chairs: Patrick Amoth for the Government of Kenya, M. F. Khodabocus for the Government of Mauritius, Minister Teodoro Herbosa for the Government of the Philippines, Gregor Smith for the Scottish Government, Mandeep Dhaliwal for the United Nations Development Programme (UNDP), Alison Cox for the NCD Alliance (NCDA), and Sarah Klein for United for Global Mental Health (UGMH).
2. The objective of the meeting was for the Steering Committee to: (i) review the actions from decisions arising from the 4th Steering Committee meeting; (ii) receive and review a narrative and financial report for 2025; and (iii) consider the proposed activities and budget for 2026. The agenda is in Annex 1.

B. Welcome and introductions

3. The co-chairs in their introductory email indicated that 2025 had been a pivotal year for the H4LF. With five countries now in the grantmaking portfolio, an operational South-South Learning Lab, and the Fund’s inclusion in the Political Declaration on NCDs, mental health and wellbeing, the H4LF has strengthened both its country impact and global visibility. These achievements, the co-chairs considered, provided a strong platform for deeper engagement and growth in 2026.

C. Review of actions from decisions arising from the 4th Steering Committee meeting

4. The H4LF Secretariat shared a report on actions from decision points from the Fourth Steering Committee (Annex 2). The paper was noted. No issues were raised.

D. Progress during 2025

5. The H4LF Secretariat shared a progress report for 2025 (Annex 3). The Scottish Government noted that, despite significant challenges from the reduction of official development assistance, 2025 had been a significant year for NCDs and also for the H4LF with actions from the last Steering Committee meeting catalyzing progress, including expanding grants to three additional countries and the establishment of the South-South Learning Lab. The Scottish Government welcomed the meeting

¹ The United Nations Multi-Partner Trust Fund to Catalyze Country Action for Non-Communicable Diseases and Mental Health

between H4LF partners and the Government of Rwanda at the NCD Alliance Global Forum – and this underlined the Scottish Government’s commitment that the voices from Global South must sit at the heart of the NCD movement. The Scottish Government welcomed the inclusion of the H4LF in the Political Declaration, with the desire to see this translated into further catalytic action with additional resources for the Fund.

6. UNDP agreed that 2025 had been important for the Fund and expressed appreciation for everyone’s collective efforts in the challenging global context. UNDP highlighted that the ambitious political declaration, which explicitly includes the H4LF, is testament to what we are building and delivered together and the confidence of Member States in this mechanism. UNDP emphasized that the Fund’s expansion in reach, impact, visibility, and partnership strongly validated its original design, with its clear emphasis on country ownership, integrated approaches to NCDs and mental health, and the need for adequate and reliable financing, as well as coherent partner engagement. At the same time, UNDP emphasized that the H4LF is seeing growing demand for the exchange of practical experience, lessons, and innovative solutions across countries. In that context, the South-South Learning Lab is a timely and important addition to the Fund’s overall approach.
7. NCDA reminded the Steering Committee that it included the H4LF in its policy and advocacy priorities for the fourth high-level meeting and was therefore pleased to see the Fund included in the political declaration. NCDA noted that the Global Forum in Kigali in February 2025 provided a platform for face-to-face meetings between a number of members of the Steering Committee and also allowed for the H4LF to provide an update on progress to the global NCD and mental health community. The Forum Impact Report and Post-Forum Snapshot were published in December 2025. NCDA drew attention to the evolving crisis in global health funding and hoped that the Steering Committee can work together to find opportunities to make the case for integration of NCD financing in the evolving dialogue on the future of global health initiatives and the wider global health architecture. NCDA welcomed the development of the South-South Learning Lab and the opportunity that this can facilitate the engagement of civil society and people with lived experience on NCDs, particularly at the and regional levels.
8. UGMH congratulated the H4LF on its success in 2025, especially in its engagement of a wide range of stakeholders. UGMH supported the point raised by the NCD Alliance regarding global health architecture and the need to see NCDs and mental health fully included in future discussions, noting that the current architecture is not designed to address the burden of NCDs and mental health. UGMH highlighted that there are a range of issues that would benefit from further international cooperation, not least an integrated approach to the co-morbidities of physical and mental health through greater emphasis on support for UHC, and improved access to medicines, and that UGMH would be developing a further briefing on this for circulation in 2026. UGMH indicated that it would be interesting to learn more about the plans for the South-South learning lab and to see if there were ways for the members of the Global Mental Health Action Network (both government and non-government) to be involved.

Action

- Secretariat and Core Team to offer briefings on the South-South learning lab to Steering Committee members individually or collectively.

E. 2025 financial report and proposed budget for 2026

9. The H4LF Secretariat shared a paper that described financial reporting for 2025 and a proposed budget for 2026. The Scottish Government noted that its contributions are dependent on the annual enactment of the Budget (Scotland) Bill for each financial year. The timing of the UK Government's 2025 Autumn Budget statement and the pre-election period for the upcoming Holyrood election may present additional challenges in achieving timely notification of continuing funding for the next financial year. The Scottish Government welcomed further discussion on the new multi-year grant of USD 750,000 to be awarded in 2026. As the Rwanda and Zambia projects come to the end of implementation, the Scottish Government would also welcome further discussion in 2026 on how the impact of these projects are evaluated.
10. UGMH welcomed the distribution of funds and the efforts of the H4LF in engaging with a range of stakeholders to mobilize resources.

Action

- Secretariat and Core Team to share current thinking on how the impact of projects are being evaluated, including plans for end of project evaluation.

F. Secretariat and Core Team activities for 2026

11. The proposal for the Secretariat and Core Team project was accepted. To support planning and coordination, the Philippines said that it would appreciate an indicative timeline for the implementation of the planned activities. The Scottish Government, recognizing the challenging position for global health official development assistance, would welcome further discussion on how it, as a non-member state, can better support the Core Team and global south partners to advocate for the Fund, and for NCDs and mental health. Within this context, the Scottish Government supported the proposal for Core Team in country visits to support the grant management despite the travel-freeze. In addition, the Scottish Government welcomed further discussion on how to bring the Fund to the attention of important events such as WHA and UN General Assembly, to build on the momentum from the Fund's inclusion in the political declaration.
12. UNDP welcomed the Secretariat's intention to convene the Steering Committee in the first half of 2026 to reflect on the Fund's positioning, direction, and priorities. This should include how the Fund can support implementation of the Political Declaration and more systematically capture demand from Member States as well as how the Fund is positioning itself in the evolving dialogue on the future of global health initiatives and financing. In that context, and building on UNDP's role as an implementing partner of initiatives such as the Global Fund, the Green Climate Fund, and the Pandemic Fund, UNDP sees an opportunity for the H4LF to help inform discussion on more coherent financing and systems strengthening. This is particularly relevant where NCDs and mental health intersect with communicable diseases, climate risk, and broader resilience agendas.

Action

- Secretariat and Core Team to implement activities described in the Secretariat and Core Team project, in partnership with Steering Committee members.
- Identify opportunities to convene the Steering Committee in the first half of 2026 to reflect on the Fund's positioning, direction, and priorities.
- Secretariat and Core Team to develop an advocacy plan on how to highlight the Fund at key global health events during 2026 and 2027, following the Fund's inclusion in the political declaration.

G. Any other business

13. Kenya requested that it should be considered as a possible recipient for the next grant cycle.
14. The Philippines announced its plans to host the Third International Dialogue on Sustainable Financing for NCDs and Mental Health in Manila, 2-4 September 2026. The Philippines indicated that it was exploring the feasibility of convening the Steering Committee on the margins of the dialogue.
15. NCDA noted that the Financing Dialogue on NCDs and Mental Health provided an opportunity to engage with other governments and stakeholders on the H4LF and to promote better integration of NCDs and mental health care in global health financing and architecture.
16. UGMH indicated that it would welcome a discussion as soon as convenient on planning for the Financing Dialogue. It reminded the Steering Committee that the Global Mental Health Action Network is holding its Annual Forum in the Philippines in February 2026, when over 400 people from over 70 countries would be joining in person with another 2000+ participating online. UGMH encouraged Steering Committee members to join, and thanked the Government of the Philippines for its support with the meeting, and that the meeting would support preparations for the financing dialogue.

Action

- Secretariat and Core Team to have initial discussions with the Government of Kenya regarding their request to be a possible recipient for the next grant cycle.
- Secretariat to work with the Government of Philippines to maximize the opportunities for including the H4LF in the Financing Dialogue, including holding a Steering Committee meeting in the margins of the dialogue.
- Steering Committee to consider attending the Annual Forum of the Global Mental Health Action Network in the Philippines in February 2026.

oooOOOooo

Annex 1: Agenda for the Fifth Steering Committee Meeting of the United Nations Health4Life Fund

Agenda item	Paper	Action from the Steering Committee
1. Review of actions from decisions arising from the 4 th Steering Committee meeting	1.1 Report on Actions on Decision Points from the Fourth Steering Committee	To note the report, clarifying any issues as required.
2. Progress during 2025	2.1. Health4Life Fund Progress Report 2025	To note the report, clarifying any issues as required.
3. 2025 financial report and proposed budget for 2026	3.1. Financial Reporting 2025 and Budget for 2026	The Steering Committee is invited to review and take note of the 2025 expenditure, and to indicate whether they endorse the proposed budget for the Health4Life Fund's grantmaking and programme activities in 2026.
4. Secretariat and Core Team activities for 2026	4.1. Secretariat and Core Team Project 2026	The Steering Committee is invited to review and indicate if they endorse proposed activities and the budget for the Health4Life Fund Secretariat and Core Team in 2026.
5. Any other business		The Steering Committee is invited to identify any other issues.

Annex 2: Report on Actions on Decision Points from the Fourth Steering Committee

Decision Point	Actions
D1: The Steering Committee approves the Funding Framework of the H4LF and the planning forecast for 2025-2026.	H4LF grantmaking activities were carried out in line with the approved budget. Financial report for 2025 and budget for 2026 submitted for Steering Committee review and approval.
D2: The Steering Committee approves the Secretariat and Core Team's recommendation for the use of UNICEF USA funds and the six countries to be invited to submit proposals.	Six countries submitted concept notes in February 2025; three of them were selected for full proposal development, all of which were approved for grantmaking which is currently underway. The three countries were Lao PDR, Papua New Guinea and Sierra Leone.
D3: The Steering Committee:	
(i) approves the budget for the SSSL;	SSLL established, work plan developed, with implementation of activities ongoing;
(ii) requests the Secretariat and Core Team to develop a multi-year roadmap and results framework to assess the impact of the SSSL; and	Discussions underway on a strategic approach for developing a SSSL impact measurement framework;
(iii) asks the Secretariat to explore the possibility of a working session in the margins of the NCD Forum.	Steering Committee members and observers that attended the NCD Forum participated in an informal working dinner, as well as bilateral meetings between one another. Meeting also held with the Government of Rwanda to discuss ongoing collaboration.
D4: The Steering Committee approves the 2025 budget for Secretariat and Core Team activities, including carryover of underspent funds from 2024 to 2025.	The budget approved in December 2024 was reallocated in March 2025 from supporting Secretariat and Core Team activities to fund the Secretariat's operations consultant compensation. This reallocation, approved by the Steering Committee, was necessary due to WHO's financing constraints which led to the departure of the resource mobilization consultant but ensured continued support for operations.
D5: The Steering Committee requests the Secretariat and Core Team to develop a strategy to raise the profile and funding for the H4LF in 2025 in view of the Fourth High-level Meeting on NCDs	Call to action developed and used to advocate for the inclusion of the H4LF in the Political Declaration of the fourth high-level meeting of the General Assembly on the prevention and control of NCDs and the promotion of mental health and well-being. Steering Committee Member States advocated for the inclusion of the Fund in negotiations, and WHO, UNICEF and UNDP provided support to Member States during the negotiations, including through the multistakeholder hearing. The Political Declaration (REV4) includes call for support to the Health4Life Fund.

Annex 3: Health4Life Fund Progress Report 2025

This report provides the Steering Committee with an update on the main activities in 2025. It will form the basis of the 2026 Health4Life Fund annual report, which will be published in May 2026. The Steering Committee is invited to note the report and is welcome to provide any comments and/or seek clarifications.

1. The Health4Life Fund (H4LF) has continued to support countries with existing awards (Rwanda and Zambia) to implement and monitor activities, and has awarded grants to three new countries (Lao PDR, Papua New Guinea and Sierra Leone)². Annex 1 provides further details on activities in the five countries, including the impact in terms of numbers of beneficiaries for Papua New Guinea and Lao PDR. Estimates for the remaining three countries will be available in 2026. These details are also available on the Task Force website on the [H4LF where we work webpage](#).
2. The H4LF South-to-South Learning Lab to Accelerate Knowledge Sharing and Innovation in NCD Prevention and Control became operational in March 2025 and provides a catalytic platform to translate evidence into policy action at scale. Leveraging a new partnership with the UN Office for South-South Cooperation (UNOSSC), the lab has delivered across three main areas: technical exchange, high-level advocacy, and knowledge production and shared agenda setting. Details on achievements, country engagement and next steps are in Annex 2.
3. The H4LF has continued to promote the Fund with Member States and development partners with a view to mobilizing resources. A [call to action](#) ahead of the high-level meeting on NCDs, mental health and wellbeing was published in April 2025. The H4LF was highlighted in negotiations on the Political Declaration, including at the [UN multi-stakeholder hearing](#) on 2 May 2025. The H4LF was ultimately included in the Political Declaration, with Heads of State and Government calling for *“...UN agencies, regional and intergovernmental organizations, within their respective mandates, to support Member States through catalytic development assistance, including through the UN NCD Task Force and the Health4Life Fund.”*
4. An informal dinner and dialogue hosted by the governments of Kenya and the Philippines for existing and potential new partners was held on 24 September 2025 in New York, the day before the high-level meeting to highlight the call to action, the political declaration and encourage additional partners to join the Fund.
5. The [H4LF Annual Report](#) that reported on activities in 2024 was published in May 2025.
6. As of December 2025, H4LF has received USD 8.3 million in pledges. The attachment ‘Financial Reporting 2025 and Budget for 2026’ provides details on the financial position of the Fund.

² The three countries were the successful applicants from a Steering Committee approved pool of six countries who were invited to submit expressions of interest earlier in the year. Cabo Verde and Cote d’Ivoire were unsuccessful applicants. Myanmar did not submit an expression of interest in spite of the invitation to do so.

Appendix 1. Country activities, in chronological order

Rwanda

Project Title

Building an integrated, efficient, resilient system to expand equitable access to NCD and mental health services across the life course.

Project Duration

December 2024 – November 2026

UN system implementing partner(s)

WHO, UNICEF, ILO, UNHCR

Government implementing partner(s)

Ministry of Health, Rwanda Biomedical Center

Civil society implementing partner(s)

Rwanda NCD Alliance, Partners in Health (PIH), Uyisenga Ni Imanzi, YWCA

Grant amount

USD 999,915

Project summary and catalytic impact

This project aims to strengthen Rwanda's health system response to NCDs and mental health conditions by developing integrated, people-centered models of care across the life course. It is being piloted through schools, workplaces, health facilities, and community structures, and is being supported by multisectoral coordination mechanisms.

Building on the country's existing robust health system and universal health coverage platform, interventions are expanding equitable access to gender- and age-responsive services, supported by service packages, protocols, and tools that are integrating NCD and mental health care into primary care and beyond.

In recognition of the long-term effects of the 1994 genocide, the project is embedding trauma-informed and community-sensitive approaches within service delivery.

The project's catalytic impact lies in its ability to institutionalize multisectoral care models, embedding NCD and mental health services into national service packages, school health programs, and workplace wellness initiatives. By advocating for increased domestic and external financing, and for inclusion of NCD and mental health care in insurance benefit packages, the project is creating sustainable pathways for scale-up.

Cross-sectoral engagement with education, labor, and humanitarian actors (including through ILO and UNHCR support) is ensuring that the needs of displaced and vulnerable populations are being addressed, while civil society partners are supporting advocacy and service uptake among youth, women, and genocide survivors.

This project is reinforcing equity, resilience, and accountability across the health system, accelerating progress towards SDG 3.4.

Zambia

Project Title

Enhancing youth health through governance and policy for NCD and mental health prevention.

Project Duration

September 2025 – August 2028

UN system implementing partner(s)

WHO, UNICEF, UNDP, World Bank

Government implementing partner(s)

Ministry of Health, Ministry of Education, Ministry of Youth, Sport and Child Development, Ministry of Trade, Commerce and Industry, Ministry of Local Government and Rural Development

Civil society implementing partner(s)

CIDRZ, Zambia NCD Alliance, The Youth Platform

Grant amount

USD 999,065.42

Project summary and catalytic impact

This project is seeking to address the rising burden of NCDs and mental health conditions among adolescents and youth aged 10–29 in Zambia by targeting the major behavioral risk factors of tobacco use, alcohol misuse, physical inactivity, and unhealthy diets. It is aiming to strengthen the legal and policy environment through revision of the Liquor Licensing Act of 2011 and the National Alcohol Policy, as well as supporting the enactment of comprehensive tobacco control legislation aligned with the WHO FCTC.

Complementary measures are establishing standards and regulations to curb the sale of unhealthy foods, including sugar-sweetened beverages. School- and community-based interventions, combined with innovative approaches in vocational centers and universities, are embedding behavior change models and integrating NCD prevention into curricula. In parallel, health systems capacity is being expanded through training of healthcare workers in mental health service delivery, while digital tools and public awareness campaigns are being deployed to promote healthier lifestyles and reduce stigma.

The catalytic potential of this project lies in its multisectoral approach, implemented under the National Health in All Policies Framework (2022–2026), which is ensuring collaboration across health, education, trade, youth, and local governance sectors. By integrating prevention and service delivery into schools, communities, and primary health care, the project is expanding equitable access to counseling and youth-focused services, while generating sustained demand through advocacy and public engagement.

Vulnerable groups, particularly adolescents, are at the core of the intervention, with an emphasis on reducing early adoption of risk behaviors that are driving premature adult mortality.

Expected outcomes include a strengthened regulatory framework, increased awareness of NCD risks, improved mental health services for youth, and greater public and political support for sustained investment in prevention.

Lao PDR

Project Title

Transforming NCD Care through Health System Strengthening in Lao PDR

Project Duration

January 2026 – December 2027

UN system implementing partner(s)

WHO, UNDP, UNICEF

Government implementing partner(s)

Ministry of Health, Ministry of Sports and Education, Ministry of Finance

Grant amount

USD 850,000

Project summary and catalytic impact

This project proposes a comprehensive strategy to strengthen NCD care and prevention in Lao PDR by scaling up primary health care readiness, establishing a national NCD surveillance system, and driving multisectoral action through a costed national plan. It will roll out the WHO Package of Essential Noncommunicable Disease Interventions (PEN) in three provinces, embed an NCD module into the national DHIS2 platform, and co-develop with government and civil society a multisectoral action plan that includes a sustainable financing strategy.

Complementary youth-led behavior change initiatives will promote healthier lifestyles, strengthen community demand for services, and foster accountability. The project prioritizes equity, focusing on underserved groups including rural populations, women, ethnic minorities, and adolescents at increasing risk of NCDs. The catalytic potential lies in bridging systemic gaps that have hindered Lao PDR's NCD response: weak surveillance, limited financing, and inequitable access.

By embedding NCD prevention into PHC, enhancing governance and financing mechanisms, and leveraging youth engagement for advocacy and demand generation, the project will create the conditions for scale and sustainability. Cross-sectoral collaboration with ministries of health, finance, and education will ensure coherence across policy domains, while civil society participation strengthens ownership and inclusivity. Anchored in strong government leadership, the proposal aligns with UHC and SDG 3.4, and demonstrates readiness for early and measurable impact through integrated, equity-driven action.

The support will drive direct impact for over 1.6 million people in three pilot provinces through the rollout of Lao PEN protocols across 254 public health facilities. By integrating an NCD surveillance module into the national DHIS2 platform, the initiative will also strengthen data systems, enabling better planning, resource allocation, and service delivery for the wider population.

In parallel, 300 youth leaders are engaging at least 9,000 peers and community members in their first year, amplifying prevention messages and fostering a culture of health awareness. Together, these interventions will create an inclusive model that reaches millions nationwide while prioritizing women, ethnic minorities, and rural populations.

Papua New Guinea

Project Title

Strengthening National Capacity and Multisectoral Commitment to Non-Communicable Diseases Prevention in Papua New Guinea.

Project Duration

January 2026 – December 2028

UN system implementing partner(s)

WHO, UNDP, UNICEF

Government implementing partner(s)

National Department of Health, Provincial Health Authorities, PNG Institute of Medical Research

Civil society implementing partner(s)

University of PNG UPNG, Youth Council Network

Grant amount

USD 845,835

Project summary and catalytic impact

This project will strengthen the national response to NCDs by addressing data and governance gaps, empowering youth, and piloting innovative financing approaches in Papua New Guinea. It will modernize the surveillance system through implementation of a WHO STEPS survey and integration of NCD indicators into routine health information systems, ensuring a sustainable evidence base for planning and monitoring. In parallel, the project will develop an NCD investment case to guide political prioritization and resource allocation, while piloting multisectoral budgeting mechanisms to foster policy coherence and shared accountability. Youth will be engaged as active partners through participatory action research, advocacy, and peer-led prevention initiatives, ensuring that interventions reflect community perspectives and address intergenerational health challenges.

The catalytic impact of this project derives from its coherent, system-wide approach, which combines strengthened data systems, innovative fiscal planning, and inclusive governance. By embedding NCD prevention and financing into multisectoral frameworks and engaging youth, women, and underserved populations, the project will drive equity and sustainability while fostering stronger social demand for action. Partnerships between government, UN agencies, and academic institutions provide a strong delivery platform and signal political readiness for reform. If successful, this initiative will establish a replicable model for data-driven, youth-engaged, and fiscally sustainable NCD prevention in Papua New Guinea, catalyzing broader health system transformation.

The investment will strengthen national NCD surveillance systems and expand access to prevention and care, with the potential to reach up to 3.75 million adults at risk. Complementing this, a youth-led

participatory action research initiative will equip young people with tailored tools and methods to raise awareness about NCDs, reaching an additional 2.15 million young people.

Sierra Leone

Project Title

Building sustainable funding and Investment mechanisms for NCD Prevention and Control in Sierra Leone

Project Duration

January 2026 – December 2028

UN system implementing partner(s)

WHO, UNDP, UNICEF

Government implementing partner(s)

Ministry of Health, Ministry of Finance

Civil society implementing partner(s)

Sierra Leone NCD Alliance

Grant amount

USD 849,990.26

Project summary and catalytic impact

This project focuses on building sustainable financing and investment mechanisms for NCD prevention and control in Sierra Leone through structural, fiscal, and governance reforms. Core interventions include integrating essential NCD services into the Sierra Leone Social Health Insurance and the Free Health Care Initiative, anchoring NCD priorities in the medium-term expenditure framework and programme-based budgeting, and strengthening domestic resource mobilization through health-promoting excise taxes on tobacco, alcohol, and sugar-sweetened beverages.

The project will also support development of a national NCD policy and operational plan, a dedicated investment strategy, and strengthened governance and clinical capacity for delivering the Essential Health Service Package at the district level.

The catalytic dimension of the project lies in embedding NCD financing and service delivery into national systems, thereby safeguarding sustainability against donor volatility and ensuring financial protection. Upstream reforms will institutionalize NCDs in planning and budgeting processes, while downstream measures will enhance primary health care integration and build district management capacity, with a focus on equity and inclusion of women, youth, and underserved communities.

Cross-sectoral collaboration with ministries of health and finance, and the leveraging of co-financing commitments from the government, WHO, and UNDP, demonstrate strong national ownership and high-level political commitment. By linking fiscal strategies to health outcomes, the project will secure durable domestic investment and strengthen accountability, enabling Sierra Leone to advance towards UHC and SDG 3.4.

Appendix 2: H4LF South-South Learning Lab Activities, 2025

In 2025, The Secretariat and Core Team operationalized the H4LF South-South Learning Lab as a catalytic platform to translate evidence into policy action at scale.³ With UNDP leading facilitation and coordination, and leveraging a new partnership with the UN Office for South-South Cooperation (UNOSSC), the lab has delivered across three main areas and on frontier issues:

- 1. Technical exchange:** Convened the cross-regional virtual exchange, ‘Integrating Air Pollution into Nationally Determined Contributions (NDCs): Insights From Country Action and Collaboration.’ Timed ahead of the fourth high level meeting on NCDs and mental health, COP30, and NDC 3.0 processes, the exchange brought together the Governments of Chile, Nepal, and Zimbabwe (health, climate and environment representatives), with technical inputs from WHO, UNDP, and the World Bank. It engaged 82 participants across 23 UN Country Offices. The Lab is now working with Chile in developing a case study on integrating air pollution into climate action, including through legally binding frameworks and multisectoral coordination, offering a model for Global South countries to drive health-centered climate wins (planned for end-2025/early-2026).
- 2. High-level advocacy:** Hosted a high-level in-person dialogue at UNGA week on scaling up investment in NCDs and mental health, bringing together governments, UN agencies, civil society, and funders to accelerate implementation of national investment cases. Co-sponsored by UNDP, UNICEF, WHO, UNIATF, the WHO FCTC Secretariat and UNOSSC, the session highlighted the strategic value of investment cases in mobilizing political commitment and sustainable financing. Jamaica’s Minister of Health emphasized a new South-South collaboration with the Philippines, while additional contributions from Thailand, Saudi Arabia, and Cameroon underscored how investment cases are strengthening policy coherence, unlocking domestic resources, and enabling civil society engagement. Broadcast globally via [YouTube](#), the session elevated the Lab’s visibility and reinforced its role in convening actors to advance action on NCDs and mental health.
- 3. Knowledge production and shared agenda setting:** Developed the flagship paper, ‘From Progress to Transformation – Delivering on the Promise of National Investment Cases for NCDs and Mental Health’. The paper synthesizes a decade of investment case work across more than 60 countries, combining economic and political economy insights with the most comprehensive picture to date of policy impact and financing outcomes. Grounded in direct feedback from 30+ countries and informed by the UNGA high-level dialogue, the paper sets out a forward-looking agenda to support deeper implementation of investment case recommendations (planned for early-2026, with accompanying journal article). Additionally, the Lab established a new research collaboration with UNOSSC’s ‘Global Thinkers Network’ to elevate Global South research leadership and advance collective intelligence on integrated health systems, disease prevention and well-being.

³ As the Year 1 allocation for the South-South Learning Lab was received in March 2025 (tranche 1) and September 2025 (tranche 2), an administrative adjustment to the Year 1 project end date may be processed to reflect actual fund availability. This would not affect the scope or deliverables of Year 1 and is unrelated to the proposed 2026 budget.

Annex 4: Financial Reporting 2025 and Budget for 2026

The Steering Committee is invited to review and take note of the 2025 expenditure, and to review and indicate whether they endorse the proposed budget for the Health4Life Fund's grantmaking and programme activities in 2026.

Contributions and pledges to the Health4Life Fund

1. **New funds and pledges:** The Governments of Mauritius and the Philippines each awarded the Fund USD 50,000 in 2025. The Government of the Philippines pledged a multi-year contribution in 2025, totaling USD 1,000,000, with the first year of funds planned to be awarded in 2026.
2. **Total pledges:** USD 8.3 million to end 2025, up from USD 7.2 million at end 2024.
3. **Total deposited:** USD 3,485,982.8 to end 2025.

The Annex provides details of inflows and outflows in 2025 and projected financial flows for 2026 and beyond. The table is the same format as last year.

Disbursements

4. **Total amount disbursed:** As of end 2025 this is **\$2,301,155**.
5. **Country grants approved by the Steering Committee:** Grants to Rwanda and Zambia are USD 1 million each. Grants to Papua New Guinea, Lao PDR and Sierra Leone are USD 850,000 each. (Total 5.55 million). As of December 2025, a total of USD **\$2,301,155** has been disbursed.
6. **South-South Learning Lab:** USD 150,000 has been disbursed.
7. **Direct costs (Secretariat & Core Team activities):** Resource constraints in WHO meant that we were no longer able to retain one consultant position (partnerships and resource mobilization). Following the agreement of the Steering Committee, the funding for the salary of a second consultant (policy, strategy and operations), which had previously been supported by WHO, is now provided from the Health4Life Fund. To date, USD 157,502 has been disbursed from the Health4Life Fund to support direct costs.

Budget for 2026

8. **Country grants:** USD 1,095,041.61 has been allocated for disbursement to existing country grants. A multiyear grant for USD 750,000 will be awarded in 2026, with up to USD 375,000 being available for disbursement in 2026.
9. **South-South Learning Lab:** USD 150,000 has been allocated. A workplan commensurate with this allocation will be submitted in early 2026 for the Steering Committee's review. Proposals for additional catalytic support to countries leveraging the Learning Lab may be submitted as demand, specific donor interest, and opportunities arise.

10. **Direct costs (Secretariat and Core Team activities):** USD 150,000 has been allocated; USD 75,000 for the Health4Life Fund consultant, and USD 75,000 available for Secretariat and Core Team activities for advocacy, resource mobilization, monitoring and evaluation. Refer to document 004 for detailed work plan and budget.

Annex 5: Secretariat and Core Team Project 2026

The Steering Committee is invited to review and indicate if they endorse the proposed activities and budget for the Health4Life Fund Secretariat and Core Team in 2026.

1. ***Background:*** In 2025, the Secretariat and Core Team: (i) supported existing countries (Rwanda and Zambia) to implement, monitor and report on activities; (ii) awarded grants to three new countries (Lao PDR, Papua New Guinea, Sierra Leone); (iii) operationalized the H4LF South-to-South Learning Lab as a catalytic platform to translate evidence into policy action at scale; and, (iv) continued to implement resource mobilization activities.
2. In 2026, the Secretariat and Core Team will continue supporting countries to implement awards and monitor progress and impact. At the end of 2026, Rwanda will be the first country to provide an end of project report. The Secretariat and Core Team will make a recommendation to the Steering Committee on a multi-country or regional grant in a third grant cycle in 2026 and identify a further country in a fourth grant cycle for support starting 2027. The Secretariat and Core Team will continue to undertake activities under the South-to-South Learning Lab. The Secretariat and Core Team will also continue to work with existing partners, while identifying opportunities to engage new partners to invest in the Fund, taking into account the Political Declaration.
3. As in 2025, the budget is divided into: (i) personnel; (ii) operations and grant management; and (iii) partnership and resource mobilization.
4. ***Personnel:*** This funding will supplement FY2025 resources to cover costs for the Secretariat's core consultant during FY2026. The consultant will continue to coordinate the day-to-day operations, including supporting proposal development, grant management, and monitoring awards. The consultant will also facilitate the Core Team meetings (held every two weeks) and Steering Committee meetings. As part of the Secretariat, the consultant will also work closely with the Core Team to manage existing and develop new partnerships, and work on reporting requirements, including the Annual H4LF Report.
5. ***Operations and grant management:*** The travel-freeze in 2025, caused by recent financing challenges faced by the PUNOs, significantly affected the ability for the Secretariat and Core Team to provide in-country support, in line with the Operations Manual. The Secretariat and Core Team are recommending that USD 35,000 of funds are made available for essential visits to countries in 2026.
6. ***Partnerships and resource mobilization:*** This project will support Secretariat and Core Team activities in key global and regional events where there are opportunities to strengthen impact and cultivate relations with potential investors. Examples include: (i) the World Health Assembly in Geneva, May 2026; (ii) the next Global Dialogue on Sustainable Financing for NCDs and Mental Health, hosted by the Government of the Philippines in Manila, June 2026; (iii) the high-level week of the UN General Assembly in New York, September 2026; and (iv) the World Health Summit in Berlin, October 2026.

7. *Budget:* The budget for the Secretariat and Core Team Project, 2026 is provided in the Table below in line with standard UN Development Group categories.

UNDG category	Budget (USD)
Staff and other personnel costs ⁴	75,000
Contractual Services	30,187
Travel	35,000
Transfers and Grants to Counterparts	0
General Operating and Other Direct Costs	0
Total Programme Costs	140,187
<i>Programme Support Costs (7% of total budget)</i>	<i>9,813</i>
TOTAL Programmable Amount	150,000

⁴ The total for 2026 is USD 130,000, with USD 55,000 to be carried over from 2025.