Building Global Capacity for Non-Communicable Diseases (NCD) Prevention: Defining Direction and Roles

Executive Summary

BACKGROUND AND PURPOSE:
Non-communicable diseases (NCDs) are the world’s leading cause of death and place an enormous public health and financial burden on all countries, regardless of their level of development. The United Nations High-Level Meeting (September 2011 - New York, USA) placed this crisis at the top of the agenda for global health. The resulting political declaration calls for international collaboration around a broad range of actions, including the need to build capacity for NCD prevention and control in low- and middle-income countries (LMIC). In response to this recommendation, the US Centers for Disease Control and Prevention (CDC) and the International Union for Health Promotion and Education (IUHPE) hosted a multisectoral stakeholders meeting to discuss roles and define a way forward for NCD capacity building in LMIC in Atlanta, USA on July 24-26, 2012.

KEY MEETING OBJECTIVES:
1. Identify key needs to increase NCD prevention capacity in LMIC
2. Understand the current portfolio of NCD capacity building activities in LMIC
3. Understand the role of health promotion in addressing NCDs
4. Identify critical components required to increase NCD prevention capacity in LMIC, as identified by participating stakeholders
5. Understand and discuss roles for organisations and institutions and LMIC represented at the workshop as well as suggest roles for other important organisations
6. Start identifying areas for joint action on NCD capacity building in LMIC

DEFINING PRIORITY AREAS FOR JOINT ACTION:
This meeting brought together governmental and nongovernmental representatives from LMIC and key international organisations to engage in a collective dialogue on current challenges, initiatives, and opportunities around NCD capacity building for public health. It built on existing activities and consultations and focused on the much needed capacity building dimension of NCD prevention and control with the aim of offering practical solutions and recommendations.
Priority areas for joint action were defined, translated into areas for a common multi-stakeholder agenda, and the range of roles that could be best used to implement activities and deliver concrete outcomes discussed. Below are some of the resulting recommendations from the discussions to build global capacity for NCD action in Atlanta.

**Building capacity for strengthened and improved comprehensive surveillance systems**

1. Strengthening data analysis and reporting for
   a. Advocacy to policy and decision makers
   b. Informing practice
2. Integrating measures for SDH (developing indicators for SDH and strengthening existing systems)
3. Broadening surveillance to cover economic, trade, education, and other social and environmental risks
4. Incorporate new technology for data collection, analysis, reporting and mapping
5. Collecting, developing and disseminating core methods and tools across countries

**Building capacity for adequate research on NCDs to inform policy and action**

1. Need to articulate research, and knowledge to policy development and action
2. Develop a research agenda:
   o To determine if interventions work and why or why not
   o To focus on causes of diseases and risk factors and not just diseases
   o With questions tailored to local context
   o To collect evidence on what works for multi-sectorial actions at governmental level (national, regional, local)
3. Advocacy for prioritisation of research needs for capacity building in countries to inform contextualised research agenda
4. Address health economics and cost-effectiveness of interventions in research work - identify “best buys” - focusing on interventions on social and environmental risks
5. Come up with valid way(s) to evaluate and assess capacity for standardisation

Balancing science and operational research was highlighted as important.

**Increasing efforts to develop and strengthen a well-equipped workforce worldwide**

1. Build capacity for health impact assessments and the integration of health in all policies
2. Build capacity for influential advocacy
3. Develop core sets of methods and tools that work in different contexts
4. An increased investment in health promotion development and in ensuring a health promotion workforce that is prominently placed and equipped with the core competencies to implement current knowledge, policies and practices
5. Training course to train surveillance workforce adapted to country context (data collectors, data analysts, communications staff, policy analysis)
6. Develop education and deliver training with and to multidisciplinary teams (beyond/in addition to health sectors)
7. Integrate technology training in workforce development adapted to the context
8. Build capacity / build skills and competencies of researchers (better communicate research results, ethical issues, use of mobile technology tools...)
9. Advocate to government to create and better define career paths for sustainable workforce on NCDs
10. Define types of profiles to facilitate integrated efforts (e.g. media, nurses, etc.)

An important dimension to consider was the global versus in-country workforce development.

**Others**

1. Connect countries through centers of excellence
2. Identify power of local champions
3. Transform existing public health infrastructure to work for NCDs
4. Organise dialogue/debates with policy and decision makers from different sectors
5. Ensure systems that support sustainability

**Next Steps**

The group of participants for this meeting was very different from other groups, bringing a lot of sectors (researchers, civil society, ministries of health and funders) around the table. Participants agreed to stay connected and continue advancing discussions initiated during the meeting in Atlanta in July 2012 including the following actions:

- Complete identification of and prioritise areas for joint action on NCD capacity building in LMIC;
- Identify specific steps for addressing and operationalising the capacity building agenda and offer practical solutions and recommendations;
- Prepare a report on this workshop for possible publication in IUHPE’s official peer-reviewed journal *Global Health Promotion*; and
- Identify appropriate ways in which these discussions may be introduced into the UN High-Level Meeting on NCDs follow-up process.

**Disclaimer:** the views expressed in the Meeting as noted in the present document are those of the Meeting participants and do not necessarily reflect those of the CDC or IUHPE.