

# 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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### 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.<sup>1</sup> 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

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