Creating a 21st Century Global Health Agenda

The General Assembly of the United Nations High Level Meeting on Non-Communicable Diseases

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On May 13, 2010, the General Assembly of the United Nations (UN) voted unanimously for UN Resolution 64/265 to hold a High Level Meeting on Non-Communicable Diseases in September 2011. This UN High Level Meeting, to be held in New York, is an unparalleled opportunity to put noncommunicable diseases (NCDs), including cancer, diabetes mellitus, cardiovascular disease, stroke, and chronic respiratory disease, on the global health and development agenda. It also has the potential to secure political commitments from heads of government for a coordinated global response to NCDs, to promote multisectoral action to addressing NCDs within countries, and to ensure that resource allocations for addressing NCDs are more commensurate with their contribution to the global disease burden. Such actions will provide the urgent and necessary momentum to dramatically improve the prevention and management of NCDs for future generations. Our 3 organizations, as well as other partners, are working together to maximize the impact of this meeting. The world can no longer afford to ignore the ever-expanding global social and economic threat posed by chronic diseases.

NCDs account for >60% of all deaths globally, and the overall burden of chronic diseases continues to grow.1 By 2030, it is estimated that NCDs will be responsible for 7 in 10 deaths worldwide.2 In addition to the human toll, the economic impact of chronic disease is staggering and will continue to rise. The World Health Organization estimates that the cumulative estimated national income losses attributable to chronic disease from 2005 to 2015 could exceed $1 trillion in just 3 countries: China ($558 billion), Russia ($303 billion), and India ($237 billion).1

Moreover, the chronic disease mortality burden is heaviest in less affluent nations. Of the world’s roughly 35 million annual deaths attributable to NCDs, ~80% occur in low- and middle-income countries.3 Cardiovascular disease and stroke kill 17.1 million people per year globally, with 82% of those deaths occurring in low- and middle-income countries.4 Cancer is responsible for roughly 7.1 million deaths annually, 4.8 million of which (67% of the world’s cancer deaths) occur in low- and middle-income countries.5 Diabetes mellitus kills 4 million people globally a year, and 84% of those deaths are in low- and middle-income countries where 73% of the world’s diabetes mellitus cases are found (roughly 208 million people).6 Deaths from NCDs are only a small fraction of the problem because these chronic diseases also inflict a major toll on quality of life and successful aging. The growth in NCD incidence and mortality is projected to

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4. The American Cancer Society, American Diabetes Association, and the American Heart Association make every effort to avoid any actual or potential conflicts of interest that may arise as a result of an outside relationship or a personal, professional, or business interest of a member of the writing panel. Specifically, all members of the writing group are required to complete and submit a Disclosure Questionnaire showing all such relationships that might be perceived as real or potential conflicts of interest.
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disproportionately affect poor and disadvantaged populations, thereby contributing to the ever-widening health gaps between and within countries.

Global public health efforts have largely failed to acknowledge the ever-expanding magnitude of the NCD burden and the socioeconomic inequities that shape it. For example, NCDs are not specifically referenced in the UN’s landmark Millennium Development Goals, which are designed to reduce poverty, hunger, and disease. These goals are viewed by many as the world’s development and public health agenda. The neglect of NCDs on the international agenda must be addressed immediately. The UN High Level Meeting represents a tremendous opportunity to set the stage for a new global health agenda that calls for dialogue and policy-driven action that will more fully address the world’s leading causes of death and disability.

For many years, each of our organizations has been working on an individual basis on international health issues. For example, the American Diabetes Association offers education and training programs for healthcare professionals in developing countries. Since 1990, the association has reached >10,000 diabetes specialists and primary care physicians with education focused on the standards of care for diabetes mellitus and its complications. Since 1972, the American Heart Association’s guidelines for emergency cardiac care and cardiopulmonary resuscitation have been accepted as the gold standard for treating cardiovascular emergencies. They serve as the basis for training materials used at >220 training centers in 144 nations. During the past decade, grants from the American Cancer Society have supported >380 cancer projects conducted by international organizations in 88 countries and trained hundreds of international patient advocates in the latest advocacy, communications, and patient services strategies. The American Cancer Society has actively engaged with policymakers throughout the world to promote comprehensive cancer planning strategies and to strengthen policies for tobacco and cancer control in many countries.

Partnerships and collaborations are essential to success in the international arena. Therefore, the American Cancer Society, the American Diabetes Association, and the American Heart Association have joined forces to support the upcoming UN meeting. This work is being conducted under the banner of the Preventive Health Partnership, our joint initiative founded in 2004 to work together to reduce the burden of cancer, diabetes mellitus, cardiovascular disease, and stroke. Our collaborative goal is to increase the application of public health and clinical interventions of known efficacy to improve health through campaigns targeting tobacco use, diet, and physical activity and to increase the use of screening tests for early detection. We jointly advocate for policies that support our common goals and our individual missions. Our goal from an international perspective is to raise awareness about the burden of NCDs globally by providing key policy and media stakeholders with technical assistance to inform policy discussions, along with resources that highlight the global burden of NCDs and the need for coordinated interventions. Through joint letters, opinions-editorials, face-to-face meetings, and other outreach, for example, we have been using our collective influence to promote the importance of and need for a successful UN meeting on NCDs. Our work is conducted in close concert with organizations at the global level such as the Union for International Cancer Control, the International Diabetes Federation, the World Heart Federation, and the NCD Alliance, of which the preceding organizations are leading members.

We believe the UN meeting can significantly call the world’s attention to the 4 main NCDs—cancer, diabetes mellitus, cardiovascular disease including stroke, and chronic respiratory disease—along with the priority policies and interventions needed to address them. To that end, we are asking our government and others throughout the world to take several important steps. First and foremost, we believe the success of this meeting depends on the attendance of heads of State, including US President Barack Obama. Second, we call on the UN and its members to include strong civil society input in the meeting. Third, we call on members to pass a strong, action-oriented outcomes document with concrete recommendations and follow-up mechanisms. For instance, countries could be called on to develop or strengthen national plans that include specific NCD surveillance systems, prevention targets, interventions, and timelines. In addition, the outcomes document should call for full implementation of the Framework Convention on Tobacco Control, which is critical to reducing the devastating consequences of tobacco use that is currently responsible for 5 million deaths every year.

If these 3 interrelated goals are met, then we believe the UN meeting will lead to the following:

- A meaningful political commitment for a coordinated global response to NCDs;
- Substantially increased financial resources for reducing NCDs;
- Measurable targets and commitments to take action on NCDs for which nations can be monitored and held accountable through regular reporting; and
- Stronger awareness and greater recognition of the need to make NCDs an integral part of the Millennium Development Goals and successor goals.

On behalf of the American Cancer Society, the American Diabetes Association, and the American Heart Association, we are calling on the United States and the world to help ensure the success of the upcoming UN meeting on NCDs. This meeting represents an enormous opportunity to save millions of people across the globe from premature death and disabling health complications resulting from NCDs. We are committed to seizing this unique moment to transform the global health landscape and to make certain that NCDs become an international priority.

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Disclosures

Writing Group Disclosures

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References


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