

PACIFIC ISLANDS FORUM SECRETARIAT

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FORUM ECONOMIC OFFICIALS MEETING FORUM ECONOMIC MINISTERS MEETING

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INFORMATION PAPER 4: NCDS ROADMAP

Purpose and Summary

Purpose

To provide an update on progress towards the implementation of the Pacific Non-Communicable Diseases (NCD) Roadmap and highlight the challenges and recommendations to scale up national NCD actions to promote the wellbeing of all Pacific people.

Summary

Despite some progress made in the implementation of the roadmap and other NCD prevention and control measures, most Pacific Island Countries and Territories (PICTs) are not on track to meet the global NCD targets and NCD related Sustainable Development Goals. The COVID-19 pandemic, natural disasters, and other competing priorities continue to hamper the progress on all aspects of NCD prevention and control. Without urgent action, NCD will impose further challenges on health and economic development in the Pacific region. Substantial efforts are required, in particular, to:

- i. invest additional financial resources to ensure effective prevention and control of NCD at the national level, such as increasing access to critical NCD service through implementation of decentralised actions on NCD at primary health care level;
- ii. engage government and non-government stakeholders to take decisive and committed action to address the root causes of NCD in a coordinated whole-of-government, whole-of-society, and health-in-all policies approach;
- iii. further raise taxes on tobacco, alcohol, and unhealthy food and sugary drinks, in line with global recommendations, and reduce taxes on healthy alternatives such as fruits and vegetables; and
- iv. enact legislation, and ensure implementation and monitoring, of NCD preventive policies, legislations and regulations, particularly in controlling marketing of unhealthy foods and non-alcoholic beverages to children, restricting marketing of breastmilk substitutes, eliminating trans-fat in the food supply, and prohibiting tobacco and alcohol marketing, and industry interference.

A. Overview

Noncommunicable diseases (NCD) account for around 75% of mortality in the Pacific Island Countries and Territories (PICTs) and the majority are premature deaths. The health and economic impacts are significant due to lost workforce, reduced productivity, and increased health care costs due to NCD.

- 2. To scale up multi-sectoral actions to address the Pacific NCD crisis, the inaugural Joint-Forum Economic and Health Ministers Meeting held in the Solomon Islands in 2014 endorsed the Pacific NCD Roadmap. The Ministers committed to: 1) strengthen tobacco control by an incremental increase in excise duties to 70% of the retail price of cigarettes; 2) increase in taxation of alcohol products; 3) improve policies on food and drink products directly linked to NCD; 4) enhance primary and secondary prevention of NCD; and 5) strengthen the evidence base for programme effectiveness. The Roadmap includes a menu of over 30 other multi-sectoral interventions that are evidence-based and suited to the Pacific region.
- 3. To assist PICTs to monitor progress on implementing the Pacific NCD Roadmap, the Pacific Monitoring Alliance for NCD Action (MANA) was established, and a mutual accountability mechanism, using the MANA Dashboard was developed, and is updated every two years. The progress made in 2019-2020 against the baseline status 2017-2018, was reported at the Forum Economic Ministers Meeting in 2021.
- 4. The MANA Coordination Team, including the Fiji National University (FNU), Pacific Community (SPC), Pacific Islands Health Officers Associations (PIHOA) and World Health Organisation (WHO), are currently in the process of updating the 2021-2022 MANA Dashboards for all 21 PICTs. The aim is to have all 21 dashboards validated and endorsed by December 2022. To date five PICTs (Fiji, Nauru, Samoa, Tonga and Tuvalu) Dashboards have been updated but have yet to be validated and formally endorsed by the respective Ministry of Health. This paper summarises the preliminary findings on the progress made in 2021-2022 against the status in 2019-2020 of five PICTs that have been updated. The progress updates of the remaining PICTs are not reflected in the paper. Where relevant, cumulative progress to date for all 21 PICTs are also reported in this paper. The challenges and recommendations to scale up NCD action in PICTs are also discussed.

B. Discussion

Key Progress

5. While some progress has been observed, implementation of the Roadmap needs further strengthening to reduce the burden of NCD, improve the wellbeing of Pacific Island people, and achieve global NCD targets. The following summarises the progress on the key areas recommended in the Pacific NCD Roadmap.

Recommendation 1: Strengthen tobacco control by an incremental increase in excise duties to 70% of the retail price of cigarettes.

6. All five PICTs that have been updated for 2021-2022 have maintained their current tobacco taxation levels as was reported for 2019-2020 in FEMM 2021. Most PICTs have yet to reach the recommended tobacco taxation target. Since MANA baseline reporting in 2018 for all 21 PICTs, 6 PICTs (American Samoa, French Polynesia, New Caledonia, Palau, Tonga, and Wallis & Futuna) have reached recommended the tobacco taxation target.

Recommendation 2: Increase in taxation of alcohol products.

7. In 2021-2022, all five PICTs have alcohol taxations in place and have maintained the level of taxations as was reported at the 2021 FEMM. Since MANA baseline reporting in 2018, 20 out of 21 PICTs have alcohol taxation measures in place, however, taxation levels are low and mainly based on beverage type rather than on ethanol content as recommended by the WHO NCD best-buys.

Recommendation 3: Improve policies on food and drink products directly linked to NCD, especially salt and sugary drinks.

8. In 2021-2022, Tonga strengthened policy measures to restrict trans-fat in the food supply and endorsed its food based dietary guidelines. Since MANA baseline reporting in 2018, 15 PICTS adopted a taxation measure to discourage unhealthy food and beverage choices; 16 PICTs put in place a plan or policy to reduce population salt consumption; and 7 PICTs now have some policy measures to restrict trans-fat in food supply; 14 PICTs endorsed food-based dietary guidelines; and 5 PICTs have enacted legislation or policies to restrict marketing of foods and non-alcoholic beverages to children. However, the implementation is low and there are many opportunities for strengthening.

Recommendation 4: Enhance primary and secondary prevention of NCD including scaling up of WHO package of essential noncommunicable (PEN) disease interventions for primary health care.

9. To enhance primary and secondary prevention of NCD, Tonga endorsed legislation that provides at least 12 weeks paid maternity leave to support breastfeeding. Since the MANA baseline report in 2018, 15 out of 21 PICTs now have legislations in place providing 12 weeks paid maternity leave. Additionally, 19 PICTs have national guidelines in place for the diagnosis and management of at least one of the four main NCD and a national list of essential NCD medicines; 6 PICTs have restrictions on the marketing of breast milk substitutes; and 5 PICTs have at least one public hospital certified as a baby-friendly hospital.

Recommendation 5: Strengthen the evidence base for better investment planning and program effectiveness.

10. The progress in this area remains unchanged based on the 5 updated PICTs dashboards for 2021-2022. Since MANA baseline reporting in 2018, 14 PICTs have completed adult NCD risk prevalence data; 17 PICTs monitored adolescent prevalence data; 19 PICTs have systems for generating cause-specific mortality data; and 15 PICTs routinely collect child growth data. Some PICTs, including Fiji, Tonga, Nauru, Palau, and Kiribati, have recently undertaken tax impact assessments on tobacco, alcohol, sugar-sweetened beverages, and other discretionary foods, and fruits and vegetables. Many of these studies found that increasing taxes resulted in increased price of product at point-of-sale, increased government revenue, and decreased import quantities.

Others

- 11. In 2021-2022, Fiji joins two other countries (Niue and Samoa) in having government-level tobacco industry interference preventative policies, resulting in 3 out of 21 PICTs in total since the baseline in 2018. The progress on *the implementation of other preventive policies* remains the same in 2021-2022. Since MANA baseline reporting in 2018 for all 21 PICTs, 20 PICTs have regulations in place to control drink driving, 8 PICTs restrict alcohol advertising, 21 PICTs has licenses to restrict sales of alcohol, and 15 PICTs have compulsory physical education in school.
- 12. Progress on the implementation of *leadership and governance* area remains the same in 2021-2022. Overall, since MANA baseline reporting in 2008 for all 21 PICTs, 12 PICTs have

established a multi-sectoral NCD taskforce to oversee the implementation of their national NCD plan, and 17 PICTs have developed a national multi-sectoral NCD strategy.

13. The *Pacific Legislative Framework (PLF) for NCD* has been developed following extensive consultations with legal and health policy experts in the Pacific. The Framework has been endorsed by the Pacific Health Ministers Meeting in March 2022. The Ministers committed to utilise the Framework in reforming NCD-related laws to accelerate actions on NCD to meet global NCD targets and regional commitments. The PLF is designed to provide a regional framework for legislative reforms addressing key NCD risk factors while keeping up with the changing environment, and to scale up actions on the Pacific NCD Roadmap,

Challenges

- 14. Despite some progress made, assessment to date, most PICTs are not progressing fast enough to meet the global NCD targets and their commitments to reduce premature mortality from NCD. Unhealthy behaviours such as physical inactivity, consuming unhealthy food and drinks, tobacco use, and the harmful use of alcohol are still significant challenges in most PICTs. The MANA Dashboard demonstrates that action on the preventive policies, legislation, and regulations is low and needs strengthening. Effective policy and legislation that reduces NCD risk requires appropriately developed and endorsed policy and legislation, but also implementation, enforcement, and monitoring. Many PICTs still have limited capacity and expertise to fully effectuate these NCD strategies.
- 15. The COVID-19 pandemic, natural disasters, and other competing priorities continue to hamper progress on all aspects of NCD prevention and control. This includes disruption of NCD management services due to reallocation of resources and delays in addressing gaps on prevention policies such as combating tobacco industry interference, restricting trans-fats in the food supply, restricting marketing of foods and non-alcoholic beverages to children, taxation of unhealthy products, and enforcing existing policies and legislation.
- 16. To fully attain the intention of the Pacific Health Ministers commitments to "bend the curve" reduce economic and health burdens, as articulated in the NCD Policy Roadmap, it will be necessary to strengthen action. There is a need for political leaders to go beyond the health sector to address the root causes of NCD in a sustained whole-of-government and whole-of-society approach. For example, ministers may leverage opportunities to advocate for NCD actions at both regional and national forums such as government cabinet meetings, parliament, to increase inter-ministerial collaboration.

C. Next Steps

- 17. Only a significant scaling up of action on the Pacific NCD Roadmap will ensure that PICTs are able to meet the global NCD targets and improve the health and economic outlook for their populations and reduce premature mortality from NCD by one third by 2030. Specifically, substantial efforts are required, in particular, to:
 - i. invest additional financial resources to ensure effective prevention and control of NCD at the national level, such as increasing access to critical NCD service through implementation of decentralised actions on NCD at primary health care level;
 - ii. engage government and non-government stakeholders to take decisive and committed action to address the root causes of NCD in a coordinated whole-of-government, whole-of-society, and health-in-all policies approach;

- iii. further raise taxes on tobacco, alcohol, and unhealthy food and sugary drinks, in line with global recommendations, and reduce taxes on healthy alternatives such as fruits and vegetables; and
- iv. enact legislation, and ensure implementation and monitoring, of NCD preventive policies, legislations and regulations, particularly in controlling marketing of unhealthy foods and non-alcoholic beverages to children, restricting marketing of breastmilk substitutes, eliminating trans-fat in the food supply, and prohibiting tobacco and alcohol marketing, and industry interference.

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