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The Rising Global Tide of Non-Communicable Diseases: A Call For Decisive Action

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Abstract

The prevalence of non-communicable diseases (NCDs) has been on the rise and led to numerous deaths globally. Although the burden of disease of NCDs is significantly high, healthcare expenditure on the prevention and control of NCDs in most countries does not match the prevalence of NCDs. In low-and-middle income countries (LMICs), most development assistance for health has not been focused on NCDs with most donor funds addressing communicable diseases such as HIV/AIDS, Malaria and Tuberculosis. NCDs have plunged households into poverty as a result of catastrophic health expenditure from out-of-pocket payments for the management of NCDs. The recent COVID-19 pandemic has further highlighted the global prevalence of NCDs and the need for all countries to prioritize the prevention and control of NCDs.

While some risk factors for NCDs are inherent and non-modifiable, exposure to other risk factors such as obesity, unhealthy diet, tobacco use and alcohol consumption can be curbed to reduce the incidence of NCDs. However, in most countries, especially in LMICs, the business interest of fast-food, tobacco and alcohol companies have hampered the implementation of prevention and control strategies for NCDs. Several cost-effective strategies for the prevention and control of NCDs have been outlined and have the potential to reduce the global prevalence of NCDs to the barest minimum if adopted and implemented by most countries. It is imperative that global and national stakeholders take decisive action and renew their commitment to tackle the rising tide of NCDs across the globe.

Keywords: NCDs; Health Policy; Healthcare Financing; Universal Health Coverage; COVID-19; Global Action

Executive Summary

Globally, despite the significant morbidity and mortality caused by NCDs, they have not received the requisite attention and funding that they deserve(1). In 2014, NCDs received only 2% of all overseas development assistance for health in contrast to 29% received by HIV. Ironically, that same year, NCDs represented half of the entire burden of disease globally and HIV made up only 4% of the global disease burden(2). Although early diagnosis and management of NCDs as well as limiting exposure to some major risk factors have proven

effective in tackling NCDs, most countries have failed to curb the menace of NCDs. This failure in the prevention and control of NCDs has been attributed to inadequate funding, ineffective policy implementation, and the vested interest of stakeholders in the tobacco, alcohol, and fast food industry(1). With the deaths from NCDs predicted to increase, it is pertinent that globally all stakeholders focus on effectively implementing policies to prevent and control NCDs(3).

Introduction

Non-communicable diseases (NCDs) have become the leading cause of death globally accounting for over 36 million deaths every year(4). The rising prevalence of NCDs gained global attention, leading member states of the United Nations to meet in 2011 and commit to the reduction of NCDs (particularly cardiovascular diseases, diabetes, cancer, and chronic respiratory diseases)(5). This commitment culminated in the inclusion of NCDs in the Sustainable Development Goals (SDGs) target 3.4 which aims to “by 2030, reduce by one-third, premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being”(6).

The prevalence of NCDs has been steadily increasing(7). In most developed countries, improved healthcare services have increased life expectancy and led to a resultant higher prevalence of NCDs. In most low and middle-income countries (LMICs), NCDs have gradually overtaken infectious diseases as the leading causes of death(8)(9). Physical inactivity, tobacco use, unhealthy diet, and harmful use of alcohol are notable risk factors for NCDs which should be addressed(4). Despite the global commitment towards tackling NCDs, it appears that not much progress has been made to stem the tide and urgent action is needed to prevent a further rise in the morbidity and mortality associated with NCDs. This necessitates a review of strategies and policies employed so far to prevent and control NCDs.(10)

The aim of this brief is to remind stakeholders about the global scourge of NCDs and present key policy recommendations to be considered for accelerated progress towards curbing the rising global prevalence of NCDs. It is meant to serve as a concise overview of policy reforms necessary to build a national strategy to combat NCDs. It would focus on strategies to reduce the incidence of NCDs and mechanisms to improve access to care for people with NCDs. This policy brief is targeted at national governments, development agencies, civil society organizations, and non-governmental organizations implementing programmes focused on reducing the prevalence of NCDs.

Why Do NCDs Deserve Immediate Attention?

While NCDs have caused the death of millions of people worldwide, it appears that the worst is yet to come as the absolute number of deaths caused by NCDs has been predicted to rise if NCDs are not given immediate attention(7). The COVID-19 pandemic has further highlighted the magnitude of the global NCDs prevalence with COVID-19 infection having worse outcomes in people with NCDs. Globally, persons with NCDs have been noted to have a higher risk of severe COVID-19 infection and death when compared to those without pre-existing NCDs. A recent report from Italy showed that about 96.2% of patients who died from

COVID-19 had comorbidities, with hypertension, type 2 diabetes, ischaemic heart disease, chronic obstructive pulmonary disease, and cancer being the major pre-existing conditions noted(11).

Considerable resources are spent on dealing with NCDs and this contributes to rising total healthcare expenditure in most countries(8). This clearly indicates that the rising prevalence of NCDs has economic implications with NCDs estimated to gulp over \$50 billion from the global economy between 2011 and 2025(2). Thakur *et al* opined that NCDs caused recurrent out-of-pocket (OOP) spending and catastrophic healthcare expenditure which drove many households into poverty in India(12). Many LMICs have had similar experiences of catastrophic healthcare expenditure attributed to NCDs(2). Globally, the rising prevalence of NCDs could plunge over 150 million people into poverty as a result of catastrophic health expenditure from out-of-pocket spending on NCDs(13). It is clear that all nations should give NCDs the attention they deserve so as to place their citizens on the path to improved health outcomes and economic prosperity.

Determinants And Risk Factors Of NCDs

The incidence of NCDs has been shown to be determined by the interplay of underlying social determinants, lifestyle choices, and physiological risk factors. The major risk factors which have been associated with NCDs are tobacco consumption, alcohol use, physical inactivity, and unhealthy diet(14). Population aging, globalization, and urbanization as well as nutritional factors have also been identified as determinants of NCDs prevalence across the world. Additionally, inherent factors such as age, genetic predisposition, gender, and race have been shown to influence the incidence of NCDs(15).

While some risk factors of NCDs such as obesity, tobacco use, unhealthy diet, etc. are modifiable, other risk factors such as age, gender, and genetic factors cannot be easily modified to reduce the susceptibility of individuals to NCDs. To reduce the incidence of NCDs, policies to address the social determinants of NCDs and limit exposure to modifiable risk factors for NCDs need to be formulated and implemented(16). In a bid to advance their economic interests; big fast-food, tobacco, and alcohol companies have accelerated the rise of NCDs through their aggressive advertisements and influence on the implementation of NCDs prevention and control strategies, particularly in LMICs. Some tactics employed by these companies include influencing policymakers to water down the implementation of strategies to regulate the advertisement and sale of their products, sponsoring and influencing research that promotes their business interests, and financing front groups that counter public health recommendations for the prevention and control of NCDs(17).

Tackling NCDs: Which Policies Can Produce Results?

Although tackling the NCDs has been quite daunting over the past few decades, there is overwhelming evidence showing that reducing exposure to the modifiable risk factors for NCDs is an overarching strategy to reduce the incidence of NCDs. Economic analysis of programmes to prevent NCDs have elucidated that though these interventions may appear

expensive in the short run, they are indisputably more cost-effective in the long run(2). Early detection and requisite management of the NCDs have also been shown to be key strategies to reduce the morbidity and mortality associated with NCDs.

A recent study reported that only about 25 countries (mostly high-income economies), as well as the Western Pacific and European regions are on track to achieve the NCDs-related SDGs targets(18). This indicates that most countries of the world need to prioritize NCDs prevention and control and review their strategies towards achieving a global victory against the NCDs. Furthermore, global and national governance frameworks need to be instituted to limit the influence of big fast-food, tobacco, and alcohol companies to the barest minimum and ensure that regulations to prevent and control NCDs are effectively implemented(17). For the battle against NCDs to be won on a global scale, all countries must back their commitment to reduce the prevalence of NCDs with strategic policies and decisive actions(4).

To place most countries on track to effectively tackle the NCDs, the following policy reforms are recommended:

- Enactment and enforcement of tobacco and alcohol taxes with a concurrent ban on their advertisement; in a bid to discourage harmful alcohol and tobacco use(19).
- Integration of NCDs management into primary healthcare services. This is fundamental as evidence shows that it is a cost-effective, equitable, and affordable strategy for reducing the morbidity and mortality associated with NCDs(20).
- Innovative healthcare financing mechanisms to increase domestic funding for the prevention and control of NCDs should be considered to guarantee the sustainability of efforts at tackling NCDs(10).
- Engagement in mass media campaigns to educate the population about risk factors of NCDs such as tobacco use, alcohol abuse, unhealthy diet, and physical inactivity (21).
- Mobilization of resources to ensure that high-risk individuals access routine cancer screening and receive vaccination against hepatitis B and human papillomavirus to reduce their chances of having liver and cervical cancer respectively(22).

The policy suggestions outlined above are some of the “best-buy” strategies recommended by the World Health Organization (WHO) as cost-effective and reliable means through which NCDs can be curtailed at the national level(23). The successful implementation of these policies to prevent and control NCDs would require leadership and accountability from the government and all stakeholders involved(24).

Conclusion

Globally, most nations have not fared very well in the battle to prevent and control NCDs hence a concerted multilevel and multi-sectoral approach with strategic policy implementation is required(19). All countries should strive to adopt the “best-buy” policy recommendations and take active steps to implement them in the context of their unique settings. Universal health coverage with people-centred primary healthcare would make healthcare for NCDs more affordable and accessible, leading to a decline in the morbidity and mortality caused by

NCDs(22). Decisive action must be taken to stem the rising tide of NCDs in all countries, as the cost of inaction is astronomically greater than the cost of actions needed to tackle NCDs(4).

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