The European Response to Chronic Diseases –
the role of civil society

Concept Note

Background

Over the last six years, NCDs have been elevated onto national and global health and development agendas. Through a series of landmark political commitments – including the 2011 UN Political Declaration on NCD Prevention and Control, the 2025 global NCD targets, the WHO Global NCD Action Plan 2013-2020, and Agenda 2030 – it is clear that the world's governments now recognise NCDs as an urgent global problem.

With the global prioritisation of NCDs and associated commitments now in place, the responsibility for action has shifted to the national and regional level. However, the UN High-Level Review on NCDs in July 2014 highlighted that progress at national and regional levels has been “insufficient and highly uneven”. Consequently, Member States adopted a roadmap of time-bound commitments for the national level – including setting national NCD plans, targets, and multi-sectoral commissions. A robust national and regional NCD response must be mobilized so that progress can be showcased at the 2018 UN High Level Meeting on NCDs.

A fundamental strategy to drive progress on NCD prevention and control is to stimulate a vibrant civil society movement. Within all major political commitments on NCDs, the important role of civil society and civil society organisations (CSOs) is reinforced, as is a “whole-of-society” and “multi-sectoral” response. This mirrors notable global health victories in recent history, including the HIV/AIDS campaigns, where strong civil society and community based efforts have been instrumental to success.

1 NCD civil society includes non-governmental and not-for-profit organisations working in the public interest: organisations of patients and youth advocates, healthcare professionals, researchers and academics.
CSOs are active in three key ways within the NCD response

1. **Advocacy**: At the global, regional and local levels to stimulate public and political awareness and interest in NCDs and to galvanize government action on NCDs.

2. **Accountability**: The observance and tracking of commitments is one of the critical roles played by CSOs, directed towards government commitments and other stakeholders, including the private sector.

3. **Service delivery**: CSOs have been involved in providing NCD services to supplement those provided by governments in some countries. CSOs are involved in a range of activities, including tackling childhood obesity, promoting patient empowerment, diabetic care, and palliative care.

An impressive civil society movement has been built at the global level by the NCD Alliance. This is now beginning to translate to regional and national levels, with the emergence of 5 regional NCD alliances and 40 national NCD alliances over the last few years. These alliances are testament to the effectiveness of a unified approach to NCD advocacy. However, the NCD civil society movement in many regions (particularly in low- and middle-income countries) is young and has limited capacity. There is a strong need to cultivate the NCD CSO movement across regions, supporting nascent NCD Alliances, finding common regional priorities for action, sharing experiences and lessons learned. It is key to mobilize these alliances and networks to drive whole of society action and facilitate civil society planning as a driver for national and regional progress. For these reasons, capacity development of NCD civil society is a strategic pillar of action in the 2016-2020 Strategic plan of the NCD Alliance.

This concept note outlines plans for a Regional NCD Meeting in the WHO European region in follow-up to the adoption of the 2016-2025 WHO European action plan for the prevention and control of NCDs at the 66th WHO EURO Regional Committee meeting in Copenhagen on the 12-15 September 2016.

**Overview of the European Regional NCD Meeting**

In response to the global commitments on NCDs and the significant burden of NCDs in the WHO European region, WHO Regional Office for Europe has laid the groundwork to strengthen the regional response to NCD prevention and control with the Action Plan for Implementation of the European Strategy for the Prevention and Control of Noncommunicable Diseases 2012–2016 and its superseding 2016-2025 WHO European action plan for the prevention and control of NCDs. The 2016-2025 plan builds off the Sustainable Development goals (SDGs), themselves presenting unique opportunities for multi-sectoral approaches to NCD governance with non-health sectors assuming responsibility in NCD prevention and control.

Key to success across all objectives is a “whole-of-society” approach which is highlighted as an overarching principle both in the 2012-2016 plan and in the draft of the 2016-2025 plan. The 2012-2016 action plan specifically highlights the important role that alliances such as the European Chronic Disease Alliance (ECDA) play in addressing public health issues. The plan outlines as action area for the WHO Regional Office for Europe “to convene a well-functioning and productive partnership of European networks of NCD focal points and stakeholders in the public sector, civil society, professional groups and academia for joint advocacy, resource generation and the exchange of experiences and to build capacity for NCD prevention and control.”

In the WHO European region grass roots movements exist and several “NCD Alliances” have been forming (Denmark, Finland, Germany, Italy, Norway, Slovakia and Sweden). In addition, other coalitions working on NCDs and their risk factors, such as the Richmond Group (United Kingdom) or the ECDA (EU), work at the national and regional level. However, these groups largely work in parallel and a greater level of information
sharing and collaboration around common objectives is possible. Furthermore, in several countries of WHO European region NCD civil society is not yet organised and would benefit from encouragement and support to do so.

A European region NCD meeting would therefore be a catalyst for a more unified and stronger NCD civil society movement in the region. It would aim to identify ways civil society could contribute to the implementation of the newly adopted 2016-2025 WHO European action plan for the prevention and control of NCDs as well as identify strategies for greater alignment and collaboration. It would allow for the different CSO platforms working on NCDs across both the European Union (EU) and the broader WHO European region to effectively work together, to define common regional advocacy priorities and lay plans for strengthening civil society in-country NCD networks in the long term.

Objectives

The objectives of the regional meetings are based around the “Three C’s”: Convene, Capacity, and Collaboration:

- To **convene** NCD CSO’s in the region in order to share experiences, challenges, lessons learnt and good practices and identify ways for the different CSO platforms working on NCDs across both the EU and WHO European region to effectively work together and define common regional advocacy priorities;

- To strengthen the **capacity** of NCD CSO’s in the region, with a particular focus on supporting the emergence of national/regional NCD alliances to drive advocacy, policy, and accountability;

- To **support** implementation of the 2016-2025 WHO European action plan for the prevention and control of NCDs, and other regional NCD priorities, through effective collaboration between CSOs, within and across countries, with WHO Regional Office for Europe, European Union (EU) and national policymakers.

Audience

The primary audience of the European Regional NCD meeting are civil society organizations representing different NCDs and risk factors, including:

- Member Associations of NCD Alliance federations (Union for International Cancer Control, International Diabetes Federation, World Heart Federation, The Union against Tuberculosis and Lung Disease, Alzheimer’s Disease International, Framework Convention Alliance) in the WHO European region and national/regional NCD alliances

- The European Chronic Disease Alliance (ECDA) and its national member organisations

The total number of participants for the meeting will be approximately 60 people. It will include staff from WHO Regional Office for Europe.
Date and format

The regional meeting is co-organised by the European Chronic Disease Alliance (ECDA) and the NCD Alliance and co-sponsored by the World Health Organisation. The meeting will be two days in length, the 12th-13th December and will be hosted in Brussels.

The following elements should be considered for the format:

- It should be interactive and participatory, with a combination of presentations and workshop format
- There should be sufficient time for networking
- Workshops may include (1) the identification of priority areas for regional and national NCD advocacy based (2) SWOT analysis for NCD civil society at national and regional level (3) sectoral contribution to NCDs and models for civil society engagement (4) Identification of priority areas for CSO capacity building (including twinning arrangements among CSO’s in low and middle income countries (LMICs) and high income countries (HICs))
- In preparation of the meeting the NCD Alliance will commission a background paper to map NCD civil society in the EU region

Output

The meeting would result in a report, with an outline of key priorities for joint action for the NCD CSO movement in the WHO European region under the framework of the 2016-2025 WHO European action plan for the prevention and control of NCDs, key areas for collaboration between CSOs and WHO Regional Office for Europe, the NCD Alliance and ECDA, and key recommendations for strengthening the CSO movement in the region.