

Box 1 Recommendations

To Member States

1. In the area of governance: implement the commitments of the 2011 United Nations Political Declaration and the time-bound commitments of the 2014 United Nations General Assembly review meeting, guided by the regional framework for action, and prepare for the comprehensive review and assessment at the next review meeting of the United Nations General Assembly in 2018.
2. In the area of prevention and reduction of risk factors: implement the “best buy” preventive interventions to deal with high-burden risk factors (e.g. tobacco use, unhealthy diet and physical inactivity) in order to meet the global monitoring framework targets.
3. In the area of surveillance: strengthen noncommunicable disease surveillance through capacity-building and setting national targets for 2025.
4. In the area of health care: ensure continuity of care by focusing on strengthening the integration and management of noncommunicable diseases within primary health care. Screening and early detection programmes should be embedded into primary health care systems.

To WHO

1. In the area of governance: modify the 17 process indicators to enhance their synergy with the 10 global progress indicators designed to facilitate monitoring and reporting on Member States commitments by 2018.
2. Continue to raise political commitment and consider best approaches to mobilize resources for noncommunicable diseases in low-income countries and establish a regional noncommunicable disease network and periodic noncommunicable disease newsletter.
3. Continue to build national capacity for the noncommunicable disease team to enhance national capacity and contributions.
4. Scale up the work at country level, including through strengthening the role of WHO Representatives in advocacy, in raising commitment to prevention and control of noncommunicable diseases.
5. In the area of prevention and reduction of risk factors: support implementation of the “best buys” together with other public health initiatives which can have short-term to medium-term impact in most countries. Examples include reducing salt intake, restricting certain food imports such as those with high trans-fat content, and implementing tobacco reduction measures.
6. In the area of surveillance: enhance the capacity of Member States for noncommunicable disease surveillance, based on the three pillars of surveillance (risk factors and determinants, morbidity/mortality, and health system response).
7. Strengthen cancer registries and cancer reporting to include factors such as the incidence of cancer, type of cancer and staging of cancer, which will contribute to the improvement of cause-specific mortality as part of health information system development.
8. In the area of health care: lead the development of guidance/tools to support countries to strengthen noncommunicable disease integration into primary health care to achieve health care targets.