

Regional Office for the Eastern Mediterranean

Key definitions and criteria for NCD progress indicators



In the area of governance

A multisectoral national integrated NCD and risk factor policy/plan that addresses the 4 main NCDs and their main risk factors.

"Multisectoral" refers to engagement with one or more government sectors outside of health.

"Operational" refers to a policy, strategy or action plan which is being used and implemented in the country, and has resources and funding available to implement it.

Country has selected a set of national targets and indicators for 2025, based on the country status, priorities and resources and guided by the WHO Global Monitoring Framework for NCD prevention and control.

"Multisectoral" refers to existing mechanisms of engagement with one or more public sectors outside of health and coordinated through high level of engagement and action including, as appropriate, health-in-all policies and whole-of-government.

In the area of prevention and reduction of risk factors

The highest level of implementation for each of the selected demand reduction measures is consistent with the WHO Framework Convention on Tobacco Control (FCTC) guidelines or WHO recommendations.

M: Recent, periodic, representative data available for both youth and adults.

- P: All public places are completely smoke-free (or at least 90% of the population is covered by complete subnational smoke-free legislation). Designated smoking rooms are not allowed.
- O: National, toll-free quit line exists, Nicotine Replacement Therapy (NRT) and cessation services available, NRT and cessation services fully covered by Health Insurance or governmental support.
- W: Pictorial warnings are mandated by law. At least 50% of the total size of the pack (at least on front and back of all packs).
- E: Ban on all forms of direct and indirect advertising.
- R: > 75% of retail price is tax.

Country has regulations and policies to implement the International Code for Marketing of Breast-milk Substitutes.

In the area of prevention and reduction of risk factors

WHO recommendations refer to the establishment/development of a regulatory mechanism to control marketing of foods and non-alcoholic beverages to children, a monitoring system to ensure compliance with the controls on marketing, measures to monitor breaches in compliance, and the trends in this number over time, school-based policies to limit promotional marketing and promotional branding relating to foods and beverages, and trends in this percentage over time.

WHO recommendations (sodium daily intake should not exceed 2g/day which is equivalent to 5g of salt intake).

WHO recommends that populations should not exceed the consumption of 10% of energy from saturated fatty acids, and 1% from naturally occurring *trans*-fatty acids.

Public awareness programme through mass media on diet and/or physical activity refers to planned and generally paid communications using mass-reach media to inform, persuade, motivate a population about physical activity, using diverse channels.

In the area of surveillance, monitoring and evaluation

A system that has a legal framework for civil registration and vital statistics, and can report annual statistics on birth and deaths by sex and age at both national and subnational levels/administrative region, and the reporting of cause of death is coded according to the International Classification of Disease 10 (ICD 10).

Population-based cancer registry refers to a systematic collection of data on all new cancer cases occurring in a defined population. Usually the population is that which is resident in a particular geographical region.

Country is implementing NCD risk factor surveys including WHO STEPS survey (3 modules) or health examination survey every 5 years.

In the area of health care:

The WHO/ISH risk prediction charts indicate 10-year risk of a fatal or nonfatal major cardiovascular event (myocardial infarction or stroke), according to age, sex, blood pressure, smoking status, total blood cholesterol and presence or absence of diabetes mellitus for 14 WHO epidemiological sub-regions. The risk score obtained through the charts is used to tailor the management of individuals according to their level of risk, by taking an integrated approach to multiple risk factors.

Government approved evidence-based national guidelines/protocols/standards for the management of the 4 main NCDs.

Essential medicines are those that satisfy the priority health care needs of the population. They are selected with due regard to disease prevalence, evidence on efficacy and safety, and comparative cost-effectiveness. The 7 listed NCD-related pharmacological classes/medicines are included in the 18th WHO Model List of Essential Medicines and are considered a minimum requirement for achieving NCD Global Target 8.