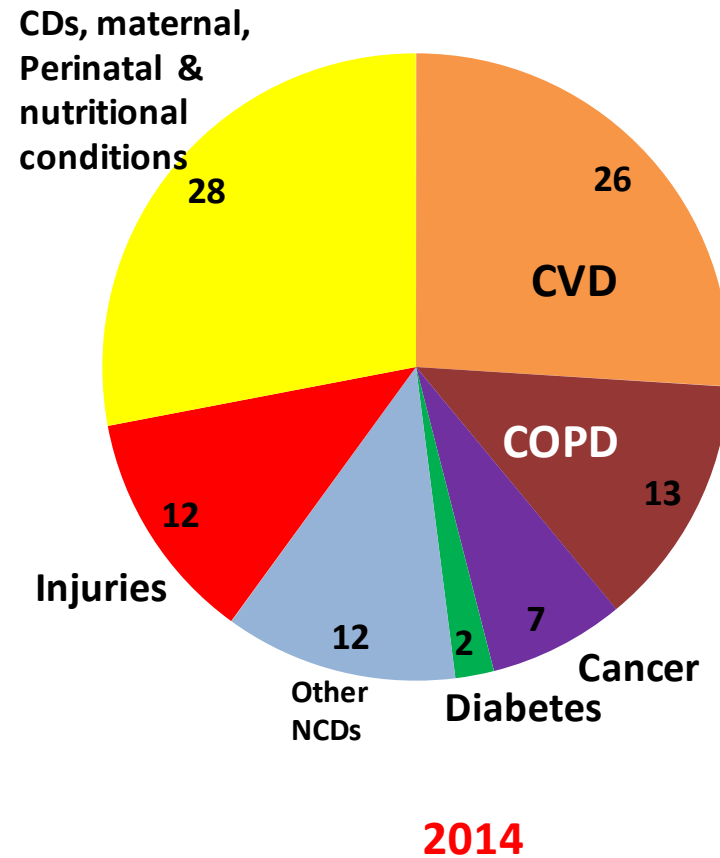
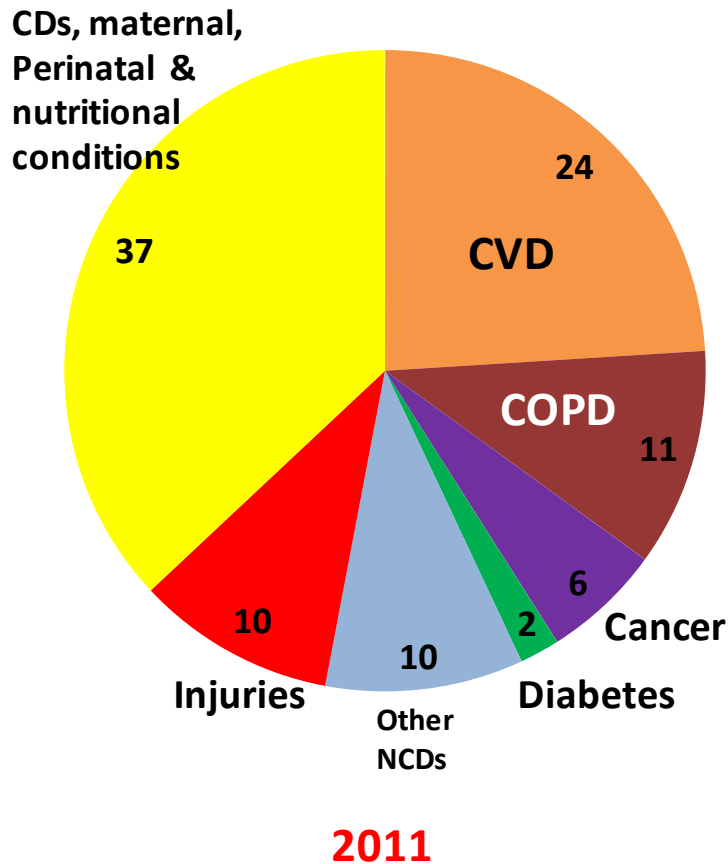


National Multi-sectoral Action Plan for Prevention & Control of NCDs in India

**Webinar on
“Double-Duty” Policies for Improved Nutrition
7th June 2017**

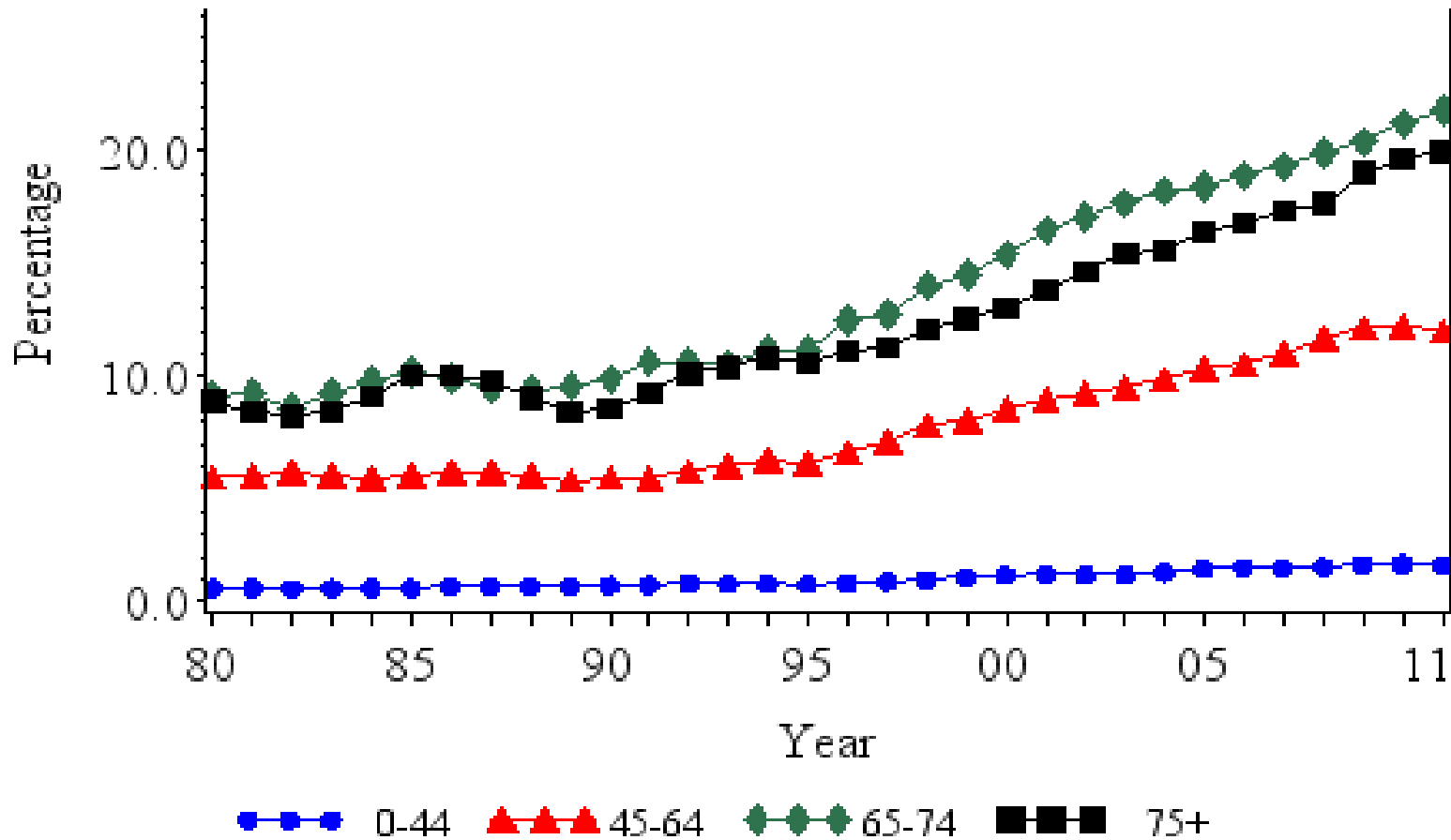
**Prof. Damodar Bachani, MD, MPH
Deputy Commissioner (NCD)
Ministry of Health & FW**

Proportional Mortality in India (% of all deaths, all ages, both sexes)

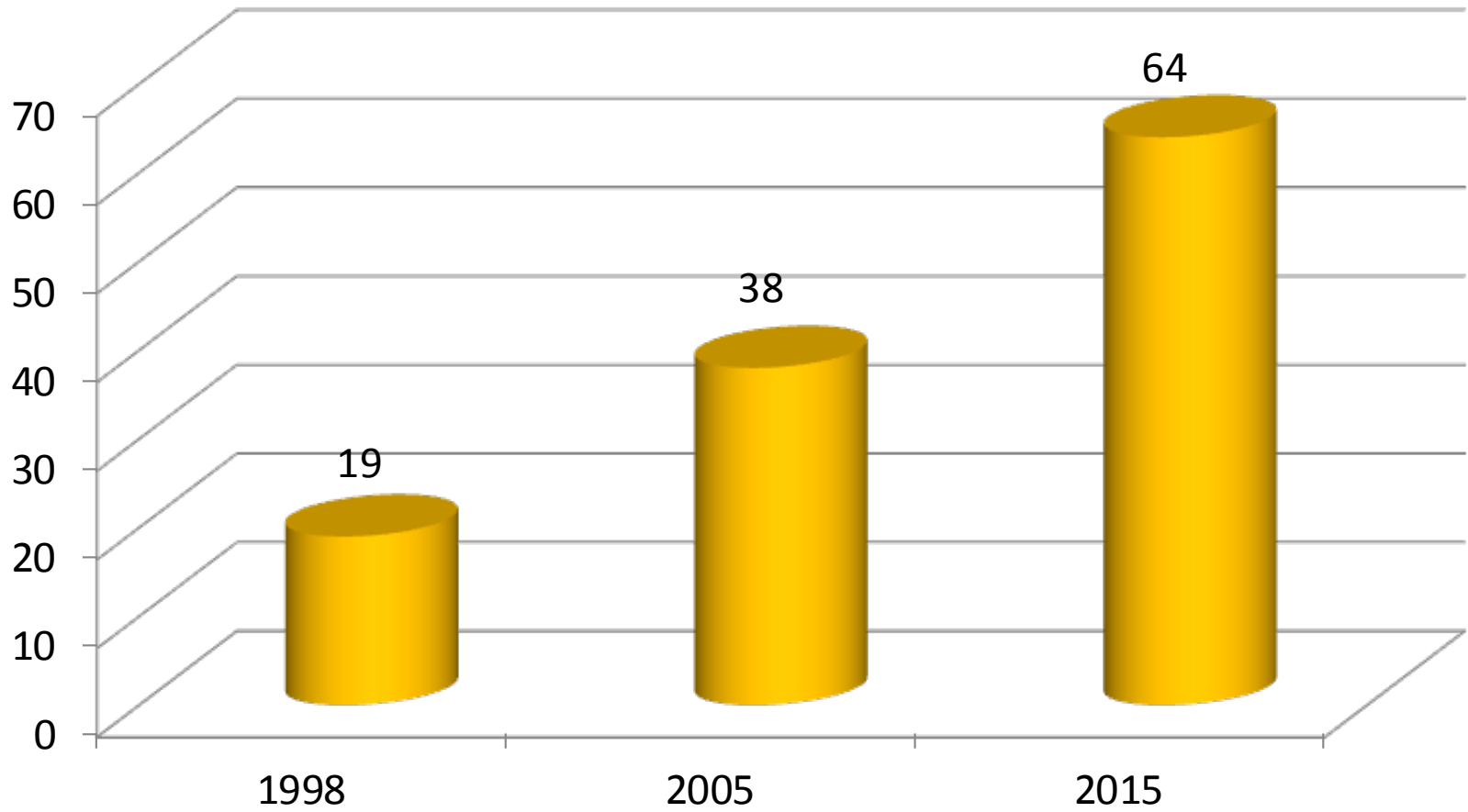


Trends in Prevalence of Diabetes: India

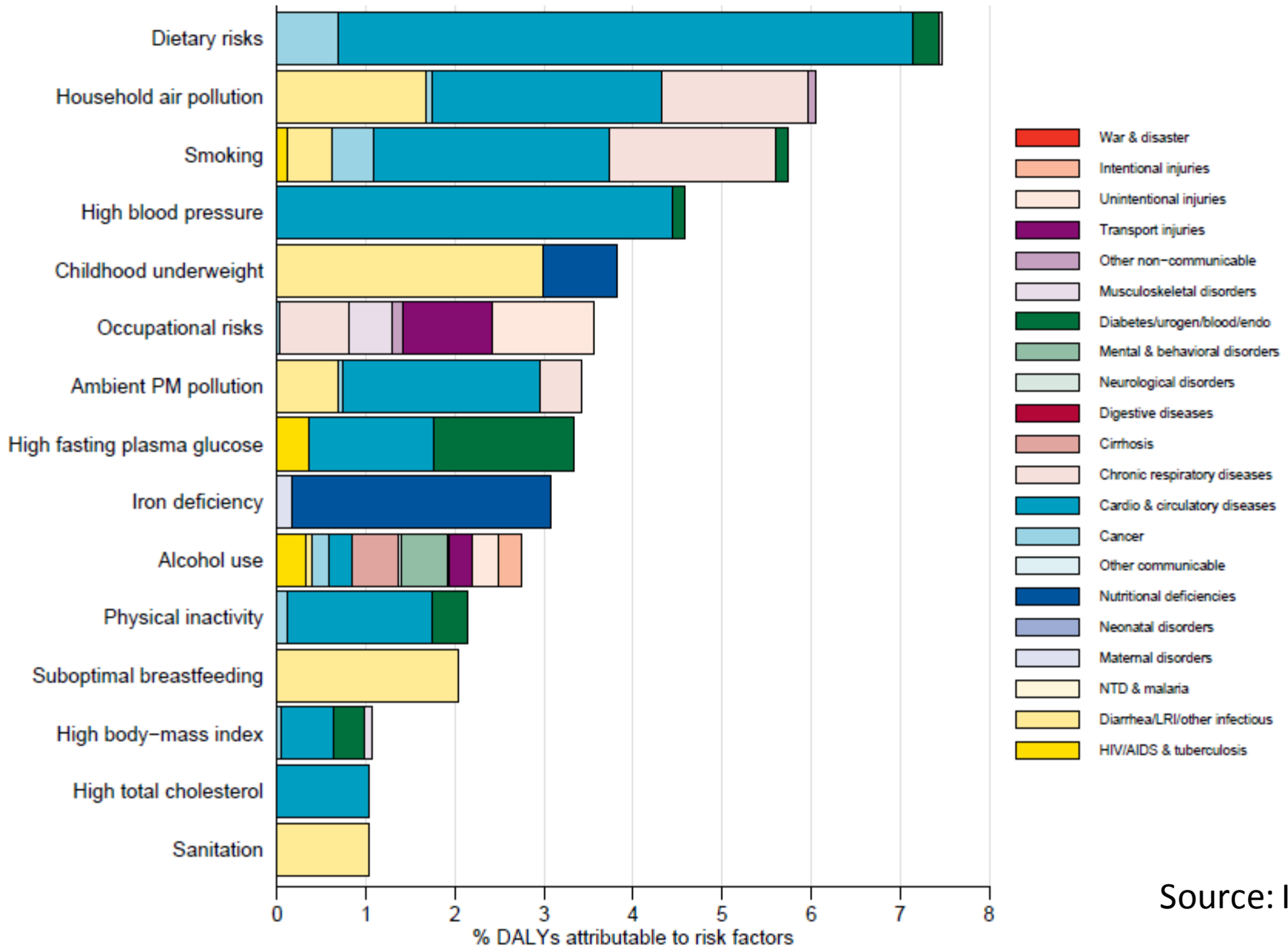
Current Burden: 69 million



Trends of Cardiovascular Diseases in India (Cases in million)



Top 15 causes of disease burden, India, 2010



Source: IHME

Burden of NCD risk factors in India (2008)

Risk factor	Prevalence
Proportion of insufficiently active population (15+)	14%
Per capita alcohol consumption (liters of pure alcohol)	4.3
Proportion of population (above the age of 25 years) with raised blood pressure (140/90 mm Hg)	33%
Proportion of population (above the age of 20 years) who were overweight	11%
Proportion of population (above the age of 25 years) with raised blood glucose	10%
Proportion of population (above the age of 25 years, in both sexes) with raised total cholesterol	27%

Nutrition Evolution over the last 30 yrs



Decrease

Increase

7% decrease in energy derived from Carbs

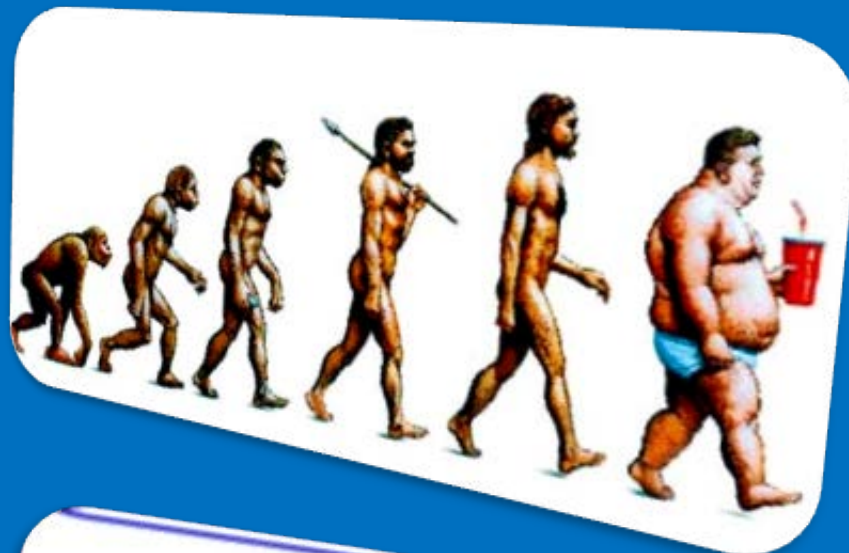
Decreasing intake of coarse cereals, pulses, fruits & vegetables

6% increase in energy derived from Fats

Increasing intake of meat products & salt

Sedentary lifestyle with low levels of physical activity & rapid urbanization

Nutrition Transition over the past 30 years



WE'VE COME A LONG WAY IN SOME WAYS,
IN OTHERS ... NOT SO MUCH.

National Monitoring Framework: Long Term Targets

Indicator	2020	2025
Relative reduction in premature mortality from NCDs	10%	25%
Obesity & Diabetes Prevalence:		Halt the rise
Relative reduction in prevalence of insufficient physical activity	5%	10%
Relative reduction in the prevalence of raised blood pressure	10%	25%
Relative reduction in mean intake of salt/ sodium intake	20%	30%

Long Term Targets

Indicator	2020	2025
Relative reduction in alcohol use	5%	10%
Relative reduction in prevalence of current tobacco use	15%	30%
Eligible people receive drug therapy and counselling to prevent heart attacks and strokes	30%	50%
Availability of essential NCD medicines & basic technologies to treat major NCDs public/private facilities	60%	80%
Relative reduction in household use of solid fuel (indoor pollution)	25%	50%

Nutrition Related Monitoring Indicators

- Age-standardized prevalence of obesity among adults
- Prevalence of obesity in adolescents
- Age-standardized prevalence of raised blood glucose/ diabetes among adults
- Age-standardized prevalence of raised BP among adults
- Age-standardized mean adult intake of salt per day
- Age standardized prevalence of persons consuming less than five total servings (400 grams) of fruit and vegetables per day

2. Obesity & Diabetes Prevalence: **Halt the rise (2025)**

Suggested Activities:

- Implement strategies under National programme for prevention and control of cancer, diabetes, CVDs and Stroke
- Implement **promotion of breast feeding** policies
- Develop and conduct evidence based public health campaign for **early detection and treatment of obesity and diabetes** and **promotion of healthy food** options
- Develop nutrition policies to **limit content of sugar** in food and non-alcoholic beverages, limit excess calorie intake, reduce portion size and energy density of foods
- Develop and implement policy measures for food producers and processors for **reducing saturated fatty acids** in food and replacing them with unsaturated fatty acids, and **replacing transfats** with unsaturated fats in food products
- Develop and implement policies and guidelines on **marketing of foods and beverages to children**
- Reduce tax and increase **subsidies** on food products containing unsaturated fats
- Create **health and nutrition monitoring environments** in educational institutions, work places, health facilities etc.

4. Relative reduction in the prevalence of raised blood pressure **10% (2020), 25% (2025)**

Suggested Activities:

- Implement strategies under National programme for prevention and control of cancer, diabetes, CVDs & Stroke
- Implement strategies for **reducing salt intake**
- Implement strategies for **improving physical activity**
- Implement strategies for **reducing saturated and transfat** intake and promote unsaturated fat intake policies

5. Relative reduction in mean intake of salt/ sodium intake **20% (2020), 30% (2025)**

Suggested Activities:

- Develop policy measures (engaging food producers/processors, other relevant commercial operators, civil society, and consumers) to **reduce the level of salt** added to prepared/processed food
- Develop and conduct evidence based **public campaign** on harmful effects of increased salt intake and measures to reduce salt in prepared food
- Engage food retailers and caterers to improve the availability, affordability and acceptability of foods with reduced salt content
- Improve the availability, affordability and acceptability of **salt with low sodium content.**
- Promote food products **labelling** of all nutrient content including salt

Human Resource Development

- **Develop policies and strategies for promoting healthy behaviour and nutrition monitoring environments in educational institutes**
- Develop, strengthen and implement multi-sectoral public policies and action plans to promote health education and health literacy
- **Develop and implement policies and guidelines on availability of foods, beverages and non-availability of tobacco products to children in schools and neighbourhood**
- Promoting physical activity in schools through school based programme

Agriculture

- Promoting alternate crop for tobacco and discourage the tobacco cultivation.
- **More cultivation of fruits and vegetables.**
- **Reduce the wastage of agricultural produce through efficient transportation and marketing strategies.**

Women & Child Development

- **Promote, protect and support breastfeeding.**
- **Strengthen the implementation of the international code of marketing of breast milk substitutes.**
- **Promote gender based approaches for prevention and control of NCDs.**

Finance

- **Increased taxation on unhealthy foods.
Tobacco, alcohol, processed food**
- **Reduce taxes on items made of fruits
vegetables, gyms items such as treadmill.**

Food Processing

- **Develop nutrition policies to limit content of sugar in food and non-alcoholic beverages**
- **Develop and implement policy measures for food producers and processors for reducing saturated fatty acids and transfats and replacing with unsaturated fats in food products**
- **Develop policy measures (engaging food producers/processors, other relevant commercial operators, civil society, and consumers) to reduce the level of salt added to prepared/processed food**
- **Promote food products labelling of all nutrient content including salt**

Information & Broadcasting

- Develop media plans, strategies and conduct activities for awareness building on harmful effects of tobacco and alcohol
- Develop and conduct evidence based public health campaign to raise awareness on harmful effects of indoor air pollution
- **Public awareness trough various media for promotion of Healthy Life-style, physical activity, healthy and unhealthy foods (rich in salt, sugar, saturated/transfats)**
- Awareness regarding dangerous effects of tobacco, alcohol.
- More time should be allotted for health awareness messages throughout the day at frequent intervals.

National Consultation for Development of National Multi-sectoral Action Plan for Prevention & Control of NCDs

- Organized jointly by Ministry of Health & FW & WHO-India on 22-23 May 2014, New Delhi
- Delegates included officers from various sectors, academia, NGOs and International agencies
- Deliberations were held on four themes
 - ✓ *Multi-sectoral approach*
 - ✓ *Health systems strengthening*
 - ✓ *Health promotion and advocacy*
 - ✓ *Monitoring and evaluation*

National Multi-sectoral Action Plan

WHOLE OF GOVERNMENT RESPONSE – ALL MINISTRIES AND STATES PARTICIPATE



Leading
Multi-sectoral
Action



Health
Promotion



Health System
Strengthening



Monitoring
and
Evaluation

PRIVATE SECTOR & CIVIL SOCIETY PARTNERS - WHOLE OF SOCIETY RESPONSE

Next steps proposed in India...

1. Constitute structure for taking decisions on healthy public policies for multi-sectoral approach and population based interventions
2. Strengthen Healthcare System for NCDs
3. Increase budget allocation for NCDs; explore alternate financial mechanisms
4. Evolve mechanism for involving voluntary organizations and private health sector
5. Strengthen health information system & surveillance

SDG Goal 3: Ensure healthy lives and promote well-being for all at all ages

- **Target 3.4:** By 2030, reduce by one third **premature mortality from non-communicable diseases** through prevention and treatment and promote mental health and well being
- **Target 3.5 :** Strengthen the prevention and treatment of **substance abuse**, including narcotic drug abuse and harmful use of **alcohol**
- **Target 3.6 :** By 2020, halve the number of global deaths and injuries from **road traffic accidents**
- **Target 3.8** Achieve **universal health coverage**, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all
- **Target 3.9 :** By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and **air, water and soil pollution** and contamination
- **Target 3a** Strengthen the implementation of the World Health Organization Framework Convention on **Tobacco Control** in all countries, as appropriate
- **Target 3b** Support the research and development of **vaccines and medicines** for the communicable and non-communicable diseases

Simple ways to prevent Lifestyle Disease

