



## Management Response

Evaluation Title	Independent evaluation of the UN Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases (decentralized programmatic)
Commissioning Unit	HQ/PPC/NMH/CAI/UNIATF Secretariat
Link to the evaluation	<a href="#">Report</a> , <a href="#">Annexes</a> , <a href="#">Evaluation Brief</a>
Evaluation Plan	<a href="#">WHO Executive Board-approved Organization-wide Evaluation Workplan, 2024-2025</a>
Unit Responsible for providing the management response	PPC/NMH/CAI/Secretariat, UN Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases
<p><b>Overall Management Response:</b> Accepted, subject to strategic review of the effectiveness, efficiencies and functional organisation of the Task Force, taking into account the changing global health and development landscape, including reduced funding and staffing for WHO, the UN system and other international intergovernmental organizational members of the Task Force.</p> <p>An initial version of the evaluation was made available in May 2025 and discussed at the <a href="#">25<sup>th</sup> meeting</a> of the Task Force (4-6 November 2025)<sup>1</sup> ahead of the <a href="#">evaluation's final publication</a> in December 2025. WHO and members of the United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases (Task Force) welcome the independent evaluation and reiterate the important role that the Task Force plays in ensuring a coordinated and joint-UN response to NCDs.</p> <p>In December 2025, the UN General Assembly adopted the political declaration '<i>Equity and integration: transforming lives and livelihoods through leadership and action on noncommunicable diseases and the promotion of mental health and well-being</i>' of the Fourth High-level Meeting of the United Nations General Assembly on the Prevention and Control of NCDs and the promotion of Mental Health and Well-being that was convened on 25 September 2025. The political declaration includes a call for United Nations agencies, regional and intergovernmental organizations, within their respective mandates, to support Member States through catalytic development assistance, including through the United Nations Inter-Agency Task Force on the Prevention and Control of Noncommunicable Diseases and the Health4Life Fund.</p> <p>This must be assessed in line with the rapidly changing global health landscape, including reduced funding and staffing for WHO and the UN system, which means that the evaluation findings, conclusions and recommendations are important and timely in informing the Task Force in developing its future strategy and operations, including consideration of new roles and responsibilities, joint work, and ever greater efficiencies. Taking forward the evaluation's recommendations therefore requires a detailed assessment of current and likely future capacity of WHO and the other members of the Task Force, including opportunities to mobilize resources for the Task Force Secretariat and work of the Task Force. In 2025, many Task Force members, including WHO saw significant reductions in staffing and programmatic funding.</p> <p>While the current environment provides significant challenges, there are opportunities as well. The evaluation considered the Task Force an exemplar for the UN working as one, demonstrated through collaborative work across agencies, coordination and shared learning, and successful joint missions and country-level work. As the Secretary-General's UN80 Initiative moves forward, strengthening mechanisms that already demonstrate more coherent, integrated, and collaborative UN action will be critical. In this</p>	

<sup>1</sup> With the action agreed as follows: 'Task Force Secretariat, working in consultation with WHO and Members of the Task Force, to develop the WHO management response to the Task Force evaluation, ahead of review and subsequent finalization by the WHO Assistant Director-General. 3 (Task Force Secretariat, WHO and other members of the Task Force)'.

context, the Task Force should aim to be ever more effective, efficient, transparent and accountable, with activities directed at driving progress on the prevention and control of NCDs at the country level, in particular through UN Country Teams.

The Management Response recognises the role of all Task Force members in taking forward actions under each recommendation. For WHO, which provides the Secretariat, this will be led by Assistant Director-General, Division of Health Promotion, Disease Prevention and Care (PPC).

<b>Management Response Status</b>	In Progress
<b>Date</b>	January 2026

## Recommendations and Action Plan

### Recommendation 1

**Build on the unique value added of the Task Force, maintain focus on alignment and coordination of the UN multisectoral response to NCDs at country level and promote its contribution to the global health coordination agenda, by:**

- maintaining the current model of the Task Force as a platform for UN agencies to coordinate and support multisectoral action at country level;
- developing the new strategy in consultation with a wide array of stakeholders, emphasizing opportunities for joint planning involving two or more Task Force members and linkages with global health coordination initiatives such as the WHO Special Programme on PHC and the Lusaka agenda; and
- increasing the Secretariat's support to Task Force members that have been less involved to date, through a targeted approach to engage agencies with a clear stake in specific issues.

<b>Management response</b>	<b>Accepted.</b> Members of the Task Force, including WHO, supported by the WHO Task Force Secretariat will jointly undertake a SWOT analysis, a theory of change and an options paper in the light of the current global health landscape and current and likely future resources available to guide the next phase of the Task Force, including determining how to maximise the value added of the Task Force, and how to maintain focus on alignment and coordination of the UN multisectoral response to NCDs and mental health at country level, and how best to promote its contribution to the global health coordination agenda.			
<b>Status</b>	In Progress			
<b>Key action</b>	<i>Responsible Entity(ies)</i>	<i>Timeline</i>	<i>Status</i>	<i>Comments</i>
Undertake SWOT analysis, theory of change and options paper with recommendations to inform the strategic direction, work plan, priority actions and ways of working for the Task Force.	Task Force members, including WHO (HQ/PPC).  Supported by the WHO Task Force Secretariat.	Q1 2026	In progress	<p>This action will be undertaken in collaboration with relevant stakeholders. Particular attention will be given to the findings of the evaluation. This includes ensuring the comparative advantages of the Task Force and not duplicating individual UN agency efforts in order to maximise the efficiency and effectiveness of the Task Force, taking into account current global health landscape and current and likely future resources.</p> <p>Outcomes to be shared with the Task Force's governing body ECOSOC in the annual report of the Task Force.</p>

Review SWOT analysis, theory of change and options paper with recommendations and use these to agree the future direction and activities of the Task Force.	Task Force members, including WHO (HQ/PPC).  Supported by the WHO Task Force Secretariat.	Q1 2026	Not initiated	
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## Recommendation 2

### Enhance joint accountability and resourcing by Task Force member agencies.

- Develop a new Task Force strategy by the end of the current strategic period outlining the joint contribution of its members to the implementation of the 2025 political declaration, the NCD Global Action Plan and its Implementation Roadmap for 2023–2030. This strategy should be accompanied by 2-year joint implementation plans identifying entry points in existing programmes of member agencies to integrate NCDs and mental health and priority countries; a joint accountability framework tracking UN alignment and coordination at country level; and a joint resources mobilization strategy for the next task force strategy.
- Identify and mobilize Member States champion(s) to support the development and implementation of the strategy.
- Encourage member agencies to provide dedicated staff time for participating in Task Force activities within their agencies. Focal Point positions should be of sufficient level of seniority to influence strategic and programmatic decisions as well as resource allocations.
- Enhance political will and ownership by member agencies to support the Task Force's work, for example through an annual meeting to report to agencies' leadership for decision on Task Force proposed joint work or/and taking advantage of global events such as the UN General Assembly, the High-level Political Forum convened by ECOSOC or the World Health Assembly to do the same.

<b>Management response</b>	Accepted, with the approach for how to take forward each of the sub-recommendations based on the outcomes of the SWOT analysis, theory of change, options paper and strategic direction as described under Recommendation 1.			
<b>Status</b>	In Progress			
<b>Key actions</b>	<i>Responsible Entity(ies)</i>	<i>Timeline</i>	<i>Status</i>	<i>Comments</i>
Based on the review of the SWOT analysis, theory of change and options paper, and consensus on the strategic direction for the Task Force, develop Task Force strategy (including for resource mobilisation), 2026 work plan and accountability framework in collaboration with Member States and development partners.	Task Force members, including WHO (HQ/PPC).  Supported by the WHO Task Force Secretariat.	Q2 2026	Not initiated	<p>This action will be undertaken based on the outcomes of the review of the SWOT analysis, theory of change and options paper, and consensus among Task Force members on the strategic direction for the Task Force, and in collaboration with relevant stakeholders, including Member States and other development partners. WHO, through the Task Force Secretariat, will lead an open consultative process (electronic and online).</p> <p>Particular attention will be given to the findings of the evaluation as well as ensuring the comparative advantages of the Task Force in order to maximise its efficiency and effectiveness, taking into account current global health landscape, individual Task Force members' efforts, and current and likely future resources.</p>

				<p>The workplan will be costed and include a joint resource mobilization plan, as well as options to consider whenever additional resources are not identified. The workplan will also include a joint accountability framework to track UN alignment and coordination, including at country level.</p> <p>Outcomes to be shared with the Task Force's governing body ECOSOC in the annual report of the Task Force.</p>
Implement the agreed strategy and workplan, and charting progress in delivering support to Member States.	<p>Task Force members, including WHO (HQ/PPC).  Supported by the WHO Task Force Secretariat..</p>	Q2 2026	Not initiated	The Task Force will continue to report on delivering its agreed strategy and work plan to ECOSOC.
Develop a communication plan to champion the strategy, action plan and resource mobilization and progress in its implementation.	<p>Task Force members, including WHO (HQ/PPC).  Supported by the WHO Task Force Secretariat.</p>	Q2 2026	Not initiated	

### Recommendation 3

**Enhance the Task Force Secretariat governance, resourcing and leadership to ensure that it has the necessary political leadership across the UN system to deliver on its mandate, by:**

- (a) maintaining the current level of human resources of the Task Force Secretariat;
- (b) ensuring that member agencies contribute to the economic sustainability of the Secretariat and its activities, including by supporting fundraising for the Task Force;
- (c) defining clear respective mandates on NCDs among Task Force members;
- (d) enhancing dialogue across WHO to strengthen collaboration and, where required, clarifying respective roles and responsibilities between the Task Force and other parts of WHO, with the Task Force exploring opportunities for synergies with the WHO Global Coordination Mechanism (GCM) in line with the recommendation of the Evaluation of GCM conducted in 2024; and
- (e) identifying the optimal institutional positioning of the Secretariat to reflect the nature of its mandate by ECOSOC as a UN-wide coordination body and to maintain its independence as a neutral broker of the UN collaboration on NCDs.

<b>Management response</b>	<p>Recommendation 3a: <b>To be determined.</b> The level of human resources will be assessed under actions included in Recommendations 1 and 2 and in the context of the prioritisation work within WHO, the constrained financial and human resources available.</p> <p>Recommendation 3b: <b>To be determined</b> following outcomes of actions described under Recommendations 1 and 2 and in the context of the prioritisation work within WHO, the constrained financial and human resources available.</p>
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	Recommendation 3c, 3d and 3e: <b>Accepted</b> . With regards 3e, following restructuring of WHO as a result of the new structure in HQ, the Task Force Secretariat is now part of the NCD and Mental Health Department to enhance alignment on NCDs and mental health in WHO. All options will be considered during the development of the options paper.			
<b>Status</b>	In Progress			
<b>Key actions</b>	<i>Responsible Entity(ies)</i>	<i>Timeline</i>	<i>Status</i>	<i>Comments</i>
As per actions under Recommendations 1 and 2.	Task Force members, including WHO (HQ/PPC).  Supported by the WHO Task Force Secretariat.	Q1 2026	In progress	The recommendations and management response of the <a href="#">mid-term evaluation of WHO/GCM</a> conducted in 2024 will also be taken into account. Especially with regards 3d.

#### Recommendation 4

##### Enhance the effectiveness of the Task Force at country level by:

*reviewing the country prioritization process*

- The process of selecting countries for support should include raising the profile of the Task Force and what it can bring in countries; responding to and generating demand from governments and civil-society actors for Task Force support; and mapping UN efforts on NCDs to help prioritize countries.
- A set of conditions that need to be in place in countries needs to be developed.

*employing a programme cycle approach to strengthen the capacity of UN country teams*

- Focus country-level work on strengthening UN country teams and engagement with the resident coordinators to promote joint work on NCDs.
- Consider supporting fewer countries so that sufficient resources are more likely to be available for follow-up work and M&E of interventions.
- Ensure that follow up to joint missions is embedded in agencies' country and regional plans; and
- Ensure that all joint missions include the cocreation of an action plan with the UNCT, identifying the role of each agency in the implementation of their recommendations.

*accelerating progress on the Health4Life fund*

- Ensure that Task Force members advocate for the Health4Life fund through a joint resource mobilization strategy for country responses and joined-up UN work at country level.
- Health4Life Fund resources to continue to be primarily directed to government and networks of people living with NCDs and mental health conditions in countries and to provide flexible funding for relevant activities of the Secretariat.
- Ensure the Fund can broaden its offer to any potential donor, with proposals that are complementary to Task Force members' ongoing fundraising for their NCD work.
- Work with recipient countries to showcase results from the first investment round, including through the new South-South learning lab agreed by the Steering Committee.

<b>Management response</b>	<b>Accepted</b> . Ever more effectiveness of the Task Force at country level is critical to future ways of working. Reviewing the country prioritization process, employing a programme cycle approach to strengthen the capacity of UN country teams, and accelerating progress on the Health4Life Fund.			
<b>Status</b>	In Progress			
<b>Key actions</b>	<i>Responsible Entity(ies)</i>	<i>Timeline</i>	<i>Status</i>	<i>Comments</i>
Country prioritization process will be included in	Task Force members, including WHO (HQ/PPC)	Q1 2026	In progress	

<p>the actions described under Recommendation 1.</p>	<p>HQ/CCS, and Regional Offices).  Supported by the Task Force Secretariat.</p>			
<p>Employing a programme cycle approach to strengthen the capacity of UN country teams will be included in the actions described under Recommendation 1.</p>	<p>Task Force members, including WHO (HQ/PPC HQ/CCS, and Regional Offices).  UN Development Coordination Office (UNDOCO)  Supported by the Task Force Secretariat.</p>	<p>Q1 2026</p>	<p>Not initiated</p>	
<p>Accelerating progress on the Health4Life fund will be taken forward by UNDP, UNICEF, WHO and members of the Health4Life Fund Steering Committee, including through an updated communications and resource mobilisation strategy/plan (see also Action 2 under Recommendation 3).</p>	<p>UNDP, UNICEF and WHO (HQ/PPC).  Supported by the Task Force/Health4Life Secretariat.</p>	<p>Q1 2026</p>	<p>In progress</p>	<p>The political declaration calls upon United Nations agencies to support Member States through catalytic development assistance, including through the Health4Life Fund.</p>

**Recommendation 5****Increase the capacity and focus of the Task Force's work on gender equality, equity and disability inclusion by:**

- expanding the scope of the Task Force Human Rights Team to include gender, health equity and disability inclusion;
- identifying entry points for integration of these crosscutting issues across the Task Force's portfolio; and
- meaningfully engaging with communities and networks of people living with NCDs, affected by mental health conditions and relevant vulnerable groups, including by developing synergies with the work by GCM on engagement of people with lived experiences, and by ensuring that their role in implementing Health4Life fund investments is outlined

<b>Management response</b>	<b>Accepted in principle</b> , subject to the outcomes of actions described under Recommendation 1 and Recommendation 2.			
<b>Status</b>	Not initiated			
<b>Key actions</b>	<i>Responsible Entity(ies)</i>	<i>Timeline</i>	<i>Status</i>	<i>Comments</i>
As part of actions under Recommendations 1 and 2, consider options for identifying entry points for greater integration of gender, health equity and disability inclusion issues into the Task Force's work and options to consider how best to engage with communities and networks of people living with NCDs.	Task Force members, including WHO (HQ/PPC).  Supported by the Task Force Secretariat.	Q2/Q3 2026	Not initiated	The recommendations and management response of the <a href="#">mid-term evaluation of WHO/GCM</a> conducted in 2024 will also be taken into account.

For further information about the evaluation, please contact the WHO Evaluation Office [evaluation@who.int](mailto:evaluation@who.int)

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