

niramaaya

NCD NEWSLETTER

VOLUME 1, JANUARY 2014



CONTENTS

03

MESSAGES

INDIA RESPONDS TO
NONCOMMUNICABLE DISEASES (NCDs)

05

07

WHAT'S NEW IN
NCD PREVENTION AND CONTROL IN INDIA?

NCD FOCUS: TOBACCO CONTROL

09

11

VOICES FROM THE FIELD

KNOWLEDGE CENTRE

12

ADVISORY GROUP

Mr Anshu Prakash

Joint Secretary
Ministry of Health and Family Welfare

Ms Shakuntala Gamlin

Joint Secretary
Ministry of Health and Family Welfare

Dr Francois Decaillet

Programme Coordinator
WHO Country Office for India

Dr K. Srinath Reddy

President
Public Health Foundation of India

EDITORIAL TEAM

Dr D. Bachani

Deputy Commissioner (NCD)
Ministry of Health and Family Welfare

Dr Mohammed Shaukat

Deputy Director General (NCD)
Directorate General of Health Services
Ministry of Health and Family Welfare

Dr G.K. Rath

Professor of Radiotherapy
All India Institute of Medical Sciences

Dr D. Prabhakaran

Executive Director
Centre for Chronic Disease Control

Dr Nikhil Tandon

Professor of Endocrinology & Metabolism
All India Institute of Medical Sciences

Ms Vineet Gill Munish

National Professional Officer
WHO Country Office for India

Ms Shoba John

Programme Director
HealthBridge

Dr Monika Arora

Director – Health Promotion
Public Health Foundation of India

MANAGING EDITORIAL TEAM

Ms Anika Singh

WHO Country Office for India

Ms Radhika Shrivastav

Public Health Foundation of India

Ms Manjusha Chatterjee

Public Health Foundation of India

Shri Ghulam Nabi Azad, Hon'ble Minister for Health & Family Welfare, Government of India

I am happy that a newsletter on Non-communicable Diseases is being launched by the Ministry in coordination with the World Health Organization and the Civil Society. This letter will provide an excellent platform for documenting progress and initiatives in NCDs. In addition to providing an update on policy initiatives, the newsletter can also emerge as an instrument to bring together all stakeholders working in this field.

My best wishes for the success of this initiative.

Mr Keshav Desiraju, Secretary, Ministry of Health & Family Welfare, Government of India

Prevention of non-communicable diseases is possible through effective surveillance, multi-sectoral approach and strong health systems response. The Government of India plans to scale up the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) to cover all districts in the country during the 12th Five Year Plan ensuring a more robust response to NCDs in India. The newsletter will be an ideal platform for States to share experiences and best practices in tackling NCDs.

Dr Nata Menabde, WHO Country Representative to India

All over the globe, the epidemiological profile is rapidly changing. Noncommunicable diseases are now the first cause of mortality and their toll on individuals, families, health systems and societies is already considerable. The Global Action Plan for NCDs 2013-2020 provides a road map and a menu of policy options for all Member States and other stakeholders, to take coordinated and coherent action, at all levels, to attain the nine voluntary global targets.

India is the first country to have started adapting the Global NCD Monitoring Plan to its national context (with 21 indicators and 10 targets). Work is in progress and action is being taken with a view to synergise the efforts of all stakeholders towards achieving these targets.

I hope this newsletter will effectively provide a platform for information sharing and will help connect all partners in creating a positive change. I urge all to contribute to it, sharing views and lessons learned. Be inspired and inspire!



**Dr Jagdish Prasad, Director General Health Services,
Ministry of Health & Family Welfare, Government of India**

I am happy to note that the Ministry of Health & Family Welfare in collaboration with the World Health Organization is bringing out the first edition of NCD newsletter. Non-communicable diseases (NCDs) are major contributors to rising morbidity and mortality patterns in India, which are likely to increase further if timely attention is not paid to this problem.

Fighting NCDs in India warrants not only a strong commitment at the national and sub-national levels, but also by individuals. I urge each and everyone to take responsibility of your individual health and make adequate lifestyle changes for a healthier future.

I hope this newsletter will be a forum for interaction as well as a platform to highlight best practices and innovations in the area of NCDs.

**Ms Anuradha Gupta, Additional Secretary and Mission Director,
National Rural Health Mission, Ministry of Health & Family
Welfare, Government of India**

Non-communicable Diseases (NCDs) have emerged as a grave public health challenge. No country, however rich can sustain the costs of treating NCDs. Utmost priority needs to be accorded to prevent their occurrence. Heightening public awareness of risk factors and sensitizing individuals, families and communities towards importance of health promotion is most vital. Integration of National Programmes for control of NCDs under the umbrella of the National Health Mission at the primary and secondary level would facilitate a synergistic approach to address NCDs in India.

The newly constituted NCD Flexi pool mechanism under the National Health Mission would widen the scope for flexible and innovative approaches. The initiative to bring out a newsletter on NCDs is very timely and reflects the importance being attached to NCDs at the national level.



**Mr C.K. Mishra, Additional Secretary, Ministry of Health & Family
Welfare, Government of India**

The Ministry of Health & Family Welfare is committed to scaling up efforts to counter the burden of non-communicable diseases in India. The prevalence of cardiovascular diseases, diabetes, respiratory diseases and cancers is rising at an alarming rate. Early detection of diseases and integration of various NCD related health programmes are key elements in NCD prevention and control. The newsletter will provide a forum to share experiences and innovations in achieving our objectives for effective prevention and control of NCDs in the country.

I hope this becomes an effective tool of learning and sharing.



In order to prevent and control major NCDs, the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) was launched in the second half of 2010 with focus on strengthening of infrastructure, human resource development, health promotion, early diagnosis, treatment and referral. It was implemented in 100 backward and inaccessible districts across 21 States during 2010-12.

Initial phase of the programme has helped in identifying the bottle-necks in implementation and requirements for successful implementation. Accordingly, the programme is re-strategised during the 12th Plan as follows:

1. The programme will cover all the districts in the country.
2. Screenings of diabetes and hypertension in urban slums in cities with population of more than one million will get priority.
3. Screening for common cancers is also envisaged.
4. Outreach camps are envisaged.
5. Cardiac Care Units and Chemotherapy Centres at district hospitals would be established / strengthened at 25% districts (all India).

Major risk factors to NCDs

Most NCDs are strongly associated and causally linked with following four major behaviour risk factors i.e. tobacco use, harmful use of alcohol, physical inactivity, unhealthy diet including high intake of salt, sugar, trans fat and inadequate intake of fruits and vegetables. The other risk factors include psychological stress and air pollution with fumes from solid fuels.

Burden of NCDs in India

Noncommunicable Diseases (NCDs) are major contributors of rising morbidity and mortality patterns worldwide. In India, the estimated deaths due to NCDs in 2008 were 5.3 million (World Health Organization - NCD Country Profiles, 2011). The overall prevalence of diabetes, hypertension, Ischemic Heart Diseases (IHD) and stroke in India is 62.47, 159.46, 37.00 and 1.54 respectively per 1000 population. (Indian Council for Medical Research, 2006).

Based on National Cancer Registry Programme (NCRP) of Indian Council of Medical Research (ICMR), it is estimated that there are about 28 lakh cases of different types of cancer in the country with new occurrence of about 11 lakh cases and about 5 lakh deaths annually. The common cancers are breast, cervical and oral cancer.

Total cost of the programme is estimated to be about Rs. 11,000 crore, out of which cost for the programme till district level is Rs. 8096 crore (share of Government of India will be Rs. 6535 crore and that of State Governments will be Rs. 1561 crore). The funds would be provided to the States under NCD Flexi-Pool of National Health Mission, through State PIPs of respective States/UTs.

20 State Cancer Institutes (SCI) will also be set up in addition to 50 Tertiary Care Cancer Centers (TCCCs) for providing comprehensive cancer care in the country. For this purpose a provision of providing financial assistance to States has been made under a separate Centrally Sponsored Scheme.

5.33 CRORE PEOPLE SCREENED FOR
DIABETES AND HYPERTENSION IN THE COUNTRY!

Out of these approximately 6.13% are suspected with Diabetes and 5.41% are suspected with Hypertension.

Source: NPCDCS Information System, MoHFW (up till Dec 2013)

As on date, the following infrastructure has been set up for programme implementation:

1. State NCD Cell in 21 states
2. District NCD Cell in 73 districts
3. District NCD Clinic in 72 districts
4. 64 CHC Clinics in 10 districts
5. Cardiac Care Units in 60 districts
6. Chemotherapy services started in 11 districts

The following nine NCD-related programmes are included under the National Health Mission. For more details [Click Here](#)

- National Programme for Prevention & Control of Cancer, CVDs and Stroke (NPCDCS)
- National Programme for Control of Blindness (NPCB)
- National Mental Health Programme (NMHP)
- National Programme for Health Care of the Elderly (NPHCE)
- Programme for Prevention of Burn Injuries
- National Programme for Prevention and Control of Deafness (NPPCD)
- National Tobacco Control Programme (NTCP)
- National Oral Health Programme (NOHP)
- National Programme for Palliative Care

During 2014-15, the programme will be scaled up to cover majority of the districts to provide one stop facility in district hospitals and Community Health Centres, for diagnosis, treatment and follow up of major NCDs under the Programme.

Establishment of National Cancer Institute (NCI) at Jhajjar Campus of AIIMS, New Delhi in Haryana

National Cancer Institute, under the aegis of AIIMS has been approved by the Government of India at Jhajjar, Haryana under the 12th Five Year Plan. For more details [Click Here](#)



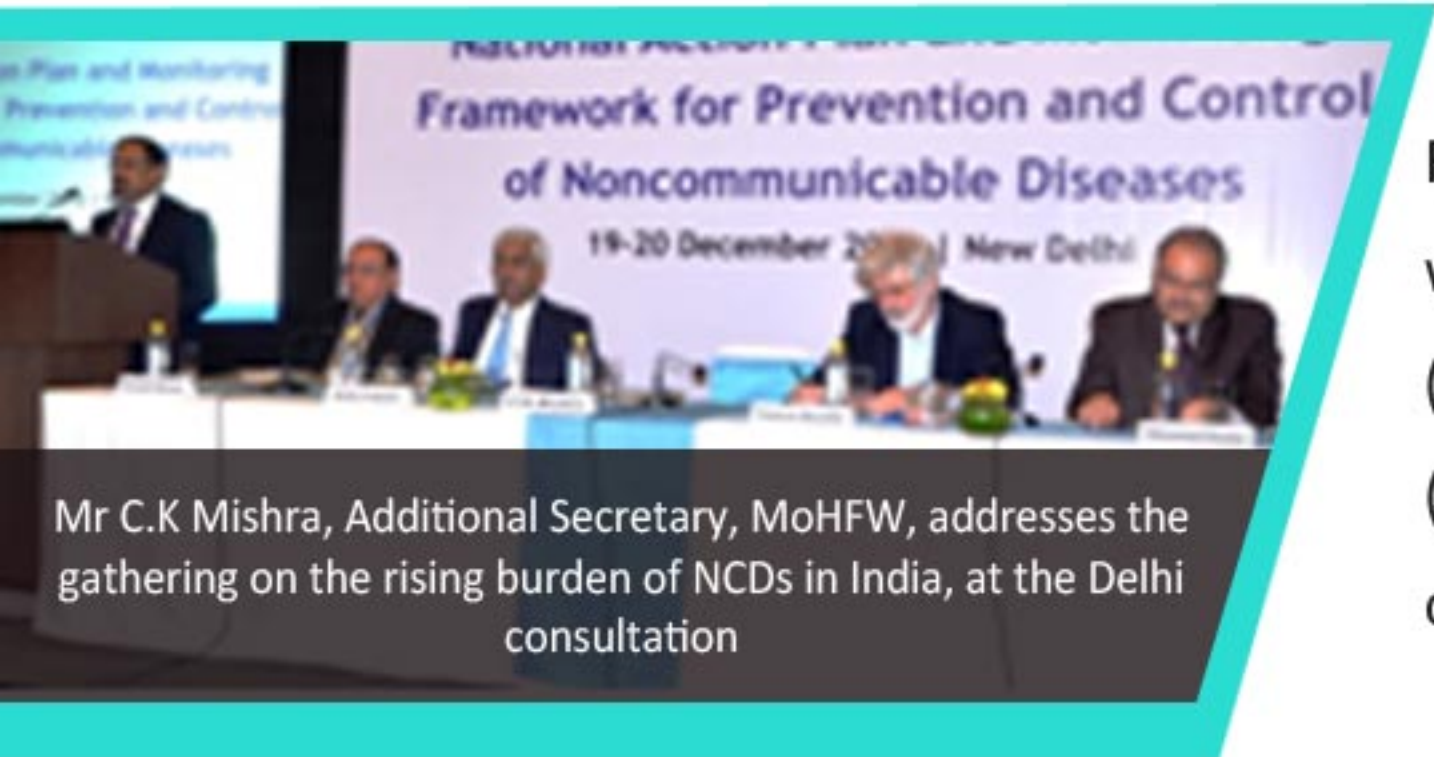
**Hon'ble Prime Minister, Dr Manmohan Singh
laying the foundation stone of the National Cancer Institute at Jhajjar, Haryana
(03 January, 2014)**

INDIA IS THE FIRST COUNTRY GLOBALLY TO ADAPT THE NCD GLOBAL MONITORING FRAMEWORK TO ITS NATIONAL CONTEXT

WHO has developed a comprehensive Global Monitoring Framework for Prevention and Control of NCDs (2013-2020) , which was endorsed by the 66th World Health Assembly (WHA) in May 2013. The Framework includes a set of nine voluntary targets and 25 indicators which can be applied across regional and country settings. For more details [Click Here](#)

India is committed to take adequate steps to meet the objectives of the global action plan. India's National NCD Monitoring Framework has been developed through a consultative process with various stakeholders and outlines 10 targets and 21 indicators It calls for enhancing the existing capacity, mechanisms and mandates of all relevant stakeholders in facilitating and ensuring action across sectors for prevention and control of NCDs. For more details [Click Here](#)

A National Steering Committee on NCD surveillance and monitoring has been constituted to work out an evidence-based plan of action for prevention and control of key NCDs and their risk factors.



Mr C.K Mishra, Additional Secretary, MoHFW, addresses the gathering on the rising burden of NCDs in India, at the Delhi consultation

Regional Consultations to develop a comprehensive National Action Plan were organised by MoHFW and WHO Country Office for India in Guwahati (29-30 November, 2013), Bengaluru (13-14 December, 2013) and Delhi (19-20 December, 2013). Participants included over 250 senior health officials from the national, sub-national level (from all States and Union

Territories), experts and civil society representatives. Deliberations included possible data sources for the assigned indicators, actions to achieve these targets, opportunities and challenges in implementation with a focus on efforts towards multi-sectoral engagement.



States display their new initiatives and innovations for prevention and control of NCDs at the Bengaluru consultation



Brainstorming sessions at the Guwahati consultation

Targets for NCD Prevention and Control in India

S.NO.	FRAMEWORK ELEMENT	NATIONAL NCD TARGETS		
		OUTCOME	2020	2025
1	Premature mortality from NCDs	Relative reduction in overall mortality from cardiovascular disease, cancer, diabetes, or chronic respiratory disease	10 %	25 %
2	Alcohol use	Relative reduction in alcohol use	5 %	10 %
3	Obesity and diabetes	Halt the rise in obesity and diabetes prevalence	No mid-term target set	Halt the rise in obesity & diabetes prevalence
4	Physical inactivity	Relative reduction in prevalence of insufficient physical activity	5 %	10 %
5	Raised blood pressure	Relative reduction in prevalence of raised blood pressure	10 %	25 %
6	Salt/sodium intake	Relative reduction in mean population intake of salt, with aim of achieving recommended level of less than 5 gms per day	20 %	30 %
7	Tobacco use	Relative reduction in prevalence of current tobacco use	15 %	30 %
8	Drug therapy to prevent heart attacks and strokes	Eligible people receiving drug therapy and counselling (including glycemia control) to prevent heart attacks and strokes	30 %	50 %
9	Essential NCD medicines and basic technologies to treat major NCDs	Affordability of quality, safe and efficacious essential NCD medicines including generics, and basic technologies in both public and private facilities	60 %	80 %
10	Household indoor Air Pollution	Relative reduction in household use of solid fuels as a primary source of energy for cooking	25 %	50 %

NATIONAL CONSULTATION ON “STRENGTHENING ROAD SAFETY LEGISLATION: SAVING LIVES”



L-R Shri Oscar Fernandes, Hon'ble Minister, MoRTH, Gol, Justice J. R. Midha, Hon'ble High Court of Delhi, Dr Nata Menabde, WHO Representative to India, Dr Etienne Krug, WHO HQ, Dr Tony Bliss, World Bank, Mr Sanjay Bandopadhyaya, Joint Secretary, MoRTH

The Hon'ble Minister of Road Transport & Highways (MoRTH), Gol, Shri Oscar Fernandes chaired a consultation on strengthening the road safety legislation, organized by WHO India and World Bank in collaboration with his Ministry, on 14 December, 2013. The conference was attended by senior government officials from the Centre and States, representatives from NGOs, civil society and media. The Transport Minister assured that the Ministry will set a target to bring down deaths due to road accidents by 50% in the coming years with a 'Vision Zero' goal. Consensus also emerged on the urgent need to pass the Motor Vehicles (Amendment) Bill, 2012 followed by a comprehensive Bill on road safety based on the recommendations of the Sundar Committee.

FIRST EXPERT GROUP MEETING ON COMORBIDITIES

MoHFW and the WHO Country Office for India organized a joint consultation in September 2013 to discuss strategies for strengthening the national health system response to address comorbidities across the continuum of care. The meeting aimed to identify challenges in integration of service provision for communicable and noncommunicable diseases and their comorbidities. The group agreed to develop a person-centric model of healthcare delivery and suggested development of an expert group forum for sharing best practices and recent advances in integrated management of multimorbidities.

INDIA'S TOBACCO CONTROL EFFORTS SCALED UP

India's National Tobacco Control Programme (NTCP) was launched as a pilot programme in nine states and 18 districts in 2007 and subsequently expanded to cover 21 states and 42 districts under the 11th Five Year Plan. The programme has been recently expanded to cover eight new states and 11 districts in 2013. NTCP now has a substantial outreach in a total of 53 districts across 29 states and aims to cover all districts under the 12th Five Year Plan. NTCP Operational Guidelines available here. For more details [Click Here](#)

DID YOU KNOW?

The WHO Framework Convention on Tobacco Control (WHO FCTC), an international treaty of evidence-based tobacco control measures, completed **10 years of adoption** in 2013. The year also marks a decade of India's comprehensive tobacco control law – Cigarettes and Other Tobacco Products Act (COTPA) 2003.

INDIA HOSTS INTERNATIONAL CONFERENCE ON THE 'ENDGAME FOR TOBACCO'

With the World Health Assembly adopting a target of 30% relative reduction in tobacco use prevalence by 2025, the global narrative on tobacco control is increasingly exploring the concept of 'tobacco endgame', which envisions reducing tobacco prevalence and availability to minimal levels. India hosted the International Conference on Public Health Priorities in the 21st Century: The Endgame for Tobacco with support from MoHFW, WHO, and various national and international partners and organized by the Public Health Foundation of India (PHFI) and HRIDAY in New Delhi from 10 – 12 September, 2013.



L-R: Mr. Keshav Desiraju, Health Secretary, MoHFW, Pekka Puska, Director General, National Institute for Health and Welfare, Finland, Dr Margaret Chan, WHO Director General, Ms. Avni Sharma, Youth Speaker, Shri Ghulam Nabi Azad, Union Health Minister, India, Dr K. Srinath Reddy, President, PHFI and Dr Monika Arora, Director – Health Promotion, PHFI

The Conference was inaugurated by the Hon'ble Health Minister of India, Shri Ghulam Nabi Azad and the keynote address was delivered by Dr. Margaret Chan, WHO Director General. Other dignitaries included the Health Minister of Jamaica, several Indian Parliamentarians, WHO officials and senior bureaucrats. Nearly 600 speakers and delegates from 52 countries attended the two-day Conference. A major highlight was the launch of a global, youth-led campaign 'No More Tobacco in the 21st Century' (NMT 21C), unanimously recommended for inclusion, in the Conference Declaration, as a symbol of the global tobacco control movement. The Conference Declaration has proposed 23 recommendations to world leaders and civil society, to work towards tobacco endgame.

Complete Conference Declaration available here. For more details [Click Here](#)



FORMER INDIA SKIPPER AND WORLD-CLASS CRICKETER RAHUL DRAVID BECOMES INDIA'S TOBACCO CONTROL AMBASSADOR

MoHFW has announced Mr Rahul Dravid, former Indian cricket captain as India's Brand Ambassador for Tobacco Control. Given Mr Dravid's admirable feats in the sport and enormous fan following, the Union Health Ministry has sought his support in creating awareness, especially among youth, about the dangerous effects of tobacco use. Mr Dravid will feature in tobacco control health spots and

posters to be released by the Union Health Ministry over the next few months. In a message to the country, Mr Dravid said, 'As a sportsperson, I would like to see every Indian healthy and fit – Choose Life, Not Tobacco'.



'INDIA COMMEMORATES ONE YEAR OF ENFORCEMENT OF RULES TO REGULATE DEPICTION OF TOBACCO PRODUCTS OR THEIR USE IN FILMS AND TELEVISION PROGRAMMES'

INDIAN YOUTH MONITOR AND SCORE TOBACCO IMAGERY IN BOLLYWOOD FILMS



Mandated disclaimer to be screened at cinema halls in the beginning and middle of a film

In a unique ongoing monitoring campaign named 'Thumbs Up and Thumbs Down', HRIDAY in technical collaboration with the University of California, has engaged school and college going youth from Delhi to monitor depictions of tobacco use and tobacco imagery in the newly released Bollywood films. The campaign, supported by WHO Regional Office for South-East Asia, involves inculcating critical watching and advocacy skills among youth by engaging them as film reviewers. Students from nearly 30 schools and 15 colleges of Delhi have been trained in critically reviewing movies for tobacco use depictions. The review involves counting the incidents of tobacco use in the movie, and assessing the type of tobacco product used, by whom, where, perceived message, anti-tobacco messages/clues and compliance with laws related to depiction of tobacco product in Indian movies. Of the 54 Bollywood films reviewed, 22 have received a 'Thumbs Up' and 32 have received a 'Thumbs Down' for non-compliance with regulations related to tobacco depiction on-screen.

VOICES FROM THE FIELD

- Rajasthan is one of the first Indian states to make it mandatory for all persons seeking government jobs to give an undertaking that they are not tobacco users (both smoking and smokeless tobacco use).
- The state of Karnataka will constitute Inter-Departmental Squads for tobacco control at the district level. Penalties collected will be used for developing IEC material on tobacco control. In the area of NCDs, a MoU has been developed to link specific districts with tertiary care centres for the treatment of cancers.
- In Chhattisgarh, NCD Training modules have been developed for 70,000 Community Health Workers (Mitans) with the help of the State Health Resource Centre (SHRC) under NRHM with an aim to create master trainers for disseminating the messages related to NCDs.
- In the state of Odisha, daycare chemotherapy services have been extended to all districts to make cancer treatment services accessible to the people. Efforts are being made to provide free of cost cancer drugs to the 'Below Poverty Line' patients while providing hugely subsidised rates to other patients. Odisha also established dedicated NCD units at four district level hospitals for providing integrated management of NCDs under one roof.



In Tamil Nadu, pilot interventions for hypertension and cervical cancer were carried out during 2007–2010. Up scaling in a phased manner covering 32 districts in Tamil Nadu is being carried out in 2012–13.

- Arunachal Pradesh has recently launched NPCDCS in the State, in the presence of Hon'ble Union Minister for Petroleum and Natural Gas, Dr M. Veerappa Moily as Chief Guest.



PARTNER INITIATIVES

- National Institute of Mental Health and Neurosciences (NIMHANS) conducted a 3-day training for NPCDCS counselors in Karnataka (22 August, 2013) to sensitize participants regarding the burden, risk factors, need for continuous care along with strengthening the skills of the participants for counselling, ensuring continuity of care, increasing compliance to treatment of NCDs and for larger health promotion activities. In addition, the participants drafted a plan of action to strengthen and support health promotion activities at district level and develop documentation and record-keeping guidelines for counselling.
- In October – November 2013, nearly 2000 students from 11 schools in Delhi and 3000 students from 13 schools and 6 colleges in Visakhapatnam (Andhra Pradesh) participated in events to promote walking among Indians. PHFI's Health Promotion Division collaborated with HRIDAY, Visakha HRIDAY-SHAN and the World Heart Federation to mobilize students from schools and colleges in Delhi, Mumbai and Visakhapatnam to participate, with their families, in these walking events. Various innovative activities such as a poster making competition and online campaigns with school students, on HRIDAY's online youth portal, Youth for Health (Y4H) were organized to motivate youth to participate in the walk and embrace walking as a part of their routine. The pre-event promotion announced the launch of 'Ground Miles' – a free smartphone application, to help people track their walking habits.



School students participate in a walking event in New Delhi

NCDs TO COST INDIA TRILLIONS OF DOLLARS: STUDY

The Harvard School of Public Health has in a recent study on economic losses due to NCDs, estimated that the economic burden of the five main NCDs (cardiovascular disease, cancer, chronic respiratory disease, diabetes, and mental health) will be close to USD 6.2 trillion for India for the period 2012-30. This figure is equivalent to nearly nine times the total health expenditure during the previous 19 years of USD 710 billion. The Harvard report also predicated ischemic heart disease – characterized by reduced blood supply of the heart muscle – will become the most costly NCD in India (causing a \$1.2 trillion dent from now until 2030). In response to these alarming figures, the report indicates that WHO's Best Buys for addressing the challenge of NCDs are highly cost-beneficial.

Citation: Bloom, D. E., Cafiero, E. T., McGovern, M. E., Prettner, K., Stanciole, A., Weiss, J., Bakkila, S., et al. (2013). The Economic Impact of Non-communicable Disease in China and India: Estimates, Projections, and Comparisons. NBER Working Paper No. 19335.

WALKING AND BICYCLING TO WORK CAN REDUCED CARDIOVASCULAR RISK AMONG INDIANS

A study published in PLOS Medicine has found that walking and bicycling to work is associated with reduced cardiovascular risk in the Indian population. The study showed a dose-response relationship between duration of bicycling to work and being overweight, having hypertension or diabetes. The study concluded that programmes designed to maintain healthy weight and prevent NCDs in India should endeavour to increase active travel in urban areas and to halt declines in rural areas by increasing investment in public transport and improving the safety and convenience of walking and cycling routes in urban areas.

Citation: Millett C, Agrawal S, Sullivan R, Vaz M, Kurpad A, et al. (2013) Associations between Active Travel to Work and Overweight, Hypertension, and Diabetes in India: A Cross-Sectional Study. PLoS Med 10(6): e1001459. doi:10.1371/journal.pmed.1001459

NEW REPORT ON 'ALCOHOL MARKETING AND REGULATORY POLICY ENVIRONMENT IN INDIA' RELEASED

On November 26, 2013, a first of its kind report on Alcohol Marketing and Regulatory Policy Environment in India was released by PHFI. The report includes a commentary on India's expansive alcohol industry, growth patterns and marketing and advertising practices that target women and youth in India. The report also recommends a national-level alcohol control framework to counter the growing burden of alcohol in the country.

For full report [Click Here](#)

Alcohol Marketing and Regulatory Policy Environment in India, Public Health Foundation of India, November 2013

CALL FOR CONTRIBUTIONS!

We look forward to comments and feedback on the newsletter and also request for your contributions (focusing on NCD prevention and control) for the next issue. These may include success stories from the field, new publications, research findings or any other information/news which you feel should be shared with various stakeholders working in this area. Please restrict your write-ups to 200 words. Accompanying high resolution digital photographs and web links are strongly encouraged. Please write to us at: niramaya.newsletter@gmail.com; manjusha.chatterjee@phfi.org; singhan@searo.who.int

PLEASE SUBMIT YOUR CONTRIBUTIONS BY 10 MARCH, 2014!