








WHO-RTG CCS 2022-2026

Health in All Public Policies for
the Prevention and Control of
Non-communicable Diseases
(WHO-CCS NCDs)

Progress Report

6 January 2022

Expected outcomes by 2026 with a contribution of the WHO- CCS NCDs Programme

9 Voluntary Global NCD Targets for 2025		Reference data (2010)	DATA	Target (2025)
	Risk of premature death between 30 - 70 years : 25% Reduction	14.75% (2010) BOD/IHPP	12.7% (2018)	10.3%
	Prevalence of current tobacco use in persons aged 15+ years : 30% Reduction	21.4% (2011) NSO	17.4% (2021)	14.98%
	Prevalence of insufficient physical activity aged 18+ : 10% Reduction	33% (2012) IPSR	25% (2016 IPSR) 43.7% (2021 NSO)	29.7%
	The harmful use of alcohol in persons aged 15+ years : APC (litre of ethyl alcohol absolute/person/year) : 10% Reduction	7.13 (2011) Excise Dept.	6.86 (2019)	6.03
	Mean population intake of sodium (mg/day) : 30% Reduction	3,246 (2009) Nutrition Div.	3,636 (2020) Rama, MU	2285
	Prevalence of raised blood pressure : 25 % Reduction	21.4% (2009) NHES	25.4% (2020)	16.05%
	Prevalence of Diabetes in persons aged 18+ years : 0 % Increase Prevalence of Obesity in persons aged 18+ years : 0 % Increase	6.9% (2009) 34.7(2009) NHES	9.5%(2020) 42.2(2020)	6.9% 34.7%

Thailand's achievements on WHO NCD Progress monitor

10 Indicators (19 Sub-indicators)

Indicators		2017	2020	2022	2022-23
1. National NCD target and indicator		fully achieved	fully achieved	fully achieved	
2. Mortality data		partially achieved	partially achieved	partially achieved	
3. Risk factor surveys		fully achieved	partially achieved	partially achieved	
4. National integrated NCD policy/ strategy/ action plan		fully achieved	fully achieved	fully achieved	
5. Tobacco demand - reduction measures:	- Taxation/ increased excise taxes and prices	partially achieved	fully achieved	fully achieved	
	- Smoke-free policies	fully achieved	fully achieved	fully achieved	
	- Health warnings/ large graphic	fully achieved	fully achieved	fully achieved	
	- Advertising bans	partially achieved	partially achieved	partially achieved	
	- Mass media campaigns	fully achieved	partially achieved	fully achieved	
6. Harmful use of alcohol reduction measure:	- Availability regulation	fully achieved	fully achieved	fully achieved	
	- Advertising and promotion bans	fully achieved	fully achieved	fully achieved	
	- Tax and Pricing policies	partially achieved	partially achieved	partially achieved	
7. Unhealthy diet reduction measures:	- Salt/sodium policies	fully achieved	fully achieved	fully achieved	CCS focus
	- Saturated fatty acids and trans-fats policies	not achieved	partially achieved	partially achieved	
	- Marketing to children restriction	not achieved	Fully achieved	Fully achieved	CCS focus
	- Marketing of breast-milk substitutes restrictions	not achieved	partially achieved	partially achieved	CCS focus
8. Public awareness on diet and/or physical activities		fully achieved	fully achieved	fully achieved	
9. Guidelines for the management of major NCDs		fully achieved	fully achieved	fully achieved	
10. Drug therapy/counselling for high risk persons		fully achieved	fully achieved	fully achieved	



WHO-CCS NCDs : YEAR 2022-2026

HEALTH IN ALL PUBLIC POLICIES FOR THE PREVENTION AND CONTROL OF NCDs

OBJECTIVE :

To improve existing agency functions regarding **social and behavioral determinants of NCDs** to ensure their systems are fully functional and performs optimally to promote health and life-year gain, productivity gain, and increase national competitive capacity.

STRATEGIES :

LEARNING AND GROWTH

There are 5 strategic objectives

1.

FACILITATE

To facilitate multi-sectoral mechanisms for healthy public policy development and movement

2.

MOBILIZE

To mobilize international network through shared agenda on NCDs

3.

ADVOCATE

To advocate evidence-based policies including media advocacy

4.

GENERATE

To generate health and economic M&E framework for NCDs & conduct documentation for partners' learning and shared expectation

5.

LEVERAGE

To leverage political attention and investment in pandemic to advocate for NCDs

FOCUS AREAS :

AGENDA BASED

Major NCD risk factors, including Tobacco, Alcohol, Unhealthy Diet, Physical Inactivity, Pollution and Mental Health.

AREA MECHANISM

National, Regional, Provincial, District and Sub-district Health Board including Local Government

TARGET POPULATION

Children and working aged for healthy active aging.

SEEDING FUND :

for 2022-2026 is **50 Million Baht** from WHO Country Collaboration Strategy Program supported by ThaiHealth, HSRI, NHSO, MoPH, and WHO.



CONTACT :

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Page Facebook WHO-CCS NCDs

2022 Summary: progress and challenge

- **Sub-steering committee meeting** : Feb 9th , May 12nd , Aug 11st , Nov 23rd 2022
- **Technical working gr. Meeting**: Jan 28th , May 10th , Aug 10th , Oct 19th 2022
- **Specific issues**:
 - Digital Health station and platform for extra-hospital NCD services and self-monitoring
 - Multisectoral actions for obesity prevention and management: Oct 25th -27th , Nov 21st-22nd
 - Legislation drafting on marketing restriction of HSSF food for children
 - Monitoring the Milk code Act
 - Formulate five years national NCD strategic plan
 - Support DM Remission as new service model
 - Thai NCD Champion & Leadership : Lesson Learn and Capacity building
 - Supporting the strategy to reduce sodium
- **The troubleshooting actions**
 - push forward UN Thematic working group meeting (Forth coming)
 - 2 Multisectoral Taskforces on Obesity : Workplace Policy Partnership, Food administration in Social welfare
 - Promote and support Non-health sector to implement Obesity policies.
 - Support 1st year implementation of the National NCD strategic plan 2023-2027 especially for non-health sectors
- **Lessons learned**
 - Digital Health station and platform model is chosen as one of the three best practice innovations in national reform activities.
- **Challenges/barriers to implementation**
 - Establishment of OKRs to empower local operation

Technical progress

Milestones	Plan 2022	Progress	On track
MS.1 Institutionalized and strengthen multi-sectoral mechanisms			
MS.1.1 multisectoral meetings with UN partners	/	Planning of UNTWG meeting on March, 2023	N/A
MS.1.2 strengthen health and non-health members of multisectoral mechanisms at national and local level	/	National/Provincial NCD committee	/
	/	Drafting the Food marketing restriction Bill, Supporting the strategy to reduce sodium	/
MS 2 International collaboration			
MS.2.1 Issue-based discussion	/	---	--
MS.2.2 International exchange forum	/	1) Obesity MSA 2) Malaysia visit 3) China online meeting (HT)	--
MS 3 Evidenced based policy advocacy			
MS 3.1 Workforce assignment	/	MSA Obesity policy working gr.	/
MS 3.2 Advocacy workshop and policy brief development	/	MSA Obesity workshop Oct and Nov 2022	/
MS 3.3 Public and media advocacy	/	WHO-CCS NCDs FB	-
MS. 3.4 Encourage ThaiHealth and mobilize partners for tobacco mass media campaign		Pass the WHO criteria	/
MS. 3.5 Collaboration to launch campaigns during pandemic, for example, Fit and Firm with Thaisook App	/	Launched in March 2022	/
MS. 3.6 Documentation and communication on the impact of NCDs from COVID-19 epidemic and vice versa	/	IHPP launched final report on website	/
MS. 4 Generate health and economic M&E framework for NCDs and lessons learnt documentation			
MS.4.1 Generate health and economic M&E framework	/	M&E Obesity MSA	/
MS.4.2 Conduct studies and documentation			
MS 4.3 Fill the gaps of surveillance; for example, encourage ThaiHealth and mobilize partners for the Sodium urine survey every 5 years			
MS.4.4 Dissemination			

Financial progress (as of 31 Dec 2022)

Detail	Account	Expenses	Balance
1). WHO-CCS NCDs 2017-2021 (account 10,536,211.22 bath forward for year 2022 on 31 Dec 2022)	10,536,211.22 bath	5,959,898.57 bath (advance payment)	4,576,312.65 bath
1.1 received 2.4 MB. from ThaiHealth and 0.1 HSRI in May 2022	2,499,992 bath	5,626,304.65	.
1.2 total expenses 1 Jan – 30 Nov 2022	13,036,203.22 bath	11,480,745.71	1.45 MB
1.3 received 2.4 MB. from ThaiHealth in Dec 2022	2,500,000-	-	3.95 MB.
* 26 Dec 2022 (transfer to WHO-CCS NCDs 2022-2026)			3.95 MB.
2) WHO-CCS 2022-2026 agency funding 9 MB. per year (Y1 2022 received 4.9 MB. from ThaiHealth, WHO 3 MB. and HSRI 0.3 MB. in Oct 2022)	8.2 MB.	-	8.2 MB.
2.1 expenses 26 Jul – 31 Dec 2022		789,727.72 bath	
2.2 balance account Y 2022 on 31 Dec 2022		-	7,410,264.28 bath Advanced payment 290,450 baht
** Totally account to WHO-CCS NCDs in Dec 2022			11,360,264.28 bath
Y2 2023			

2023 Proposal workplan (draft) (# 17.1 MB.)

	Strategic Action	Budget
1	MS 1 Facilitate multi-stakeholder co-ordination	9.75 MB.
	1. Drive policy and support sub-steering committee meeting, technical working group meeting and urgent items (continued) 2. Implementation of national salt reduction strategies 2016-2025 at province level (continued) 3. Legislation drafting on marketing restriction of HSSF food for children (continued) 4. Advocate and Support NCD National Strategies Plan 2022-2027 (0.9 MB.) (continued) (activities for <u>strategy1</u> :Smart NCD Networks =0.5 MB., <u>strategy2</u> : NCDs Health literacy = 0.5 MB. and <u>strategy3</u> : Creative Ecosystem for empower NCD management = 2.5 MB.)	2 MB. 2.75 MB. 0.6 MB. 4.4 MB.
2	MS 2 International collaboration	0.75 MB.
	1. UNTWG 2. Academic forum 3. Supporting health personal sharing in NCD international conferences	0.05 MB. 0.3 MB. 0.4 MB.
3	MS 3 Evidenced based policy advocacy	5.6 MB.
	1. Public Relation WHO-CCS NCDs mission and risk communication ไม่น้ำสาม (continued) 2. Promote and support non-health sector to implement obesity policies (child growth, healthy workplace, CCC) (continued)	1.0 MB. 4.6 MB.
4	MS 4 Generate health and economic M&E framework for NCDs and lessons learnt documentation	1.0 MB.
	1. Conferences on health measurement and M&E framework for health sectors and non-health sectors	1.0 MB.
5	MS 5 leverage political attention and investment in pandemic to advocate for NCDs	