

**Program proposal for
World Health Organization and Royal Thai Government (WHO-RTG)
Country Cooperation Strategy (CCS) 2022-2026 (version 3rd Nov 2021)**

1. Title of proposal: "Health in all public policies for the prevention and control of NCDs"

2. Executive Summary

Title: "Health in all public policies for the prevention and control of NCDs"

Goal: 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

Guiding Principles for CCS-NCDs 2022-2026 program:

A: All public policies that address social and behavioral determinants of NCDs (Health in all policies).

B: Bigger impacts and be ambitious by joint efforts.

C: CATALIST to use value added of WHO's contribution.

D: Define and deliver system improvement by identify the need or opportunity to improve existing agency functions to ensure the intervention is flexible and able to take on emerging opportunities to achieve unmet strategic goals.

E: Enhance people to learn to live more creatively with a core value ' Learning and Growth'.

F: Focus and shared values: Shared priorities and values with health and economic partners.

Strategic Objectives: the main strategy is learning and growth. There are 5 strategic objectives

1. To facilitate multi-sectoral mechanisms for healthy public policy development and movement
2. To mobilize international network through shared agenda on NCDs
3. To advocate evidence-based policies including media advocacy
4. To generate health and economic M&E framework for NCDs & conduct documentation for partners' learning and shared expectation
5. 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. Priority issues are tobacco consumption, sodium consumption, CVD & hypertension, and Obesity.
- Area mechanism: District/ Sub-district, Provincial, and Regional Health Board
- Target population: working aged for healthy active aging.

Estimated Budget for 2022-2026 is 50 Million baht.

3. Background / Rational / Lessons from CCS cycle 2017-2021 (if applies) / Conceptual Framework

Rational:

1. NCDs are still counted for high burdens of health system and premature mortality in Thailand. NCDs are responsible for three out of every four deaths.
2. The economic burden of NCDs is staggering—8% of GDP with most costs attributed to lost productivity from premature mortality. NCD issue is being the present challenge and will continue as Thailand has reached aging society.
3. NCDs are preventable and the reduction of pre-mature deaths from NCDs could be possible but challenging.
4. NCDs is a target under SDGs and national plan. It is also one of the three major area under national health reform.
5. Major NCD risk factor, including tobacco, alcohol, unhealthy diet physical inactivity, pollution and mental health are still challenging.
6. The COVID-19 is a reminder that a society with a high burden on NCDs is a vulnerable society to current and future pandemics.

WHO/UN 5x4x5 model for NCD prevention & control

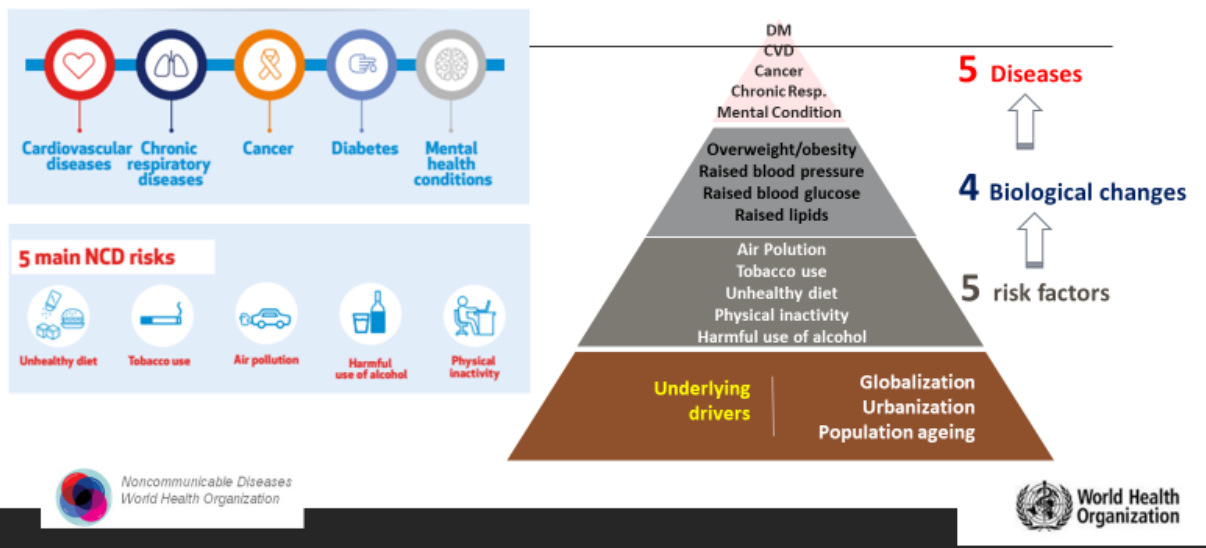


Figure 1 Scope of main NCD risks and biological changes for NCD prevention and control

Achievements (2017-2021)

During CCS 2017 – 2021, there have been many initiatives under the NCD program, including the strong collaborative efforts to fight high prevalent NCDs (diabetes, hypertension, etc.), the support for the control of NCD risks (sodium and salt reduction, obesity, strengthening surveillance and

monitoring system for NCDs), NCD policy development fellowships, and promotion of NCD champions, among others. An outstanding achievement of the current CCS is the organization of a high-level UN Interagency Task Force (UNIATF) Mission in 2018. The UNIATF has met with the top leadership including the Prime Minister and other ministers and come up with 17 recommendations. This helped the country to expand, intensify and scale-up health sector's response on NCDs and increase engagement of non-health ministries. As a follow-up to the UNIATF recommendations, a UN thematic group was set up with 10 United Nations (UN) agencies, 10 government agencies (including Prime Minister's Office) and civil society with the UN Resident Coordinator and Director General of Department of Disease Control as co-chairs. This initiative was very helpful in mobilizing UN partners to support NCD agenda and improve engagement with other sectors.

Lessons Learned and Unfinished Agenda

Despite the significant advancement in the national NCD prevention and control program in the CCS NCD. Some unfinished agenda exist:

- NCD is still considered as health problem. The whole government and whole society respond need more innovative leverage mechanism. Although the earlier CCS cycle successfully launched a UN thematic working group and other networks, there is still a need for strong and functional institutional mechanisms for leveraging “a whole of government and a whole of society” response to NCDs.
- The current response is mainly implemented by agencies at national and central levels. There is a need to increase involvement of the provinces and setting up multisectoral mechanisms for enforcement of policies at local levels. Local governmental units should be strengthened and supported to scale-up NCD programs.
- NCDs focus is still at the screening and treatment end. New approaches are necessary to gradually shift the focus of NCD programs toward primary prevention and to address social determinants of health. Innovative communication strategies are needed for greater engagement of public, including via mass and social media and public release of data annually for greater two-way accountability.
- NCDs are common health problems in the aging population, which could have been prevented with effective interventions at earlier stages in life. Thus, there is a need to develop strategies to prepare the national responses toward active aging society through a life course approach.
- Global NCD progress monitor 2020 reported Thailand was ranked top-ten with 12 out of 19 indicators fully achieved and 7 indicators partially achieved. The five-year trend showed good progression, but 4 indicators was stagnant in the last 3 years which are: (1) mortality data, (2) risk factor survey, (3) mass media campaign for tobacco demand reduction, and (4) increase excise taxes on alcohol.
- Close monitoring of the NCD achievement is necessary. The timeline of the global NCD targets for 2025 are approaching but only the accesses to health services and medicines have been achieved. Risk behaviors and prevalence of diseases are getting worse, except physical activity, alcohol use and tobacco use which are getting better.

Table 1. Nine Global NCD Targets, Thailand

Target	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%
Essential medicines and technologies to treat major NCDs: 80% of facilities		Pass, UHC	80%
At least 50% eligible people receive drug therapy and counseling (including glycemic control) to prevent heart attacks and strokes		Pass, HDC	50%

Table 2. NCD Progress monitor, assessed by WHO

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

WHO's roles in supporting the implementation of the NCD CCS plan 2017-2020 had major contributions including a) catalyst and connector, b) influencing, c) technical assistance and capacity building, d) resource mobilization, and e) sharing Thai expertise, for example. (Details see in RTG-

WHO Country Co-operation Strategy (2017-2021): Lessons from Non-communicable Disease Programme).

The value added of WHO's contribution for the NCD CCS 2022-2026 includes all of the following CATALIST:

- Convening multi sectoral partners, including bringing UN partners on board.
- Accelerating and boosting efforts of champions, by endorsing champions and thought leaders and shining a light on the work of champions and supporting their advocacy to high level political leadership
- Tracking, monitoring and certifying progress against goals,
- Advancing Thailand's health leadership globally,
- Linking and connecting with global partners,
- Intellectual capital,
- Social capital, and
- Training and capacity building.

4.Guiding Principles (specify for each program)

In the stakeholder meetings on July 30th and September 21st, 2021, agreed principles for CCS-NCDs program on 2022-2026 are listed below.

A: All public policies that address social and behavioral determinants of NCDs (Health in all policies).

B: Bigger impacts and be ambitious by joint efforts.

C: CATALIST to use value added of WHO's contribution.

D: Define and deliver system improvement by identify the need or opportunity to improve existing agency functions to ensure the intervention is flexible and able to take on emerging opportunities to achieve unmet strategic goals and solve the big problems in the system.

E: Enhance people to learn to live more creatively with a core value ' Learning and Growth'.

F: Focus and shared values: Shared priorities and values with health and economic partners.

5.Goals and Strategic Objectives

The purpose of the program of WHO Country Cooperation Strategy on NCDs 2022-2026 (CCS-NCDs) is 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.

The 9 Global NCD targets set for 2025 will be monitored and evaluated. This programme will bring key partners' joint efforts to make progress in better health by targeting on NCD risk factors and biological changes. Additional to the health outcome variables; a 25% relative reduction in risk of

premature mortality from NCDs for 2025 with a baseline of 2010, other outcomes such as productivity gain and other competitiveness index will be assessed and monitored during 2022-2026. Moreover, this program will create a joint target for hypertension and diabetes.

Strategic Objectives: the main strategy of WHO CCS-NCD 2022-2026 is learning and growth. There are 5 strategic objectives

1. To facilitate multi-sectoral mechanisms for healthy public policy development and movement
2. To mobilize international network through shared agenda on NCDs
3. To advocate evidence-based policies including media advocacy
4. To generate health and economic M&E framework for NCDs & conduct documentation for partners' learning and shared expectation
5. To leverage political attention and investment in pandemic to advocate for NCDs

6. Activities, Outputs and Timeline: focus on mobilizing social and intellectual capital (5-year

- Focus areas
 - Agenda based: Major NCD risk factors, including tobacco, alcohol, unhealthy diet, physical inactivity, pollution and mental health. Priority issues are tobacco consumption, sodium consumption, CVD & hypertension, and Obesity.
 - Area mechanism: District/ Sub-district, Provincial, and Regional Health Board
 - Target population: working aged for healthy active aging.
- Activities for 5 years during 2022-2026.
 - I. Strengthen the multi-sectoral mechanisms: possible activities include but not limit to
 - Consultation forums for academic, civil society, government officials, public, private sector where no conflict of interest and WHO to establish participatory mechanism for evidence-based public policy movement for NCD prevention and control.
 - Convening multi-sectoral partners (including non-health sector) and UN partners for healthy public policy development with WHO support. i.e., UNTWG or multisectoral meetings with UN partners established under CCS-NCDs
 - Establish informal mechanism between MOPH and other Ministries with shared policy agendas
 - Mobilize social and intellectual capital of Thai experts for think-tank and mentorship to nurture younger and middle level of NCD Goodwill ambassador and champions in health and other public sectors.
 - Strengthen regional, provincial, and local functions by leadership building at provincial mechanisms and actors NCD prevention & control local government for NCD prevention & control
 - Create a co-integrated workspace for outcome monitoring
 - Thinktank meeting and taskforce meeting for collaboration

- II. International collaboration
- Mobilize international network through shared agenda on NCDs and linkage to international experts especially with UN/WHO UNICEP UNDP.
- III. Evidence-based policy advocacy including media advocacy: possible activities include but not limit to
- Information made available for decision making at all level of stakeholders are needed for communication to engage stakeholders to join the CCS-NCD initiative “Together Fight NCDs” campaign.
 - Societal informed on cost-effective measures that will help to save the maximum number of lives. Focus on interventions that make the biggest difference, e.g. tobacco taxation and reformulation of packaged food. Introduce tax on unhealthy food with cross subsidy on healthy options (fruits and vegetables)
 - Apart from regulatory policies, behavioral economics will be used to guide the public decision-makers and private providers to provide good-default options for consumers. Information of the commercial determinants should be uncovered.
 - Capacity building on policy development and advocacy and technical taskforce
 - Public engagement in policy dialogue and policy adoption.
- IV. M&E framework & documentation for learning and shared expectation: possible activities include but not limit to
- Building in the M&E system (Health and economic framework on NCDs prevention and control) based on SDG
 - Capacity building for study on Social Return On Investment (SROI)
 - Capacity-assessment tools
 - support for the development of the next national NCD plan 2023-2027
 - Documentation on Best practice to express at international awarding platform
 - Area-based and community-based learning for scaling up at nationwide
 - Using information platforms, especially Electronic Health Record for decision making and making progress on Digital Health
- V. To leverage political attention and investment in pandemic to advocate for NCDs
- Leverage political attention and investment in pandemic to advocate for NCDs. Most vulnerable for severe morbidity and mortality of Covid-19 are people with NCDs underlying diseases. Thus, strategy to reduce obesity, smoking, alcohol consumption, and increasing physical activities should gradually interfaced and integrated with ongoing Covid-19 programs.

Table 3 Activities and Expected outputs of RTG-WHO CCS programme 2022-2026 for the prevention and control of NCDs

Strategic obj.	Activities	Expected outputs	Expected outcomes	Impact
Strategic obj.1: To facilitate multi-sectoral mechanisms for healthy public policy development and movement	<p>1.1 Organize multisectoral meetings with UN partners to make progress on UNIATF's recommendation</p> <p>1.2 Organize technical and strategic meeting</p> <p>1.3 Support existing multisectoral committees and members (National NCDs, Tob, Alc, Sodium, NHSO on NCDs, ThaiHealth on NCDs) to learn and share experiences including site visits</p> <p>1.4 Mobilize social and intellectual capital of Thai experts for think-tank and mentorship to nurture younger and middle level of NCD Goodwill ambassador and champions in health and other public sectors</p> <p>1.5 Strengthen regional, provincial, and local functions by leadership building of health and non-health actors</p> <p>1.6 continue the co-ordination stakeholder office</p>	<p>a. Meetings with UN partners twice a year</p> <p>b. Technical -cum- strategic meetings 4 times a year</p> <p>c. Numbers of young and middle level of NCD Goodwill ambassador and champions</p> <p>d. An awarding system for best practice of non-health actors</p> <p>e. Effective informal mechanism between MOPH and other Ministries with shared policy agendas</p>	<p>Unfinished UNIATF's recommendation to be implemented:</p> <p>a. Establishment of a new inter-ministerial steering committee on NCD prevention and control with designated high level focal persons for NCDs in ministries with accountability</p> <p>b. Accede to the WHO FCTC Protocol to Eliminate Illicit Trade in Tobacco</p> <p>c. Identify and utilize champions for NCD-related SDG targets in health and non-health sectors</p> <p>d. Introduce health impact/outcomes assessments</p> <p>e. Regulation of food industry to ensure food products comply with recommended standards, focusing on reducing sodium, sugar, and fat</p> <p>f. Ban inappropriate marketing of unhealthy food and beverages to children and implement the Act on Control of Marketing of Infant and Young Child Food</p> <p>G. Address interference from tobacco, alcohol, air pollution, and food industry to ensure that public interests remain above commercial interests</p>	<p>-Implementations on unfinished UNIATF's recommendations</p> <p>-Numbers of innovative public policy agendas for NCD prevention and control</p>

Strategic obj.	Activities	Expected outputs	Expected outcomes	Impact
Strategic obj.2 International collaboration	2.1 Mobilize international network through shared agenda on NCDs and linkage to international experts especially with UN/WHO UNICEF UNDP	a. International exchange forum once a year b. Issue-based discussion as needed	Lesson learnt on NCD progress from international network	- Thailand on track for achieving global NCD targets
Strategic obj.3: To advocate evidence-based policies including media advocacy and policy implementation	3.1 Media communication to mobilized support and engage public in policy dialogue 3.2 Support working group movement <ul style="list-style-type: none"> - Establish the Behavioral economics advocacy group - Support ThaiHealth's Tobacco and Alcohol network: tax and illicit trade - Support the National Sodium reduction committee - NHSO's DM/HT Steering committee to promote HBPM & CVD risk assessment 3.3 Capacity building for sub-national actors and technical taskforce on policy development and advocacy 3.4 Advocate the successful pilot model for nationwide implementation	a. Numbers of partner agencies and individuals who access to website, facebook, and polls b. Program responses to globalization of NCD epidemic c. Policy briefs, Policy recommendations, Press releases, NCD public forum d. Model development adopted to general action	Policy movements on <ul style="list-style-type: none"> a) Regulation of food industry to ensure food products comply with recommended standards, focusing on reducing sodium, sugar, and fat b) Consumption behaviors / Physical activities and targeting to obesity reduction c) Tobacco and alcohol tax and illicit trade d) Sodium tax / Sodium limits and Reformulation mandatory, front of pack labelling, Low-sodium community and hospital, public awareness e) Home Blood pressure monitoring and CVD risk assessment f) Ban inappropriate marketing of unhealthy food and beverages to children and implement the Act on Control of Marketing of Infant and Young Child Food 	- Thailand on track for achieving global and national NCD targets and related SDGs

Strategic obj.	Activities	Expected outputs	Expected outcomes	Impact
<p>Strategic obj.4:</p> <p>To generate health and economic M&E framework for NCDs & conduct documentation for partners' learning and shared expectation</p>	<p>4.1 Health and economic framework on NCDs prevention and control based on SDG</p> <p>4.2 Societal informed on cost-effective measures including SROI study,</p> <p>4.3 Policy evaluation study</p> <p>4.4 Policy, capacity and outcomes assessment at provincial level</p> <p>4.5 support for the development of the next national NCD plan 2023-2027</p> <p>4.6 Documentation on Best practice to express at international awarding platform</p> <p>4.7 Community based learning</p> <p>4.8 Using information platforms, especially Electronic Health Record for decision making and making progress on Digital Health</p>	<p>a. Literature review report</p> <p>b. Research reports</p> <p>c. Scientific papers</p> <p>d. Recommendations for the next national NCD plan 2023-2027</p>	<p>a. National monitoring framework for NCDs for reference</p> <p>b. National guideline development</p> <p>c. Tool development</p> <p>d. Model development for nationwide scaling up</p>	<p>- Thailand on track for achieving global and national NCD targets and related SDGs</p>
<p>Strategic obj 5: To leverage political attention and investment in pandemic to advocate for NCDs</p>	<p>5.1 Collaboration to launch campaigns during pandemic, for example, Fit and Firm with Thaisook App</p> <p>5.2 Documentation and communication on the impact of NCDs from COVID-19 epidemic and vice versa.</p>	<p>a. especially numbers of participants in the campaign</p> <p>b. Numbers of campaign COVID-19 and NCD</p>	<p>a. Public attention on NCDs for the nation to live with COVID-19 pandemic,</p> <p>b. Political attention on NCDs and investment in pandemic to advocate for NCDs</p>	

7.Expected Outcomes, Milestones and Impacts (5-year and 1-year)

Major expected outcomes:

- Functioning institutionalized and strengthened national and local multi-sectoral mechanisms for primary prevention of NCDs.
- Unfinished UNIATF's recommendation to be implemented
- An improved NCD response implementation as indicated by the Nine Global NCD targets and NCD progress monitor report, particularly on the indicators that Thailand has yet to fully achieved in the 2020 report.
- A continuing progress towards Thailand achieving the global NCD targets for 2025 and the SDG 2030 target on NCDs.

Table 4 Expected outcomes and Milestones

Expected outcomes and Milestones	Timeline of Activities / Achievement					
	2022	2023	2024	2025	2026	Remarks
Expected outcomes						
1. Probability of dying of aged 30-69 years old will decrease to 10.3%				/		Nine Global NCD targets
2.Prevalence of tobacco use in adults will decrease to 14.98%				/		
3. Prevalence of insufficient physical activity will be reduced by 10% from 2010				/		
4. Reduction of Mean of population intake of sodium from 2010				/		
Milestones						
MS.1 institutionalized and strengthen multi-sectoral mechanisms						
MS.1.1 multisectoral meetings with UN partners	/					
MS.1.2 strengthen health and non-health members of multisectoral mechanisms at national and local level	/	/	/	/		
MS 2 International collaboration						
MS.2.1 Issue-based discussion	/	/	/	/	/	
MS.2.2 International exchange forum	/	/	/	/	/	

Expected outcomes and Milestones	Timeline of Activities / Achievement					
	2022	2023	2024	2025	2026	Remarks
MS 3 Evidenced based policy advocacy						
MS 3.1 workforce assignment	/					
MS 3.2 Advocacy workshop and policy brief development	/	/	/	/	/	
MS 3.3 Public and media advocacy	/	/	/	/	/	
MS. 3.4 encourage ThaiHealth and mobilize partners for tobacco mass media campaign			/	/	/	WHO's NCD progress monitor
MS. 3.5 Collaboration to launch campaigns during pandemic, for example, Fit and Firm with Thaisook App	/	/				Strategic Objective 4
MS. 3.6 Documentation and communication on the impact of NCDs from COVID-19 epidemic and vice versa	/	/				Strategic Objective 4
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	/					
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				/		WHO's NCD progress monitor
MS.4.4 dissemination			/	/	/	

8. Involvement of Multi-Stakeholders and how they will add value

- Local Health Division, Department of Local Administration, Ministry of Interior will be co-project management on the capacity building program for Health section of Local Administrative Government.
- Department of Labour Protection and Welfare, Ministry of Labor will be co-researchers on the health and economic assessment on the workplace program
- Fiscal Policy Office, Ministry of Finance will be co-researchers on health and economic assessment framework

9. Program Governance (including Program Management Structure)

Department of Disease Control will be responsible for contract management and a designated Deputy DG of DDC will sign the contract on behalf of the DDC. Director of Division of NCD is responsible for the program management.

Table 5 Staffing

Role	Number of people
1. Program manager: Dr.Krisada Hanbanjerd (Gov. staff)	1
2. Assistant manager: Ms.Tarinee Pangjunan (Gov. staff)	1
3. Financial and accounting officer (project staff)	1
4. Coordinator (project staff)	1
5. Researcher: Dr.Siriwan Pitayarangsarit (Gov. staff)	1
6. Research assistant for technical task and policy advocacy: (project staff)	2
7. Communication officer: (project staff)	1
total	8 persons

There will be a steering committee chaired by a non-government officer to provide direction and monitor the progress. The component of the steering committee will be from high officials from MoPH and other relevant ministries, WHO and UN agencies, representatives from funding agencies , and senior NGOs and experts.

A technical working group will be assigned by the Chair of the steering committee to review activity plan and budget allocation for each strategy.

10. Monitoring & Evaluation including program OKRs (Objective Key Results)

Table 6 Objectives and key results

Objectives	Key results	targets					
		2022	2023	2024	2025	2026	Total
1. To facilitate multi-sectoral mechanisms for healthy public policy development	1.1 Numbers of multisectoral meetings with UN partners, chaired by the Permanent Secretariat and the UN Resident Coordinator	2	2	2	2	2	10
	1.2 Numbers of national multi-sectoral mechanisms to be involved at least - National NCDs - National Sodium reduction - NHSO's DM/HT steering committee	3	3	3	3	3	3
	1.3 Numbers of Technical - cum- strategic meetings	4	4	4	4	4	20

Objectives	Key results	targets					
		2022	2023	2024	2025	2026	Total
	1.4 CCS-NCD subcommittee meeting	2	2	2	2	2	10
	1.5 Numbers of young and middle level of NCD Goodwill ambassador and champions (persons)		4	4	4	4	20
	1.6 an awarding system for best practice of non-health actors		1				1
	1.7 Program coordination and management office	1	1	1	1	1	1
2. International collaboration	2.1 Numbers of issue-based discussion	3	3	3	3	3	15
	2.2 Numbers of international exchange forums	1	1	1	1	1	5
3. To advocate evidence-based policies including media advocacy	3.1 Numbers of issues to advocate at least - Tobacco consumption, - Sodium consumption, - CVD & hypertension, and - Obesity and General NCDs	4	4	4	4	4	4
	3.2 Numbers of persons (National and subnational level) received capacity building on policy development and advocacy	20	20	20	20	20	100
	3.2 number of NCD public forums		1	1	1	1	4
4. To generate health and economic M&E framework for NCDs & conduct documentation for partners' learning and	4.1 health and economic M&E framework for NCDs		1				1
	4.2 Research reports and scientific papers			1	1	1	3

Objectives	Key results	targets					
		2022	2023	2024	2025	2026	Total
shared expectation							
5. To leverage political attention and investment in pandemic to advocate for NCDs	5.1 numbers of issues in public agenda	1	1				2
	4.2 numbers of NCD policy adoption and implementation raised by CCS-NCDs	1	1				2

In addition, the programme will use the OKRs of the Together Fight NCDs as follows for monitor the contributions of partners.

1. 30 % reduction of sugar and sodium consumption in 2025
2. 70% of People at working age know their number and risk of NCDs
3. 80% of people with undiagnosed diabetes or undiagnosed hypertension have diagnosis confirmation
4. 50% of diabetic and hypertension patients receiving services are able to control their blood sugar levels and blood pressure levels.

The 80 80 80 target for hypertension control will be proposed and seek consensus from partners of Together Fight NCDs campaign.

Note: The 80 80 80 target stand for the 80 % of people aged 35-59 years know their blood pressure level, 80% of persons who have high blood pressure received diagnosis confirmation and access to care, 80% of HT patients are with controlled blood pressure.

11. Estimated Budget according to HSRI budget template

- o Total 50 Million baht for 5 years

Table 7 Estimated budget

Strategies	Estimated budget (million baht)					
	2022	2023	2024	2025	2026	Total
1. To facilitate multi-sectoral mechanisms for healthy public policy development and Program coordination and management	3	3	3	3	3	15
2. To mobilize international network through shared agenda on NCDs	1	1	1	1	1	5
3. To advocate evidence-based policies including media advocacy	3	3	3	3	3	15
4. To generate health and economic M&E framework for NCDs & conduct documentation for partners' learning and shared expectation	2	2	3	3	3	13
5. To leverage political attention and investment in pandemic to advocate for NCDs	1	1	0	0	0	2
	10	10	10	10	10	50

12. Contracting Agency : Program Manager and organization name and contact info

- Program Manager's name and contact info: Dr. Krisada Hanbanjerd Email: iamkrisada@gmail.com
- Organization's name, address and contact info: Division of NCDs, DDC, MoPH
- Authorization name for contract signature: Dr.Preecha Premisiri, Deputy director-general of the Department of Disease Control (DDC), Ministry Of Public Health.

13. Expert Partners: Dr.Wiwat Rojanapithayakorn, Prof.Dr. Prakrit Vathesatogkit, Dr. Kumnuan Ungchusak, Dr. Somsak Chunharas, Dr.Surasak Kantachuvesiri, Dr.Piyawat Katewongsa, Dr.Panya Kaimuk, Dr.Wannee Nitiyanant and etc.

Annex 1. Detailed project and activities for 2022-2023 with budget 20 Million baht

Strategic objectives	Activities	Expected outputs 2022-2023	Output indicators	Responsible agencies	Estimated budget	
					2022	2023
Strategic obj.1: To facilitate multi-sectoral mechanisms for healthy public policy development	1. Cooperation Party of Networks to strengthen Non-communicable disease strategy	a. Strengthened multisectoral co-ordination b. Increase capacity and engagement of stakeholders / partner institution	a. Number of multisectoral meetings held b. Numbers of national multi-sectoral mechanisms to be involved c. Numbers of Technical - cum- strategic meetings d. CCS-NCD subcommittee meetings e. Numbers of international exchange forums	Division of NCDs	1.5 MB	1.5 MB
	2. NCD Champion - Mobilize social and intellectual capital of Thai experts for think-tank and mentorship to nurture younger and middle level of NCD Goodwill ambassador and champions in health and other public sectors	a. Strengthen regional, provincial, and local functions by leadership building of health and non-health actors	a. Numbers of young and middle level of NCD Goodwill ambassador and champions b. An awarding system for best practice of non-health actors	IHPP	1.5 MB	1.5 MB

Strategic objectives	Activities	Expected outputs 2022-2023	Output indicators	Responsible agencies	Estimated budget	
					2022	2023
Strategic obj.2: To mobilize international network	International collaboration	a. International forum and meetings	Numbers of issue-based discussion and forums	Div. of NCDs and WHO	1 MB	1 MB
Strategic obj.3: To advocate evidence-based policies including media advocacy and policy implementation	Media communication and policy dialogue	b. Communication to partners and public	a. Numbers of partner agencies and individuals who access to website, facebook, and polls b. NCD public forums	Mainarsam co.	0.6 MB	1.2 MB
	Capacity building for NCD policy development and advocacy -Capacity building for national and sub-national actors - Support working gr. movement	a. Program responses to globalization of NCD epidemic b. Model development adopted to general action	a. Numbers of issues to advocate b. Numbers of persons received capacity building on policy development and advocacy (NCD Fellows and others) c. Policy briefs, Policy recommendations, Press releases	Div of NCDs	1.2 MB	1.2 MB
	the Behavioral economics advocacy group	a. KM of Behavioral economics	a. Key messages for media communication, b. Press releases, c. stakeholder meeting	To be consulted with partners	1.2 MB	0.6 MB
Strategic obj.4:	Health and economic framework on	a. Health and economic framework for NCD assessment	a. Literature review report b. Research reports	To be consulted with partners	1 MB	1 MB

Strategic objectives	Activities	Expected outputs 2022-2023	Output indicators	Responsible agencies	Estimated budget	
					2022	2023
To generate health and economic M&E framework for NCDs & conduct documentation for partners' learning and shared expectation	NCDs prevention and control	b. Societal informed on cost-effective measures including SROI study c. Policy, capacity and outcomes assessment at provincial level	c. Scientific papers			
	Policy evaluation	a. Recommendations	a. Research report	To be identify after subject selection		0.5 MB
	Support for the development of the next national NCD plan 2023-2027 and strategic planning for Together Fight NCDs at sub-national level	a. Recommendations for the next national NCD plan 2023-2027 b. Strengthen information platforms, especially Electronic Health Record for decision making and making progress on Digital Health	a. Scientific papers b. Report on lesson learnt c. OKRs of Together Fight NCDs and Regional Health reform	Div. of NCDs	1 MB	0.5 MB
Strategic obj 5: To leverage political attention and investment in pandemic to advocate for NCDs	1. Collaboration to launch campaigns during pandemic, for example, Fit and Firm with Thaisook App	a. Public attention on NCDs for the nation to live with COVID-19 pandemic.	numbers of participants in the campaign	Div of NCD, Thai Healthy Lifestyle Office, Network of fatless belly Thai, A-MED NSTDA	0.8 MB	1 MB
	2. Documentation and communication on the impact of NCDs from COVID-19 epidemic and vice versa.	a. Political attention on NCDs		IHPP, Division of NCDs, and Association of Thai NCDs	0.2 MB	