

International dialogue on sustainable financing for NCDs and mental health

**Location: Washington D.C., United States of America
20–21 June 2024**

Concept note

Strategic setting of the dialogue

1. The inclusion of noncommunicable diseases (NCDs) and mental health in the 2030 Agenda for Sustainable Development – with the commitment to *reduce premature mortality from noncommunicable diseases by one third through prevention and treatment and promote mental health and well-being by 2030* (SDG target 3.4.1) – was a key step towards galvanizing action towards a whole-of-society approach to address one of the most critical developmental challenges of the 21st century. NCDs represent 74% of all deaths, making up seven of the [world's top 10 causes of death](#), while mental disorders account for one in six years lived with disability globally. There is also emerging evidence suggesting that the number of people living with [NCDs](#) and [mental health](#) conditions continues to climb and consequently, the need for NCD and mental health services.
2. However, more than halfway into the SDG era, only a handful of countries are on track to meet the [SDG target 3.4](#) and [the nine voluntary targets of the NCD Global action plan](#). In some countries, [death rates due to NCDs have even increased](#) and millions of people, especially in lower-income settings, lack access to interventions that could prevent or delay NCDs, mental health conditions, and their consequences.
3. Progress on addressing NCDs and mental health conditions has not only slowed since the beginning of the SDG era in 2015, but it has also slowed further following the COVID-19 pandemic. The world is still catching up on delayed vaccinations, screening programmes, detection, and treatment following essential service disruptions due to the pandemic. Investments in NCDs and mental health are needed to be prepared for future humanitarian crises and pandemics and to build back better and fairer. Furthermore, polluted air is now the fourth leading risk factor for health overall, contributing to 6.7 million deaths annually; most of the deaths, 85% or about 5.7 million, are due to NCDs. Accumulating evidence is also now showing how the climate crisis is impacting mental health via stresses and risks imposed by severe weather events and longer-term environmental changes. Climate change is affecting all countries but disproportionately more the 39 Small Island Developing States (SIDS), which are especially vulnerable for their size and geography. As discussed at the [SIDS Ministerial conference on NCDs and mental health](#), held in Bridgetown, Barbados on 14–16 June 2023, and set out in the [Bridgetown Declaration on NCDs and Mental Health](#), these countries are also disproportionately represented among the countries with the highest estimated risk of dying prematurely from any of the four main NCDs.

-
4. The good news is that every country still has options for achieving the global SDG 3.4 target and moving towards universal health coverage (UHC) for people living with NCDs and mental health conditions, including through scaled-up delivery of context-specific, cost-effective priority interventions (so-called the [best buys](#)) along with domestic capacity for ensuring action across government sectors. Achieving this will require modest additional investments and would generate huge benefits: for example, spending an additional US\$ 18 billion per year across all low- to middle-income countries for NCDs could generate net economic benefits of [US\\$ 2.7 trillion](#) over the next seven years and prevent or delay 39 million deaths; while for the most prevalent mental health conditions, depression, and anxiety, economic analysis indicates a [return on investment of at least 4:1](#) in terms of restored health and also productivity.
 5. Implementing the required systemic changes demands bold shifts in the countries' structure and enacting their national strategies to prevent and manage NCDs and mental health conditions as part of primary health care and UHC, including how they position and incorporate those responses within health and development financing plans and resource allocation processes. Bold shifts are particularly relevant in the post-COVID-19 world when health is rapidly being deprioritized, and in the context of increasing humanitarian emergencies due to climate change and conflicts. Governments are struggling with stagnant or declining budgets and must learn to accomplish more with fewer resources. Concurrently, macroeconomic “headwinds”, such as inflation, debt, and reduced productivity from an ageing workforce, constrain the necessary increase in health spending to achieve UHC and effectively address NCDs and mental health conditions. Thus, improving the efficiency of current spending by reallocating funds towards more cost-effective interventions and implementing financing reforms to increase adequate, stable, and predictable revenue, enable strategic purchasing, and control cost escalation as well as financial protection are no longer options; they are necessities.

Objectives, mandate and outcome document

6. The International dialogue on sustainable financing for NCDs and mental health (International financing dialogue hereafter) builds on the outcomes of the first Global Dialogue on Partnerships for Sustainable Financing of NCD Prevention and Control (held in Copenhagen, Denmark in 2018). The objectives of the meeting are to:
 - a. To define and start building consensus among a range of interested stakeholders on actionable strategies and policy recommendations that can enable and enhance the integration of NCDs and mental health responses in national budgets systems.
 - b. To unpack the implications of these strategies and recommendations in varied contexts to inform health financing reforms that can a) sustain adequate, stable, and predictable financing, b) enable strategic purchasing, and c) enhance financial protection.
 - c. To discuss and identify approaches on how to integrate prioritized NCDs and mental health responses within national health and financing plans – with the aim of providing high-quality, equitable NCD and mental health services that are integrated into existing health systems and broader public health ecosystems.
 - d. To inform a forward-looking agenda that can guide countries towards accelerating progress and realizing the targets under SDG 3.4 and 3.8 by 2030 – as a key milestone in the process for the Fourth High-level Meeting of UNGA on NCDs (2025) and beyond.

-
7. The International financing dialogue responds to specific recommendations of UN General Assembly High-level Meeting (UN HLM) on NCDs held in 2011, and further reaffirmed in UN HLMs NCD held in 2014 and 2018, including to “explore the provision of adequate, predictable and sustained resources, through domestic, bilateral, regional and multilateral channels, including traditional and voluntary innovative financing mechanisms”, and to “take measures to develop and implement national policies and plans, with financial and human resources allocated particularly to addressing NCDs”.
 8. Moreover, the International dialogue forms one of the technical meetings in the preparatory process for the Fourth High-level Meeting of the United Nations General Assembly (UNGA) on the prevention and control of NCDs that will be convened in 2025 as requested in resolution A/RES/73/2 and that will be organized in accordance with resolution A75/10 Annex 11 (2022).
 9. The outcome document of the International financing dialogue will aim to guide countries towards realizing the targets under SDG 3.4 and 3.8 by 2030. In addition to actionable national strategies and policy recommendations, the outcome document will set out how stakeholders can effectively align themselves with national strategies and implement the policy recommendations. A draft of the outcome document will be prepared and subject to a pre-meeting online consultation with Member States, nongovernmental entities, and regional offices of WHO and the World Bank.
 10. The outcome document of the International dialogue may serve as technical input into the negotiations among Member States on the outcome document of the Fourth High-level Meeting of the UNGA on the Prevention and Control of NCDs.

Modalities

11. The International financing dialogue will bring together around 150 participants and include representatives from Member States from different sectors (health, finance, development, environment, private, etc.); the World Bank Group, WHO regional/country offices and other UN organizations; and interested non-State actors, including civil society and people living with NCDs and mental health conditions. The International financing dialogue will be held in a hybrid (virtual/in-person) format. There will be a high-level segment and technical plenary sessions accompanied by interactive roundtable discussions.
12. The International financing dialogue will be informed by and built on several relevant reports and publications, as listed below:
 - Report of the first [Global Dialogue on Partnerships for Sustainable Financing of NCD Prevention and Control](#).
 - Final report of the working group on how to realize governments’ commitments to provide financing for NCDs of the WHO Global Coordination Mechanism on the Prevention and Control of NCDs.
 - Papers by the [NCD Countdown 2030 collaborators](#).
 - The Lancet series published by [The Lancet Taskforce on NCDs and economics](#).
 - [The Lancet Commissions on Investing in Health](#).
 - Position papers and briefings on financing by [NCD Alliance](#) and [United for Global Mental Health](#).
13. A technical summary background document based on a series of technical background papers will be prepared and, together with the outcome document, subject to a pre-meeting online consultation with Member States, nongovernmental entities, and regional offices of WHO and the World Bank.

Consultation process

14. WHO and the World Bank will obtain inputs to the summary background document, the technical background papers, and the outcome document from an External Technical Expert Group (ETEG) and The Lancet Commission on Investing in Health (CIH) commissioners. The ETEG is established and represented by academic and research institutions.
15. In addition, WHO and the World Bank organized a multistakeholder briefing, on 15 March 2024, to share with partners an overview of the preparation for the International financing dialogue and outlines of the technical background papers. The multistakeholder briefing comprised relevant non-State actors; United Nations funds programmes and organizations and other intergovernmental and multilateral organizations; private sector and financing institutions.
16. The multistakeholder briefing will be followed by web-based multistakeholder consultations organized from 1 May to 26 May 2024 to enable all interested parties to contribute their views to the summary background document, the technical background papers, and the outcome document.