

## **Governing Board document: 1/2019**

24 Feb 2019

### **Notes from the face-to-face board consultation on 10-11 December 2018**

A face-to-face board consultation was held at the World Economic Forum in Geneva on 10-11 December 2018, attended by board members and several guests as speakers and advisers. The agenda is at GB Doc 19/2018. The list of Board members is at GB Doc 16/2019 and other attendees at GB Doc 20/2018.

#### **OPENING REMARKS**

Welcome remarks were given by Board Chair Dr James Hospedales, CEO Dr Mukesh Kapila, and WEF hosts, Dr Arnaud Bernaert and Dr Vanessa Candeias.

#### **STRATEGY AND PROGRESS OVERVIEW**

Dr Kapila sketched the Partnership's strategy and principal achievements since its initiation in January 2018 and its formal launch at the UN General Assembly in New York in September 2019.

In summary (see the published brochure for details): The Defeat-NCD Partnership has been set up to tackle the most significant global health problem of the age: non-communicable diseases (NCDs) focusing on the major NCDs: diabetes, cardiovascular diseases, chronic respiratory diseases, and cancer. As the first Partnership of its kind, our vision is to enable Universal Health Coverage for all people with NCDs as per Sustainable Development Goal 3. The Partnership is a service provider and also seeks to function as a catalyst for change by leveraging technical partner expertise and assisting partner countries.

The Defeat-NCD mandate covers approx 90 low-income and lower-middle-income countries through four inter-connected tracks of work:

- ⇒ National Capacity Building: Assisting governments to strengthen key institutions and develop costed action plans;
- ⇒ Community Health Scale-Up: Increasing the provision of services for NCDs through community action and health system strengthening;
- ⇒ Marketplace: Expanding the consistent availability of affordable essential medicines, diagnostics, and technologies for NCDs;
- ⇒ Financing: Developing innovative financing models to support low-resource countries in securing financing to achieve universal health coverage for NCDs.

An interim workplan was devised (GB Doc 18) and a progress report had been made available to board members (GB Doc 17/2018). An Annual Report covering 2018 will be done by the end of March 2019.

Comments and reflections:

- The strategy had been well received and universally endorsed as providing the right scope and balance. It should remain evidence-based.
- Good progress had been made in rolling out the initial stages of the strategy including acquiring resources and partners, and initiating programming. A constraint has been the slow pace at which appropriate staff could be recruited.
- Defeat-NCD should endeavour to provide a “big tent”.
- Development and humanitarian plans do not prioritize NCDs and Defeat-NCD addresses this gap;
- SIDS (Small Island Developing States) are highly susceptible to natural disasters, which has led to devastating breakdowns of healthcare systems. Defeat-NCD should expand its coverage by incorporating SIDS into its strategic focus;
- NCD supplies and distribution systems are a particular challenge that increase the end-user price and limit the affordability of drugs; Defeat-NCD will provide a unique and essential service through its marketplace.

**TRACK 1: NATIONAL CAPACITY BUILDING**

Dr Cherian Varghese (WHO) provided a useful global overview on NCDs and Dr Kapila outlined how Defeat-NCD was approaching national capacity building through assessing capacities, opening dialogue with countries, and ensuring that countries had operational costed action plans to provide the mechanism for nationally-led and coordinated frameworks for scaling-up action on NCDs.

**Comments and reflections:**

- The action plans are much needed to provide a practical means to advance the implementation of national NCD policies, strategies, and investment cases.
- Their real value lies in the extent to which they enable domestic and international partners to come together within a coordinated framework and enable necessary resources to be mobilised.
- A multisectoral effort is needed and it is important to avoid verticalised programming and to take an integrated health system approach.
- The issue of gendered accessibility to care as well as gender dimensions to data collection and disaggregation is important to ensure equitable access to services and care.
- Assessing gaps in institutional capabilities and in the overall health system is vital.
- We should use national institutions as much as possible in the rollout of this track e.g. for epidemiological, economic and service delivery studies. That would also help build national capacities.

## **TRACK 2: COMMUNITY HEALTH SYSTEMS AND SCALE UP**

Two presentations made dealing with the employment of technology and community engagement and scale-up of health systems. The first, by the Founder and Chief Mentor of Kuza Biashara Mr. Sriram Bharatam, and the second by the President of the Tajikistan Red Crescent Society, Mr Said Qurbanov, set the stage by illustrating innovative ideas and scaling-up options. For example, the Kuza model is built on the principles of micro-learning, micro-distribution and micros financing to enhance small business and community participation and the Red Cross Red Crescent system can, through its volunteers, provide outreach and scale-up in myriad communities.

### **Comments and reflections:**

- The intent of this track is to ensure that more people have access to NCD prevention and management through empowering and connecting communities.
- Customisation of this track to varied country contexts is important.
- Enabling task shifting is going to be important in scaling-up service provision
- Community-based care and primary healthcare systems needed to connect better both in the public and private sector.
- Digital or e-health and m-health approach had promising potential. But we need a critical prioritisation process for selecting the right digital solutions and innovations.

## **TRACK 3: MARKETPLACE**

Introductory presentations by Mr Dinuke Ranasinghe, CEO of Arcadier and Mr Sam Kim of Chain Action on blockchain technologies set the stage.

The Defeat-NCD marketplace will help countries improve the procurement and distribution of essential medicines and technologies and equipment and ensure their availability and affordability. Its design leverages technology and market dynamics, including pooled purchasing power and online procurement systems, to achieve lower prices, improved quality control, standardization, and more effective supply chain management. The marketplace will also create a competitive environment by creating an accessible online marketplace platform that will serve both buyers and suppliers. It will enable transparency in the system including on pricing. Returns from the marketplace would be shared with countries so that they benefit in several ways beyond more cost effective and efficient supplies provision.

Blockchain technologies can serve as a mechanism for secure and transparent transactions and reduce transaction costs thereby augmenting the functionalities of the marketplace. They can also enable cost analysis with data gathered, and seamlessly connect among different providers and suppliers.

#### Comments and reflections:

- The marketplace will provide fair pricing of medicines, diagnostics and equipment.
- The marketplace would be deployed in lower income countries where the needs are the greatest.
- The other tracks including national capacity building, community health scale-up, and financing are pre-requisites for the success of the marketplace.
- The marketplace will help ensure the sustainability of country NCD programming efforts and eventually reduce dependency on donor contributions.
- The marketplace will create a vetting system on buyers and suppliers to ensure process transparency and access to quality products and to protect the overall integrity of the system. The vetting system will ensure that only quality products will be sold, facilitating the selection process for partner countries and ensuring high-quality investment in necessary medicines, diagnostics and equipment.
- The marketplace will provide tailored platforms to eligible countries and integrate the WHO drug pre-qualification programme to increase the variety of drugs available to countries.
- It will use a percentage of the revenue to ensure the sustainability of operations both at the central level and in partner countries to assist them to build stronger national procurement and supply chain management capacities.
- The marketplace will be designed to have universal integrated capabilities to ensure the system can be integrated into different healthcare delivery systems.
- The Marketplace has the capabilities to create both a national and global pooling system for purchasing, financing and supply chain management of medicines, diagnostics and equipment.
- Overall, the platform will create transparency in pricing, reduce corruption and optimize distribution channels.

#### **TRACK : FINANCING**

A presentation on innovative financing modalities was given by Mr Arthur Wood, Founder of Total Impact Capital Founder.

Current financing structure and incentive structures are misaligned and fragmented. The result is inefficiency and worse.

#### Comments and reflections:

- NCDs are long-term chronic conditions and so long-term financing approaches are going to be needed.
- The current donor-centred traditional financing system is not a sustainable source of financing
- One size will not fit all and that is why financing packages tailored to specific countries and contexts will be needed.

- Hence the importance of properly costed operational action plans which provide the framework and justification for funds required
- The Partnership will help countries to argue for additional fiscal space for health in their national budgets and, as part of that, a greater share for NCDs justified by the population burden of disease.
- Developing innovative financing models are still at an early stage. Ideas include insurance, microfinancing, public-private partnerships, and both social impact and commercial bonds.

## **HOSTING**

The Defeat-NCD Partnership secretariat is hosted at UNOPS, and Mr Moin Karim, Regional Director and Mr William Axelsson, Deputy Director, presented on hosting services provided.

UNOPS, in hosting the Defeat-NCD Partnership Secretariat, provides a comprehensive catalogue of operational, transactional, and advisory services that support processes such as human resources, procurement, grant management, financial management and reporting, trust fund management, general administrative services and audit provision. The provision of UNOPS services allows the Partnership to focus on its technical and substantive work without having to establish these processes. Deriving legal status from UNOPS allows for the strengthening of the Defeat-NCD Partnership through access to diplomatic and other established channels as a United Nations entity.

UNOPS charges various fees for providing these hosting services.

## **GOVERNANCE**

There was comprehensive discussion on the functions and responsibilities of the board. The extant terms of reference and rules of procedure are referenced at Governing Board document 3/2018 dated 31 January 2018 as revised on 7 Feb 2018.

### **Comments and reflections:**

- The current board membership is due to end on 31 December 2018 and will be extended to 31 March 2019.
- As the Partnership has been growing and is expected to continue to do so, the governing mechanism will have to be revised to keep it fit for purpose.
- The CEO is asked to review models and examples and draft and share a revision proposal in Q1/ 2019.
- Consideration for the revised governance mechanism include the need to balance inclusive participation and efficiency of governance processes.
- Another consideration is to ensure that conflicts of interest are transparently managed. Board members are there to serve the best interests of the Partnership only.

- For an effective Board, it is important for it to have its own key performance indicators and mechanisms for monitoring its individual member and collective performance.

### **MISCELLANEOUS AND CONCLUSION**

Mr Michael Moller, Director General of the United Nations in Geneva and Hon. President of the Defeat-NCD Partnership gave a much-appreciated address over dinner. (Attached; referenced as Board Doc 21/2018).

An additional lunch time address was given by Dr Darian Stibbe, Executive Director, The Partnering Initiative. All attendees, speakers, and discussants were thanked. (The presentations of speakers are attached for information).

The generous hospitality of WEF for hosting the meeting was warmly appreciated.

**10 December 2018**  
**Defeat-NCD Partnership Face-to-Face Board**  
**consultation**

Remarks by Mr. Michael Møller  
United Nations Under-Secretary-General  
Director-General of the United Nations Office at Geneva

Defeat-NCD Partnership Face-to-Face Board consultation

Monday, 10 December 2018 at 18:45  
World Economic Forum  
Route de la Capite 91-93, 1223 Cologny

Ladies and gentlemen,

It is a pleasure to be with you this evening. Let me first of all thank Dr. Mukesh Kapila and his team for bringing us together tonight.

A strength of the Defeat-NCD Partnership - you know this well - is the expertise it assembled. And in light of the expertise in the room today, the contribution I want to make is not to offer the specialist's perspective, but rather to take a step back, to take a more general view.

–A view that looks at NCDs not as an isolated issue in itself, but as one piece in a large mosaic.

–A view that sees defeating NCDs not just as an outcome, but a key driver of progress - central to peace; critical to prosperity; and essential for equality.

Because that is what the 2030 Agenda is all about: to make us look beyond the silo of our expertise by helping us recognize how every challenge we face - and every measure we take - has consequences that go further than we may realize at first sight.

Think about what you as health professionals are trying to achieve. Eliminate disease, treat illness. All true. But wouldn't you agree that just as peace is about more than simply the absence of conflict, so too is health not just about the lack of illness? Rather, it's about creating the conditions for well-being, both physical and mental, for every person everywhere.

But to get there, we need more than medicines and vaccinations, important though they are.

To get there, we also need a clean environment, because polluted air causes an alarming 7 million premature deaths each year.

Reducing carbon emission, curbing climate change, and defeating non-communicable diseases are therefore all part and parcel of one and the same effort.

In fact, and this is a key reason why I so readily agreed to become the Honorary President of the Defeat-NCD Partnership, NCDs are in many ways a fulcrum on which much of the 2030 Agenda's success will turn.

With an increasingly globalized world, longer life expectancy, a rapidly changing climate and increasing levels of urbanization, we are witnessing shifts – demographic and otherwise – that see the burden of NCDs rising in all nations.

Today, for the first time, more people are dying from heart disease, diabetes, and cancer than are dying from malaria, pneumonia or dysentery.

I think it's fair to say that there is no one in the world today who does not at least know one family member, friend, neighbour or colleague suffering - or even dying - from NCDs.

The biggest prize we pay is in millions of premature deaths - millions of men and women killed in the prime of their lives, the vast majority of them in developing countries.

But the costs extend further, not only to the people affected, but to vicious cycles of poverty that impoverish families and entire communities; to national budgets and health systems that cannot cope; to the whole global economy that fails to realize its potential.

So, reason one why I joined is rooted in my belief that NCDs are one of the defining challenges of our time.

And reason two is in the name of the initiative itself, and that's "Partnership".

It sounds straightforward in theory, even banal, but it's practical implications are hugely significant: partnership is the only way forward.

Partnership across countries and regions; across actors and sectors.

The other day a journalist asked me about the risks of partnering with the private sector. My response was simply this: the biggest risk lies in not partnering with the private sector.

That's not to deny there are risks. Conflicts of interest between serving the public good and delivering return on equity for shareholders; attempts by corporations to "blue-

wash” their brand by association with the UN. And it’s no secret: Many of the biggest causes of NCDs – like tobacco, alcohol, sugary drinks, and junk food – have powerful industries working on their sides.

And yet, it’s downright ludicrous to think that we can defeat NCDs without - much less against - the private sector.

Which is why we need to find a way of partnering that leverages the strength of business, that stays true to our values, and, above all, that delivers for the people.

And that’s where I see the powerful contribution our partnership can make.

To be more agile and nimble, more flexible and imaginative in our approach by being outside of traditional structures but still connected to them; to harness our broad convening power to build an alliance with unparalleled firepower.

The success this Partnership has had in getting off the ground over these past nine months is encouraging - and it shows there was real demand for exactly that kind of initiative.

It’s no accident, by the way, that it has enjoyed this success in Geneva. After all, it’s exactly the kind of broad-based collaboration and holistic thinking that is in the DNA of this city - and never more so since everyone started to get behind the 2030 Agenda.

That said, let’s not forget that where this partnership will really prove its worth will not be here, on the shores of Lake Geneva; it will be on the ground, in the field, with the people it was created to serve. Success will be determined by the direct impact on individual lives - as fundamental as preventing someone from dying because they could not buy insulin.

The partnership was created to turn words into action; to strip away the alibis; to scale up our fight against the biggest killer on the planet.

And I think we can today say we’re on the right path.

But I would also say that we can never be too ambitious.

Now, I was also asked to share some advice tonight.

And in as much I can do so without belabouring specifics, it would be this: be bolder.

One, be bolder in leadership: my personal philosophy of good leadership can be summed as follows: “do what is right and ask for forgiveness later”. If we don’t take risks; if we don’t accept and forgive failures; well then, we simply won’t be able to get rid of that

business-as-usual approach that bogged so many of our efforts in the past.

Two, be bolder in innovation: one strength of this partnership is its laser-sharp focus on country-level, field-based impacts. But at the same time, it recognizes that local impact is also achieved by tackling global, systemic constraints such as drug prices. Which is why the NCD Marketplace is exactly the kind of innovation that can make a meaningful difference.

And finally, be bolder, be louder in your engagement: NCDs account for two-thirds of all deaths, and yet, only two percent of international health funding to low and middle-income countries has been dedicated to preventing NCDs. This disconnect is incredible. To begin to fix it, we need to engage more aggressively - engage media, engage mayors, engage youth.

I say this often, but it strikes me as particularly true today: we have everything we need to succeed. We have the skills; we have the expertise; we even have the money. What we need now is a much greater political will from our leaders and, above all, to execute - and we need to do so at greater scale and at greater speed. In our case, the case of NCDs, lives literally depend on it.

Thank you.