National accountability and response for noncommunicable diseases in the United Arab Emirates

Ibtihal Fadhil, Buthaina Bin Belaila, Hira Abdul Razzak
Department of Non Communicable Diseases and ‘Statistic and Research Centre, Ministry of Health and Prevention, Dubai, United Arab Emirates

ABSTRACT

Noncommunicable diseases (NCDs) remain significant health and developmental challenge in the United Arab Emirates (UAE). The four main NCDs accounted for 77% of all deaths in UAE and 17% of premature deaths (30–70 years). The UAE National Agenda 2021 reflects high-level political commitment demonstrating strong leadership to address the national challenge and meet the global commitments providing a clear roadmap to guide planning, implementation, multisectoral response, and accountability for NCD Prevention and Control. This paper, therefore, aims to present the national response to NCD highlighting the strong leadership of the government at the highest level in the UAE, together with multisectoral engagements, thus establishing a national accountability framework.

Keywords: Multisectoral action plan, national accountability, national plan, noncommunicable diseases, United Arab Emirates

Introduction

The increasing burden of noncommunicable diseases (NCDs) in the United Arab Emirates (UAE) constitutes a huge public health challenge, associated with tremendous social, economic, and developmental impact. NCDs – principally cardiovascular disease (CVD), cancer, diabetes, and chronic respiratory disease – are responsible for 77% of all deaths in the UAE, and the probability of dying prematurely (before the age of 70) from one of these diseases is 17%.[1] Furthermore, the top five risk factors for NCDs were dietary risks, high body mass index, high systolic blood pressure, high fasting plasma glucose, and high total cholesterol. These are exacerbated by a range of various demographic and lifestyle changes.[2-3] Against this background of rising incidence of NCDs, and the need to accelerate actions toward achieving the National Agenda Targets 2021, the Ministry of Health and Prevention (MOHAP), in partnership national stakeholders, and with technical support from international partners such as World Health Organization (WHO), WHO/EMRO, and Gulf Country Council, developed and implemented a National Multisectoral NCD Action Plan.

In this paper, we describe the national response to NCDs highlighting the strong leadership of the government at the highest level in the UAE, adopting a multidimensional approach to NCD Prevention and Control, with active stakeholder participation. We discuss the establishment of national multisectoral mechanisms and accountability framework as one of the major milestones in NCD Prevention and Control in the UAE.

United Arab Emirates Leadership, Starting from the Top

The UAE government provides a model for high-level commitments and leadership for NCD Prevention and Control.
Control. The UAE Vision and National Agenda 2021 are launched by the Vice-President and Prime Minister of the UAE, recognized NCD as a national priority. The UAE National Agenda, which was established by over 300 officials from 90 federal and local government entities, emphasizes the importance of prevention seeking to reduce NCD morbidity and mortality and promote healthy lifestyle. The National Agenda has been put forth as a comprehensive strategy to improve health, education, infrastructure, economy, judicial process and public safety, and overall social well-being in the UAE. The agenda has a set of performance indicators and targets for each of the six priority areas. Five out of the ten indicators for health focus on NCDs and related risk factors to be achieved by 2021 aimed to reduce mortality from CVDs and cancer, reduce incidence of diabetes among population aged 20–79 years, and reduce incidence of main risk factors, namely obesity and tobacco consumption.

Furthermore, the National Agenda targets and indicators are aligned well with WHO 2025 targets and sustainable development goal (SDG) targets for 2030[8,9] [Table 1].

Multisectoral Mechanisms for Noncommunicable Diseases Prevention and Control

Acknowledging the need to enhance partnership and whole of government approach as emphasized in UAE National Agenda and SDGs goal, in particular goal 17, deals with strengthening and revitalizing the partnership for sustainable development.[10] Several mechanisms have been established to enhance multisectoral mechanisms and coordination for NCD prevention and control, including national committee and national action plan.

National Multisectoral Action Plan for Noncommunicable Disease Prevention and Control (2017–2021)

The political declaration of the UN high-level meeting on NCDs committed all member states to an inclusive set of actions to treat and prevent NCDs with a certain goal to support national multisectoral action plan.[11] Similarly, the global NCD Action Plan 2013–2020 has emphasized on need to develop multisectoral action plan for NCD Prevention and Control, as one of the overarching principles to achieve the WHO Global Targets 2025.[12]

The National NCD Action Plan was developed through a stepwise process of consensus building between the different stakeholders. The MOHAP was keen to initiate the process early in 2013, mainly focusing on situational analysis. A series of consultative meetings were organized to sensitize and motivate all sectors, with the support of the WHO. Subsequently, a draft action plan was developed by the MOHAP and reviewed using a WHO checklist to examine the completeness of a national multisectoral action plan for NCD Prevention and Control. The National NCD Action Plan has four strategic areas: NCD governance; risk reduction and health promotion; early detection; and management of NCDs, surveillance and research, monitoring, and evaluation. There were more than 15 federal ministries and relevant authorities involved in the process of developing and finalizing the NCD National Plan.

To facilitate effective multisectoral engagement, a consensus on role and responsibility has been obtained through progress reporting and addressing achievements from all relevant sectors.

National Multisectoral Noncommunicable Disease Committee

A Ministerial Decree was issued in January 2017 to establish the National Multisectoral NCD Committee. The intention is to develop a platform for multistakeholder policies and coordination; it provides structure for information sharing and policy coherence, oversees the implementation of the NCD Action Plan, and ensures multisectoral collaboration. Accordingly, the MOHAP took the lead to establish the national high-level multisectoral committee in 2017. Various stakeholders nominated members of the committee following the invitation raised by MOHAP. The term of reference for the committee includes:

- Plan, implement, and monitor NCD activities
- Facilitate overall policy harmonization and coordination among various national stakeholders
- Draft the National Multisectoral NCD Action Plan document and oversee the implementation of NCD Action Plan
- Draft the framework for accountability and engagement of various sectors
- Agreed on role and responsibilities and progress reporting.

The MOHAP as a lead facilitator chaired and acted as the secretariat (the engine) for coordinating monthly meetings.

Promoting health through multisectoral actions

The National NCD Action Plan several population-based interventions implemented in partnership with other sectors. Furthermore, more details on plans and policies
### Table 1: National and Global NCD Targets

| National action plan targets on NCDs | WHO targets | SDG target | Global and National NCD Targets |
|-------------------------------------|-------------|------------|---------------------------------|
| Target 1 A 25% relative reduction in the overall mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases | Target 1 A 25% relative reduction in the overall mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases | SDGs Target 3.4. By 2030, reduce by one-third premature mortality from NCD through prevention and treatment and promote mental health and well-being | Number of deaths from cardiovascular diseases per 100,000 population |
| Target 2 A 10% relative reduction in prevalence of insufficient physical activity | Target 3 A 10% relative reduction in prevalence of insufficient physical activity | SDGs Target 3.d. Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks | Prevalence of smoking any tobacco product among adult (18+) |
| Target 3 A 30% relative reduction in mean population intake of salt/sodium | Target 4 A 30% relative reduction in mean population intake of salt/sodium | SDGs Target 3.4. Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all | Prevalence of diabetes among population 20-70 years of age |
| Target 4 A 30% relative reduction in prevalence of current tobacco use in persons aged 15 + years | Target 5 A 30% relative reduction in prevalence of current tobacco use in persons aged 15 + years | SDGs Target 3.d. Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks | Prevalence of obesity amongst children (5-17) years |
| Target 5 A 25% relative reduction in the prevalence of raised blood pressure or contain the prevalence of raised blood pressure, according to national circumstances | Target 6 A 25% relative reduction in the prevalence of raised blood pressure or contain the prevalence of raised blood pressure, according to national circumstances | SDGs Target 3.d. Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks | - |
| Target 6 Halt the rise in diabetes and obesity | Target 7 Halt the rise in diabetes and obesity | SDGs Target 3.d. Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks | - |
| Target 8 At least 50% of eligible people receive drug therapy and counseling (including glycemic control) to prevent heart attacks and strokes | Target 8 At least 50% of eligible people receive drug therapy and counseling (including glycemic control) to prevent heart attacks and strokes | SDGs Target 3.8. Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all | - |
| Target 9 An 80% availability of the affordable basic technologies and essential medicines, including generics, required to treat major NCDs in both public and private facilities | Target 9 An 80% availability of the affordable basic technologies and essential medicines, including generics, required to treat major NCDs in both public and private facilities | SDGs Target 3.8. Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all | - |

SDG - Sustainable development goal, NCD - Noncommunicable diseases, WHO - World Health Organization, TRIPS - Trade-related aspects of intellectual property rights
targeting main risk factors (obesity, physical inactivity, unhealthy diet) strengthened monitoring and ensured the accountability of each sector [Figures 1 and 2].

- In this context, several preventive interventions were launched at national level, aiming to reduce obesity and promote physical activity. To list few\textsuperscript{[13,14]}
  - Dubai Fitness Challenge 30 × 30: The Dubai fitness challenge is a citywide initiative to improve physical activity and promote health among population
  - Healthy restaurant initiative (to reduce obesity)
  - The young chef program (to combat childhood obesity by raising awareness among children)
  - Health heroes (an electronic app to spread health awareness among young generation about healthy lifestyle, healthy eating, physical activity, hygiene, and effect of smoking
  - Art for health competition
  - Hack for life, aimed at promoting healthy lifestyle by raising awareness and reduction in salt intake through communication and behavior change.

**National Accountability**

National accountability is needed to ensure that all relevant stakeholders are held accountable for NCD commitments, recognizing that accountability incorporates three dimensions: monitoring of progress, reviewing of progress, and appropriate responses to accelerate progress.\textsuperscript{[13]}

Similarly, in the UAE, to ensure accountability of all relevant sectors and hold them accountable toward achieving the National Agenda (2021) targets and commitments to NCDs and NCD-related national key performance indicators (KPIs), specifically

1. Number of Deaths from Cardiovascular Diseases per 100,000 population
2. Number of Deaths from Cancer per 100,000 population
3. Prevalence of Smoking any Tobacco Product among adult (18+)
4. Prevalence of Diabetes among population 20–70 years of age
5. Prevalence of Obesity among Children (5–17) years.

The MOHAP as the leading agency for health-related NKPIs established five executive committees as a platform to foster collaboration and coherence across various sectors and oversee the implementation of relevant work plans in coordination with various government and private entities at the national level.

1. Executive Team for Healthy Life Styles’ Indicators
2. Executive Team for Healthcare Quality Indicators
3. Executive Team for Cardiovascular and Cancer Deaths’ Indicators
4. Executive Team for Health Resources and Infrastructure Indicators
5. Executive Team for Health Regulatory Indicators.

On national level, Prime Minister Office (PMO) periodically monitored all NKPIs including NCD-related KPIs to ensure their targets are achieved by 2021. All ministries and federal authorities are required to submit periodic analytical reports on the team’s achievements, progress of initiatives, and NKPI-related results to the PMO.

Figure 3 demonstrates the process of monitoring the national agenda and NKPIs.
Conclusion

The UAE provided a positive response to NCD Prevention and Control, which is in line with the global commitment to achieve the goal of a 25% reduction in premature NCD mortality by 2025 and SDGs targets 30% by 2030.

The National Agenda 2021 stressed the importance of integrating NCD Prevention and Control into developmental agenda, setting up specific NCD-related NKPIs to reduce NCD mortality and NCD risk factors.

The agenda also emphasized the need to adopt a multisectoral, whole of government approach to NCD Prevention and Control and support the active engagement of all stakeholders working together toward achieving the national targets by 2021 and SDGs targets by 2030.

To this end and to facilitate this engagement and contribution from all sectors, a national framework of accountability has been developed with regular or annual monitoring by the PMO. National NCD targets and indicators were mapped to federal and local development plans and aligned with the core mandates of portfolio for other nonhealth ministries and national authorities. Each federal ministry is expected to provide periodic report on the team’s achievements, progress of initiatives, and NKPI-related results to the PMO.

The response of UAE to NCDs characterized strong leadership, multisectoral approach, and national accountability framework often reflects an exemplary model for other countries to replicate.

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Conflicts of interest
There are no conflicts of interest.

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