



**United Nations Thematic Working Group on
Noncommunicable Disease Prevention and Control:
case study – Thailand**

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Design by Diana De León

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ACRONYMS AND ABBREVIATIONS

NCD Noncommunicable disease

SDGs Sustainable Development Goal

TWG Thematic Working Group on NCD Prevention and Control

UN United Nations

UNDP United Nations Development Programme

WHO World Health Organization

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EXECUTIVE SUMMARY

Noncommunicable diseases (NCDs) are the most common killers globally, including in Thailand. While coordinated multisectoral action is essential for addressing the determinants of and reducing the risks for NCDs, there are few examples of how this can be done effectively at country level.

The UN Thematic Working Group on NCD Prevention and Control (TWG) has been an important mechanism for scaling up action on NCDs in Thailand and is considered an example of best practice globally (1). The work of the TWG, its successes and challenges as well as lessons learnt are described below.



The TWG includes 40 members from government, UN, civil society & academia







Participation from 10 UN agencies, 5 civil society organisations, 11 government agencies

United Nations Thematic Working Group on Noncommunicable Diseases in Thailand

STRENGTHS

-  **Multisectoral engagement:** The TWG has brought together stakeholders in non-health sectors, including from the Government, civil society organizations and academia. It also provides an effective platform for joint activities among UN agencies.
-  **Catalyst for advocacy:** The TWG has leveraged its social and intellectual capital to increase advocacy for successful multisectoral NCD actions.
-  **Clear, time-bound goals:** The TWG has followed up on the recommendations of the UN joint mission over 2 years.
-  **Awareness-raising:** The TWG has sensitized non-health stakeholders about the social and economic impacts of NCDs and built collaboration between the Ministry of Health and other ministries, including of Finance.
-  **Example for UN reform:** The TWG has served as a platform for members to work together in supporting the Thai Government in meeting the NCD-related SDG targets.

CHALLENGES

-  **Authority:** The TWG has no formal authority in the country and therefore cannot enforce activities.
-  **Participation and accountability:** Maintaining high-level commitment is difficult; performance could be monitored better and reported to the Parliament and the Prime Minister to sustain momentum on NCD actions.
-  **Collaboration:** The participation of UN agencies and ministries has been variable.
-  **Resources:** Insufficient UN resources for frequent, intensive engagement and activities.

LESSONS LEARNT: RECOMMENDATIONS FOR THAILAND AND ELSEWHERE



High-level commitment by all stakeholders ensures motivation, momentum and change. The UN can play a catalytic role as a mobilizer and integrator.



The NCD coordination mechanism should be given the same **decision-making power** as ministerial departments and government agencies.



Consider extending membership of the TWG to the **private sector**, recognizing its role in mobilizing wide support and shaping policy on NCDs and their risk factors.



Consider integrating NCD coordination mechanisms into broader **country-specific** development frameworks or multisectoral networks to use synergies and avoid duplication.



The targets and goals of NCD coordination mechanisms should be agreed when the TWG is established.



Communication, advocacy and outreach ensure that NCD prevention and control strategies are accepted by non-health ministries and communities.



Human and financial resources for the secretariats of NCD coordination mechanisms are essential for effective coordination, progress and success.



The TWG meets
1-2 times per
year



“The TWG should become a permanent institution in Thailand that sets its own goals, and is not just focused on recommendations from the UN. It can then bring together champions of best practice from the UN side as they have an overview of successful NCD interventions around the world.”

Gita Sabharwal
UN Resident Coordinator in
Thailand



“The battle against NCDs cannot be won by the health sector alone. I urge all government organizations to work hand in hand with the Ministry of Public Health to fight against NCDs together”

Dr Opart Karnkawinpong
Director General
Department of Disease
Control,
Ministry of Public Health

01

BACKGROUND

1.1 Burden of NCDs

Noncommunicable diseases (NCDs) – principally, cardiovascular disease, cancer, chronic respiratory disease and diabetes – are one of the major challenges to development in the 21st century. NCDs account for seven of every ten deaths globally, a staggering 41 million deaths each year, nearly half of which are premature (before the age of 70 years) (2). NCDs not only pose an urgent, alarming threat

to global health and well-being but can also reduce productivity, curtail economic growth and trap people in poverty, thereby holding back individuals, families and countries from realizing their social and economic potential. As NCDs hold back not only health but also social, economic and environmental objectives, the 2030 Agenda for Sustainable Development recognizes that current trends in NCD cannot coexist with sustainable development (3).



NCDs account for seven of every ten deaths globally

NCDs and Sustainable Development

Addressing NCDs is integral to the 2030 Agenda for Sustainable Development (4). Sustainable Development Goal (SDG) target 3.4 includes one-third reduction in premature mortality from NCDs by 2030.

Achieving the NCD-related SDG 3 targets can result in gains throughout the development agenda, given the multi-directional relations between NCDs, poverty, inequality, economic growth, climate action and other SDG goals and targets. Addressing NCDs will also determine success in achieving at least nine other SDGs (5). NCDs are a barrier to achieving SDG 1 (poverty), SDG 2 (hunger), SDG 4 (education), SDG 5 (gender equality) and SDG 10 (inequality). The gains in productivity achieved by preventing and managing NCDs will contribute to SDG 8 (decent work and economic growth). SDG 11 (sustainable cities and communities) and SDG 12 (responsible consumption and production) offer clear opportunities for reducing the NCD burden and creating sustainable, healthy cities. Increasing taxes on unhealthy products such as tobacco and alcohol can strengthen domestic resource mobilization (SDG 17). Progress in these areas would in turn benefit NCD responses.



Thailand, like the rest of the world, is facing an epidemic of NCDs that has serious public health and economic consequences. NCDs are responsible for 74% of all deaths in the country (6). The NCDs are due mainly to a high prevalence of risk factors such as tobacco use, harmful use of alcohol, physical inactivity, unhealthy diets and air pollution. The economic loss from major NCDs to the Thai society was an estimated THB 280 billion in 2013 or 2.2% of the GDP (7).

COVID-19 interacts with NCDs and inequality to form “a perfect storm” of avoidable death and suffering, leading to overburdened health systems, economic contraction and wider setbacks in sustainable development, particularly for people who are already vulnerable. Almost one fourth (22%) of the world’s population is estimated to have an underlying condition that increases their risk of a worse COVID-19 outcome; most of those conditions are NCDs (8). COVID-19 patients with NCDs also face disruption of or limited access to NCD prevention and treatment services, and people with NCDs are more vulnerable to severe illness of or death from COVID-19; diabetes, cancer, chronic respiratory disease and cardiovascular disease are key risk factors for adverse outcomes. Smoking, alcohol consumption, obesity and exposure to air pollution further increase the risks. The strong interactions among NCDs and COVID-19 illustrate the importance of addressing NCDs as a core part of the pandemic response.

1.2 Multisectoral action in preventing and controlling NCDs

NCDs are associated with many risk factors. Five modifiable risk factors – tobacco use, harmful use of alcohol, an unhealthy diet, physical inactivity and air pollution – are prevalent worldwide but unevenly distributed among and within countries. Differences in such risk behaviour and in access to health services (a determinant of

disease outcome) can be traced to inequity in daily life and, more broadly, underlying social, economic, political, environmental and cultural factors (2). Thus, the risk of developing an NCD, access to appropriate treatment and the outcome depend on a complex mix of factors that are the remit of various sectors beyond health.

Thus, the health sector alone cannot effectively curb widespread risk factors or respond to the challenge posed by NCDs. Experience in addressing the social determinants of NCDs demonstrates that policies chosen throughout government – such as on finance, trade, tax, labour, agriculture and education – often have a greater effect on NCD outcomes than health sector policies (2). Significant, complementary action by other sectors and stakeholders is therefore crucial. Multisectoral action was endorsed as a cornerstone of NCD responses in the 2011 Political Declaration on the Prevention and Control of NCDs (9) and in numerous other high-level political decisions.

Securing support from non-health sectors for sustainable national NCD responses, while essential, presents unique governance challenges and requires thorough understanding of political and institutional contexts. Policy, actions and strong law enforcement in non-health sectors are necessary to tackle the determinants of NCDs that are the remit of those sectors, such as air pollution or taxation of health-harming products.

Countries should prioritize low-cost, high-impact interventions for preventing and treating NCDs and mental health conditions, such as those listed in WHO’s “best buys” (10). Implementing such interventions requires governments to work as one and to join forces with other stakeholders.

Actions to address NCDs should be based on whole-of-government, whole-of-society approaches in sectors such as health, agriculture, communication, education,



NCDs are responsible for 74% of all deaths in the country



The economic loss from major NCDs to the Thai society was an estimated THB 280 billion in 2013 or 2.2% of the GDP

employment, energy, environment, finance, food, foreign affairs, housing, justice, security, legislation, social welfare, social and economic development, sports, tax, revenue, trade and industry, transport, urban planning and youth affairs and partnerships with relevant civil society and private sector entities.

1.3 Snapshot of activities in Thailand

The Government of Thailand has shown strong commitment to addressing NCDs in the past decade, with several national commitments, strategies, plans and structures. These include a multisectoral NCD strategy, a sodium reduction strategy, a national tobacco control plan, a national alcohol policy, a national strategy on physical activity and imposition of a 2% excise tax surcharge on tobacco and alcohol to finance the Thai Health Promotion Foundation.

To further strengthen advocacy for multisectoral action to reduce NCD risk factors, a joint mission of the UN Interagency Task Force on the Prevention and Control of NCDs to Thailand was conducted between 28 and 30 August 2018 at the invitation of the Government (11). The joint mission consisted of representatives from 10 UN bodies and four Thai experts. The mission met with the Prime Minister and representatives of ministries¹ and Government agencies as well as civil society organizations, selected private sector entities and academic institutions.

The mission, while recognizing Thailand's remarkable history of tackling public health challenges and its strong political and public health commitment to combating NCDs, noted nevertheless that NCDs still represent a serious threat to health

¹ National Economic and Social Development Board, Ministry of Finance, Ministry of Social Development and Human Security, Ministry of Agriculture and Cooperatives, Ministry of Labour, Ministry of Interior, Ministry of Education, Thai Health Promotion Foundation, National Health Commission Office, Action on Smoking and Health Foundation and Ministry of Public Health.



“Effective NCD prevention and control requires leadership and multisectoral approaches for health at the government level, including, as appropriate, health in all policies and whole-of-government approaches across such sectors as health, education, energy, agriculture, sports, transport, communication, urban planning, environment, labour, employment, industry and trade, finance, and social and economic development.”

Paragraph 36. Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of NCDs (6).

and development in the country. The mission proposed 17 recommendations to the Thai Government and two recommendations for UN agencies in Thailand (11), to take Thailand to the next level of response to the NCD epidemic.

In April 2019, the UN Thematic Working Group on NCDs in Thailand (TWG) was established to follow up on the recommendations of the Joint Mission. The TWG builds upon existing multi-stakeholder structures



Actions to address NCDs should be based on whole-of-government, whole-of-society approaches

in the country and is formed by high-level representatives of Government ministries, civil society and UN bodies. The TWG meets twice a year and is co-chaired by the UN Resident Coordinator and the Director-General of the Department of Disease Control, Ministry of Public Health, with WHO Thailand and the Ministry of Public Health as the secretariat.

1.4 United Nations Thematic Working Group on NCD Prevention and Control in Thailand

According to its terms of reference (12), the TWG was established for 2 years to complement the work of the Thai Government by facilitating multisectoral action for implementation of the recommendations of the joint Task Force mission of 2018. Its mandate was to exchange information, accelerate actions on NCD prevention and control, review progress in the national NCD response and identify opportunities for joint NCD action and

barriers to progress in implementing the Task Force's recommendations.

Since its establishment, the TWG has noted significant advances towards fulfilling the recommendations. For instance, progress in achieving NCD targets is monitored at a high level, and NCDs were considered by a health reform committee established by the Prime Minister. In addition, Thailand was the first country in Asia to introduce a regulation on plain packaging for tobacco products, which has been enforced since 2019, and a tax on sugar-sweetened beverages introduced in 2017 was progressively increased, as scheduled. Many recommendations, however, still require more multisectoral action, such as designation of high-level focal persons for NCDs in ministries, simplifying the tax system, an increased tax on roll-your-own tobacco, better local enforcement of NCD-related regulations and accession to the Protocol to the WHO Framework Convention on Tobacco Control to eliminate illicit trade of tobacco products.



Thailand was the first country in Asia to introduce a regulation on plain packaging for tobacco products, which has been enforced since 2019

Methods

Key informants were interviewed to understand the organization, successes, challenges and expectations of the Thematic Working Group on NCDs in Thailand. The key informants represented:

Government health sector agencies and bodies

Department of Disease Control, Ministry of Public Health; Healthy Lifestyle Promotion Section, Thai Health Promotion.

Non-health ministries

Fiscal Policy Office, Ministry of Finance; Office of National Economic and Social Development

Civil society organizations and academia

Action on Smoking and Health (ASH) Thailand; Thai NCD Alliance; Centre for Health and Policy Management, Faculty of Medicine, Ramathibodi

UN bodies

UN Resident Coordinator, UNDP, UNICEF, WHO Representative in Thailand

Secretariat of the TWG

WHO Thailand Country Office

Although it is widely acknowledged that multisectoral action is crucial to NCD prevention and control, such action is often difficult in practice. One obstacle is sustained, invested engagement of non-health stakeholders. The TWG in Thailand represents a unique platform that

facilitates multisectoral action. We describe here how the Thai TWG differs from other multisectoral mechanisms, the challenges it faces and what other countries can learn from its innovative approach.





02

STRENGTHS OF THE THEMATIC WORKING GROUP



The resulting climate of mutual trust and respect facilitates collaboration between the Government and civil society organizations

Strengths



Multisectoral engagement: The TWG has brought together stakeholders in non-health sectors, including from the Government, civil society organizations and academia. It also provides an effective platform for joint activities among UN agencies.



Catalyst for advocacy: The TWG has leveraged its social and intellectual capital to increase advocacy for successful multisectoral NCD actions.



Clear, time-bound goals: The TWG has followed up on the recommendations of the UN joint mission over 2 years.



Awareness-raising: The TWG has sensitized non-health stakeholders about the social and economic impacts of NCDs and built collaboration between the Ministry of Health and other ministries, including of Finance.



Example for UN reform: The TWG has served as a platform for members to work together in supporting the Thai Government in meeting the NCD-related SDG targets.

2.1 A unique mix of partners for multisectoral action

While there are several multisectoral groups in Thailand, the TWG on NCDs is the most diverse, bringing together representatives of various Government ministries, including the Prime Minister's Office, civil society and several UN agencies. The engagement of sectors and UN organizations allows collaboration

through a central coordinating channel.

The TWG provides a space for stakeholders to share their strengths. For civil society, the TWG represents a platform for direct engagement with government departments. Some focal points in civil society organizations that are part of the TWG are retired Government officials with expertise in NCDs. The resulting climate of mutual trust and respect facilitates collaboration between



“The TWG in Thailand represents an integrated venue providing an opportunity to relevant agencies working on NCDs to share ideas and present advantageous recommendations among members, which are expected to be crucial strategies to reduce premature mortality from NCDs, through prevention and treatment, and to promote mental health and well-being.”

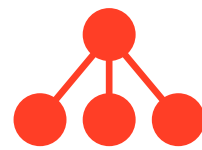
Dr Jinangoon Rojananan
Deputy Secretary-General,
Office of the National
Economic and Social
Development Council

the Government and civil society organizations. Thus, the Government benefits from the technical expertise of senior professionals, while organizations like ASH Thailand and the Thai NCD Alliance can hold the Government accountable, especially to improve enforcement of NCD legislation.

In addition, the TWG provides an opportunity for multisectoral action within the UN and is therefore an effective platform for joint UN activities to tackle NCDs, such as a joint WHO-UNDP op-ed for World No Tobacco Day in 2021; the WHO-UNDP work on the Thailand NCD investment case started in 2020; a set of WHO-UNDP multi-sectoral actions on NCDs policy briefs produced in 2021; a multisectoral meeting on NCDs and the SDGs in 2019; and WHO and UNDP collaboration on tobacco control at provincial level.

2.2 A catalyst for policy advocacy through its social and intellectual “brand”

The TWG in Thailand is a valuable platform for advocacy and awareness-raising by stakeholders. Strong support from the UN not only adds weight to discussions on NCDs with non-health ministries but ensures transfer of knowledge and best practices from other countries. For instance, in following up recommendation number 4.4, UNICEF and WHO collated international best practices and assisted the Department of Health in developing a regulation to ban inappropriate marketing of unhealthy food and beverages to children.



2.3 Strong focus on clear, time-bound goals

A strength that emerged from the stakeholder interviews was the clear goals set for the TWG in Thailand. After its mission, the Task Force proposed detailed recommendations to advance the NCD agenda with pre-defined outcomes, which facilitated implementation. The Task Force mission identified actions not only for the Government but also for the UN country offices, including establishment of the TWG on NCDs to advocate for implementation of the recommendations. In fulfilment of this commitment, the UN supports NCD action in Thailand while remaining focused on clear, time-bound goals.

The TWG provides an opportunity for multisectoral action

2.4 Influence in sensitizing non-health ministries to NCD issues

NCD prevention and control are often considered matters for the health sector only, but this could not be farther from the truth. NCDs are a major economic and social burden



The TWG is a broad platform for convening Government, civil society and academia

and hinder sustainable development in all countries, including Thailand. The TWG has helped raise awareness about NCDs in non-health ministries, such as the Ministry of Finance, and throughout the UN system, including creating momentum in NCD action and increased understanding that NCD prevention and control benefit from the support of UN agencies beyond WHO and UNDP. Recognition that NCDs are not just a health issue is the basis for multisectoral action and a requirement for successful NCD prevention and control. Beyond its recommendations, the TWG has ensured collaboration and discussion among stakeholders. In the biannual TWG meetings, civil society, Government ministries and UN agencies discuss their progress, experience and bottlenecks and ways to overcome problems.



“Through the TWG, we have learnt that fighting NCDs is a multisectoral mission that each ministry, including the Ministry of Finance, plays a significant role in achieving this role.”

Dr Maneekwan Chandarasorn

Director, Excise Tax Policy Division, Fiscal Policy Office, Ministry of Finance

2.5 An example for United Nations reform

The TWG is based on the principles of “Delivering as One UN”, which is at the core of UN reform. By bringing together a variety of specialized agencies, each with its unique capacity, expertise and partner networks, the TWG is a broad platform for convening Government, civil society and academia.

UN agencies and national institutions in the TWG build on the 2011 Political Declaration, recognizing that NCDs are a complex, multidimensional priority in Thailand, and respond to the call of Member States to advance coordinated implementation of multisectoral, cost-effective, population-wide interventions within national initiatives to prevent and control NCDs.



“It feels like the perception within UN agencies has changed. NCD action is getting traction within the UN system, involving more UN agencies beyond WHO.”

Severine Leonardi

Officer in Charge, UNICEF Thailand



03

CHALLENGES TO NCD PREVENTION AND CONTROL IN THAILAND



Multisectoral action on NCDs, such as in the TWG, requires ownership and commitment by all stakeholders

Challenges



Authority: The TWG has no formal authority in the country and therefore cannot enforce activities.



Participation and accountability: Maintaining high-level commitment is difficult; performance could be monitored better and reported to the Parliament and the Prime Minister to sustain momentum on NCD actions.



Collaboration: The participation of UN agencies and ministries has been variable.



Resources: Insufficient UN resources for frequent, intensive engagement and activities.

3.1 Lack of authority

The TWG works is a useful platform for discussing ideas, bottlenecks and progress; however, it can only make recommendations, as it has no formal authority in the country. The TWG therefore cannot enforce follow-up activities but relies on voluntary commitment of stakeholders.

3.2 Maintaining a high level of participation

Multisectoral action on NCDs, such as in the TWG, requires ownership and commitment from all

stakeholders. While there is strong overall commitment to NCD control in Thailand, this is not always reflected in the follow-up and participation by non-health ministries, with decreased participation of high-level officials from those ministries over time. This not only complicates follow-up and communication but also impedes decision-making during meetings. Consistent, high-level commitment must be obtained from health and non-health stakeholders. Furthermore, in some ministries, several departments are involved or interested in NCDs, as is the case for the Ministry of Finance, whereas only one department has been assigned

to the TWG. Without close internal communication within the ministry, representation of individual ministries into the TWG remains limited.

3.3 Variable influence of United Nations agencies on ministries

A unique feature of the Thai TWG on NCDs is that multisectoral action is taken not only by Government agencies but also by resident UN and civil society organizations. Thus, several agencies working on the prevention and control of NCDs are represented on the TWG and collaborate with ministries. The degree of collaboration between and the influence of UN agencies on ministries is, however, variable or limited, especially when several UN agencies have a regional rather than a country office. Practically, this results in different levels of engagement of non-health sectors. Better relations among all UN agencies and the relevant ministries would ensure targeted, knowledgeable support when needed and could improve the commitment of non-health ministries to tackling NCDs.



“The TWG is a good way to raise awareness on NCDs beyond the health sector. However, there is potential to achieve much more, especially with regards to multisectoral action. This would benefit from even more involvement and support from the UN in advocating with their counterpart ministries.”

Dr Wiwat Rojanapithayakorn
Director, Centre for Health and Policy Management,
Faculty of Medicine, Ramathibodi Hospital

3.4 Limited frequent, intensive engagement of United Nations agencies due to Insufficient resources

The TWG meets twice a year to discuss progress. Several members have proposed more frequent meetings and closer follow-up in between meetings in order to maintain the momentum. Monitoring the progress of TWG members is, however, time-consuming, and the UN body in Thailand does not have sufficient human or financial resources for the desired intensity of engagement and support to TWG members. A realistic dedicated budget and human resources to engage with and follow-up with the working group would not only improve communication among the various stakeholders but could also result in more efficient action and recommendations.



Several agencies working on the prevention and control of NCDs are represented on the TWG and collaborate with ministries

04

LESSONS LEARNT AND RECOMMENDATIONS FOR THAILAND AND ELSEWHERE



High-level commitment by all stakeholders ensures motivation, momentum and change. The UN can play a catalytic role as a mobilizer and integrator.



The NCD coordination mechanism should be given the same **decision-making power** as ministerial departments and government agencies.



Consider extending membership of the TWG to the **private sector**, recognizing its role in mobilizing wide support and shaping policy on NCDs and their risk factors.



Consider integrating NCD coordination mechanisms into broader **country-specific** development frameworks or multisectoral networks to use synergies and avoid duplication.



The targets and goals of NCD coordination mechanisms should be agreed when the TWG is established.



Communication, advocacy and outreach ensure that NCD prevention and control strategies are accepted by non-health ministries and communities.



Human and financial resources for the secretariats of NCD coordination mechanisms are essential for effective coordination, progress and success.

4.1 Effective change requires high-level commitment

A TWG on NCDs brings together stakeholders from various sectors to discuss and plan NCD prevention and control. It is therefore a unique

opportunity for true multisectoral action – fighting NCDs from several angles. To ensure delivery and progress during TWG meetings, however, the members should have decision-making power in their sector. High-level commitment from all stakeholders ensures motivation, momentum and change. In addition,

The Royal Thai Government is committed to:

- placing NCDs high on the development agenda and leading national multisectoral work by holding government ministries accountable for developing and enforcing legislation;
- monitoring progress in NCD control and prevention by reporting annually to the Cabinet and the public; and
- investing more in health promotion to make healthy choices available and accessible to people.

General Prayut Chan-o-cha, Prime Minister of Thailand (13).

early high-level support will support the mission and secure wider engagement. In Thailand, the Task Force mission met the Prime Minister and later reported on his support for NCD prevention and control in *The Lancet* (13).

One way to achieve stronger commitment is to appoint high-level focal points in ministries, as recommended by the Task Force Mission. Moreover, the rationale for and the aims of the multisectoral working group must be clearly communicated, with the social and agency-specific benefits of NCD action, to all stakeholders, particularly to non-health partners. This can give a true sense of ownership by all ministries and create understanding that NCDs are not just a health issue.



“Engagement of key ministers, assigning high level officials and strong engagement of UN agencies other than WHO is crucial to improving NCD action through the TWG.”

Dr Prakit Vathesatogkit
Executive Director, ASH
Thailand

4.2 The body must have adequate authority to make decisions

A key problem for the TWG is that it cannot make binding decisions. This makes it difficult to enforce the conclusions of TWG meetings and to ensure that stakeholders take the agreed actions. When establishing a TWG, it would be advisable to embed it into the country’s political structure to ensure that it has the necessary decision-making power. This could be ensured by a dedicated budget line for its activities and by stipulating that multisectoral coordination mechanisms, including on NCDs, report to the highest level of authority in the country, i.e. the Office of the Prime Minister, to ensure effective accountability.



A key problem for the TWG is that it cannot make binding decisions



“The TWG in Thailand has great potential to support NCD prevention & control. To improve its impact and truly allow it to enable change, the UNTWG should be given more authority and a longer timeframe of action.”

Dr Pairoj Saonum
Assistant Chief Executive
Officer, Thai Health Promotion
Foundation (ThaiHealth)



The schedule, organization and functioning of the TWG must be specific to the local context and respect country ownership

4.3 Consider including the private sector, after assessing conflicts of interests

The TWG in Thailand allows communication between and collaboration among several important players towards the common goal of improving NCD action. These include the Government, civil society, academia and UN agencies. The group could be extended to include the private sector, such as the local food producers to increase access to nutritious foods. Insurance companies might be invited to negotiate policy packages that encourage healthy behaviour, such as physical activity.

4.4 The programme should be specific for the country

The schedule, organization and functioning of the working group must be specific to the local context and respect country ownership, contributions and existing mechanisms early in planning. For example, by consulting both Government ministries and members or leaders of multisectoral committees. In Thailand, there are several initiatives for NCD prevention and control, many of which are multisectoral. Collaboration with these mechanisms will not only prevent overlap of responsibilities but also create strong multisectoral networks and situate new initiatives in long-term strategies. An additional benefit of collaboration with existing mechanisms is that the TWG can learn from other initiatives.

Country-specific organization should also consider tailoring the focus of the TWG according to the disease burden and needs. For example, road traffic accidents or air pollution might

contribute to deaths and be added as focus areas, in addition to NCDs.

4.5 Ensure focus

While there is ample guidance on stepwise NCD prevention and control, the breadth of interventions and the intricate relations among sectors can be overwhelming. It is therefore advisable that the TWG have clear priorities to be achieved within a realistic timeframe. Although the goals should be clear, flexibility is necessary to adapt them to the emerging landscape, opportunities and threats.

4.6 The United Nations system should support champions and advocacy

Action on NCDs is often undermined and underserved because of interference by and the vested interests of some groups. Passion and courage are necessary to overcome such interests and to implement policies and strategies to address NCDs. In the past, advances in progressive policies have been led by “champions”, who work boldly, relentlessly and selflessly. Support for champions in both society and government sectors is vital for scaling-up interventions for NCD prevention and control. The UN system should actively support local champions in advocating to policy-makers and the public in the mainstream media and other channels to sustain momentum on NCD action.

The TWG itself can be an effective platform for communication and advocacy. For example, a TWG could invite groups such as the media, parliamentarians or community groups for youth, women and the elderly to explore common grounds, build broader alliances and create social movements.



4.7 The secretariat should provide strong support to engage and collaborate

Successful multi-stakeholder engagement requires strong collaboration and coordination. In the TWG in Thailand, coordination is provided by the WHO secretariat. A coordinating body should not only engage various stakeholders, connect UN agencies with the relevant ministries and organize meetings but should also report on progress at and between meetings and provide follow up. These activities require dedicated

human and financial resources, which, in the case of the Thai TWG, could be increased to fill current shortcomings. Increased budgetary allocation would allow more time to follow up with stakeholders between meetings, address potential bottlenecks and communicate progress to a wider audience. Better communication of the successes of the TWG to politicians, stakeholders and the general public would not only increase awareness about NCDs but, more importantly, demonstrate that, while NCDs are a serious threat to the health and economy of nations, stakeholders are working together to tackle the crisis.

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CONCLUSION

While it is well known that multisectoral action is essential for advancing NCD prevention and control, few countries achieve successful, durable integration of non-health stakeholders in their NCD response. The TWG in Thailand is an example of a successful national mechanism for bringing together various stakeholders to achieve NCD targets. The collaboration of UN agencies, Government ministries and civil society has added immense value to controlling NCDs, thereby contributing to human capital and achievement of many SDGs. Furthermore, clear definition of targets, outcomes and a timeframe have resulted in a defined roadmap, so that time could be spent on discussing key issues rather than on deciding priorities. The TWG has sensitized non-health ministries to NCD issues and, in particular, has strengthened collaboration between the ministries of Health and of Finance.

Nonetheless, the TWG faces challenges in delivering action on NCDs. Insufficient high-level participation by all stakeholders limits decision-making during meetings. In addition, the meetings are not frequent enough to maintain momentum, especially as scarce resources limit the ability of the secretariat to follow

up with working group members individually at the desired intensity.

In summary, the TWG has been useful in developing integrated NCD action. The TWG in Thailand has been gaining resonance as an example of best practice for multisectoral collaboration on NCDs, not only nationally but globally. The TWG in Thailand was highlighted in the 2021 report of the WHO Director-General to the UN Economic and Social Council (1).

Key messages from the TWG in Thailand include the advantages of setting clear objectives and timeframes and the importance of integrating the TWG into existing mechanisms to define its role and authority. Ensuring that the working group is well resourced can make it more effective in implementing and sustaining its mandate, and establishing NCD focal points in relevant ministries can ensure lasting, high-level participation by all stakeholders. Finally, integrating stakeholders into the working group, the roadmap and recommendations will tailor the group to the context and increase country ownership. A TWG or a similar mechanism should be considered as an important means to intensify multisectoral action in all countries.



“What can other countries learn from the Thai experience? Well, it’s not about establishing a task force or thematic group. Rather it’s about outcomes – and defining what success looks like at the onset. In Thailand, we agreed on concrete recommendations with measurable outcomes and specific time frames. We had very strong secretariat support to follow up actions with development partners, and above all high-level political commitment.”

Dr Daniel Kertesz
WHO Representative, Thailand

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ANNEX

Terms of reference of the United Nations Joint Task Force on Noncommunicable Diseases, Thailand

Background: The United Nations Interagency Task Force (UNIATF) on the Prevention and Control of noncommunicable diseases (NCDs) was established by the UN Secretary-General in 2013. Since 2013, the Task Force has conducted over 20 joint programming missions to accelerate action for the prevention and control of NCDs in countries. The Task Force reports annually to the UN Economic and Social Council on progress in countries.

With inclusion of NCDs in the 2030 Agenda for Sustainable Development and a specific target 3.4 to reduce by one third premature mortality from NCDs by 2030, countries are obliged to accelerate action on NCDs. Therefore, a joint mission of the UNIATF on NCDs, comprising UN agencies and Thai experts, was conducted in Thailand during 28–30 August 2018 to catalyse “whole of government” and “whole of society” action for the prevention and control of NCDs and to provide impetus to UN agencies to work together in a coordinated manner to support national work. The Joint Mission made recommendations to take Thailand to the next level of response to the NCD epidemic. To follow-up on the recommendations made by the UNIATF, it is proposed that a UN Joint Task Force on the Prevention and Control of NCDs for Thailand be established, with the following terms of reference:

Proposed terms of reference:

1. to exchange information and review progress in implementation of the recommendations from the UNIATF Mission;
2. to identify opportunities for joint advocacy and action to advance progress for the prevention and control of NCDs;
3. to identify bottlenecks that limit or slow down progress on the implementation of the recommendations and provide the necessary support for overcoming them; and
4. to report progress to the Prime Minister’s office, the national NCD strategic committee and the UNIATF secretariat in Geneva, by sharing minutes of the meetings, including recommendations.

Term: Two years from the date of the first meeting

Chair: The Task Force will be co-chaired by the UN Resident Coordinator to Thailand and the Director-General, Department of Disease Control, Ministry of Public Health.

Frequency of meetings: The Task Force shall meet at least twice a year or more frequently if necessary.

Proposed members:

UN agencies: WHO, UNICEF, UNDP, UNAIDS and any other interested agency

Government ministries: Health, Finance, Education, Interior, Labour, Industry, Commerce and the offices of the National Economic and Social Development Board, the National Broadcasting and Telecommunications Commission and the Office of the Prime Minister

ThaiHealth Promotion Foundation: Dr Supreda Adulyanon, CEO

WHO RTG Country Cooperation Strategy for NCDs: Dr Kumnuan Ungchusak

Civil Society/NCD Alliance: Dr Wannee Nitiyanant, Dr Prakrit Vathesatogkit

Secretariat: WHO Country Office for Thailand. The secretariat will be responsible for preparing and distributing materials, an annotated agenda and the minutes of the meeting.

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