

## **PARALLEL SESSION 3.4**

**NO PROGRESS WITHOUT ACTION: A NEW ERA OF ACCOUNTABILITY TO END  
EMPTY PROMISES FOR NCD PREVENTION AND CONTROL**



## | BACKGROUND

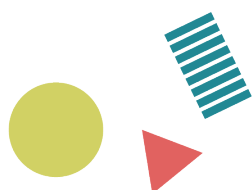
A plethora of global NCD commitments and targets have been made, but ten years since the first UN High-Level Meeting on NCDs it is evident countries are struggling to move to implementation, and the official process to track and review global progress is overwhelming and confusing. 25 outcome indicators, 10 progress indicators, and 2 SDG indicators comprise the global accountability framework for NCDs. Yet many low- and income countries (LMICs) still have inadequate national information systems, the reporting globally on NCDs is not providing the in-depth granular trends that is required to catalyse action, and all reporting on NCD targets and commitments are voluntary (unlike in the case of framework conventions such as the WHO Framework Convention on Tobacco Control or the Paris Agreement which is legally binding).

As has been demonstrated by the HIV/AIDS and women and children's health communities, accountability can be a crucial force for political and programmatic change. Defined as a cyclical process of monitoring, review and action, accountability enables the tracking of commitments, resources, and results and provides information on what works and why, what needs improving, and what requires increased attention. Accountability ensures that decision-makers have the information required to meet the health needs and realise the rights of all people at risk of or living with NCDs, and to place them at the heart of related efforts.

This session will seek to explore if the global accountability framework and architecture for NCDs is fit for purpose. Speakers will explore whether there is ownership and adherence by countries to the international system of declarations, commitments and targets, and if the systems are in place at the country level to ensure accountability; if there is value in a greater focus on independent accountability mechanisms, as has been central pillar of accountability for women and children's health; what are the lessons learnt from other parts of global health governance and other parts of sustainable development (for example the FCTC and other conventions); and what is the role of non-state actors in driving accountability for NCDs (for example, shadow reporting and witnessing).

## | OBJECTIVES

- Review and evaluate the current accountability framework and architecture for NCDs, and explore ways of strengthening it
- Identify lessons learnt from other global health governance and mechanisms, including Framework Conventions, and their implications for NCDs
- Explore the value of independent accountability mechanisms, and the role of non-state actors in accountability.





## Panelist

### Thelma Alafia Samuels

*Director, George Alleyne Chronic Disease Research Centre*

University of the West Indies  
Barbados

Professor T. Alafia Samuels is the Director of the George Alleyne Chronic Disease Research Centre, University of the West Indies in Barbados. She is a medical doctor, trained at UWI Mona. She also holds a MPH (Masters in Public Health) and a PhD in Chronic Disease Epidemiology, from Johns Hopkins University. She is an appointed member of the multi-sectoral Barbados National NCD (Non Communicable Diseases) Commission and was the principal author of the Barbados Ministry of Health Strategic Plan of Action for NCDs 2015-2019. She was the Principal Investigator for the formal evaluation of the CARICOM Heads of Government 2007 Port of Spain NCD Summit Declaration, which received the Vice Chancellors Award for Excellence for Multi-campus research. She is currently the Principal Investigator for the follow-on project, also funded by the IDRC Canada, "Improving Household Nutrition Security in CARICOM" Her research interests include policy and practice in NCD prevention and control, clinical quality of care, evaluation of NCD programmes and translation of evidence