



Agenda item 5

Development of recommendations to strengthen and monitor **diabetes** responses within national NCD programmes, including considering the potential development of targets in this regard

WHO DISCUSSION PAPER
(Version dated 9 August 2021)DRAFT RECOMMENDATIONS TO
STRENGTHEN AND MONITOR DIABETES RESPONSES
WITHIN NATIONAL NONCOMMUNICABLE DISEASE PROGRAMMES,
INCLUDING POTENTIAL TARGETS

CHALLENGES AND OPPORTUNITIES

1. Never in the past has our knowledge been so profound and the modalities to prevent diabetes and treat all people living with diabetes so great. And yet, many people and communities in need of effective prevention, life-enhancing and life-saving treatment for diabetes do not receive them:

- a) There is growing awareness and concern about the large and escalating burden of diabetes. The global age-adjusted prevalence of diabetes among adults over 18 years of age rose from 4.7% in 1980 to 8.5% in 2014.¹ Today, more than 420 million people are living with diabetes worldwide. This number is estimated to rise to 570 million by 2030 and to 700 million by 2045.² One in two adults with diabetes are unaware of their condition and are at great risk of debilitating complications that can be prevented through diagnosis and proper disease management.
- b) The increasing prevalence of diabetes is largely caused by the increasing prevalence of obesity and concurrent physical inactivity. The prevalence of overweight and obesity among children and adolescents aged 5-19 has risen dramatically from 4% in 1975 to over 18% in 2016.³ Only 40% of countries have an operational policy addressing overweight and obesity.⁴
- c) Contrary to the other main noncommunicable diseases (NCDs) the premature mortality for diabetes has increased by 5% from 2000 to 2016.⁵
- d) The global cost of diabetes for 2015 has been estimated at US\$1.31 trillion or 1.8% of global gross domestic product (GDP). While the main drivers of cost are hospital inpatient and outpatient care, indirect costs accounted for 34.7% of the total burden, mostly attributable to production losses due to labour-force dropout and premature mortality.⁶
- e) Twenty-seven percent of countries do not have an operational policy, strategy or action plan for diabetes, and 20% do not have it for reducing unhealthy diet and physical inactivity.
- f) Limited progress has been seen for diabetes towards target 3.8 of the Sustainable Development Goals on achieving universal health coverage (UHC). The WHO UHC Monitoring Report (2019) shows that diabetes health services are conspicuous by their lack of progress as part of universal

¹ Global report on diabetes. Geneva: World Health Organization; 2016

² Saeedi P, Petersohn I, Salpea P, Malanda B, Karuranga S, Ustun N, Colaguri S, Guariguata L, Motala AA, Ogurtsova K, Shaw JE, Bright D, Williams R; IDF Diabetes Atlas Committee. Global and regional diabetes prevalence estimates for 2019 and projections for 2030 and 2045: Results from the International Diabetes Federation Diabetes Atlas, 9th edition. Diabetes Res Clin Pract 2019;157:107843

³ <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>

⁴ Assessing national capacity for the prevention and control of noncommunicable diseases: report of the 2019 global survey. Geneva: World Health Organization; 2020. Licence: CC BY-NC-SA 3.0 IGO

⁵ World health statistics 2020: monitoring health for the SDGs, sustainable development goals. Geneva: World Health Organization; 2020

⁶ Bonnier C, Heesemann E, Sagalova E, Manne-Gochler J, Atun R, Bärnighausen T et al. The global economic burden of diabetes in adults aged 20–79 years: a cost-of-illness study. Lancet Diabetes Endocrinol 2017; 5: 423–30



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<https://www.who.int/publications/m/item/who-discussion-paper-draft-recommendations-to-strengthen-and-monitor-diabetes-responses-within-national-noncommunicable-disease-programmes-including-potential-targets>

Strengthening diabetes responses

Recommended actions for **Member States**

- Strengthen national capacity, leadership, governance, multisectoral action and partnerships to accelerate country response for the prevention and control of diabetes
- Reduce modifiable risk factors for diabetes and underlying social determinants
- Strengthen and orient health systems to address the prevention and control of diabetes through people-centered primary health care and universal health coverage
- Promote and support national capacity for high-quality research and development for the prevention and control of diabetes

Proposed global diabetes coverage targets

The Secretariat proposes five voluntary global diabetes coverage targets to be established for achieved by 2030:

1. 80% of people with diabetes are diagnosed
2. 80% of people with diagnosed diabetes have good control of glycaemia
3. 80% of people with diagnosed diabetes have good control of blood pressure
4. 60% of people with diabetes receive statins
5. 100% of people with type 1 diabetes have access to insulin and blood glucose self-monitoring

Monitoring diabetes responses

Recommended actions for **Member States**

- Develop and strengthen surveillance and monitoring systems for diabetes and other NCD risk factors, guided by WHO NCD surveillance framework
- Develop and strengthen monitoring systems to evaluate the treatment gap and clinical outcomes (morbidity and mortality) and health system performance (capacity and interventions) through the systematic collection of standardized routine facility-based diabetes care indicators

Questions for discussion

- 1) Would Member States agree with the recommended actions to strengthen diabetes responses?
- 2) Would Member States agree with the proposed voluntary global diabetes coverage targets for achievement by 2030?
- 3) Would Member States agree with the recommended actions to monitor diabetes responses?