



Centre For Health Ethics Law and Development

CHELD POLICY BRIEF: NON-COMMUNICABLE DISEASES (NCDS)

FROM POLICY TO ACTION?

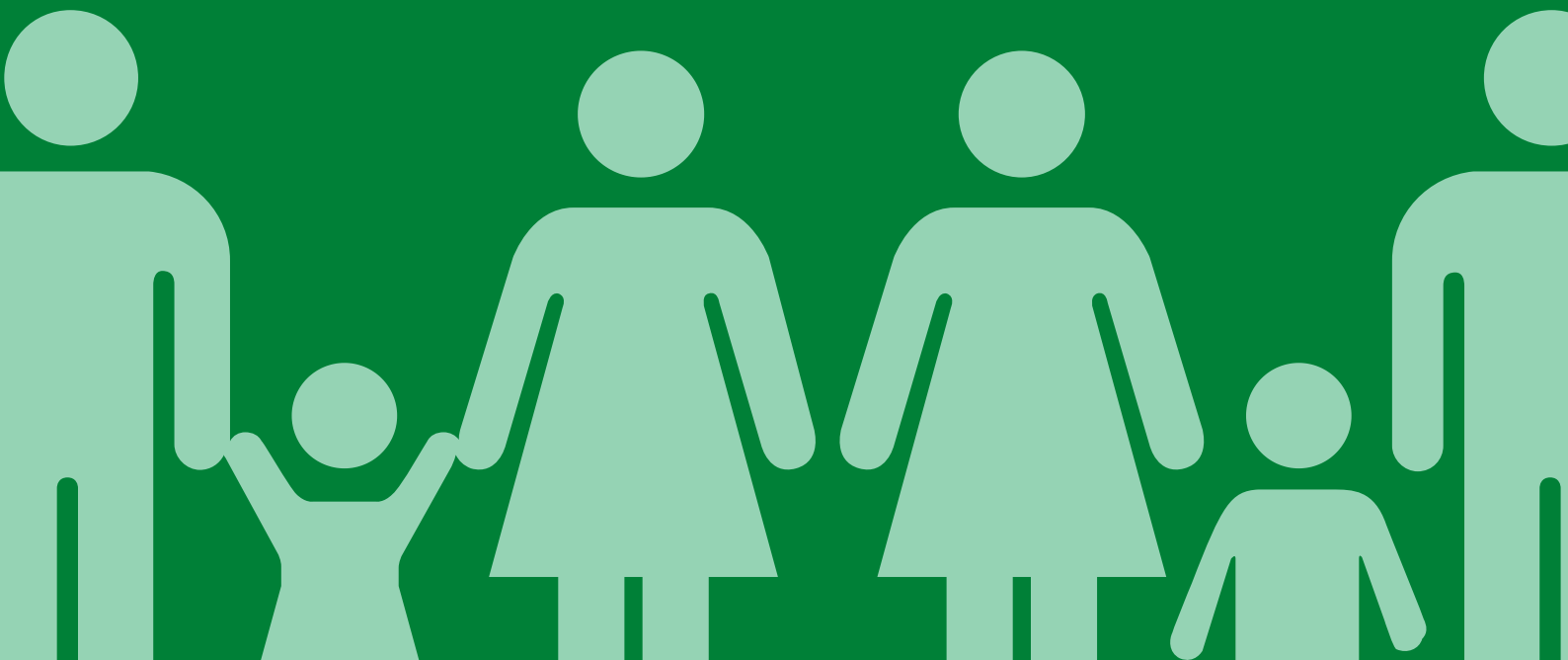


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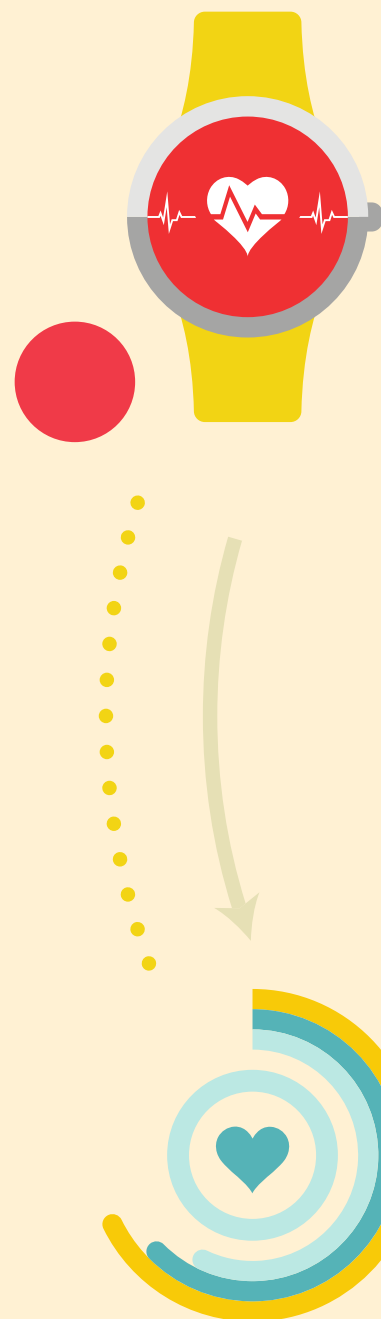
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The Data

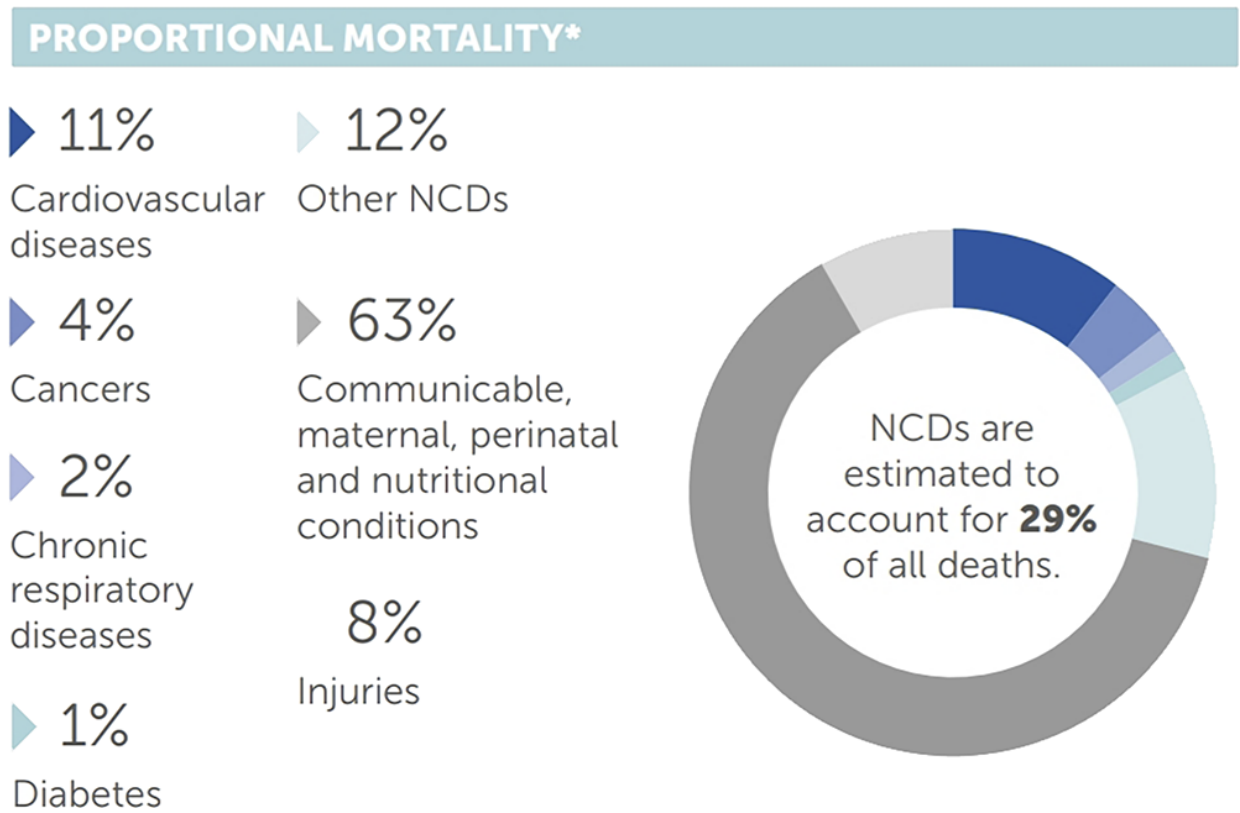
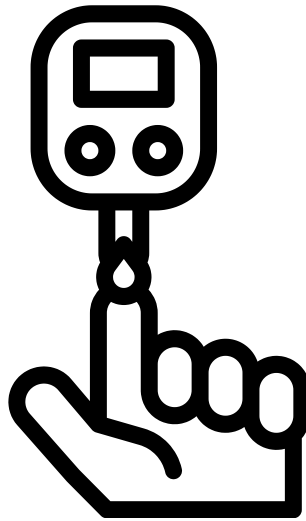


Figure 1. Percentage of NCD related deaths in Nigeria. (WHO, 2018)

In 2018, the World Health Organization (WHO) country profile listed non-communicable diseases (NCDs) as prevalent in Nigeria. The study shows 29% of all deaths, equivalent to 617,300 deaths, were caused by NCDs with cardiovascular diseases (CVDs) accounting for a major percentage (11%), followed by cancers (4%) [1]. A major risk factor of CVDs is hypertension (high blood pressure) and around 38.1% of Nigerians are hypertensive, but a large proportion of the affected individuals are either unaware or unable to afford medication [2]. Additionally, by 2040, the International Agency for Research on Cancer predicts the number of Nigerians diagnosed annually with cancer will double, from around 115,000 to 230,000 [3]. This data suggests the burden of NCDs in Nigeria will increase overtime in the absence of interventions focused on promoting awareness and implementing changes.

Issue Overview



Non-communicable diseases (NCDs), also classified as chronic diseases, cannot be passed from one person to another. These include cardiovascular diseases, chronic respiratory diseases, cancers, diabetes, mental health disorders and sickle cell disease. Primarily, NCDs can be attributed to four major risk factors consisting of unhealthy diets, physical inactivity, use of tobacco and an excessive consumption of alcohol [4] . People across all age groups are susceptible to these risk factors, but a higher percentage of NCD related deaths occur among people aged between 30 to 70 years.


A higher percentage of NCD related deaths occur among people aged between 30 to 70 years



Around the globe, NCDs account for the death of about 41 million people each year, with 85% of these deaths occurring prematurely (between the ages of 30 and 70 years) in low- and middle-income countries [5]. Nigeria, a lower middle income country [6] is disproportionately affected by NCDs, specifically cardiovascular diseases (CVDs).



CVD is a term used in describing conditions that either affect the heart or blood vessels, examples include heart attacks, heart failures and strokes. A major risk factor associated with the onset of these conditions is hypertension (high blood pressure) and people who have unhealthy diets are more at risk of developing a CVD. Unhealthy diets predominantly contain high levels of sodium (i.e salt and packaged foods) intake and excess consumption of trans fat (i.e vegetable oils). In Nigeria, there is a rise in the number of heart attacks associated with the consumption of meals containing industrially produced trans fat such as chin-chin, noodles, akara, doughnut and plantain chips [7]. Excess intake of these meals results in more than the recommended 2.2 grams of trans fat per day in a 2,000 calorie diet being consumed. This leads to an increased level of low-Density Lipo-proteins (LDL), also known as bad cholesterol which further elevates the risk of heart disease [4].



In Nigeria, there is a rise in the number of heart attacks associated with the consumption of meals containing industrially produced trans fat

Therefore, the aggregated findings show the need to implement strategies that curb a rapid surge in the number of deaths overtime, especially deaths caused by CVDs. One of such strategies includes the creation and implementation of an action plan centred on the prevention and control of NCDs in Nigeria. The Federal Ministry of Health (FMOH) in 2013 developed an action plan: National Policy and Strategic Plan of Action [8]. This was revised in 2019 resulting in the National Multi-Sectoral Action Plan (NMSAP).

The main difference between the 2013 and 2019 action plan is the move from exclusively focusing on the health sector as the sole means of controlling risk factors associated with NCDs. This decision can be attributed to risk factors associated with NCDs being present across different sectors including the health sector. Hence, the approach is beneficial because the health and wellbeing of Nigerians is incorporated into sectoral policies which could be more effective in the control of NCDs long term. However, its effectiveness is dependent on the policies being acted upon.

An overview of the National Multi-sectoral Action Plan (NMSAP)



The NMSAP has a clear vision and mission statement. **Vision:** to reduce the burden of NCDs in Nigeria thereby ensuring its population is healthy and the quality of life is enhanced for socio-economic development [6]. While the mission of the NMSAP is to provide a clear strategic framework that strengthens Nigeria's response to NCDs. The framework is guided by the World Health Organization (WHO) tools for a National Multi-Sectoral action Plan. In addition, the NMSAP acts as a guideline that enables Nigeria achieve the Sustainable Development Goal Target 3.4 that aims to reduce premature mortality caused by NCDs by one third before 2030 [9].

Underpinning the strategic framework set out in the NMSAP for 2019-2025 are five specific objectives which cover strategic areas. Each of these areas in succession have priority interventions that aim to address either NCDs or the risk factors associated.

Objective 1: To strengthen governance and stewardship for NCD prevention and control

This involves pushing Nigeria as whole including states and communities towards a healthier lifestyle via the help of governmental and non-governmental stakeholders (i.e academia, professional bodies, lateral agencies and the private sector). In order to accomplish this feat, interventions such as the establishment of a national co-ordination mechanism and an increased budgetary allocation towards NCDs are considered a priority.

Implementing these interventions will involve a range of activities including, but not limited to a National NCD advocacy group, equipping the NCD division with equipment required for policymaking and the establishment of NCD co-ordination units at the state level [6].



Objective 2: To promote a healthy lifestyle and implement interventions to reduce modifiable risk factors for NCDs

Promoting a healthy lifestyle consists of intervening with policies and legislations, alongside incorporating capacity building workshops and trainings across the six geo-political zones. For example, the NMSAP plans to reduce the use of tobacco by enforcing the National Tobacco control Act (2015). This Act regulates various aspects of tobacco control such as the labeling and packaging of tobacco products, advertising of tobacco, tobacco product disclosures and its sales .

Another priority action is the promotion of a healthy diet through the use of effective mass media campaigns to educate the Nigerian public about the risks associated with high levels of sugar, salt and trans-fat intake.

However, promoting a healthy lifestyle cannot be limited to the aforementioned actions, so other priority actions have been mapped out. These include a reduction in the use of alcohol in a harmful manner, the promotion of physical activity and the prevention of disorders associated with mental health and substance abuse.



Objective 3: To strengthen and orient health systems to address prevention and control of NCDs at all levels of care and contribute to the attainment of universal health coverage.

In order to achieve this objective, policy level action, integrated guidelines, pilot projects and workshops/trainings on NCD prevention have to be implemented. To ensure this occurs, health packages and primary health care facilities have to be reviewed to include NCDs at all levels of primary health care.



Objective 4: To monitor trends and determinants of NCDs and evaluate progress in their prevention and control

Ensuring the success of the NMSAP requires a strong surveillance background due to the lack of adequate surveillance programs that were noted during the creation of the action plan. Hence, this objective highlights the need for the collection of data to plan and implement NCD control programs.

Objective 5: To promote and support national capacity for quality research and development for the prevention and control of NCDs.

The technical capacity for research and budgetary allocation for NCDs is poor. This objective aims to develop a national research agenda on NCDs that can be implemented, but to accomplish this the technical capacity for research and budgetary allocation have to be reviewed.



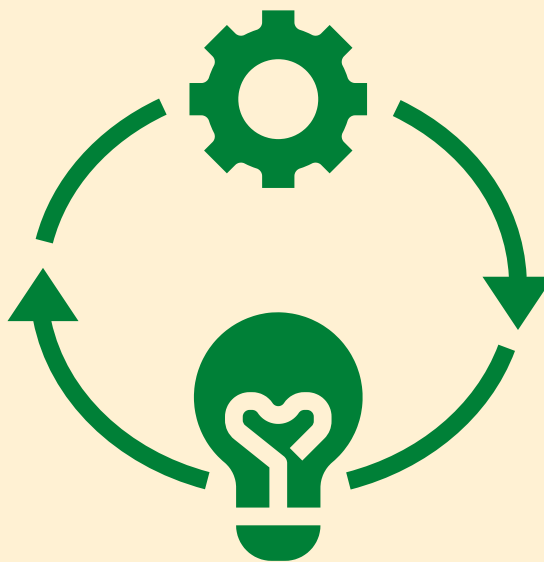
Notable Gaps in the National Multi-Sectoral Action Plan (NMSAP)

The Action Plan is laudable because of its multi-sectoral approach. However there are ongoing gaps particularly in awareness and implementation.



Awareness

In the NMSAP, raising awareness on NCDs and the risk factors was listed as a priority objective and a national target aimed at reducing the prevalence of insufficient activity by 10% was adapted. However, recent findings have shown public awareness on the topic is low. A study by Ikechukwu et al (2020) found the majority of patients living with diabetes were unaware of the positive effects physical activity could have on their health [11]. This finding was further mirrored in a study that investigated the level of awareness on hypertension in Nigeria [12]. The researchers found that the number of Nigerian adults who are hypertensive has increased drastically overtime, although the number of people who were aware of the condition was alarmingly low. This suggests that steps taken to raise awareness on NCDs and their risk factors are currently inadequate across all sectors such as the health sector, private sector and media.

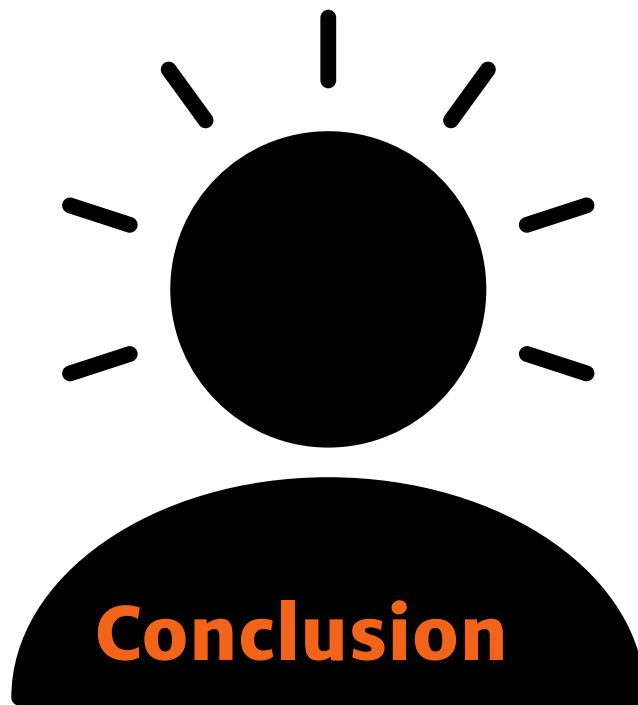


Implementation

There is limited evidence of implementation of the Plan, including implementation of relevant law, policy and regulations as required under the Plan. One major area of weakness is related to the reduction of salt and elimination of industrially packaged trans fats (TFA) in Nigeria. The World Health Organization (WHO)'s 'SHAKE' and 'REPLACE' technical packages respectively are now the standard for reduction and is adopted in the Action Plan. The implementation of such regulations has been slow – there have been delays in the approval of the relevant regulations. For example, the National Agency for Food & Drug Administration and Control (NAFDAC) released a revised fats and oil regulation in 2019 which limits the TFA content to 2g per 100g of total fat in all foods [13]. The regulation was updated to reflect the best-practice limit on trans fat in 2020, but is still a draft and has neither been implemented or enforced [14].

Excessive alcohol consumption is also a major risk factor of NCDs and was linked to ~10% of cancer cases in Nigeria [15]. Although there are NAFDAC regulations which specify labeling requirements for alcoholic beverages to raise awareness on the content and risks associated with its consumption, a large percentage of alcohol producers do not comply to these regulations. A study by Odeigah et al (2021) found that out of 59 beer and spirit drinks reviewed, none of the labels had the six mandatory elements required by NAFDAC [16]. These elements consist of: a list of ingredients, percentage of alcohol by volume (ABV), allergens, a 'drink responsibly statement', nutritional information and age restrictions. The lack of compliance poses a major problem as most consumers are unaware of the associated risks.

Furthermore, under the National Tobacco Control Act, 2015, the National Tobacco Control Regulations 2019 was developed. Implementation of the provisions has been limited [10,17]. Nigeria is also currently taxing below WHO and ECOWAS benchmarks for tobacco, with the implication that tobacco products remain lowly priced in Nigeria and thus more available to all income groups, with the attendant negative health impacts [18].



Gaps identified in the NMSAP highlight areas where change is required to ensure NCDs are controlled and prevented in Nigeria. These changes cut across all sectors, government levels, industries and stakeholders. NCDs have caused a significant amount of deaths in Nigeria and this number is projected to increase overtime. Hence, the implementation and enforcement of regulations stated in the NMSAP is required to curb this increase. In addition, viewing the public as equal partakers in the fight to control NCDs acts as a driver to further generate awareness.

Contributors

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About CHELD

CHELD is a non-profit which focuses on promoting the right to health through various initiatives. One of our key initiatives involves the Control of NCDs programme. Key goals of the programme include improving awareness of NCDs in Nigeria and monitoring the implementation of the National Multi-Sectoral Action Plan (NMSAP) for the Prevention and Control of Non-Communicable Diseases (2019-2025). Other key goals are to support the formulation and implementation of effective laws and policies.

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