Regional advocacy workshop on noncommunicable disease priorities among children and adolescents in the Eastern Mediterranean Region

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Abstract

Background: There has been a surge of noncommunicable diseases (NCDs) globally, and particularly in the Eastern Mediterranean Region. Data indicate a notable prevalence of NCD risk factors among children and adolescents, including physical inactivity, tobacco use, as well as high salt, sugar and fat intake, highlighting the need for urgent actions.

Aim: To present key recommendations and follow-up actions from a workshop on noncommunicable diseases among children and adolescents in the Eastern Mediterranean Region.

Method: In March 2023, the WHO Regional Office for the Eastern Mediterranean held a workshop in Oman which discussed the challenges, early interventions, policy changes, and prioritization of NCDs prevention for children and adolescents in the region.

Results: Participants, including a considerable representation of the youth group, shared experiences on risk factors, prevention, treatment, and suitable platforms for NCD care among children and adolescents, and the importance of systematic monitoring and evaluation. Following the workshop, the youth were engaged in the development of a region-specific NCDs intervention roadmap.

Conclusion: Further youth engagement, multisectoral collaborations, and the establishment of dedicated national authorities to oversee proposed interventions are needed to reduce premature deaths due to NCDs by one-third by 2030, as indicated in the Sustainable Development Goals target 3.4.

Keywords: Noncommunicable disease, children and adolescents, physical inactivity, tobacco use, unhealthy diet, economic crisis, conflicts


Introduction

NCDs in a different light

Noncommunicable diseases (NCDs) include cardiovascular disease, cancer, diabetes, chronic lung disease, and mental health conditions. The main risk factors for NCDs are physical inactivity, unhealthy diet, tobacco use and alcohol abuse (1). For years, these were typically associated with adults (2), but the trend has clearly changed in recent years. Many of the risk factors associated with NCDs are modifiable but are prevalent among both adults and younger populations (6–19 years), as they are facilitated by the environment and policies. Exposure to these risk factors often begins during childhood and adolescence and sometimes before conception (3,4).

NCDs account for 74% of all deaths globally, and 42% of deaths among under-70s (5), and contributes significantly to disabilities. NCDs were responsible for additional 100 million healthy life years lost in 2019 over the 2000 figures, over half of the disability-adjusted life years (DALYs) among adolescents, and approximately 20% of deaths among individuals aged 10–19 years (6). Chronic conditions due to NCDs require long-term care, leading to catastrophic health expenditures, especially in low- and middle-income countries (LMIC) (7), where NCD-related services are rarely covered under the health benefits packages.

A growing challenge in the EMR

NCDs are particularly prevalent in the Eastern Mediterranean Region (EMR), accounting for 66% of all deaths, reaching up to 89% in Lebanon, and 86% in Tunisia, Bahrain and Egypt. They are responsible for 55% of premature deaths in the region (4). NCD-related risk factors, including physical inactivity, tobacco use, as well as high salt, sugar and fat intake are prevalent in the EMR countries (8). Around 10% of total deaths among all ages in the region in 2015 were attributable to high Body Mass Index (BMI) (9), and 10.7 million DALYs resulted from mental disorders (10). Some 58.9% of the causes of years lived with a disability (YLDs) among adolescents aged 10–14 years in the EMR were related to NCDs (12). NCDs accounted for more than half of the disease burden and disability among adolescents aged 10–19 years in the EMR (11). The Global School-based Student Health Survey (GSHS) in the EMR estimates the prevalence of overweight and obesity among children and adolescents aged 13–17 years as 19.8% and 9.7%, respectively. It further estimates that 86.1% did not practice sufficient physical activity and 17.8% used tobacco (12).
The EMR also faces other challenges due to conflict, climate change and economic hardship, which negatively impact the availability and affordability of healthy foods and triggers mental health issues among populations in the region (13,14). Although there is growing awareness of NCDs, only 10 of the 22 countries in the region reported adopting a standalone or integrated policy or plan for addressing mental health issues among children and adolescents (15). Early interventions to prevent NCDs, including the promotion of breastfeeding and healthy lifestyles at the community level, and the ban on marketing of unhealthy foods, are yet to be scaled up and accelerated (16,17).

**Workshop on noncommunicable diseases among children and adolescents**

The Sustainable Development Goals (SDGs) adopted by the United Nations General Assembly in September 2015 include the ambitious target 3.4 to reduce premature mortality due to NCDs by one-third by 2030 through prevention and treatment, and to promote mental health and wellbeing (18). Evidence shows that involving children and adolescents in implementing health-related interventions targeting them is crucial for programme effectiveness and sustainability (19–22).

Regional workshops are an efficient medium for exchanging knowledge and sharing best (and worst) practices to catalyse actions for putting adolescents and children at the focus of NCDs prevention and management programmes. In March 2023, the Oman Ministry of Health, in collaboration with WHO and NCD Child, hosted a regional workshop on NCD priorities for children and adolescents (23). The workshop highlighted the need to rethink how NCDs are addressed in the region based on the perspectives of the target population. Over 60 participants from 13 countries (Bahrain, Egypt, Islamic Republic of Iran, Jordan, Kuwait, Lebanon, Morocco, Oman, Pakistan, Somalia, Sudan, United Arab Emirates, and Yemen) and other key stakeholders convened over 3 days to discuss how to prioritize actions on NCDs for children and adolescents. Over 25% of the participants were youth and approximately 10% were high school students below 18 years of age.

The workshop aimed to shift the paradigm in addressing NCDs among children and adolescents across the continuum of care in EMR countries. Besides highlighting country best practices, participants discussed: (i) prevention of NCD risk factors; (ii) management and treatment interventions; (iii) viable platforms to deliver NCD care; and (iv) monitoring, evaluation, and accountability for NCDs. Participants shared their experiences, highlighting success stories and challenges, with a focus on opportunities for policy planning at the country level across 4 domains: governance, prevention of risk factors, health systems, and surveillance. Multiple intervention concepts, including priority interventions, were identified with crosscutting and country-specific recommendations, based on each country’s demographic and geographic characteristics as well as health system capabilities and available resources.

**Post-workshop engagement**

Following the workshop, Omani stakeholders across various sectors followed up with the group of students and youth leaders to develop a roadmap for NCD-related interventions among Omani children and adolescents. WHO/EMRO continued to engage with youth from the NCD Child delegation to develop an implementation roadmap for NCDs priority interventions for children and adolescents in the region. NCD Child has been involved in the WHO Youth Council and continues to provide a platform for young people to discuss NCD issues.

**Conclusions**

Considering the discussion in the workshop and during the follow-up consultations, there is a need to further empower young people on NCDs prevention and care through various partnerships. We encourage more countries in the EMR and globally to conduct consultations with diverse youth groups on the issue. Children and adolescents should be recognized and involved as major targets and partners for NCD interventions, knowing that their behaviours can still be directed and adjusted for healthy lifestyles. We suggest that every country assigns a national authority to evaluate its proposed roadmap and ensure that interventions are inclusive and multi-sectoral.
non transmissibles chez les enfants et les adolescents dans la Région.

**Méthode** : En mars 2023, le Bureau régional de l'OMS pour la Méditerranée orientale a organisé un séminaire-atelier à Oman pour discuter des défis, des interventions précoces, des modifications de politiques et de la priorisation de la prévention des MNT chez les enfants et les adolescents de la Région.

**Résultats** : Les participants, parmi lesquels on observait une représentation considérable du groupe des jeunes, ont partagé leurs expériences sur les facteurs de risque, la prévention, le traitement et les plateformes appropriées pour la prise en charge des MNT chez les enfants et les adolescents, ainsi que sur l'importance d'un suivi et d'une évaluation systématiques. À l'issue du séminaire-atelier, les jeunes ont participé à l'élaboration d'une feuille de route d'intervention sur les MNT spécifique à la Région.

**Conclusion** : Un engagement accru des jeunes, des collaborations multisectorielles et la mise en place d'autorités nationales spécialisées pour superviser les interventions proposées sont nécessaires pour réduire d'un tiers les décès prématurés dus aux maladies non transmissibles à l'horizon 2030, comme indiqué dans la cible 3.4 des objectifs de développement durable.

### Références


