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Document on development of draft global action plan on public health response to dementia for regional committees

This document contains background information on the development of the draft global action plan on a public health response to dementia. The action plan, in preparation by the Secretariat at WHO headquarters as requested by the 139th session of the Executive Board in decision EB139(1), will be submitted for consideration by the Seventieth World Health Assembly in May 2017. Information on the web-based consultation process planned for September and October 2016 with Member States and nongovernmental organizations is also included.

Document on development of draft global action plan on public health response to dementia for regional committees

(version 25.07.2016, MSD)

Background

1. Dementia is a public health issue currently affecting more than 47 million people worldwide. These figures are expected to rise to 75 million by 2030. Nearly 60% of people with dementia currently live in low- and middle-income countries (LMICs) and most new cases (71%) are expected to occur in those countries. Yet, the gap between the need for treatment and care for dementia and their provision is wide, ranging from 50% to 80% in high-income countries and as high as 90% in LMICs. Lack of awareness and an inadequate understanding of dementia are often to blame, resulting in stigmatization and barriers to diagnosis and care.
2. Although dementia mainly affects older people, it is not a normal part of ageing. Dementia is one of the major causes of disability and dependency among older people worldwide. Dementia can be overwhelming not only for the individual who has dementia, but also for their caregivers, families and society as a whole. It costs billions – in 2015 the global cost of caring for people with dementia was estimated to be US\$818 billion – 1.1% of global gross domestic product (GDP). By 2030, this figure is estimated to have more than doubled to a staggering US\$2.0 trillion, which would undermine social and economic development globally. In high-income countries, informal care (45%) and formal social care (40%) account for the majority of costs, while the proportionate contribution of direct medical costs (15%) is much lower. In LMICs direct social care costs are small and informal care costs (i.e. unpaid care provided by the family) predominate.

Key activities undertaken by the Secretariat to address the global challenges posed by dementia

3. In 2012, WHO launched the report “Dementia: a public health priority”, developed together with Alzheimer’s Disease International, to raise awareness of dementia as a public health priority and to advocate for action at international and national levels to improve services for people with dementia and their caregivers. WHO participated in the G8 summit on dementia hosted by the UK in 2013, as well as follow-up G7 legacy events which highlighted the need for dementia research and innovation; cross-sector partnerships and knowledge translation; supporting people with dementia and their caregivers; and raising awareness and reducing stigma.
4. In order to have a more concerted and unified response to maximise impact and reach of efforts, WHO hosted the First Ministerial Conference on the Global Action against Dementia in Geneva in March 2015. In the Conference’s ‘Call for Action’, the importance of promoting and monitoring global and national efforts on dementia was highlighted. This has been followed by the initiation of development of Global Dementia Observatory to provide a knowledge exchange and translation platform to support evidence-based dementia service planning and strengthening of policies in health and social care system for dementia.

Organizational Context

5. The Executive Board in its 139th session noted that the response to the global burden of dementia can be greatly enhanced by a shared commitment among Member States and all other stakeholders to put in place necessary policies and resources for care of people with dementia,

to promote research, to find disease-modifying treatments or cure, and to give adequate priority to action against dementia in national and global political agendas (EB139/DIV./2).

6. The Executive Board has therefore requested the Director-General to develop, with the full participation of Member States and in cooperation with other relevant stakeholders, a draft global action plan on public health response to Dementia, with clear goals and targets, for consideration by the Seventieth World Health Assembly, through the 140th session of the Executive Board (EB139/DIV./2, 10 June 2016).

Process

7. In response to the Executive Board's decision, a zero draft action plan is to be developed in consultation with Member States, UN agencies and other non-state actors such as relevant NGOs, private sector entities, academic institutions and philanthropic organizations, a number of mechanisms are being put into place including virtual and face-to-face consultations.

8. July - August 2016: Internal consultations and zero draft of the global action plan on public health response to dementia

- Internal consultations with Regional Offices and relevant WHO HQ departments to develop the "zero draft of the global action plan on public health response to dementia".
- The zero draft will include proposed vision, cross-cutting principles, strategic objectives and a set of recommended actions which, when performed collectively by Member States, international partners and the WHO Secretariat, will improve the care and quality of life of people with dementia and their families and caregivers
- Supporting WHO background material will be made available on the MSD website in the first week of August under the following link (please refer to Annex A for list of background materials): http://www.who.int/mental_health/neurology/dementia/action_plan_consultation/en/index.html
- The 'zero draft' of the global action plan on public health response to dementia would be available for online consultation through a specific website in the first week of September 2016. http://www.who.int/mental_health/neurology/dementia/action_plan_consultation/en/index.html

9. Early September to mid-October 2016: Consultation via web-based platform

- Member States and UN agencies are invited to submit their comments in response to the 'zero draft' by participating in a web-based consultation or by sending an email to whodementia@who.int. The web-consultation will start in the first week of September and remain open until 15 October 2016.
- Non-state actors (NSAs) including relevant NGOs, private sector, academic institutions, philanthropic entities and other stakeholders are also invited to participate in the web-consultation or provide feedback using the same email address.

- WHO Regional Offices, Member States and relevant NGOs are being invited to organize face-to-face consultations or webinars at regional, sub-regional or national level as part of upcoming RCs, side-events to RCs or other regional, sub-regional and national meetings.

10. October 10th and 11th 2016: Informal consultation at mhGAP Forum

- The WHO Secretariat will convene an informal consultation with Member States, UN agencies and NGOs on the 'zero draft' as part of the mhGAP Forum, which will be held in Geneva, Switzerland on 10 and 11 October 2016. Member States are expected to be represented by their Geneva based missions.

11. End-October 2016: Summary of comments available

- A summary of all comments received from Member States, UN agencies and other non-state actors during the consultation process will be posted on the abovementioned website in an aggregated, anonymous format separately for member states, UN Agencies and non-state actors.

12. November 2016: Revised draft prepared and submitted to Executive Board

- The outcomes of the consultation will serve as input for the WHO Secretariat to prepare a revised draft of the Global Action Plan on public health response to Dementia which will be submitted in November 2016.

Input required from Member states

13. During the entire consultation phase, Member States as well as UN agencies and relevant NSAs are invited to provide guidance on the proposed vision, cross-cutting principles, strategic objectives, actions, indicators, targets and any specific regional context.

Annex A: Supporting WHO background materials

- **WHO/ADI (2012): Dementia – a Public Health**
Priority: http://apps.who.int/iris/bitstream/10665/75263/1/9789241564458_eng.pdf

- **First Ministerial Conference on Global Action Against Dementia (2015):** <http://www.who.int/mediacentre/events/meetings/2015/global-action-against-dementia/en/>

- **Thematic briefs for the first Ministerial conference:**
 - a) *The epidemiology and impact of dementia*
 - b) *Supporting informal caregivers of people living with dementia*
 - c) *Ensuring a human rights based approach for people living with dementia*
 - d) *Dementia: a public health*priority http://www.who.int/mental_health/neurology/dementia/thematic_briefs_dementia/en/

- **Call for Action (2015):**
http://www.who.int/mental_health/neurology/dementia/call_for_action/en/
 - Arabic: http://www.who.int/mental_health/neurology/dementia/call_for_action_ar.pdf?ua=1
 - Chinese: http://www.who.int/mental_health/neurology/dementia/call_for_action_ch.pdf?ua=1
 - English: http://www.who.int/mental_health/neurology/dementia/call_for_action_en.pdf?ua=1
 - French: http://www.who.int/mental_health/neurology/dementia/call_for_action_fr.pdf?ua=1
 - Russian: http://www.who.int/mental_health/neurology/dementia/call_for_action_ru.pdf?ua=1
 - Spanish: http://www.who.int/mental_health/neurology/dementia/call_for_action_es.pdf?ua=1