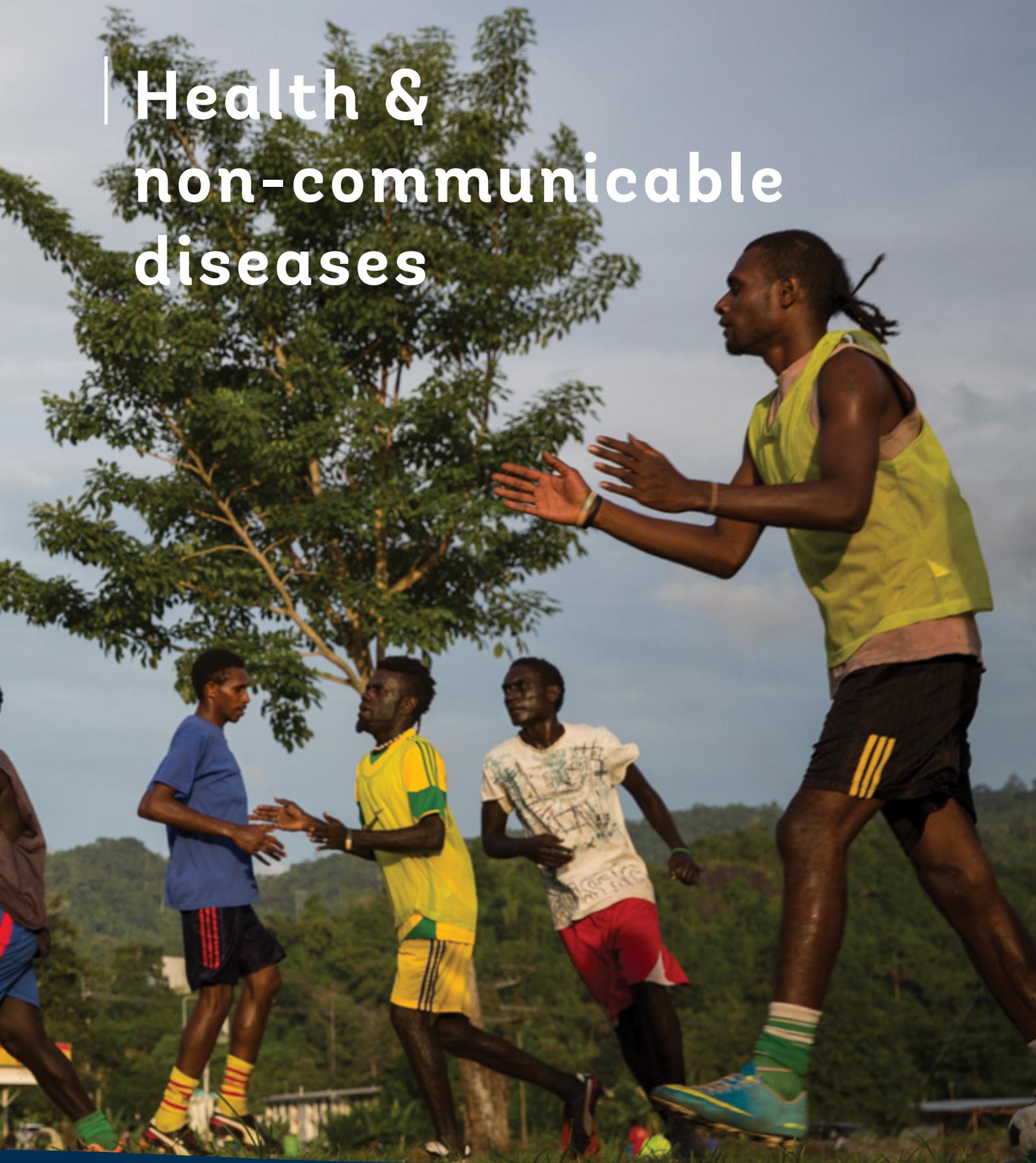


# | Health & non-communicable diseases



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# What is the opportunity?

- Non-communicable diseases (NCDs) are already causing a health and economic crisis in the Pacific, with most of the trends and risk factors pointing to a substantial worsening of the situation.
- Pacific Island countries that successfully pursue measures to prevent and control noncommunicable diseases will be able to reduce the costs of NCDs and generate broader economic benefits.
- The *Pacific Possible: Health and Non-Communicable Diseases* report examines the current health challenges facing the region and presents strategies to mitigate the costs of non-communicable diseases in the Pacific.

## BACKGROUND

Currently, non-communicable diseases (NCDs) – especially heart disease, cancer, diabetes, and chronic respiratory disease – kill around 38 million people each year globally. Almost three-quarters of NCD deaths occur in low- and middle-income countries.

NCDs are now the leading cause of death in most countries in the Pacific Islands region, ranging from an estimated 60 percent of deaths in the Solomon Islands to 80 percent of deaths in Fiji. NCDs are also a key driver of *premature* (under 70 years of age) deaths in most of the Pacific Island Countries, with rates measurably higher than the average across lower-middle income countries worldwide.

Yet the capacity to respond to this growing challenge is severely constrained due to the already high absolute and relative levels of government expenditure on health. Given generally low, or at least volatile, economic growth and limited capacity to increase tax revenue from a still emerging private sector, governments have increasingly limited scope to allocate more resources for health in a way that is financially sustainable.

The *Pacific Possible: Health and non-communicable diseases* report examines the current health and health financing challenges facing the region and presents strategies to mitigate the costs of NCDs in the Pacific.

## PACIFIC ISLAND COUNTRIES COVERED IN THE REPORT:

**Fiji · Kiribati · Marshall Islands · Federated States of Micronesia · Palau  
Papua New Guinea · Samoa · Solomon Islands · Tonga · Tuvalu · Vanuatu**

## CURRENT SITUATION

Pacific Island leaders have formally declared an NCD “crisis” in the region. The percentage of Pacific Islanders affected by NCDs is expected to rise substantially in the coming decades if action is not taken. The main causes of the projected NCD increase are high rates of population growth; a growing over 60-years segment of the population; and behavioral risk factors, including tobacco use, lack of physical activity, and unhealthy diet.

In addition, diabetes is particularly prevalent in the Pacific. The Pacific contains seven of the top ten diabetes-prevalent countries in the world. Diabetes places particular health burdens on individuals and families, is a complicating factor related to other NCDs, and has significant long-term financial impacts on Pacific governments.

## THE OUTLOOK

NCDs directly affect the *quantity* of the labor force through premature death of workers, or through disability as the result of a stroke, diabetic-related blindness or amputation. NCDs also affect the *quality* of the labor force through absenteeism, additional diseases co-occurring including mental health issues and disability.

The biggest driver of lost output is the potential loss of labor due to early death from NCDs.

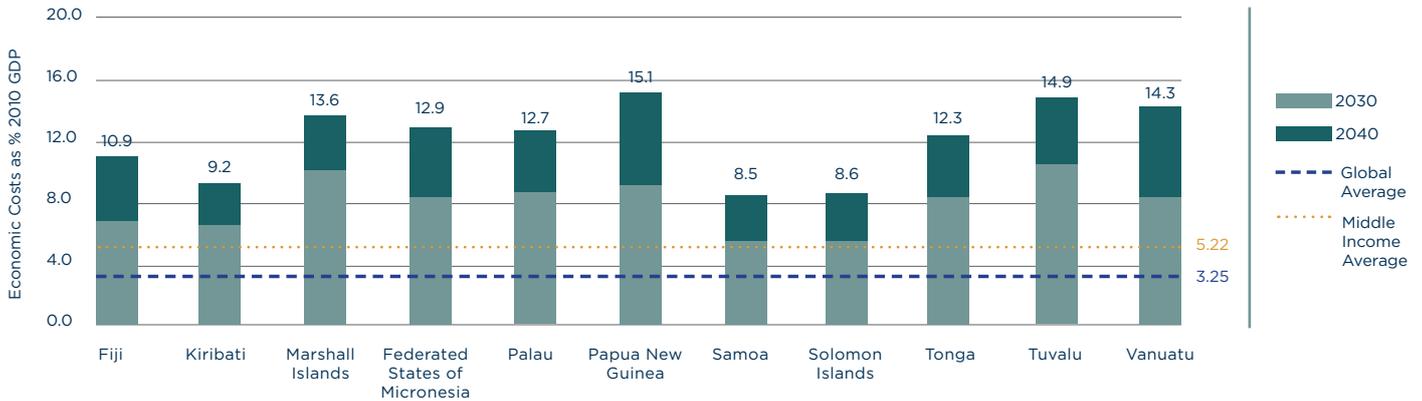
### **Four results stand out in terms of projected economic costs of NCD mortality/morbidity analyses in the Pacific:**



- 1 The economic burden of NCDs in the Pacific is greater than expected for middle-income countries;
- 2 Although cardiovascular disease is the biggest contributor to the mortality burden in the region, diabetes plays a far greater role in the Pacific countries compared to the global average;
- 3 The economic burden of NCDs is increasing with time, especially as incomes rise;
- 4 Estimates show that in the absence of the four biggest NCDs, the labor force could be at least nine percent, and up to 30 percent larger.

With this in mind, targeted interventions to reduce disease prevalence are vital to reducing the long-term costs associated with NCD mortality/morbidity.

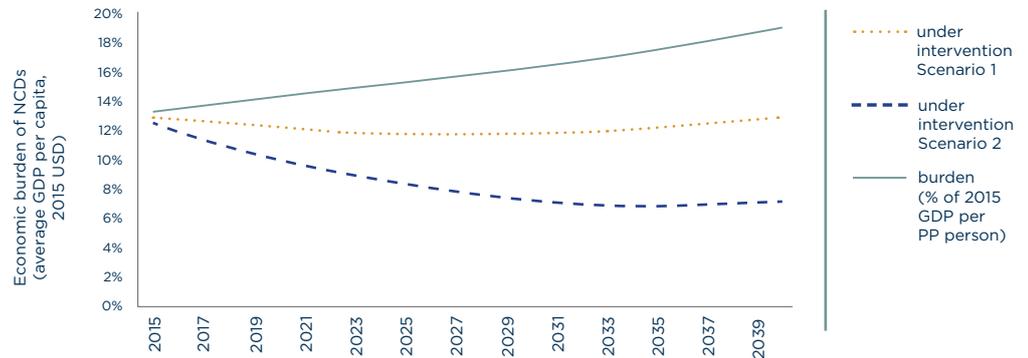
## Economic burden of four main NCD categories as a proportion of GDP, 2030 and 2040



Source: Staff calculation.

**However, the overall national cost curve associated with NCD morbidity can be modified or bent through interventions targeted to reduce disease prevalence.**

NCDs are preventable and manageable. The modeling demonstrates that the NCDs cost curve can be bent at a national level with substantial economic, as well as obvious health benefits. Intervention methods to reduce incidence will vary for individual countries, but there are a set of interventions which are considered cost-effective and best-buys based on international evidence.



In Scenario 1, NCD prevalence was reduced by three percent over the previous year with a discount rate of five percent. In Scenario 2, NCD prevalence was reduced by six percent over the previous year with a discount rate of five percent.

## How can this be realized?

A *NCD Roadmap* was undertaken to provide analysis and recommendations based on the best available international evidence for effective, feasible, and “best buy” strategies to mitigate the impacts of NCDs in the Pacific. The *NCD Roadmap* has a suite of evidence-based, feasible, affordable, cost-effective and in some cases cost-saving interventions specifically designed for the Pacific Islands. The *Roadmap* highlights four key strategies that, with **effective implementation**, can begin to bend the NCD cost curve.



**Strengthen tobacco controls through incremental increases in excise duties.**



**Improve the efficiency and impact of the health budget by reallocating scarce health resources to targeted primary and secondary prevention measures for cardiovascular disease and diabetes, including through the Package of Essential NCD interventions of “best buys.”**



**Reduce consumption of local and imported food and drink products that are high in sugar, salt, and fat content through policies such as targeted preventative measures, taxes, and better regulation.**



**Strengthen the evidence base to enable better investment planning and program effectiveness, thereby ensuring that interventions work as intended and provide value for money.**

**“EVIDENCE-BASED, FEASIBLE, AFFORDABLE, COST-EFFECTIVE AND IN SOME CASES COST-SAVING INTERVENTIONS CAN REDUCE THE IMPACT OF NON-COMMUNICABLE DISEASES IN THE PACIFIC ISLAND COUNTRIES”**



# WHAT IS Pacific Possible?



Pacific Island countries face unique development challenges. They are far away from major markets, often with small populations spread across many islands and vast distances, and are at the forefront of climate change and its impacts. Because of this, much research has focused on the challenges and constraints faced by Pacific Island countries, and finding ways to respond to these.

This paper is one part of the Pacific Possible series, which takes a positive focus, looking at genuinely transformative opportunities

that exist for Pacific Island countries over the next 25 years and identifies the region's biggest challenges that require urgent action.

Realizing these opportunities will often require collaboration not only between Pacific Island governments, but also with neighbouring countries on the Pacific Rim. The findings presented in Pacific Possible will provide governments and policy-makers with specific insights into what each area could mean for the economy, for employment, for government income and spending.

## LEARN MORE

To learn more, visit [www.worldbank.org/PacificPossible](http://www.worldbank.org/PacificPossible), or join the conversation online with the hashtag #PacificPossible.