Canada's International Development Research Centre Launches Program to Fund Non Communicable Disease Prevention Research in Developing Countries

Janis Geary (University of Alberta) News Reporter (HSI 2011-2012)

In July 2011, Canada's International Development Research Centre (IDRC) announced the launch of a program that will provide funding to research projects in low- and middleincome countries (LMICs) to assist in their fight against the rise in non-communicable diseases (NCDs). The program, called the Non-Communicable Disease Prevention program (NCDP), has been approved for an initial 5 years of funding (2011-2016). NCDP will target funding to academic researchers leading initiatives with the potential to generate local evidence for creating policies which are low cost but have a high impact on reducing the NCD burden through prevention. The NCDP is more than just a funding program, and funded researchers receive support to develop, implement, and compile evidence effectively.

The program responds to the rising burden of NCDs on developing countries. 63% of all deaths worldwide are attributable to NCDs, which have now replaced infectious diseases as the global leading cause of death.¹. The World Health Organization (WHO) estimates that of the 9 million people who died prematurely from NCDs in 2008, 90%

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of those were in LMICs. According to the NCDP Program Leader, Greg Hallen, preventing NCDs is the key to reducing disease burden: "It's becoming clearer and clearer that the burden of NCD is already upon us and rapidly getting worse, and that no country, least of all low- and middleincome countries can afford to treat themselves out of it. It is a rapidly developing problem that cuts across all borders and requires the development of low cost, preventive solutions."

NCDs include cardiovascular diseases, diabetes, cancer, and



Tobacco use is one of the four common risk factors for development of non-communicable disease.

chronic obstructive respiratory diseases. They share four common risk factors of unhealthy diet, physical inactivity, tobacco use, and alcohol misuse. IDRC's NCDP will focus its research funding on policies which address these four common NCD risk factors, and cost-effective communitywide interventions that have potential to be scaled up to address the common risk factors in a broader population.

The high burden of morbidity and mortality due to NCDs in developing countries has an impact on development, which is the focus of organizations like IDRC. Hallen points out that it's not just the high number of deaths that are causing problems in LMICs: "Both morbidity and mortality impact development. People, especially in LMICs are dying earlier, in the productive years of their lives and being less productive due to chronic illnesses that require expensive or unaffordable treatments." The WHO predicts that in LMICs, NCDs will be responsible for the loss of three times as many productive years (due to disability or premature death) than communicable diseases by 2030.²

The NCDP isn't an entirely new concept but an extension of IDRC's successful Research for International Tobacco Control program (RITC). For over 15 years RITC has been providing funding and support to LMICs to address tobacco use. Although IDRC recognized the opportunity to apply their success in tobacco control to NCDs, it was critical for them to not lose this focus on tobacco control to credibly address all NCDs. One reason that the RITC was a large

Health Science Inquiry



IDRC's successful Research for International Tobacco Control program (RITC).

success was because IDRC approached tobacco use as a multi-sectorial issue. Hallen points out: "Most of the work to address NCDs has been in high-income countries, and most of that work has been done in the health sector. This, of all health problems requires a multi-sectoral response. Even if health services quickly do all they can to prevent NCDs, it would be useful, but by no means anywhere near what needs to be done by other sectors to address the risk factors for NCDs."

One area where RITC has experienced success is in supporting research on fiscal policies for tobacco control. Hallen says that "Fiscal policies can help to adjust the affordability and accessibility of different products and create a differential between healthy and less-healthy products, making the health products more affordable and accessible.". NCDP also aims to support research that balances health and commercial interests and to understand the potential rules of engagement with the food industry that may help to increase the accessibility and affordability of healthy foods.

One of the first steps taken by the NCDP after it was announced in July was to put out two calls for concept notes. While the program is open to receiving ideas and concept notes from researchers in LMICs at any time, this was an attempt to generate new interest in this research at the early stages of the new program. The calls were for policy related research on healthy diets and on fiscal

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policies for tobacco control, and are open to applicants who are citizens or permanent residents of a LMIC and also have a primary work affiliation with a LMIC institution. The goal is to accelerate funding for research on low cost and cost-effective policies to increase the availability and consumption of healthy foods and to generate sustainable fiscal policies that reduce tobacco use. NCDP received almost 140 concept notes. "This high level of interest helps us to build a program of research around these issues and is an indicator for development agencies and funders of the increasing need for resources in this area."

To learn more about the NCDP, please visit the program website at: http://www.idrc.ca/EN/Programs/Global_ Health_Policy/Non-Communicable_Disease_Prevention/ Pages/default.aspx

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Janis Geary

Janis Geary is a 2nd year PhD student in the School of Public Health at the University of Alberta. After completing her undergraduate degree in Microbiology at the University of Manitoba, she moved to Edmonton to complete a Masters degree in Global Health. Since completing her masters she has been Project Manager for the Canadian North Helicobacter pylori Working Group. For her PhD, she is working on a project titled "Enhancing Trust and Communication in North-South Research Collaborations: A commons theoretical framework to equitable use and management of databases and biorepositories to support translational biomedical research".