

FREQUENTLY ASKED QUESTIONS (FAQs)





WHAT IS THIS INITIATIVE ABOUT AND WHAT ARE ITS OBJECTIVES?

There is growing recognition that non-communicable diseases (NCDs) dominate health care needs and expenditure in all developed and most low and middle-income countries. They are also the biggest killers. Heart diseases, strokes, cancers, diabetes, and chronic lung disease cause an estimated 36 million deaths every year. Most low and middle-income countries are now facing a double burden of communicable and non-communicable diseases, and the urgency of addressing this problem has already been expressed by a UN Political Declaration in 2011. To bring this into context, the only other time in history that the UN General Assembly convened to discuss a health issue was for AIDS.

This new initiative is a unique joint project between the UN health and telecommunications agencies to use mobile technology, in particular text messaging and apps, to help member states combat the growing burden of NCDs. Mobile phones have already been successfully used in different health fields, improving access to health services, training health workers, and assist individuals to manage their diseases. They are also extremely cost-effective. A number of countries have also used mobile technology to monitor and control NCD risk factors. This initiative will take successful pilots to the world stage through a global UN, private sector and government partnership dedicated to providing mobile solutions for NCDs.

MAIN STRATEGIC OBJECTIVES

- Scale up already successful and cost effective technologies for NCDs, which have been proven at a pilot level and make them available for the world.
- Harness the "best" technology in the world to make it available to Member States to help them address their burden of Non-communicable diseases by validating technology for results, quality assurance and cost effectiveness.
- Help develop cost effective tools and devices, and innovative solutions, to help reduce the global burden of NCDs.
- Strengthen the capacity of local stakeholders towards optimal and efficient use of available resources.
- Create standards and guiding principles that would assist governments and citizens to quickly access and adopt the new tools and devices.
- Showcase the synergy between UN agencies, private sector and government institutions.
- By focusing on the WHO "best buys" for NCDs, this initiative will contribute to saving millions of lives and reduce the economic burden to society due to NCDs.



WHAT ARE THE KEY ACTIVITIES AND DELIVERABLES OF THIS INITIATIVE?

GLOBAL LEVEL ACTIVITIES

- Program coordination and management through a joint mHealth UN secretariat and steering committee.
- Development and dissemination of lessons learned, guidelines, case studies, literature reviews and other technical tools for effective support of the replication and scaling-up of mobile NCD projects and initiatives in other countries. These will be presented in a "tool-box" format where countries can pick and choose options depending on their needs.
- Mobilize stakeholders and resources at global level and link with other NCD mobile initiatives to support the development of WHO-ITU activities. This can also include launching international challenges to stimulate innovation and make sure that innovations are linked to actual needs.

THE "MHEALTH FOR NCD TOOL-BOX":

- 1. **Best Practices**: such as "best apps for NCDs", case study series, literature review, projects database, etc.
- 2. **Content:** including database of validated content and Community Health Workers (CHWs) eLearning materials and professional development curricula for NCD prevention and treatment.
- 3. **Technology solutions and platforms:** including available validated m-apps and service delivery platforms that are preferably Open, standardized, secured and modular that can be reused by countries for NCD prevention and treatment.
- 4. **Deployment Strategies and Business models:** This can include the development of materials such as "mHealth Standard Operating Procedures (SOPs), marketing strategies and sustainable business models.
- 5. **Policies:** that induce an enabling environment for scalable and sustainable mHealth services.
- 6. **Monitoring, Evaluation and Evidence:** including evaluation methodologies and mHealth for NCD impact assessments.

COUNTRY LEVEL ACTIVITIES

Project formulation and Design: Identification of specific needs that the mobile NCD initiative will address; engagement and official commitment from government and cross-sectoral partners; formulation of a detailed country project document.

Support Country Project Implementation: providing support to implement project components as outlined in the country project document including providing content, policy, and regulatory advice; providing technical assistance for applications development; capacity building; monitoring and evaluation; and dissemination of best practices.



WHAT ARE THE TARGET COUNTRIES?

Eight countries will be targeted in four years. Countries will be selected representing different regions, income levels and demonstrating high disease burdens and political commitment. Decisions will be made by the WHO-ITU Steering Committee on which countries to select and why.

Costa Rica has been officially selected as the first country, and the government has chosen to focus on mobile technology for smoking prevention and helping smokers quit. The Ministry of Health has already committed significant local resources to support the cessation programme and to promote healthy smokeless lifestyles using mobile and social media in collaboration with local partners including ministries of health, ICT and education, Institute of Alcoholism and Drug Dependence, the Social Security Fund and the Costa Rican Institute of Sport and Recreation among others.



HOW WILL THIS INITIATIVE BE MANAGED?

A programme coordination and management unit (secretariat) at the Headquarter level at WHO and in ITU will be in charge of the overall management and coordination with different partners. This joint unit, comprised of staff working in both organizations, is responsible to broker partnerships with partners, develop annual work-plan, coordinate PR and communications activities for the initiative, report to donors and parties, conduct background research and prepare documentation for the steering committee, provide administrative and secretariat support and assistance to the steering committee and the technical expert groups, and to disseminate and share lessons learned. The programme coordination and management unit will work closely with a:

Steering Committee: The overall project will be governed by a steering committee formed from representatives from ITU and WHO. The Global Steering committee would be comprised of directors from WHO and ITU with technical competencies in NCDs, technology and telecoms. The steering committee will define the overarching goals and vision of the project; approve and validate technical recommendations made by the Technical Expert Groups, approve the workplans for the initiative, provide guidance to the coordination and management team to ensure that the project implementation reflects those goals and vision; monitor project implementation to ensure that milestones are met; support the resolution of issues that arise during the course of the project; and exercise any other powers and authority, and discharge any other duties and obligations, as ITU and WHO may mutually agree upon.

Technical Expert Groups: Technical Expert groups will be established on an ad-hoc basis by the steering committee to advise ITU and WHO on technical matters relating to the components identified above of the "mHealth for NCD Tool-box" e.g. content, monitoring and evaluation and design of mHealth NCD projects, etc. Such groups can provide expertise through informal and web based consultations and can provide face to face advice as needed. The group shall be composed of subject matter experts and shall prior to their appointment be subject to conflict of interest assessment by WHO and ITU. Partners can suggest experts to join the expert groups but experts, following their membership approval by the Steering Committee, will act on their own individual capacity once being part of the group.



WHAT ARE THE BENEFITS FOR PARTNERS TAKING PART IN THIS INITIATIVE?

- Opportunities to be part of a Global initiative at scale.
- Opportunities to network and share experiences and success story with wider global audience from private sector, academia, governments and other public sectors.
- Opportunities to participate in specific country implementations to replicate and upscale success stories.
- **P**R and visibility opportunities to build a reputation of a leader in the mHealth space.
- **7** Get the Early mover advantage in developing a sustainable mHealth business model.
- Opportunities to contribute in identifying best practices and models for replication as an expert in the mHealth space.
- Opportunity to contribute in addressing one of the major disease burdens in the world.
- Opportunities to showcase private sector and public sector partnerships.
- Opportunities to trail new mobile technology approaches to monitoring & evaluation of health projects



WHAT ARE THE ROLES OF ITU AND WHO?

- Resource Mapping: identify success stories, technology solutions, and "who is doing what" in the mHealth for NCD space.
- Coordinate: the work of the technical expert groups and partners towards reaching initiative objectives.
- Mobilize countries: to implement mHealth for NCD intervention and get high-level government and local partners commitment.

- Validate: NCD Prevention and Treatment Health content and services/solutions that will be delivered through mobile channel.
- **Evaluate:** interventions for cost effectiveness and health outcomes.
- Build capacity: in areas where there are gaps at national level.
- Promote: results and best practices.
- Mobilize Resources
- **7** Link with Ministries of Health and Finance at global and country level



HOW CAN PARTNERS CONTRIBUTE TO THIS INITIATIVE?

In Kind contributions:

- **7** Share experiences and expertise (health, ICT, mobile, innovation, financing etc)
- Suggest experts to the Technical Expert Groups.
- Collaborate in specific country implementation (contribute human and technical resources)

Financial contributions:

Financial contributions can be made to support both global and country levels activities. A total of 9m\$ has been estimated to cover the cost of global operations and support initial implementation in 8 countries over a 4-year period.

It is important to understand that WHO will not be the recipient of any direct private sector funding for this project. All such contributions will be made directly to ITU in its capacity as the administrative agent of this initiative.



WOULD THERE BE A FORMAL PARTNERSHIP AGREEMENT?

Yes, a formal "Letter of Agreement" can be signed with the ITU (as the lead coordinator for this initiative) detailing areas of collaboration and both in-kind and financial contributions. ITU will provide detailed activity reports including technical and financial description of how the support is being used. Parties will be reflected on the ITU website for the initiative and in the annual reports.



HOW WILL THE WORK OF THE TECHNICAL EXPERT GROUPS BE ADOPTED BY COUNTRIES?

The Technical Expert Groups will establish recommendations for a "model implementation" covering the different components mentioned above within the scope of specific diseases (e.g. Diabetes) or specific type of intervention (e.g. mCessation) and building on the collective experience and knowledge of world class experts. Following the review, validation and approval of the Steering Committee, those recommendations will be made available for the "country implementing partner" (e.g. Ministry of Health or a local partner) who will adapt and adopt them to country's own context. A detailed evaluation will be conducted following the implementation to capture lessons learnt and identify best practices to be disseminated later on at a global level.



ARE THERE ANY TARGETED APPLICATION AREAS:

The application areas will be marked across Prevention, Treatment and Enforcement for NCDs. These will be identified by the countries based on their priorities. The targeted applications will grow based on requirements: some of the current list of targeted applications include:

Prevention

- 1. mAwareness including healthy diet, physical activities, NCD prevention
- 2. mTraining for Health Workers
- 3. mWellness
- 4. mSurveillance

7 Treatment

- 1. mDiabetes for disease management, and support in treatment
- 2. mBehavioural Change e.g. Tobacco cessation , healthy diet, salt reduction, obesity control
- **7** Enforcement
 - 1. mIllicit
 - 2. mGeoMapping

