



**HOW SELF-CARE
CONTRIBUTES TO
THE PREVENTION
AND MANAGEMENT OF
NONCOMMUNICABLE
DISEASES**



**GLOBAL
SELF-CARE
FEDERATION**

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BACKGROUND ON NCDs AND PUBLIC HEALTH DISCUSSIONS

Accounting for 74% of all deaths globally¹ and with those suffering from conditions such as hypertension, diabetes, or other chronic conditions numbering in the billions around the world, NCDs have gained worldwide prominence in public health discussions over the past few decades. This has been reflected in the major commitments made by governments and industry, under the global guidance of the United Nations (UN) and the World Health Organization (WHO). **The WHO Global NCD Action Plan 2013-2030** and the **UN Sustainable Development Goal's Target 3.4** provide essential guidance and monitoring frameworks to demonstrate the global progress in preventing early mortality from NCDs.

Despite these commitments and efforts, the latest report by WHO Director General, Dr Tedros Adhanom Ghebreyesus, at the seventy-fifth World Health Assembly on the “Political declaration of the third high-level meeting of the General Assembly on the prevention and control of noncommunicable diseases” highlights that since 2010 “progress in preventing and controlling premature death from NCDs has been inadequate”. The challenge is particularly prevalent in Low and Middle-Income Countries (LMICs), where 85% of premature deaths (between 30 and 69 years old) recorded in the world by NCDs are registered.²



¹ WHO (2022) Noncommunicable diseases Progress Monitor 2022. Available at <https://www.who.int/publications/i/item/9789240047761>. Access in August 2022.

² NCD Alliance (2020) NCD ATLAS BRIDGING THE GAP ON NCDs THROUGH CIVIL SOCIETY ACTION Initiatives of national and regional NCD alliances. Available at: https://ncdalliance.org/sites/default/files/resource_files/NCDatlas_NCDalliance_Feb2020_FINAL.pdf

According to the WHO, the NCD burden is growing at a higher rate due to an increase in common risk factors including tobacco use, physical inactivity, unhealthy diets and use of alcohol, in parallel to an ageing population. As well as contributing to a rise in multi-morbidity, these epidemiological changes are occurring in health systems that are underfunded, ill-adapted to managing chronic diseases and to providing access to affordable medicines.³

The importance of a globally coordinated response to tackling NCDs has been even more evident since the COVID-19 pandemic. This new reality has forced national health systems to divert resources to the pandemic response while compromising much needed treatments for NCDs. As a result, nearly half of the countries reviewed reported disruptions to one or more services treating NCDs.⁴

Therefore, it is imperative that healthcare systems provide innovative solutions to not only treat these diseases and their symptoms, but also to prevent and tackle their risk factors and causes. This paper looks to provide evidence that self-care is a key practice in supporting healthcare systems to better prevent and manage NCDs. It does this by changing the paradigm to a more person-centred approach, that views people as active decision-makers in their own health, not merely passive recipients of health services.⁵ Finally, this paper will provide recommendations for policymakers, so they are able to integrate self-care into the global response to NCDs and their overburden on healthcare systems.



³ David Beran, Hanne Bak Pedersen & Jane Robertson (2019) Noncommunicable diseases, access to essential medicines and universal health coverage, *Global Health Action*, 12:1, 1670014, DOI: 10.1080/16549716.2019.1670014

⁴ NCD Alliance. (2022, February 1). Resilience and recovery from covid-19. NCD Alliance. <https://ncdalliance.org/ncd-covid-19-recovery-agenda-report>

⁵ WHO (2019) WHO Consolidated Guideline on Self-Care Interventions for Health: sexual and reproductive health and rights. <https://reliefweb.int/report/world/who-consolidated-guideline-self-care-interventions-health-sexual-and-reproductive>

THE ROLE OF SELF-CARE IN TACKLING NCDs

Self-care is defined by WHO as “the ability of individuals, families, and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a health worker”.⁶ The scope of self-care in this definition includes:

- **Health promotion,**
- **Disease prevention and control,**
- **Self-medication,**
- **Giving care to dependent people,**
- **Seeking hospital, specialist, or primary care when needed and,**
- **Rehabilitation, including palliative care.**

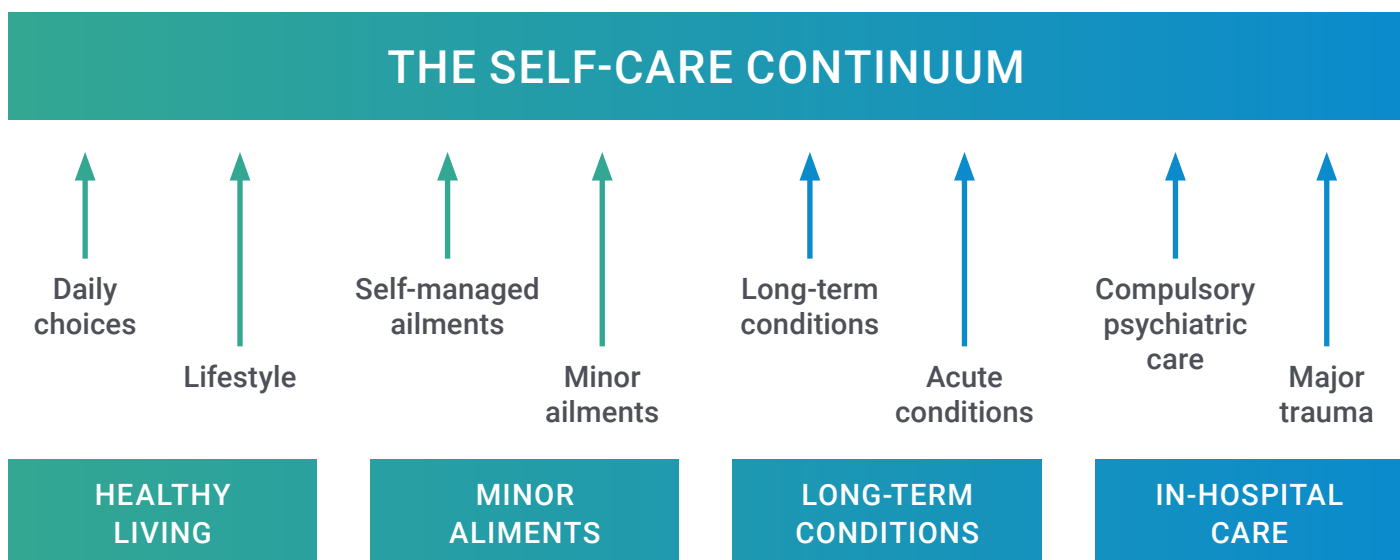
Additionally, “self-care interventions are tools that support self-care. These include evidence-based, high-quality drugs, devices, diagnostics, and/or digital interventions that can be provided fully or partially outside formal health services and be used with or without a health worker”.⁷

The concept of the self-care continuum is another useful tool to understand the comprehensiveness of self-care and how it connects to the prevention and management of NCDs (Image 1):

IMAGE 1. THE SELF-CARE CONTINUUM (Self care Forum, 2020 - adapted)

PURE SELF CARE
 Responsible individual

PURE MEDICAL CARE
 Professional responsibility



⁶World Health Organization (2023) Self-care interventions for health. <https://www.who.int/health-topics/self-care>

⁷Ibid.

The self-care continuum demonstrates the importance of self-care from prevention to treatment of NCDs. This can be seen in preventative measures such as brushing teeth, eating healthily, or choosing to do exercise. It is also relevant in actively managing symptoms including self-monitoring blood glucose and blood pressure and using products available without a prescription to add fibre, fill nutrient gaps, reduce cardiovascular risk, or help people quit smoking, for instance. In this way, self-care is essential in achieving the goals developed by WHO in its **Global Action Plan for the Prevention and Control of NCDs 2013-2030**.

With the setting of this Action Plan, the WHO intends to highlight the comprehensiveness of the issue and to stimulate Member States and policymakers around the world to work on robust responses to the increased prevalence of NCDs, especially in LMICs.



In various official documents and guidelines for NCDs, whether made by WHO or national/subnational governments, it is possible to identify the key concepts of self-care that can be applied in the fight against these diseases and risk factors. For instance, the **2018 United Nations' Political Declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases** urges Member States to:

Empower the individual to make informed choices by providing an enabling environment, strengthening health literacy through education, and implementing population-wide and targeted mass and social media campaigns that educate the public about the harms of smoking and/or tobacco use and second-hand smoke, the harmful use of alcohol and the excessive intake of fats, in particular saturated fats and trans-fats, sugars and salt, promote the intake of fruits and vegetables, as well as healthy and balanced sustainable diets, and reduce sedentary behaviour.

SELF-CARE AND THE MAJOR DISEASES

Because of the long-term nature of some of these diseases, people living with NCDs are constantly challenged to assess their medical situation and to make informed decisions about it. One of these every-day hurdles involves the rational use of medicines, including non-prescription medicines, which make up **WHO's Model List of Essential Medicines (EML)** as some of the treatments recommended for NCDs. For instance, **ibuprofen, acetylsalicylic acid, paracetamol, fluoride toothpaste and Nicotine Replacement Therapies (NRT)** are listed as medicines for pain and palliative care.

Moreover, our daily choices, including having a healthy lifestyle, are proven to avoid or reduce the health impacts of NCDs. According to the

WHO, physical activity is a natural preventive measure against coronary heart disease and stroke, diabetes, hypertension, various types of cancer including colon cancer and breast cancer, as well as depression.⁸ Additionally, healthy eating plays a vital role in preventing NCDs. Consuming moderate amounts of complex staples, fruits, vegetables, legumes and foods from animals, and limited amounts of fats and oils, reduce the risk of developing NCDs such as obesity, hypertension, type 2 diabetes, and cancers. Fiber supplementation, omega-3 fatty acid supplementation, aspirin to reduce the risk of second heart attacks, and aids to help people quit smoking are all examples where products available without a prescription can also fill gaps or otherwise reduce some of these risks.



⁸WHO (2018). Available at <https://www.who.int/news-room/facts-in-pictures/detail/physical-activity>



The integral role of self-care in the prevention and treatment of NCDs was recognized by WHO at its **Global Strategy on Oral Health** adopted at World Health Assembly 75. Strategic objective 2 calls for oral health education to support the development of personal, social and political skills that enable all people to achieve their full potential for **oral health self-care**. Upstream, oral health promotion includes creating public policies and fostering community action to improve people's control over their oral health and to promote oral health equity.

Finally, self-care plays a fundamental role in the fight against NCDs through its underlying connection with the concept of health literacy. The Health Promotion Glossary defines the term as “the achievement of a level of knowledge, personal skills and confidence to take action to improve personal and community health by changing personal lifestyles and living conditions”.⁹ Applied to the context of self-care, self-care literacy refers to knowledge, motivation and competencies of individuals, families, and communities to promote and maintain health, prevent disease, and to cope with illness and disability with or without the support of a health-care provider.¹⁰ The empowerment that this knowledge provides to the community is key to the prevention and management of NCDs, since better informed populations tend to present better healthcare outcomes.

⁹ WHO (1998) Health Promotion Glossary. Available at <https://www.who.int/publications/i/item/WHO-HPR-HEP-98.1>

¹⁰ GSCF (2021) Self-care Literacy Policy Brief

RELEVANCE OF SELF-CARE FOR NCD RISK FACTORS

Specifically for risk factors, much can be linked to the concepts of self-care in terms of how all members of society can work together to change habits that might lead to the occurrence of NCDs.

Modifiable behaviours, such as tobacco use, physical inactivity, unhealthy diet and the harmful use of alcohol, all increase the risk of NCDs.

According to a study by the Global Burden of Disease Collaborative Network¹¹:

- **Tobacco accounts for over 8 million deaths every year** (including from the effects of exposure to second-hand smoke).
- **1.8 million annual deaths** have been attributed to **excess salt/sodium intake**.
- **More than half of the 3 million annual deaths attributable to alcohol use** are from NCDs, including cancer.
- **830,000 deaths annually** can be attributed to **insufficient physical activity**.

LMICs are increasingly struggling to contain the emergence of NCD risk factors such as tobacco use, unhealthy diet and alcohol abuse.¹² In these countries, poverty is highly interlinked with lack of education on the outcomes of unhealthy habits and with precarious policies to avoid this scenario and to support those who need.

In this regard, self-care is not only important because of its intrinsic connection to better informed healthcare decisions, but also for the many non-prescription medicines, digital apps and further technologies that help people living healthier lives. For instance, NRTs gums, patches, and mouth sprays support millions of people to quit smoking every year.

¹¹ Global Burden of Disease Collaborative Network, Global Burden of Disease Study 2019 (GBD 2019) Results (2020, Institute for Health Metrics and Evaluation – IHME) <https://vizhub.healthdata.org/gbd-results/>

¹² Ndubuisi N. E. (2021). Noncommunicable Diseases Prevention In Low- and Middle-Income Countries: An Overview of Health in All Policies (HiAP). Inquiry : a journal of medical care organization, provision and financing, 58, 46958020927885. <https://doi.org/10.1177/0046958020927885>



IMPROVING ACCESS TO NCD CARE THROUGH SELF-CARE

Investing in self-care strategies in the national, regional and global level has been leading countries to avoid one of the main hurdles for the treatment and management of NCDs: the lack of access to medicines, diagnostics and healthcare technologies. As an example of the hurdles in the implementation of policies on access to these NCD healthcare tools in LMICs, more than 50% of cancer medicines on the WHO EML are not available to individuals in these countries. This is due in part to a weak health system and insufficient infrastructure but also because of other barriers, such as fractured diagnostics landscapes and shortages or maldistribution of the health workforce, as well as multidimensional, logistical and financial challenges: high costs, lack of quality assurance, frequent stock-outs, and complex regulatory pathways.¹³

To avoid this scenario, evidence has been gathered on the critical role that self-care has in reducing unnecessary expenses for healthcare systems. At the global level, current self-care activities are generating substantial monetary savings as well as

healthcare workforce savings, totalling at least approximately \$119 billion per year. The above should be coupled with a positive impact on global productivity when over-the-counter treatment is adopted at first, granting approximately 40.8 billion productive days, corresponding to a value of \$1,879 billion in welfare effects. Looking at the future, the cost saving effect is estimated to be approximately \$178.8 billion per annum, with increased productivity gains of 71.9 billion productive days per annum. If we add other positive effects brought by other self-care practices, such as preventive care, oral health care and use of vitamins and mineral supplements, the overall gain will increase further.¹⁴

These figures are extremely relevant in the context of limited resources available for prevention, diagnosis and treatment of NCDs. Through self-care, governments would not only benefit from a decrease in expenses, but individuals suffering from NCDs would have a much higher quality of service from healthcare providers and increased access to essential healthcare tools.



¹³Seiter et al. (2022) How to improve medication access for chronic illnesses. Available at <https://blogs.worldbank.org/health/how-improve-medication-access-chronic-illnesses>. Access in August 2022.

¹⁴Global Self-Care Federation (2022) The Global Social and Economic Value of Self-Care.

KEY RECOMMENDATIONS AND CONCLUSION

Tackling NCDs requires a multidisciplinary and multisectoral approach to address the complex interaction between individuals, communities, populations, and their environment. This paper recommends the following activities for healthcare actors to push forward self-care strategies in their efforts to reduce NCDs incidence and economic burden:

INDIVIDUALS, especially those with high-risk of developing NCDs, should be supported to access and implement information about daily choices that will improve and maintain their health, and the health of their family and wider community.

HEALTHCARE PROFESSIONALS, including doctors, nurses, pharmacists, nutritionists, physiotherapists and dentists, should work as self-care advocates in their daily interventions with individuals, so these are better-informed about their treatments and habits that can contribute to the prevention of NCDs.

REGULATORS need to address the need to improve access to self-care tools to NCD patients, especially through the convergence of regulatory practices among different agencies.

GOVERNMENTS should develop policies to empower individuals to take increased ownership of their health through self-care literacy policies aimed at educating populations on self-care and NCDs, including awareness campaigns and digital tools.

WHO could encourage Member States to include self-care in the WHO NCD Implementation Roadmap 2023 to 2030 and to further develop a Resolution on Self-Care that would help foster the necessary momentum to fully integrate self-care into health systems for the benefit of individuals and society and ultimately significantly alleviate the global burden of NCDs.

These recommendations are meant to be a first step towards self-care serving as a valuable solution to consider in the debate on NCDs. They also suggest a way forward towards achieving equitable and sustainable healthcare systems, in line with the UN's Sustainable Development Goal 3.4, which seeks to reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being until 2030.

Finally, GSCF calls on the many stakeholders identified in this paper to advocate for better NCD policies that involve concepts of self-care. With a whole-society approach it is not only politically possible but economically viable that person-centric healthcare approaches change the reality of an increase in NCDs worldwide, especially in LMICs.



ABOUT US

The Global Self-Care Federation is dedicated to a world where self-care increasingly contributes to better health and more sustainable healthcare systems. We represent associations and manufacturers in the self-care industry, working closely with our members and relevant stakeholder groups to ensure evidence-based self-care products and solutions are recognized as key contributors to health for individuals and systems worldwide.

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The Global Health Literacy Academy is an independent, global leader in health literacy by design. Working with international organizations, governments, academia, industry, and civic society the aim is to build health literacy capacity with sustainable impact.

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