

# World Congress on Hypertension and Cardiovascular Diseases

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## DRM; Non-communicable disease

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With the growing incidence, if non-communicable disease (NCD) in low and middle-income countries rising at an alarming rate, we must prepare for an onslaught of new problems and new costs associated with multi morbidity and rising mortality rates. At the heart of these issues will be cost of care and funding for preventative medicine in already funding constrained environments in a political climate where major donors are pulling back. In the next 10 years, the WHO estimated NCDs will increase by 17% globally and 27% in Africa. By 2030, over 80% of cardiovascular and diabetes deaths will occur in developing countries. These alarming statistics foreshadow the impending cost and impact of NCDs on the developing world. Domestic resource mobilization (DRM) will play an essential role in curbing this epidemic and softening the blow by providing sustainable financing for emerging health systems. My presentation will provide a summary of the oncoming issues with emerging NCDs in Sub-Saharan Africa, Asia and the Middle East and North Africa and offer a set of different solutions and approaches to domestic resource mobilization for health; Approaches to top down DRM; Approaches to bottom up DRM; Intersection of health systems issues and DRM; and Marrying governance approached to clinical practice. I will also present selected country results and give examples of project approaches across Latin America and Africa including: Liberia: Tax authority increased tax payments by 48% with help from our DRM project RG3, this and other tax administration changes contributed to a projected USD 58 mill increased revenue. Based on 2016 health spending, this would mean USD 8,700,000 more for health. Tanzania: Working through the preparedness and response project a USAID funded global program focused on a one health approach to epidemic control, the Tanzania project team developed their own strategy on how they going to make a case for health and do a better job of budget planning, reporting and advocacy – the idea is to become a trusted partner of government while also making the case for funding and therefore increasing DRM for health over time.