

The WHO Global Diabetes Compact

Uniting around a common agenda for diabetes

The COVID-19 pandemic is causing **fear and suffering for people with diabetes across the world.**

This is why

- People with diabetes have a higher risk of severe COVID-19 disease and death.
- Delays in diagnosis of diabetes may result in more advanced disease and complications.
- Delayed, incomplete or interrupted therapy (treatment, rehabilitation and palliative care) for diabetes can lead to declines in health.

Diabetes is a global epidemic

Before COVID-19 emerged, more than 420 million people were living with diabetes worldwide. This is 6% of the world's population. It is also four times more than in 1980. This number is expected to rise to 570 million by 2030 and to 700 million by 2045, rising most rapidly in low- and middle-income countries.

Yet, because of the scale of the problem, most diabetes care needs are not met.

An effective response during the pandemic is hampered by a chronic lack of investment in diabetes prevention, early diagnosis, appropriate treatment and care. This underinvestment needs to be redressed without delay to reduce immense suffering among millions of people and mitigate preventable long-term social and economic costs to society.

All communities need **quality diabetes care, during the COVID-19 pandemic and beyond.**



Credit: WHO/Andrew Esiebo

What needs to change

- 1 in 2 adults with diabetes are unaware of their status.
- Many people with type 1 diabetes (all of whom need insulin for survival) do not have access to it.
- 1 in 2 of the 60 million people with type 2 diabetes who need insulin treatment do not get the insulin they need, often because of the cost.
- Basic technologies such as blood glucose testing are not available in the public sector primary health care system in most low-income countries.
- Limited access in many low- and middle-income countries to health professionals in primary health care trained in diabetes prevention and care.
- Insufficient health promotion activities to help prevent diabetes and inadequate coverage of quality care for people living with diabetes.

The WHO Global Diabetes Compact

In April 2021, WHO will launch the Global Diabetes Compact.

The overall goal of the Compact is to support countries in implementing effective programmes for the prevention and management of diabetes, such that fewer people *get* diabetes and the lives of people who *have* diabetes are improved.

The Compact will bring together in one package all WHO materials available for the prevention and management of diabetes, both existing and new.

On the prevention side, particular focus will be given to reducing obesity, especially among young people.



Credit: WHO/Sergey Volkov

On the treatment side, emphasis will be on improving access to diabetes medicines and technologies, in particular in low- and middle-income countries.

Key to the success of the Compact will be alignment and united action across all sectors (public, private and philanthropic).

Through this collaborative action

- The capacity of health systems to detect, diagnose and manage diabetes will be increased.
- Diabetes care will be integrated into existing programmes, to leverage existing capacities in the health-care system and to meet people's health-care needs in a more holistic way.
- Health promotion efforts to prevent diabetes will be scaled-up, in particular among young people, and with a special focus on obesity.

Vision

To reduce the risk of diabetes and ensure that all people diagnosed with diabetes have access to quality care and treatment that is equitable, comprehensive, and affordable.

Prevention and diagnosis

Prevention of type 2 diabetes and early diagnosis of type 1 and type 2 diabetes.

Quality care

Control of blood glucose levels and major risk factors for heart disease and stroke.

Screening for and management of complications.

Measure and monitor

Clinical monitoring and population-based surveys.

WHO Global Diabetes Compact components



1. **An informal collaborative arrangement** to unite stakeholders, including people with diabetes, around a common agenda.



2. **Integration** of the prevention, diagnosis and treatment of diabetes into primary health care through existing WHO packages.



3. **Global medicine price reporting** for insulin and other essential diabetes medicines and technologies purchased by low- and middle-income countries.



4. **Global targets** for treatment coverage as an incentive for progress.



5. **Care during humanitarian emergencies** to ensure continuity of care.



6. **A global price tag** for closing the gap between people with diabetes who have access to the services they need and those who don't.