Report Launch Webinar
Realizing the Return: *Insights from a Decade of Investment Cases on Non-communicable Diseases and Mental Health*
5 February 2026

1. Background

On 5 February 2026, UNDP, together with the Secretariat of the UN Interagency Task Force on NCDs (UNIATF), and other partners, convened a global webinar to launch a new report - *Realizing the Return: Insights from a Decade of Investment Cases on Non-communicable Diseases and Mental Health*.

This initial launch session brought together a total of 55 participants with 28% from UNDP (12% UNDP COs, including 4% from Africa, 4% from Asia and the Pacific, 2% from Arab States, 2% from Latin America and the Caribbean; and 17% from UNDP HQ), 27% from WHO, and 45% from external organizations.

Its objectives were:

- *Launching the report and presenting its key findings and recommendations;*
- *Discussing the report's findings with authors and experts, hearing perspectives from investment case countries and partners; and*
- *Identifying the collective action needed by countries and partners to implement investment case recommendations and accelerate NCD and mental health responses.*

The session and report follow the recently adopted 2025 Political Declaration on NCDs, Mental Health, and Well-being. They are also timely in the context of increasing challenges in global health and development, but also the opportunities for garnering momentum for stronger national and regional ownership and financing of the NCD and mental health response.

The webinar featured contributions from government officials, parliamentarians, the UN, civil society, and financing partners, reflecting the multisectoral and country-driven nature of the investment case experience.

2. Opening Remarks

Mandeep Dhaliwal, Director, HIV and Health Group, UNDP

Mandeep Dhaliwal noted that the report, developed through the Health4Life Fund's South-South Learning Lab, reflects a decade of collaborative work between countries, UN agencies, civil society, and partners in developing national investment cases for NCDs and mental health. She emphasized that countries are currently operating in an environment of tightening fiscal space, more frequent shocks, and declining development assistance for health.

She referred to the Political Declaration on NCDs and Mental Health adopted by the UN General Assembly in December 2025, which now places mental health on equal footing with NCDs and sets outcome and process targets for national systems. Mandeep Dhaliwal underscored that national investment cases have driven progress by reframing health from a recurrent cost to a development investment and enabling dialogue across health, finance, and other sectors. Finally, she reflected on the report's three priority action areas to accelerate and scale NCD and mental health responses, including institutionalization and governance, financing and fiscal sustainability, and partnerships and collective action.

Hon. Christopher Kalila, Member of Parliament, Zambia

Christopher Kalila welcomed the launch of the report and noted that NCDs and mental health conditions pose significant threats to health, livelihoods, and national development. He emphasized that the economic costs associated with healthcare expenditure, productivity loss, and premature mortality are rising and unsustainable, particularly in resource-constrained settings.

Drawing on his experience in leading the Global Legislators Report: Noncommunicable Diseases and Mental Health Conditions: A Threat to Health and a Threat to Wealth, he highlighted that economic evidence is critical for legislators when considering policy and budgetary decisions. He emphasized the importance of sustained investment in prevention and care, as well as the need to strengthen legislative and regulatory frameworks to reduce exposure to health risks and address commercial determinants of health. Finally, Christopher Kalila noted that national investment cases provide parliaments with country-owned evidence that can support legislative action and alignment across sectors.

3. Presentation of the Report

Roy Small, Policy Specialist, Health Governance and Financing, UNDP

Roy Small presented the background, key economic and governance insights, and recommendations in the report, drawing on experiences from more than 80 national investment cases across more than 60 countries. He recalled that early global estimates highlighted the scale of economic losses associated with NCDs and mental health conditions, which led to the need to develop country-specific investment cases beginning in 2015.

He highlighted several core findings from the report, including:

- NCDs, poor mental health, tobacco use, and air pollution impose economic losses that function as recurrent macroeconomic shocks, yet this rarely appears in budget debates.

- In nearly one-third of countries with NCD investment cases, more than 25% of adults die prematurely from NCDs, frequently during their most productive years, creating a

convergence of human and economic losses.

- Prevention generates high returns on investment. Scaling up NCD action across 23 countries could avert millions of deaths and generate substantial economic gains, with tobacco control, air pollution reduction, and mental health interventions also delivering high returns.

- In many countries, the investment required for scaled-up prevention over 15 years represents less than the annual economic burden caused by NCDs.

- Investment in prevention also drives equity, for example, through reductions in catastrophic, out-of-pocket spending and co-benefits for climate and gender outcomes.

Roy Small explored learnings from the investment cases' Institutional and Context Analyses (ICAs) on how governance determines action. That includes the importance of political leadership beyond the health sector, meaningful civil society engagement, and strong safeguards against industry interference in policymaking. Based on country feedback, he provided an overview of how investment cases have catalyzed reforms in multisectoral governance, sustainable financing, and health service access and delivery. He concluded by highlighting the need for greater progress and outlining priority areas for deeper implementation.

For more, access the report and full presentation.

4. Country Experiences

Georgia: Kakha Gvinianidze, Public Health Officer, WHO, Georgia

Kakha Gvinianidze described Georgia's experience with multiple investment cases, including tobacco control, NCDs, and antimicrobial resistance. He noted that the tobacco control investment case, conducted during a period of intensive advocacy, consolidated economic arguments that supported legislative reform aligned with the WHO Framework Convention on Tobacco Control. He reported that subsequent investment cases contributed to policy dialogue on salt reduction, obesity, physical activity, and trans-fat elimination.

Finally, he highlighted that economic benefits from prevention investments often remain less visible than commercial investments and emphasized the importance of better communicating broader economic and social benefits associated with NCD prevention.

The Gambia: Jarra Marega, Programme Manager, National Mental Health Programme, Ministry of Health, The Gambia

Jarra Marega described how the mental health investment case was positioned as a whole-of-government reform tool. She reported that the investment case was launched in October 2025 at the national level, with participation from the Vice President, other senior political leaders and multiple ministries. She highlighted that the economic analysis, which estimated losses

equivalent to 0.5% of GDP, provided a strong entry point for political engagement. Jarra Marega reported early outcomes, including increased parliamentary advocacy, engagement with justice and human rights institutions, progress toward new mental health legislation, and expanded civil society involvement. Finally, she emphasized that the institutional context analysis within the investment case supported cross-sectoral dialogue and prioritization.

5. Partner Perspectives

James Sale, Deputy CEO, United for Global Mental Health

James Sale noted that national investment cases are valuable advocacy tools for civil society, as they provide country-owned economic evidence to support engagement with governments. He emphasized the importance of civil society involvement in investment case development and further stressed that mental health investment cases serve as practical business cases for advocates, helping to build political will and sustain reform momentum through partnerships between governments, civil society, and donors. James Sale also underscored that a key strategic challenge lies in financing the transition from tertiary, institution-based mental health services to community- and primary-care-based systems, which often requires catalytic, transitional funding and a reframing of mental health investment as a whole-of-government responsibility, rather than one borne solely by health ministries and budgets.

Elvis Kyere-Gyeabour, Breathe Cities Portfolio Manager, Ghana Clean Air Fund
Elvis Kyere-Gyeabour highlighted that investment cases support multisectoral ownership by grounding analysis in government data and processes. He emphasized that in the context of Ghana, their role was critical in mainstreaming NCD considerations into planning and monitoring systems, while strengthening accountability and ownership across ministries, including finance and planning authorities. Elvis Kyere-Gyeabour stressed that embedding the investment case recommendations into national development plans, health action plans, and performance monitoring frameworks is essential to sustain momentum beyond the launch phase and to enable ongoing evaluation of implementation progress.

Labram M. Musah, National Coordinator, Ghana NCD Alliance

Labram M. Musah described how Ghana's investment cases were used in advocacy for excise tax reforms on tobacco, and in discussions on alcohol and sugar-sweetened beverages. He reported that investment cases supported arguments for revenue generation and domestic resource mobilization for health, while noting ongoing challenges related to competing priorities and industry influence. Labram M. Musah highlighted that sustained civil society advocacy is essential to translate investment case evidence into concrete policy and financing outcomes, including efforts to expand national health insurance benefit packages, the Ghana Medical Trust Fund, and explore the earmarking of health tax revenues for healthcare services. Finally, he also

noted the value of developing more disease-specific investment cases, such as for diabetes and access to insulin, to inform targeted investment decisions and returns.

For more on the country experiences and partner perspectives, watch the session recording.

6. Discussion

During the discussion, participants highlighted the importance of institutionalizing whole-of-government approaches, strengthening monitoring and evaluation, and linking investment cases to broader development agendas. Several participants shared their experience with the investment cases, and others expressed interest in future engagements to learn more from experiences and insights in using national investment cases to support policy prioritization for NCDs and mental health.

7. Closing Remarks

Natalia Linou, Deputy Director, HIV and Health Group, UNDP

Natalia Linou emphasized that NCDs and mental health conditions have significant implications for families, communities, and national development, particularly in the context of demographic change, climate risks, and future health shocks. She noted that investment cases have demonstrated their value in generating political will and multisectoral engagement. Finally, she highlighted that the next phase of work should focus on accelerating implementation, scaling up reforms, and ensuring long-term sustainability through financing, accountability mechanisms, and continued partnerships.

Access the summary report, presentations, recording, and other materials on the event page here.

Annex 1: Agenda

Moderator: Nick Banatvala, Head of the Secretariat of the UN NCD Task Force & Health4Life Fund

Timing (Geneva)	Description	Speakers
13:30 – 13:40	**Opening remarks**	Mandeep Dhaliwal, Director, HIV and Health Group, UNDP Hon. Christopher Kalila Member of Parliament, Zambia
13:40 – 13:50	**Overview of and key messages of the paper**	Roy Small, Policy Specialist on Health Governance and Financing, UNDP
13:50 – 14:00	**Country experiences with health investment cases** Countries share how investment cases are being used, highlighting challenges and opportunities	Kakha Gvinianidze, Public Health Officer, WHO Georgia Jarra Marega, Programme Manager, National Mental Health Programme, Ministry of Health, The Gambia
14:00 – 14:25	**Partner perspectives on aligning support with country priorities** (15 min) Discussion on how partners can strengthen coherent, catalytic support for country-led implementation. **Discussion / Q&A** (10 min)	James Sale, Deputy CEO, United for Global Mental Health Elvis Kyere-Gyeabour, Breathe Cities Portfolio Manager, Ghana Clean Air Fund Labram M. Musah, National Coordinator, Ghana NCD Alliance
14:25 – 14:30	**Closing remarks**	Natalia Linou, Deputy Director, HIV and Health Group, UNDP