



**WORLD
HEART
FEDERATION**

The background is a light blue gradient with a grid pattern. It features several white line-art elements: a large heart in the center, several gears of different sizes to the left, and a heartbeat line at the bottom. A red rectangular box is positioned on the right side, containing the main title text. White dashed lines and arrows connect the heart to the text box and the gears to the heart, indicating a relationship between the mechanical and biological elements.

WORLD HEART VISION 2030: DRIVING POLICY CHANGE – FOR EVERYONE'S HEALTH



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Cardiovascular disease (CVD)

affects more than

523 MILLION



people, almost double the figure of two decades ago, with one in three CVD deaths occurring prematurely in people under 70 years of age.

How does this happen when up to **80%** of cardiovascular disease could be prevented and treated?



The World Heart Vision 2030: driving policy change is an actionable guide

to reduce by at least
– adjusting for all
ages – cardiovascular
mortality and incidence.

30%



Through four main avenues, we can reimagine and redefine healthcare practice, policy, delivery, and access.

CARDIOVASCULAR HEALTH FOR EVERYONE THROUGH:

- Equity in prevention and treatment
- Implementation and knowledge
- Innovation and technology
- Heart-friendly climate policies



Paving the way for cardiovascular health equity



Leveraging innovation and technologies for cardiovascular health



Fostering timely implementation of knowledge



Placing cardiovascular health at the heart of health and climate policies



KEY MESSAGES



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PAVING THE WAY FOR CARDIOVASCULAR HEALTH EQUITY



- Awareness of cardiovascular health and access to care are both highly variable within and across countries. Socio-economically vulnerable communities are among those at greatest risk of heart health complications. Further inequities in care persist based on age, gender, disability, parental status, income, employment, sexual orientation, or migrant or refugee status.
- Policies and programmes must expand cardiovascular health education and ramp up care that is timely and affordable for everyone. Access to healthy nutrition options, clean air and water, and recreational spaces protect heart health, and can prevent disease and mitigate costs in the long term.
- Greater awareness campaigns are needed along with access to treatment plans and healthy lifestyle options.
- Research and clinical trials must include data from under-served communities.

An estimated
3 BILLION
people lack access to
safe, nutritious and
sufficient food



People with diabetes
are up to
THREE TIMES
more likely to develop
cardiovascular disease



**MORE
THAN 75%**
of cardiovascular
deaths occur in low-
and middle-income
countries





FOSTERING TIMELY IMPLEMENTATION OF KNOWLEDGE

- Closing healthcare gaps by 2030 between availability of preventive and curative measures and their implementation requires focusing on scientifically proven solutions, supportive health policies, and applying the knowledge we continue to gain over the decades.
- Research findings, rather than sit on a shelf, must be used to improve laws and regulations that enable better care delivery; this includes bans and taxes on products we know to be harmful (for example tobacco and sugary beverages), and emphasising the importance of access to nutritious food and of practising regular physical exercise.
- Primary care health systems must engage and empower patients while facilitating task-sharing and task-shifting supported by improved collaborative practices and digital health technologies. Increased education and training opportunities are critical along with simplified protocols and guidelines that healthcare workers can use in daily clinical practice.



Scaling up population coverage of primary and secondary cardiovascular prevention interventions

by **20%** over 2023-2030 could result in

14 MILLION

lives saved across

123 low- and middle-income countries



Prevention programmes, education and blood pressure monitoring are among the steps that make hypertension a manageable risk factor for heart disease yet it

affects **1.3 BILLION** people and less than

1 IN 5 people have it under control



Around **150 MINUTES** of moderate physical activity per week can reduce the risk of heart disease by

30% and the risk of

diabetes by **27%** low- and middle-income countries



3 LEVERAGING INNOVATION & TECHNOLOGIES FOR CARDIOVASCULAR HEALTH



- New technologies must foster patient engagement and empowerment in the access to, and use of, health interventions delivered via digital means—telemedicine and wearable devices for example.
- Home and mobile devices must be more widely available and affordable not only focusing on diagnosis but on facilitating prevention, screening and early detection.
- Robust data privacy protocols and cross-platform data integration must be supported and play a role in deployment and uptake of digital health services.
- Innovation in technology must also be complemented by innovation in the development of new treatments and therapies and their roll-out supported by task-shifting within the wider health workforce.



Some projections put internet users by 2030 at more than

7.5 BILLION



The World Economic

Forum cites **2030**

as the year by when artificial intelligence will draw on various data sources to highlight trends in disease, treatment and care.



The global telehealth market could reach

USD

\$224.8 BILLION

by 2030



4

PLACING CARDIOVASCULAR HEALTH AT THE HEART OF HEALTH & CLIMATE POLICIES



- An enabling environment is necessary for shaping beneficial choices and improving consumption habits that contribute to basic, primordial health; this entails a nutritious diet, physical activity, clean water and clean air which can all be impacted by climate change events.
- Better infrastructure across sectors such as transport, energy, industry, agriculture and housing play a critical role in supporting healthy living and consumption patterns.
- The World Heart Vision 2030 is aligned with global frameworks guiding improved health; implementation on a national or regional level complements the recommendations of other instruments for change including the UN Sustainable Development Goals, the UN Framework Convention on Climate Change (UNFCCC) and the WHO Global Air Quality Guidelines.



3 MILLION

people die every year from heart disease attributable to tobacco use and exposure to second-hand smoke



More than **20%** of all CVD deaths are caused by air pollution

– more than

3 MILLION

deaths every year



9 IN 10

people worldwide live in places where air quality exceeds recommended limits

HEART HEALTH IS EVERYONE'S BUSINESS



World Heart Vision 2030: driving policy change addresses all in the medical community and beyond: it speaks directly to determinants of health, to policymakers, the private sector and all whose decisions affect diagnosis, treatment, and affordable care. Together, we want to:

- Expand prevention measures and promote widespread screening
- Bridge gaps in digital understanding for health
- Strengthen coordination on links between medical conditions such as diabetes and cardiovascular health
- Implement effective, excise taxes on tobacco, alcohol, and sugary beverages
- Improve nutrition in schools and other public settings
- Widen access to essential and proven therapies
- Engage widely with the private sector and industry including the medical sector to promote heart health and access to care.



CARDIOVASCULAR HEALTH – REIMAGINED. REDEFINED.



CALLS TO ACTION ON:

GOVERNMENTS TO:

- Invest in basic prevention, screening, early detection, and access to treatment and care, and to secondary prevention and rehabilitation following a CVD event
- Secure everyone’s access to healthcare including via digital means and allocate resources to education and digital literacy for both workforce and patients
- Develop public policies that enable healthy lifestyles through physical activity, proper nutrition, cessation of tobacco smoking and mitigating air pollution
- Implement evidence-based policies and address regulatory bottlenecks and other barriers to access for treatment.

HEALTH PROFESSIONALS TO:

- Engage actively in the prevention, detection, and treatment of all CVDs, including neglected cardiovascular diseases
- Be attuned to, and learn from, those living with CVD and at risk for CVD
- Build better links with communities focusing on other preventable chronic conditions and infectious diseases
- Participate in learning programmes that prioritise digital health literacy.

CIVIL SOCIETY TO:

- Form communities among those dealing with diabetes or obesity to help strengthen a holistic care approach
- Advocate for measures that include better nutrition options; healthy meals in schools and other public settings; taxes on harmful products such as tobacco and sugary beverages; improved air quality; and investment in clean sources of energy and transport
- Stay informed about decisions including at local level and seek to actively influence policymakers.

THE PRIVATE SECTOR TO:

- Reorient activities and products to make them compatible with a healthy lifestyle
- Partner with others and sectors for greater impact through combined funding and expertise
- Make people’s health a leading priority and a first premise of business.

THE PHARMACEUTICAL, MEDICAL TECHNOLOGY, AND MEDICAL DEVICE INDUSTRY TO:

- Deploy resources and expertise to support and initiate programmes that widen access to essential and proven therapies
- Use a holistic approach based on the needs of real-life patients
- Engage actively in delivering solutions to prevent, detect and treat all CVDs, including neglected cardiovascular diseases.

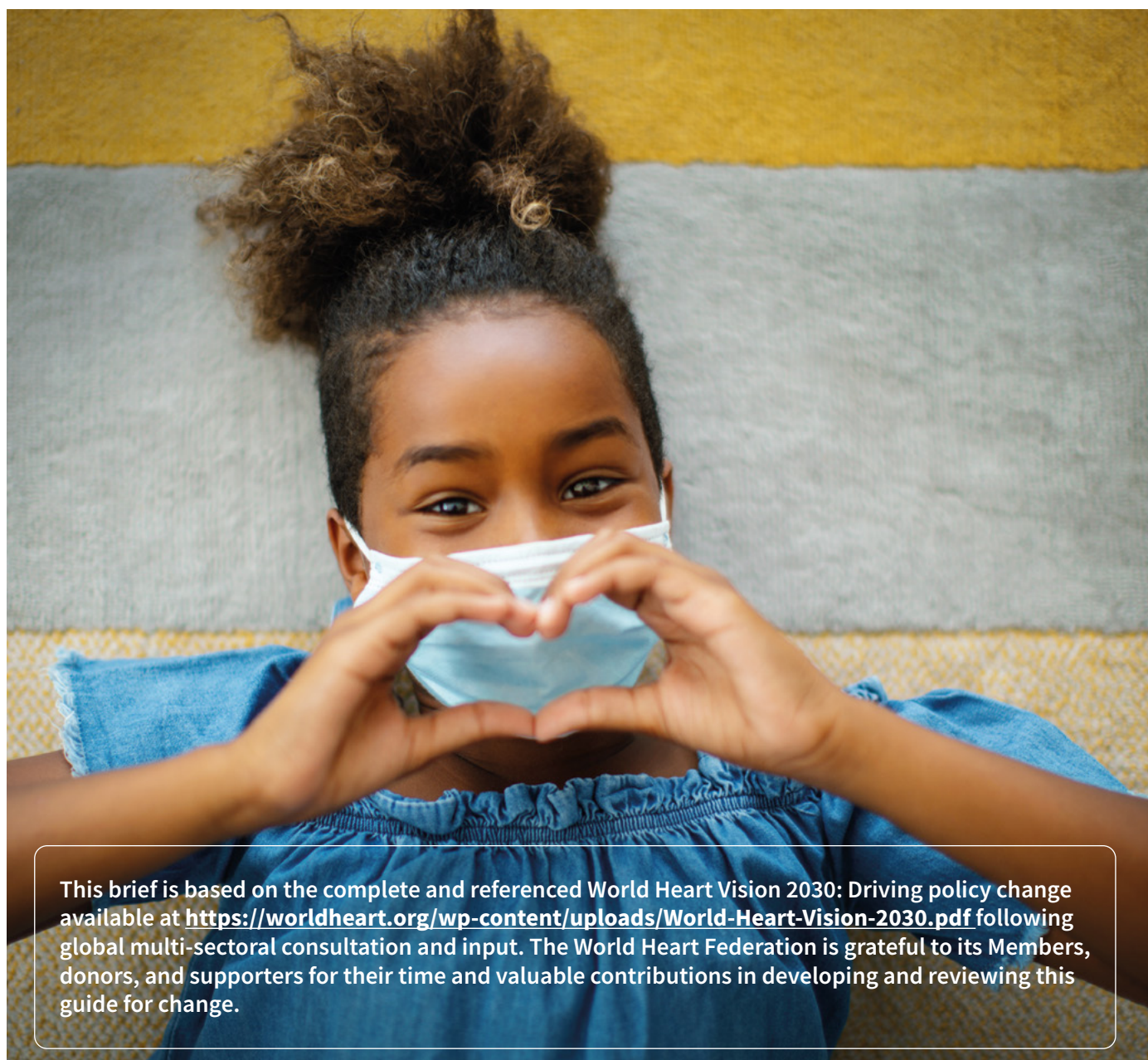
PATIENTS AND OTHER INDIVIDUALS TO:

- Seek out ever-growing knowledge to become heart-aware: healthy food choices, regular exercise, and eliminating tobacco use or exposure are among the pillars of good health
- Exercise civic duties such as voting when policy reforms and health incentives are at stake
- Take steps to preserve cardiovascular health, sticking to treatments where prescribed and keeping track of health readings
- Advocate for patient engagement with health practitioners, researchers, and policymakers.



THE ACADEMIC, RESEARCH AND EDUCATION COMMUNITY TO:

- Further its understanding of CVD's incidence, clinical course, and prognosis in understudied populations around the world to inform national strategies for prevention and control
- Ensure that observational and interventional studies encompass real-life patients treated for various conditions and coming from all backgrounds to account for genetic, cultural, and environmental factors affecting CVD risk
- Further involve patients in research and scientific communications
- Initiate studies on science and its application to narrow the gap between what we know and what we do for CVD prevention
- Promote lifelong medical education and training opportunities in the field of cardiovascular medicine.



This brief is based on the complete and referenced World Heart Vision 2030: Driving policy change available at <https://worldheart.org/wp-content/uploads/World-Heart-Vision-2030.pdf> following global multi-sectoral consultation and input. The World Heart Federation is grateful to its Members, donors, and supporters for their time and valuable contributions in developing and reviewing this guide for change.

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