



## 76<sup>th</sup> World Health Assembly statement

Agenda item 13.2: Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases, and mental health - Draft updated menu of policy options and cost-effective interventions for the prevention and control of noncommunicable diseases

### Statement

We commend the WHO on its work to expand Appendix 3 as an essential tool that supports effective action on NCDs and support the statement led by NCD Alliance.

Action on NCDs is more urgent than ever. The COVID-19 pandemic caused extensive disruption to NCD prevention, diagnosis, treatment and palliative care services, which will have far reaching impacts on suffering, mortality and rates of disability resulting from NCDs. As countries recover from the pandemic and review progress on UHC at the UN High-Level Meeting this year, robust evaluation, investment, and action to further integrate NCD policies is critical. NCDs account for 74% of global mortality and 80% of years lived with disability across the life-course, therefore UHC cannot be achieved without a comprehensive NCD service package.

To foster effective implementation, we urge Member States to:

- Utilise Appendix 3 to develop and scale-up national UHC benefit packages, ensuring a coherent patient pathway between detection, diagnosis and treatment, underpinned by rehabilitation and palliative care options as needed from the moment of diagnosis.
- Plan for the progressive implementation of core NCD interventions, ensuring adequate and sustainable investment.
- Integrate NCD, palliative and rehabilitation services into educational curricula and programs to equip healthcare providers with the tools and knowledge to deliver rights-based and person-centred care.
- Invest in comprehensive disease surveillance systems to monitor the effectiveness of NCD interventions, noting the need to remove discriminatory upper age-caps, and collect, analyse, report and use gender-, age- and disability-disaggregated data to ensure that policies and UHC packages address, rather than duplicate, health inequities.
- Include NCD care into national health emergency strategies to ensure the continuation of essential service packages.

- Leverage the resources of civil society for implementation of relevant actions at the national level.
- Ensure that services are accessible to all, including those in low resource settings, older persons and persons with disabilities, taking into account that NCDs are often the underlying conditions for persons with disabilities.

**Constituency members<sup>1</sup>**

European Society for Medical Oncology, HelpAge International, International Association for Hospice and Palliative Care, NCD Alliance, The Royal Commonwealth Society for the Blind (Sightsavers), World Federation of Societies of Anaesthesiologists, World Heart Federation and Worldwide Hospice Palliative Care Alliance. Led by the Union for International Cancer Control.

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<sup>1</sup> Constituency organisations listed in alphabetical order.