

DRAFT CO-FACILITATORS TEXT

[Political Declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases

TIME TO DELIVER: Accelerating our response to address NCDs for the health and well-being of present and future generations

Chapeau1. We, Heads of State and Government and representatives of States and Governments, assembled at the United Nations on 27th September 2018 to undertake a comprehensive review of the challenges and opportunities to implement our existing commitments for the prevention and control of NCDs and the promotion of mental health, which constitute a major challenge for the health and well-being of our peoples and for sustainable development:

PP1. Strongly reaffirm our political commitment to accelerate the implementation of the 2011 Political Declaration and the 2014 outcome document of the previous high level meetings of the General Assembly on the prevention and control of non-communicable diseases ¹, which continue to inspire our action and catalyse our efforts and, in line with the 2030 Agenda for Sustainable Development, reduce by one third premature mortality from non-communicable diseases by 2030 through prevention and treatment and promote mental health and wellbeing, by addressing their risk factors and the determinants of health,

PP2. *Reaffirm* General Assembly resolution 70/1 of 25th September 2015, entitled “Transforming our world: the 2030 Agenda for Sustainable Development”, and the Addis Ababa Action Agenda of the Third International Conference on Financing for Development,

¹ Resolutions A/RES/66/2 and A/RES/68/300

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PP3. *Reaffirm* the right of every human being, without distinction of any kind, to the enjoyment of the highest attainable standard of physical and mental health and recognize that health is a precondition for and an outcome and indicator of all three dimensions of sustainable development,

PP4. *Recognize* that action to realize the commitments made for the prevention and control of non-communicable diseases is inadequate and that the level of progress and investment to date is insufficient to meet target 3.4 of the Sustainable Development Goals and that the world has yet to fulfil its promise of implementing, at all levels, measures to reduce the risk of premature death and disability from non-communicable diseases,

PP5. Acknowledge the progress achieved by some countries in the implementation of their commitments made in 2011 and 2014 for the prevention and control of four major non-communicable diseases, namely, cardiovascular diseases, diabetes, cancer and chronic respiratory diseases, by reducing their main common risk factors, namely, tobacco use, harmful use of alcohol, unhealthy diets and physical inactivity, and addressing the underlying social, economic and environmental determinants of non-communicable diseases and the impact of economic, commercial and market factors, as well as by improving disease management to reduce morbidity, disability and mortality,

PP6. Recognize that many countries still face significant challenges in the implementation of their commitments, remain deeply concerned that the burden of non-communicable diseases continues to rise disproportionately in developing countries and that every year 15 million people between ages of 30 and 69 die from non-communicable diseases, and that 86% of these premature deaths occur in developing countries²;

² Report A71/14 of WHO Director General.

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PP7. Express grave concern that the huge human and economic cost of NCDs contributes to poverty and inequities and threatens the health of peoples and the development of countries, costing developing countries over the next 15 years more than US\$ 7 trillion³,

PP8. Welcome that the General Assembly proclaimed 2016-2025 as the Decade of Action on Nutrition and encourage its implementation,

PP9. Welcome the convening of the WHO Global Conference on the Prevention and Control of Non-communicable Diseases, hosted by the Governments of Finland, Russian Federation and Uruguay and WHO, from 18 to 20 October 2017 in Montevideo, and its outcome document entitled “Montevideo roadmap (2018-2030) on the prevention and control of non-communicable diseases as a sustainable development priority” as a contribution to the preparatory process leading to the Third High-Level Meeting and recall resolution 71.2 of the World Health Assembly,

PP10. Welcome further the report of WHO Independent High Level Commission on non-communicable diseases entitled “Time to deliver” and take note of its recommendations,

PP11. Recognize that mental disorders and other mental health conditions, as well as neurological disorders, contribute to the global burden of non-communicable diseases

³ WHO Report entitled “Saving lives, spending less. A strategic response to non-communicable diseases”.

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and that people living with mental disorders and other mental health conditions may face stigma and discrimination being more susceptible to having their human rights violated and abused have also an increased risk of other non-communicable diseases and therefore higher rates of morbidity and mortality, and that depression alone affects 300 million people globally and is the leading cause of disability worldwide⁴,

PP12. Acknowledge the significant impact of non-communicable diseases on children, which is of major concern, in particular the rising levels of obesity among them, and recognizing that children that are given the opportunity to grow and develop in a healthy environment responsive to their needs, including breastfeeding and that, at a young age, fosters and encourages healthy behaviour and lifestyles, including healthy dietary choices and regular physical activity, and promotes the maintenance of healthy weight, can greatly reduce the risk of non-communicable diseases in adulthood,

PP13. Acknowledge the impact of non-communicable diseases on older persons which is of particular concern given the growing proportion of older persons and recognizing that they have an increased risk of multiple non-communicable diseases, which constitutes a major challenge for health systems,

PP14 Acknowledge that mainstreaming a gender perspective for the prevention and control of non-communicable diseases is crucial to understand and address the health risks and needs of women and men of all ages, giving particular attention to the impact of non-communicable diseases on women in all settings,

PP15. Reaffirm the primary role and responsibility of Governments at all levels in responding to the challenge of non-communicable diseases by developing adequate national multisectoral responses for their prevention and control, and promoting and

⁴ Report of the WHO Independent High-Level Commission on NCDs entitled “Time to deliver”.

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protecting the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; and underscore the importance of pursuing whole-of-government and whole-of-society approaches, as well as health-in-all-policies approaches, equity-based approaches and life-course approaches,

PP16. Acknowledge that other stakeholders also share responsibility and can contribute in creating a conducive environment to prevent and control non-communicable diseases, and recognize the need to bring together civil society and the private sector to mobilize all their available resources to the implementation of national responses for the prevention and control of non-communicable diseases,

Chapeau 2. We, therefore, commit to scale up our efforts and further implement the following actions:

OP1. Strengthen our commitment, as Heads of State and Government, to provide strategic leadership for the prevention and control of NCDs by promoting greater policy coherence and coordination through whole-of-government and health-in-all-policies approaches and by engaging stakeholders in an appropriate, coordinated, comprehensive and integrated bold whole of society action and response;

OP2. Scale up the implementation of the commitments made in 2011 and 2014 for the prevention and control of non-communicable diseases through ambitious multisectoral national responses and thereby contribute to the overall implementation of the 2030 Agenda for Sustainable Development, including by integrating, across the life-course, action on the prevention and control of non-communicable diseases and promotion of mental health and well-being;

OP3. Implement, according to own country-led prioritization a set of cost-effective, affordable and evidence-based interventions and good practices, including those recommended by WHO, for the prevention and control of non-communicable diseases, that can be scaled up across populations to promote health, treat people with non-communicable diseases and protect those at risk of developing them, with a particular emphasis on the needs of those in vulnerable situations;

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OP4. Also scale up the implementation of the commitments made in 2011 and 2014 to reduce tobacco use, harmful use of alcohol, unhealthy diets and physical inactivity taking into account, as appropriate, WHO recommended interventions for the prevention and control of non-communicable diseases⁵, in line with national priorities and targets;

OP5. Promote and implement policy, legislative, and regulatory measures, including fiscal measures as appropriate, aiming at minimizing the impact of the main risk factors for non-communicable diseases, and promote healthy diets and lifestyles;

OP6. Accelerate the implementation of WHO Framework Convention on Tobacco Control by its States parties, while continuing to implement tobacco control measures without any tobacco industry interference, and to encourage other countries to consider becoming parties to the Convention;

OP7. Implement cost-effective and evidence-based interventions to halt the rise of overweight and obesity, in particular, childhood obesity, taking into account WHO recommendations and national priorities;

OP8. Develop, as appropriate, a national investment case on the prevention and control of non-communicable diseases to raise awareness about the national public health burden caused by non-communicable diseases, health inequities, the relationship between non-communicable diseases, poverty, social and economic development, the number of lives that could be saved and the return on investment;

⁵ Such as WHO Global Action Plan for the Prevention and Control on NCDs 2013-2020, the WHO Mental Health Action Plan 2013–2020, the WHO Global Strategy and Action Plan on Ageing and Health 2016-2020, the WHO Action Plan on Physical Activity 2018-2030, the WHO Global Strategy to Promote Healthy Diets and Physical Activity, and the WHO Global Strategy to Reduce Harmful Use of Alcohol, as well as the WHO Framework Convention on Tobacco Control.

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OP9. Establish or strengthen national multi-stakeholder dialogue mechanisms, as appropriate, for the implementation of the national multisectoral action plans for the prevention and control of non-communicable diseases in order to attain the national targets;

OP10. Share information with global and regional partners on experiences, including successes and challenges related to the implementation of national policies and programmes to prevent and control non-communicable diseases and promote health, in order to further strengthen the global knowledge and expand the evidence base on best practices and lessons learned, including on traditional medicines, to promote informed action;

OP11. Invest in research, including in public health measures, on health promotion and disease prevention and health sectors role therein, and in new treatment options for prevention and cost-effective therapies;

OP12. Take the necessary measures to recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health across the life-course, in respecting human rights obligations and addressing the specific health needs of children, women, older persons, persons with disabilities and others who are more vulnerable to non-communicable diseases;

OP13. Take measures to better prepare the health systems to respond to the needs of the rapidly ageing population, including the need for preventive, curative, palliative and specialized care for older persons, taking into account the disproportionate burden of non-communicable diseases in older persons, and that population ageing is a contributing factor in the rising incidence and prevalence of non-communicable diseases;

OP14. Scale up efforts to use information and communications technologies, including e-health and m-health and other innovative solutions, through, inter alia, promotion of public-private partnership to accelerate ambitious action towards the prevention and control of non-communicable diseases;

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OP15. Increase global awareness, action and international cooperation on environmental risk factors, to address the high number of premature deaths from non-communicable diseases attributed to human exposure to indoor and outdoor air pollution, and underscoring the particular importance of cross-sectoral cooperation in addressing these public health risks;

OP16. Promote healthy communities by addressing the impact of environmental determinants on non-communicable diseases, including air, water and soil pollution, exposure to chemicals, climate change and extreme weather events; as well as the ways in which cities and human settlements are planned and developed, including sustainable transportation and urban safety, to promote social integration and connectivity.

OP17. Encourage the adoption of holistic approaches to health and wellbeing through regular physical activity, including sports, recreation and yoga, to prevent and control non-communicable diseases and promote healthy lifestyles, including through physical education;

OP18. Empower the individual to make informed choices by providing an enabling environment, strengthen health literacy through education, implement population-wide and targeted mass and social media campaigns that educate the public about the harms of smoking/tobacco use and second hand smoke, the harmful use of alcohol, and the excessive intake of fats, saturated fats, trans-fats, sugars and salt, and promote the intake of fruits and vegetables, as well as healthy and balanced sustainable diets and reduce sedentary behaviour;

OP19. Strengthen and reorient health systems towards the achievement of universal health coverage and improvement of health outcomes, and high quality, integrated and people-centered primary and specialized health services for the prevention, screening and control of non-communicable diseases and related mental health disorders and other mental health conditions, throughout the lifecycle, including access to safe, affordable, effective and quality essential diagnostics, medicines, vaccines and technologies, palliative care, and understandable and high quality, patient friendly, information on their use, as well as health management information systems and an adequate and well trained/equipped health workforce;

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[OP20. Promote increased access to affordable, safe, effective, and quality medicines and diagnostics and other technologies, including through the full use of the provisions of the trade-related aspects of intellectual property rights (TRIPS) flexibilities for the protection of public health, while recognizing that intellectual property rights are an important incentive in the development of new health products for non-communicable diseases;] ***co-facilitators understand that interested delegations are pursuing consultations.***

OP21. Implement measures to improve mental health and well-being, including through developing and integrating comprehensive services and treatment for people living with mental disorders and other mental health conditions into national responses for non-communicable diseases, and addressing their social determinants and other health needs, fully respecting their human rights;

OP22. Promote access to affordable diagnostic, screening, treatment and care as well as vaccines that lower the risk for cancer, as part of the comprehensive approach to its prevention and control, including cervical and breast cancers;

OP23. Integrate, as appropriate, responses to non-communicable diseases and communicable diseases, such as HIV/AIDS and Tuberculosis, especially in countries with the highest prevalence rates, taking into account their linkages;

OP24. Strengthen the design and implementation of policies, including for resilient health systems and health services and infrastructure to treat people living with non-communicable diseases and prevent and control their risk factors in humanitarian emergencies, including before, during and after natural disasters, with particular focus on countries most vulnerable to the impact of climate change and extreme weather events;

OP25. Pursue all necessary efforts to mobilize the full, active and responsible engagement and participation of all relevant stakeholders for the prevention and control of non-communicable diseases;

OP26. Promote meaningful civil society engagement to encourage governments to develop ambitious national multisectoral responses for the prevention and control of non-communicable diseases, and to contribute to their implementation, forge multi-

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stakeholder partnerships and alliances that mobilize and share knowledge, assess progress, provide services, and amplify the voices of and raise awareness about people living with and affected by non-communicable diseases;

OP27. Engage with the private sector, taking into account national health priorities and objectives for their meaningful and effective contribution to the implementation of national non-communicable diseases responses in order to reach SDG 3.4 on non-communicable diseases, while giving due regard to managing conflicts of interests;

OP28. Invite the private sector to strengthen their commitment and contribution to the implementation of national responses to prevent, control and treat NCDs to reach health and development objectives by:

- (a) Promoting and creating safe and healthy working environments, by implementing occupational health measures, including by establishing tobacco free workplaces, through good corporate practices, workplace wellness programmes and health insurance plans, as appropriate;
- (b) Encouraging economic operators in the area of alcohol production and trade, as appropriate, to contribute to reducing harmful use of alcohol in their core areas, taking into account national religious, and cultural contexts;
- (c) Further producing and promoting food products consistent with a healthy diet, making further efforts to reformulating them in order to provide healthy and nutritious options, reducing the excessive use of salt, sugars and fats and saturated fats, as well as providing appropriate content information of those nutrients, in accordance with international guidelines on nutrition labeling;
- (d) Committing to further reduce exposure of and impact on children of marketing of foods and beverages high in either fats, saturated fats, sugars or salt, consistent with national legislation, where applicable;
- (e) Contributing to further improve access to and affordability of safe, effective and quality medicines and technologies in the prevention and control on non-communicable diseases;

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OP29. Establish or strengthen, transparent national accountability mechanisms for the prevention and control of non-communicable diseases, taking into account government's efforts in developing, implementing and monitoring national responses for addressing non-communicable diseases and existing global accountability mechanisms;

OP30. Commit to mobilize and allocate adequate, predictable and sustained resources for national responses to prevent and control non-communicable diseases and to promote mental health and well-being, through domestic, bilateral, and multilateral channels, including international cooperation and Official Development Assistance, and continue exploring voluntary innovative financing mechanisms and partnerships, including with the private sector, to advance action at all levels;

OP31. Call on WHO to continue to exercise its leadership, as the directing and coordinating authority on international health, in order to contribute to Member States efforts to prevent and control non-communicable diseases by continuing and strengthening its normative and standard setting work and its capacity to develop and provide technical cooperation, assistance and policy advice to Member States, as well as enhance its multi-stakeholder engagement and dialogue through the WHO Global Coordination Mechanism for the Prevention and Control of Non-communicable Diseases and the United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases;

OP32. Call further on WHO to continue to promoting and monitoring enhanced global action to prevent and control non-communicable diseases through coordinating work with other United Nations agencies, development banks and other regional and international organizations, including by exploring new financing, implementation, monitoring and evaluation and/or accountability mechanisms;

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OP33. To implement these actions, we commit to act in unity to create a just and prosperous world where all people can exercise their rights and have equal opportunities to live healthy lives in a world free of the avoidable burden of non-communicable diseases;

OP34. We request the Secretary-General, in consultation with Member States, and in collaboration with the World Health Organization and relevant funds, programmes and specialized agencies of the United Nations system, to submit to the General Assembly, by the end of 2024, for consideration by Member States, a report on the progress achieved in the implementation of the present political declaration, in preparation for a High-Level Meeting for a comprehensive review, in 2025, of the progress achieved in the prevention and control of non-communicable diseases and promotion of mental health and well-being.

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