European Union
Statement

WHO
72nd World Health Assembly
(20-28 May 2019)

Agenda item 11.8 – Non-Communicable Diseases

Geneva, 24 May 2019

- CHECK AGAINST DELIVERY –
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EU Statement

Honourable Chair,
Distinguished Director-General,
Colleagues,

I am speaking on behalf of the European Union and its Member States.

The Candidate Countries Turkey, Montenegro\(^*\) Serbia\(^*\) and Albania\(^*\), Ukraine, the Republic of Moldova as well as Georgia align themselves with this statement.

We would like to thank the DG for the updated report. The EU and its Member States acknowledge that the impact of major non-communicable diseases, including diabetes, cardiovascular diseases, cancer, chronic respiratory diseases and mental disorders, is alarming. Many non-communicable diseases could be prevented or hindered in progress, if harmful use of alcohol, tobacco use, unhealthy diets and physical inactivity could be avoided.

\(^*\) Montenegro, Serbia and Albania continue to be part of the Stabilisation and Association Process.
While communicable diseases are still the major causes of death in low-income countries, this is projected to be overtaken by NCDs in the coming decade. In middle-income countries and in high-income countries of the ten leading causes of death are NCDs. Furthermore, the table with breakdown of deaths from NCDs in 2016 by WHO regions presents a striking difference of how NCDs affect men and women. Although the report points out some progress in the overall survival as well as in the prevention and control of non-communicable diseases, for example in strengthening national capacities, we still move too slowly to meet the targets we have set for 2030, as also indicated in the Political Declaration adopted during the high-level meeting.

We need to scale up our action to tackle these alarming developments, as we are doing already in the EU by transferring best practices between countries. We consider it especially important to focus our action on four main risk factors - harmful use of alcohol, tobacco use, unhealthy diets and physical inactivity. We acknowledge the importance of multi-sectoral actions to address social, gender related and economic determinants of NCDs including overall poverty reduction, health inequity and achieving universal health coverage, which will be highlighted at the UN High Level Meeting later this year. Addressing NCDs will also involve supporting strong and integrated health systems, including community systems that can provide effective prevention strategies, improved early detection, diagnosis and enhanced treatment and quality of care.

We also call for enhanced action on behalf of the DG and the WHO Secretariat, both globally, and regionally, to address the mental health and air pollution elements in the NCDs discussion. In this regard, we would like the Secretariat to reassure the Member States that with structural changes in the WHO the NCDs will receive the same or even more attention, and that NCD risk factors and related
diseases will be approached in a coordinated manner. Furthermore, the resources WHO allocates to the NCDs programme need to correspond to the challenges Member States have in facing the epidemiological transition.

Finally, The EU welcomes and supports adopting the draft decision on the Prevention and Control of NCDs as recommended by the Executive Board in decision EB144(1), which we unanimously co-sponsored.

Thank you, Chair.