



European Union

Statement

WHO

156th Executive Board

(3-11 February 2025)

Agenda item 7- Follow-up to the third HLM on NCDs

Geneva, 5 February 2025

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Chair,

Director-General,

Members of the Executive Board,

Colleagues,

I have the honour to speak on behalf of the EU and its Member States.

The candidate countries North Macedonia, Montenegro, Albania, Ukraine, Republic of Moldova, Bosnia and Herzegovina* and Georgia as well as Armenia align themselves with this statement.

NCDs continues to be the leading cause of premature mortality and morbidity in the world. We are offtrack on our common goal to reduce NCDs premature mortality by a third by 2030 and this represents a major burden on public health, and our ageing society, leading to social and economic harm on individuals, their families, carers and communities.

The year 2025 must be a year of collective work to help reverse this trend. This is the aim of the fourth High-Level Meeting (HLM) of the United Nations General Assembly (UNGA) on the prevention and control of non communicable diseases and the promotion of mental health and well-being

The EU is committed to an impactful new political declaration on NCDs, based on scientific evidence and grounded in human rights. This will give impulse on NCD prevention and control from 2025 onwards, with WHO playing a leading role and in partnership with all relevant global health actors. The Nutrition for Growth summit, on the 27th and 28th March 2025, will also provide an opportunity to address malnutrition in all its forms, a significant risk factor for NCDs.

Cost-effective and evidence-based solutions for governments and other stakeholders to prevent NCDs and mitigate their impact on individuals are now well-known and widely recognized.

* North Macedonia, Montenegro, Albania and Bosnia and Herzegovina continue to be part of the Stabilisation and Association Process.

Their implementation is about **political will to prioritize public health over other considerations and technical know-how on implementation. In the light of current budgets constraints, it is also crucial to prioritize continuity of essential NCD programs and avoid additional strain. Therefore, we would like to request the WHO Evaluation Office to assess impact and cost of the recurring addition of new “health day”, and recommend a sustainable approach.** To achieve our shared goals, the EU supports and advocates:

1. **A multisectoral collaboration approach**, implemented through social participation and involving relevant sectors, including public and private actors – **while stressing the need to safeguard the integrity of public health policy, being aware of possible influence from commercial and other interests.** This is critical to create supportive environments by addressing the determinants of health.
2. **Action on preventable risk factors** that are common to NCDs. This includes implementing public health interventions that promote and enable health literacy, stress management, healthy diets, adequate physical activity, and a pollution-free environment, as well as tobacco-, nicotine- and alcohol-control policies, which thereby also contribute to the reduction of health inequalities
3. **Monitoring trends and evaluate progress** in addressing NCDs and their risk factors. Quantified objectives at the national level should guide priorities and policies effectively, and existing initiatives can measure the impact of these interventions.
4. **A comprehensive Care continuum approach** encompassing health promotion, prevention, screening, early detection, and treatment of NCDs, including mental health conditions, as well as access to high quality rehabilitation services and palliative care. This approach should also take into account the rising prevalence of multimorbidity, which is connected to demographic shifts in the EU and globally.
5. **Strengthening Primary Healthcare** to scale up health promotion, prevention, screening, early detection, disease management, timely treatment of NCDs and support for self-management, in coordination with a community approach. Universal Health Coverage (UHC) frameworks should center primary healthcare and help prevent catastrophic out-of-pocket health expenditures.

6. **Enhancing access for all to innovative and effective medications**, such as those for key NCDs including diabetes, cardiovascular disease and cancer, through the collaboration of all partners, including private ones.

Let us work together to progressively respond to the needs of persons living with or at risk of developing NCDs and ensure the viability of our national healthcare systems by prioritizing health promotion and disease prevention.