

**Statement by The Republic of Rwanda
on
Resumed sessions of WHA73 (9–14 November 2020) and EB147 (16 November)**

**Agenda 11.2
Follow-up to the high-level meetings of the United Nations General Assembly on
health-related issues**

9-14 November 2020

Rwanda continues to strive for universal access to health care with a major focus on the poor via our community-based health insurance scheme (CBHI) through which more than 79% of the population in Rwanda have access to affordable health care.

However, the CBHI has been facing financial sustainability challenges due to rising healthcare costs, increasing disease burden attributable to non-communicable diseases, and low contribution rates.

According to the latest Health Resource Tracking Tool report, 2016/2017, Rwanda spent US\$ 505 million in health. However, little was spent on NCDs Prevention and control. Our budget allocation and expenditure on NCDs must increase to tackle the increasing NCD challenge.

Therefore, with support from The Defeat-NCD Partnership at UNITAR and other partners, we prepared a National NCD Strategy and Costed Action plan for the Prevention and Control of NCDs (2020–2025) with the goal to ensure that Rwanda moves on track towards achieving the globally agreed targets including reducing premature mortality from NCDs by 25% by 2025. The plan requires investing around US\$ 367 million over the next five years and will help us reach more than 4.8 to 5 million people with the essential services they need.

To achieve our goal, we will need to increase our primary health care service packages and expand financial protection for NCDs. We therefore welcome the proposed operational framework for primary health care. In addition, we encourage initiatives like the Defeat-NCD Marketplace to be part of this operational framework to help countries like Rwanda increase access to quality assured, affordable NCD supplies.

We are committed to promoting the health of our population with strong emphasis on incorporating awareness and education through holistic, lifelong learning. Our National NCD Strategy starts the focus by reaching mothers during pregnancy and early childhood care to ensure the reduction of long-term effects on their offspring, the strategy then targets children in schools to ensure they develop an understanding of behavioural, modifiable risk factors for NCDs. We will also work across the Government through various ministries to reduce NCD risk factors and promote healthier, enabling environments, including reduction of NCD risk factors at workplaces.

Endorsing the EB 146 (14) decisions for accelerating actions to reduce the harmful use of alcohol, our new Plan sets the scene towards increasing the number of interventions aiming to reduce availability of retailed alcohol, enforce restrictions on promotion of alcohol products and raising taxes on alcoholic beverages to reduce their harmful consumption.

Our plan also focuses on integrating NCDs with mental health programmes at health facilities, in pursuance of decision WHA 72(11) and EB146/7.

Finally, allow me to thank all our partners who helped us achieve the current progress and to call on development actors to increase their attention and support to NCD programme to help Rwandans build-back better after COVID-19 and live healthy, productive lives.

Thank you

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