



European Union

Statement

WHO

78th World Health Assembly

(19 May – 27 May 2025)

Item 13.1 – Follow-up to the political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases

Geneva, 21 May 2025

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EU Statement

Chair,

Director General,

Excellencies,

Colleagues,

I am delivering this statement on behalf of the EU and its 27 Member States.

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

Non-communicable diseases remain the leading cause of premature mortality globally, and we are currently off track to meet the 2030 SDG target of reducing premature NCD mortality by one-third. The EU remains deeply committed to reversing this trend through an ambitious, human-rights and evidence-based political declaration at the upcoming Fourth High-Level Meeting.

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

First, we call for a **comprehensive approach to NCDs and mental health across the life course**. This includes health promotion, prevention, early detection, diagnosis, treatment, rehabilitation and palliative care, with high standards of quality and safety, and guaranteeing continuity of care. Mental health must be fully integrated across health systems, considering challenges, such as limited resources, and patient stigmatisation. Special attention must be paid to persons in vulnerable and/or marginalized situations, children, adolescents, older persons and persons living with NCDs and/or disabilities. EU Council Conclusions in this field are being elaborated.

We underline the importance of primary healthcare as the cornerstone of universal health coverage, and the need to reorient health systems toward health promotion and disease prevention together with communities through social participation and the wellbeing economy.

We need to provide consistent care throughout the life course, with particular attention to individuals with multiple chronic conditions. Leveraging affordable, high-quality and safe digital solutions, while promoting digital health literacy and ensuring access to specialised services and medicines are also crucial.

Second, we stress the urgency of **tackling shared preventable risk factors**. This includes implementing public health interventions that support healthy diets and breastfeeding, adequate physical activity, a healthy environment, as well as effective tobacco-, nicotine- and alcohol-control policies. New developments, like vaping and the impact of social media on mental health require our attention. Poor oral health is likewise an important risk factor that needs addressing.

Addressing the underlying determinants, the impact of economic, commercial, market, as well as social and cultural factors, and promoting health literacy are essential to reduce health inequalities. These efforts should take into account the guidance of WHO recommendations, including the WHO Best Buys.

Third, we advocate for **strengthened accountability and sustainable implementation**. Quantified targets should guide progress, supported by regular monitoring. In light of resource constraints, coordination and complementary use of existing mechanisms must be prioritised, and synergies used effectively, to maximise impact.

Chair,

Let us reaffirm our shared responsibility to act and to prioritize public health. The EU stands ready to work with all partners, while giving due regard to preventing conflicts of interests, to deliver meaningful progress on NCDs and mental health – for the health, dignity and well-being of all people.

Thank you.