Luxembourg Statement on advancing health and well-being

Ninth High-level Meeting of the Small Countries Initiative
10–12 May 2023, Luxembourg

We, the Ministers and high-level delegates of the Member States of the Small Countries Initiative with populations of 2 million and fewer, and partners, met in person in Luxembourg on 10–12 May 2023 to attend the Ninth High-level Meeting of the Small Countries Initiative: advancing health and well-being. This was an opportunity to share our progress in implementing the Roadmap towards better health in small countries in the WHO European Region, 2022–2025, and to address the growing challenges of small countries in our Region and beyond.

1. We welcome the WHO Regional Office for Europe initiative on health in the well-being economy, and commit to use it as a model for innovation in public health. We will contribute by investing in health, engaging with finance, economy and labour sectors, measuring progress and sharing lessons learned.

2. We stress that noncommunicable diseases (NCDs) cause nearly 90% of deaths and 85% of years lived with disability in our countries. We recognize that we are off track to reach many internationally agreed targets and commitments, and that many cost-effective and recommended interventions to tackle NCDs remain underutilized in our countries. Risk factors for NCDs such as tobacco, alcohol, unhealthy diets, insufficient physical activity, overweight and obesity, hypertension and high blood lipids, as well as psychosocial and environmental determinants, continue to cause much of the ill health among our populations. We commit to further strengthening implementation of the NCD “best buys” and other social and environmental interventions recommended by WHO, such as developing and implementing national NCD strategies; strengthening surveillance systems; bolstering tobacco and alcohol demand-reduction measures; limiting the marketing of unhealthy products; addressing overweight and obesity; and improving cancer management, drug therapies and prevention counselling. We acknowledge that the prevention of NCDs is multisectoral, and that NCD prevention and management require multidisciplinary team-based models of primary health care delivered through multiple platforms. We will strengthen NCD prevention and control in policies and action related to primary health care. We urge commercial actors to protect and improve health and health equity.

3. We acknowledge that challenges with access and affordability of medicines (including novel high-cost medicines and shortages of essential medicines) are amplified in small countries. We agree to strengthen and expand financial protection associated with access to medicines, and commit to enhance our voluntary intercountry collaboration, including in horizon scanning, health technology assessment, demand pooling and joint procurement. We commit to supporting the strategy on improving access to medicines and ensuring financial protection and the Access to Novel Medicines Platform of the WHO Regional Office for Europe, and to continuing implementation of World Health Assembly resolution WHA72.8

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on improving the transparency of markets for medicines, vaccines and other health products. We request that WHO ensures that the specific needs of small countries are given due attention in regional initiatives and strategies; continues discussion through the Small Countries Initiative (SCI) medicines thematic group; and reports progress to the next annual high-level meetings of the SCI.

4. We thank the Icelandic Ministry of Health and the WHO Regional Office for Europe for organizing the interactive online event Towards collaboration on mental health in the SCI, which took place on 24 March 2023. We recognize the need to **scale up the mental health workforce, address stigma, and improve the mental health of our children, adolescents and young people.** Within the SCI, we suggest strengthening cooperation with and among multidisciplinary peer-support groups, and taking advantage of the networks offered by the Pan-European Mental Health Coalition in promoting continuous professional development, including through multicountry mental health university training.

5. We are pleased that our countries are making progress in meeting their **health-care workforce** challenges, collaborating multilaterally with the support of the SCI Working Group on Human Resources for Health. Further action across the SCI countries will be on agreed priorities, development and implementation of national human resources for health strategies, organization of an executive course on human resources for health leadership and management, and technical support on retention and continuous professional development. This will be aligned with the Region-wide draft framework for action on the health and care workforce currently in development and the recently adopted Bucharest Declaration on the health and care workforce.³

6. We welcome the fact that in all our countries the capacity to govern digital transformation in the health sector and advance digital health literacy is accelerating.⁴ Further needs include provision of mandatory training for health workers and students; development of digital inclusion plans and policies to ensure that everyone has access to digital technologies; establishment of regulatory oversight entities to ensure the quality, safety and reliability of mobile health applications; and development of a national data strategy and policy for the use of Big Data and advanced analytics in health care. We suggest promoting the dissemination and exchange of good practices and lessons learned in digital health and health information among small countries through re-establishment of the Working Group on Digital Health and Health Information Systems.

7. We engage to strengthen **globalization of the SCI** with other subregional groups of countries and regional bodies among WHO regions, and ask the WHO European Office for Investment for Health and Development in Venice, Italy, to broaden its outreach and increase communication with interested small countries, in accordance with global developments.

8. We thank the SCI secretariat at the WHO European Office for Investment for Health and Development for its continued attention to the needs of small countries, outreach and training, and for the enabling mechanisms put in place, and will further support the secretariat’s efforts.
