The summit in September in New York is our chance to broker an international commitment that puts noncommunicable diseases high on the development agenda, where they belong.

Mr Ban Ki-moon
Secretary-General United Nations

Noncommunicable diseases deliver a two-punch blow to economies and development. They cause billions of dollars in losses of national income, and they push millions of people below the poverty line, each and every year. The September high-level meeting on noncommunicable diseases is an opportunity that we must seize. We dare not fail.

Dr Margaret Chan
Director-General World Health Organization

Who should attend – National delegations comprising:

◊ Heads of State and Government
◊ Parliamentarians
◊ Ministers of Foreign Affairs and Health
◊ Representatives of civil society

How to participate:

◊ Plenaries: Three plenary sessions will take place giving world leaders a platform to disseminate lessons learnt and highlight national approaches.
◊ Round tables: Three round tables will be held to foster exchange of experiences and international cooperation.
◊ Side-events: Numerous side events will take place to debate issues at the forefront of the NCD fight.
MAKING NCDs A GLOBAL PRIORITY

Eleven years since the landmark World Health Assembly endorsed the Global Strategy for the Prevention and Control of Noncommunicable diseases to reduce the toll of premature deaths due to noncommunicable diseases (NCDs), Heads of State and Government will come together to address the prevention and control of NCDs worldwide at the High-level meeting of the United Nations General Assembly on the Prevention and Control of NCDs between 19–20 September 2011 in New York.

Noncommunicable diseases -- mainly cardiovascular diseases, cancers, chronic respiratory diseases and diabetes -- are the biggest cause of death worldwide. More than 36 million die annually from NCDs (63% of global deaths), including 9 million people who die too young before the age of 60. More than 90% of these premature deaths from NCDs occur in developing countries, and could have largely been prevented.

This is the second time in the history of the United Nations that the General Assembly will meet with the participation of Heads of State and Government on an emerging health issue with a major socio-economic impact. Countries are expected to adopt a concise action-oriented Outcome document that will shape the international agenda for generations to come.

Two developments have led to the High-level meeting at this juncture. The first development is the growing international awareness that premature deaths from NCDs reduces productivity, curtails economic growth, and poses a significant social challenge in most countries. The second development is the now unequivocal evidence that “best buy” interventions to reduce the toll of premature deaths due to NCDs are workable solutions and that they are excellent economic investments – including in the poorest countries.

The 2011 UN High-level meeting on NCDs is a unique opportunity for Heads of State and Government to set a new global agenda, exercise leadership and call for action to promote growth and protect health. As decided by the United Nations General Assembly, Member States are encouraged to be represented at the level of Heads of State and Government and to include in their national delegations parliamentarians, representatives of civil society, including NGOs, academia and networks working on the prevention and control of NCDs.

PLENARY

The plenary meetings on 19 September 2011 from 09:00 to 13:00 and from 15:00 to 18:00 at the UN General Assembly Hall will be chaired by the President-elect of the 66th session of the General Assembly, Ambassador Nassir Abdulaziz Al-Nasser (Qatar), and will feature opening statements between 09:00 and 10:00 by the President of the General Assembly, the Secretary-General, the WHO Director-General and a representative of civil society.

The closing plenary meeting on 20 September 2011 from 15:00 to 16:00 at the UN General Assembly Hall will comprise the presentation of summaries of the round tables and the adoption of the Outcome document.
2011 UN High-level meeting on NCDs

ROUND TABLES

Three thematic round tables, which will be held in parallel to the plenary, will address the following themes:

- Round table 1 (19 September 2011, 10:00–13:00, ECOSOC Hall):
  The rising incidence, developmental and other challenges and the social and economic impact of NCDs and their risk factors.

- Round table 2 (19 September 2011, 15:00-18:00, ECOSOC Hall):
  Strengthening national capacities, as well as appropriate policies, to address prevention and control of NCDs.

- Round table 3 (20 September 2011, 10:00-13:00, ECOSOC Hall:
  Fostering international cooperation, as well as coordination, to address NCDs.

The participation in each round table will include Member States, observers, and representatives of entities of the United Nations system, civil society and the private sector.

A concept note for each round table, and accompanying discussion papers, will be made available at: http://www.who.int/ncd.

SIDE EVENTS

On the occasion of the High-level meeting, a number of countries will be hosting side events, which will take place during lunch hours (in between the plenary and round tables) or in the early evening hours (following the plenary). An overview of all available side-events is also available at: http://www.who.int/ncd.
36 MILLION people die annually from NCDs.

63% of all global deaths are due to NCDs.

4 X 4 Four types of noncommunicable diseases – cardiovascular diseases, diabetes, cancers, and chronic respiratory diseases – make the largest contribution to mortality in the majority of countries. These four NCDs are largely preventable by means of interventions that tackle four risk factors for NCDs: tobacco use, unhealthy diets, physical inactivity, and harmful use of alcohol.

9 MILLION people die too young from NCDs (before the age of 60).

90% of these premature deaths due to NCDs occur in developing countries.

58% (6%) premature deaths among women due to NCDs range from as high as 58%, in low-income countries, to as low as 6%, in high-income countries, leading to growing inequalities between countries and populations.

2/3 + 1/3 Implementing cost-effective interventions that reduce risk factors for NCDs will contribute up to two-thirds of the reduction in premature mortality. In addition, health systems that respond more effectively and equitably to the health-care needs of people with NCDs can reduce premature mortality by another one-third up to one-half.

HUNDREDS OF BILLIONS OF DOLLARS It is the estimated cost of inaction due to current losses in the national product of developing countries resulting from NCDs and shrinking workforce that curtails economic growth.

US$ 1–3 is the estimated annual cost per head of delivering essential NCD interventions in low-income settings.