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Comments

Unless political action to address these obstacles is accelerated, the current rate of decline in premature mortality from NCDs is insufficient to meet SDG 3.4 by 2030. We, therefore, commit to pursue these actions:

5. Despite the complexity and challenging nature of developing coherent policies across government sectors through a health-in-all policies approach to addressing NCDs, we will continue doing so to achieve improved outcomes from the perspectives of health, health equity and health system functioning (strengthening). We will prioritize the most cost-effective, affordable and evidenced-based interventions that will bring the highest public health return on investment, in accordance with national context and priorities. We will emphasize health as a political priority, which must be reflected in regulation, standard setting and fiscal policies that address the impact of the four common NCD risk factors, while monitoring the health outcomes.

15. Where needed, we will work on national investments cases for the prevention and control of NCDs, their risk factors and determinants, to create the fiscal space for action. Many countries will have to manage blends of innovative and traditional funding sources, including leveraging existing programmes and resources to provide integrated services. Where appropriate, we will consider using interventions that have the capacity to generate revenues such as taxation of tobacco, alcohol, sugar-sweetened beverages as well as impact investment.

17. NCDs can perpetuate poverty. For the poor and near poor, chronic illness and disability can be an economic catastrophe. Hard fought economic gains can be quickly wiped out. Women face a double NCD burden, often assuming gender-based roles as unpaid carers of the sick. We will take action on the impacts of NCDs on poverty and development and we strongly encourage the inclusion of NCDs in the Official Development Assistance at all levels.

24. One of the main challenges for the prevention and control of NCDs is that public health objectives and private sector interests can, in many cases, conflict. We commit to enhancing the national capacity to engage constructively with the private sector for NCDs prevention and control in a way that maximizes health gains throughout the life course.

38. Acting in unity to address NCDs demands a renewed and strengthened commitment with vigor to show that we can be effective in shaping a world free of the avoidable burden of NCDs. In so doing, we will continue to listen to and involve the peoples of the world – those exposed to NCD risk factors, and those with health care needs for NCDs and mental health. We will continue to build a future that ensures present and future generations enjoy the highest attainable standard of health.