RESPONSE STATEMENT TO THE INTERACTIVE HEARING FOR THE
THIRD UN HIGH-LEVEL MEETING ON NCDS

We the undersigned welcome the opportunity to respond to the open call to civil society organisations to submit statements as a follow-on action from the interactive hearing hosted on 5 July 2018, as part of the preparatory process toward the third High Level Meeting of the General Assembly on Non-Communicable Diseases (NCDs). Co-signatories to this statement represent a coalition of leading international eye health organisations with expertise and experience in blindness and vision impairment, a range of conditions which both contribute to the public health burden of NCDs around the world and result from NCD associated complications, such as diabetic retinopathy. We hereby submit this statement to H.E. President Miroslav Lajčák for consideration.

OVERCOMING NCDS: IMPROVING THE LIVES OF THOSE LIVING WITH DISEASE
Approaches to tackling NCDs must be based on comprehensive integrated person-centred health care. This is critical both for early diagnosis and treatment and for the prevention, diagnosis, and treatment of comorbidities. In particular, for those at risk of and those living with comorbidities such as Diabetic Retinopathy and other Diabetes-related complications, there must be appropriate disease prevention and management strategies, including health promotion and health literacy, early detection and screening systems, treatment and rehabilitative services and assistive devices. In addition, there must be appropriate referral systems in place across the care continuum to ensure that those living with NCDs are able to access the support they need, when they need it. National plans to tackle NCDs must be designed and implemented in a manner that is coordinated and integrated accounting for comorbidities, and with adequate and appropriate health workforce to do this.

OVERCOMING NCDS: EQUITABLE ACCESS TO NCD HEALTHCARE
Certain populations and sectors of society, including people with disability - who make up 1/7 of the world’s population - can be at considerably greater risk of NCDs. Evidence shows that people with disability are also less likely to access health promotion and healthcare including NCD-related services. Ultimately, a person with disability such as blindness, can be more predisposed to developing an NCD, more susceptible to comorbidities, more exposed to unmanaged pain and suffering, more likely to experience further activity limitations, and at greater risk of dying prematurely from an NCD. Increasingly it is being understood that NCDs are rooted in inequities, this must be tackled by dismantling barriers to access for all people, including financial, physical, sensory, attitudinal, cultural barriers. Data on NCD healthcare services in health management and information systems increasingly must be disaggregated by income, gender, age, disability, ethnicity and other characteristics relevant in national contexts (SDG target 17.18) to be able to measure, monitor and improve access for vulnerable and marginalized groups.
OVERCOMING NCDs: A GLOBAL CALL TO ACTION

In order to comprehensively prevent and control NCDs we call on the third High Level Meeting of the General Assembly on NCDs and the associated outcome statement to acknowledge that:

- NCD healthcare services must be people-centred, accessible and inclusive to Leave No One Behind, in line with the 2030 Agenda for Sustainable Development.
- NCD policies and services must not only aim at reducing premature mortality, but also address NCD complications and comorbidities including mental health as an intrinsic part of the care continuum: promotion, prevention, treatment, rehabilitation, palliation.
- NCDs healthcare systems urgently require far greater investment, but the emphasis must go beyond mortality, toward establishing the appropriate services and systems to realise the right to health and wellbeing for all people in keeping with SDG3.

OVERCOMING NCDS: UNGA HLM3 NCDS ZERO DRAFT OUTCOME DOCUMENT

We support the NCD Alliance’s Detailed Analysis and Suggested Language for the Zero Draft Political Declaration for the 2018 UN High-Level Meeting on NCDs.

We welcome the Alliance’s recommendation that an additional paragraph be inserted into the draft that addresses other conditions of public health associated with the four major NCDs, including blindness and the suggested adjustment to PP3 to include comorbidities.

We welcome the Alliance’s recommendation for an additional paragraph on the devastating effect of NCDs, and disproportionate impact on vulnerable populations including persons with disabilities, women, children, and indigenous populations.

We also believe that there are a number of key areas in the draft declaration that can be strengthened to bring attention to NCD complications and comorbidities. It is our perspective that paragraphs PP11, OP2, OP3 and OP13 of the Zero Draft Political Declaration are the most appropriate junctures in the declaration to do so.

We appreciate the opportunity to submit this statement and will gladly provide additional supporting content on request.

For further information please contact Brandon Ah Tong, Global Advocacy Lead, The Fred Hollows Foundation, bahtong@hollows.org, +61 3 8330 8181.