I represent the Norwegian Cancer Society, the largest health NGO in Norway, and a founding member of the Norwegian NCD Alliance. Today I speak also on behalf of the Danish NCD Alliance.

Our organisations represent two countries, Norway and Denmark, who are two of very few countries who actually meets the target of allocating 0.7% of budgets for development assistance, Norway even consistently being on 1%. We commend this, and encourage other countries to follow.

We want to use this opportunity to address the role of Development Assistance in financing the NCD response.

Although not the one answer, there seems to be a shared understanding that development assistance indeed has a role to play in supporting the NCD response in Low income countries as catalyst for, and supplement to, national resource mobilisation.

We have three asks primarily directed to donor states:

1. Firstly: We will strongly urge donor countries to seriously consider if the current share of development aid spending on NCDs through addressing its risks factors and the underlaying commercial determinants, and supporting health system response to NCDs, adequately reflects the burden the disease actually represents – and not least is projected to represent in the future. We think I does not – and will encourage donor countries to support strong text on the role of ODA in the outcome document.

2. Secondly, we will urge Heads of State of donor countries to include Ministers with responsibility for international development in their delegations to the High Level Meeting.

3. Lastly, act on previously made commitments. For the effect to be catalytic ODA need to come in early. Development ministries and -agencies need to allocate sufficient human resources dedicated to follow the NCD agenda, so that they are able to draft policies for how development aid spending can most effectively meet partner countries requests for support of implementation of the WHO Best Buys. We suggest that these policies include:
   a. Efforts to link current global health priorities and partnerships (on Aids, TB, Malaria, W/C health) with the NCD agenda;
   b. Provide technical assistance in building effective tax systems for tobacco in line with the Framework Convention on Tobacco Control, on alcohol and sugar
   c. Support civil society in their advocacy efforts, their support of government led initiatives through outreach and service delivery, and their efforts to hold governments accountable.