

## **UN High-Level Meeting on NCDs – zero draft Political Declaration compilation text WHF Comments**

### **Preambulary paragraphs**

- We recommend stronger emphasis on **equity and the inclusion of NCD management within UHC frameworks**.
- Emphasis on **commercial determinants of health**, beyond social, economic and environmental needs to be kept.
- We are pleased to see that the importance of **access to diagnostics for major NCDs**, including CVD has been added to the compilation text, as well as the need to strengthen manufacturing, procurement and supply chain management to ensure constant access to CVD health tools.
- We support emphasis on the **implementation of ‘best buys’** and are pleased to see **the recognition of health taxes and 50% taxation on tobacco, alcohol and sugar-sweetened beverages** as an effective tool to generate additional revenues, while simultaneously promote CV health.
- We strongly support the greater emphasis placed on **obesity**, including in children under 5 and the recognition that its causes are multifactorial.
- We strongly believe that governments should push for a **higher target for hypertension control**. Currently, 273 million people are estimated to have their hypertension under control (1 in 5). If we stick to the political declaration zero draft target of 150 million more with hypertension under control, we will not reach the target of 50% control rates for hypertension.

### **Create health-promoting environments through action across government**

- We strongly recommend **setting a target of 50% excise taxes of retail price on alcohol, tobacco and SSBs**, but welcome the inclusion of nicotine delivery products in the compilation text.
- We strongly recommend referencing **the 2021 WHO Air Quality Guidelines** and reference the recommended levels and interim targets for common air pollutants.
- We also recommend adding reference to **adopting and implementing existing action plans and packages, such as the WHO Global Action Plan on Physical Activity 2018-2030**.

### **Strengthening primary health care**

- We are pleased to see reference to commitment to ensuring a **primary health care (PHC) approach to achieve UHC**.
- We recommend adding specific reference to the **need for technical and financial support to LMICs** to strengthen their PHC and implement integrated CVD services.

- The **WHO HEARTS Technical Package should be mentioned**, as well as the need to implement task shifting and sharing approaches to CVD care in resource-limited settings.

#### **Increase sustainable financing**

- A clear and specific **target for the percentage of health budget dedicated to CVD** should be included, as currently reference is only to mental health.
- **Financial burden of CVD** should be clearly mentioned, to ensure countries prioritize CVD in their health benefit packages.

#### **Strengthening governance**

- About 50% of NCD deaths are due to CVD, yet only 16 out of 194 countries have a national cardiovascular health action plan. We recommend specifically **mentioning national cardiovascular health action plans** in this section.

#### **Strengthen data and surveillance to monitor progress and hold ourselves accountable**

- We are pleased with the inclusion of **population-based surveys** and the inclusion of disaggregated facility-based information systems.