Presentation by Zsuzsanna Jakab, WHO Regional Director for Europe Health 2020 and noncommunicable diseases (NCDs): an agenda for development

27 April 2011, Moscow, Russian Federation

SLIDE 1



Welcome to this meeting of European delegations to the First Global Ministerial Conference on Healthy Lifestyles and Noncommunicable Diseases Control. I would like to express my gratitude to our Russian hosts, and to my co-chair Dr Veronika Skvortsova in particular, for all the support received in the organization of this Conference and this meeting. I would also like to express my gratitude to all of you, who agreed to come to Moscow a day before the Conference, to attend this meeting, and thus expressed so clearly your interest in this process and in the consultations that preceded it.

I would like briefly to put this meeting in the context of the Global Ministerial Conference on and the United Nations high-level meeting on noncommunicable diseases (NCDs), and propose to you some actions that we might take together to mark the European consensus on the problem of NCDs in a development context.



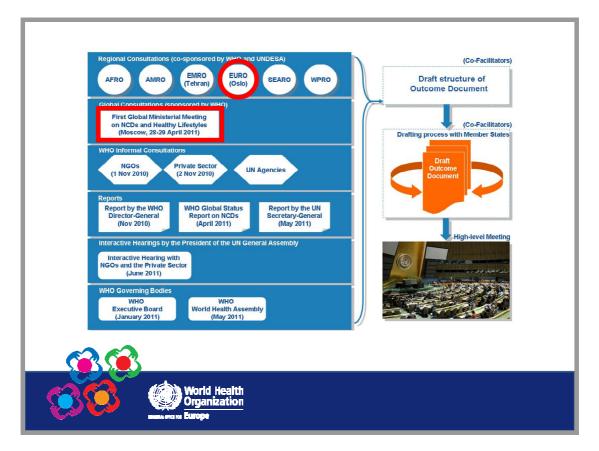
We are here to participate in a landmark event: the First Global Ministerial Conference on Healthy Lifestyles and Noncommunicable Diseases Control. A joint initiative of the Russian Federation and WHO, this Conference is a milestone in its own right – the first global gathering of high-level policy-makers in health addressing the burden of NCDs. This burden has long been neglected within global health initiatives and in the development agenda, despite the high burden of deaths from NCDs in low- and middle-income countries.

I present here a word cloud of the most common terms in draft zero of the Conference declaration, with words arranged in sizes proportional to their frequency in the document. Just a glance at this diagram illustrates the key concepts that are emerging as a global consensus on NCDs. They are a global problem that needs national solutions. They need a blend of disease prevention and disease management. Solutions involve the whole of society, and require the implementation of a package of cost-effective policies linked to strengthened health systems. Concepts such as these will form the core of our discussions in the next two days.

Why are this Conference, and the global movement it is generating, so essential?

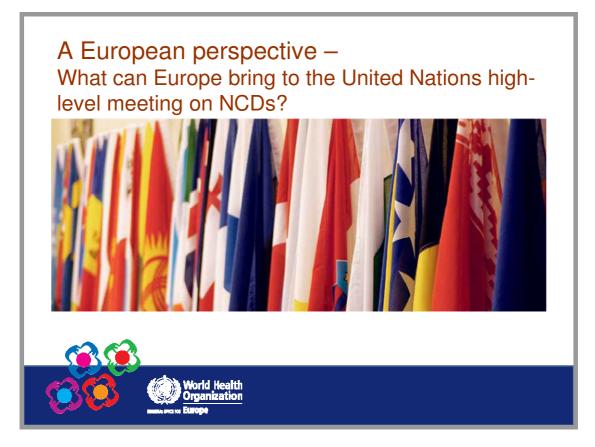
At the core of the problem is a group of chronic conditions that predominate as causes of death and disability in the WHO European Region and are fast emerging even in the least developed countries of the world. These diseases have links with a range of social, environmental and economic impacts. In impoverishing households, NCDs threaten efforts to eradicate poverty. In leading to premature deaths, NCDs threaten productivity and economic growth. In their close links with the health-related Millennium Development Goals (MDGs), NCDs impede progress towards the attainment of globally agreed goals for human development. Finally, evidence is growing that these diseases have a common causation, a core group of four risk factors, and a common set of social and economic determinants that are known and can be changed, given political will and resources.





In recognition of this, the United Nations General Assembly will convene a high-level meeting on NCDs, a level of discussion that has to date been solely reserved for HIV/AIDS. This diagram, familiar to many here, describes the process of consultation leading to the United Nations high-level meeting. I highlight two events in particular: the European regional consultation in Oslo, Norway and the Global Conference in Moscow, a global event hosted in our Region.

With regard to the Oslo consultation, our colleague Bjørn-Inge Larsen will describe the discussions and the outcome of the consultation processes. We believe that report on the consulation before you has taken on board all substantive comments and removed all points of contention. We intend to label it final and to feed it into the process of developing the outcome statement of the United Nations high-level meeting. As such, the document is important, as it is the European Region's only formal contribution to the drafting of the outcome statement.



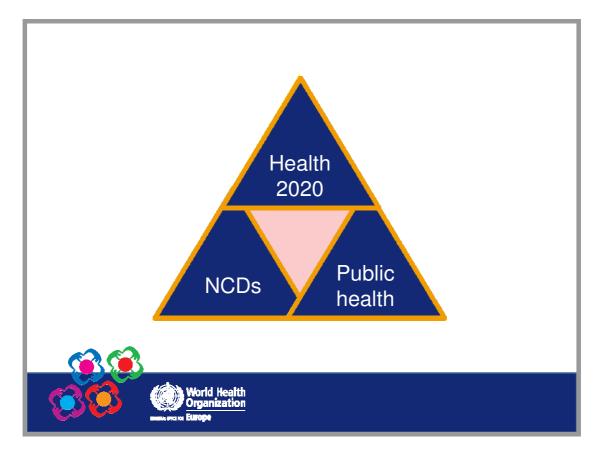
Another point of influence lies in the declaration to emerge from this Global Conference, which will be seen as a landmark and will establish a foundation that the high-level meeting will find it difficult to stray from. This will be a declaration that summarizes the demands of the world's health ministries and the latest scientific information on the subject.



It is only seven months ago that we were in Moscow for the sixtieth session of the WHO Regional Committee for Europe, setting ourselves an ambitious agenda, one that we have worked on together with active discussions and interaction. Already some impressive first results have emerged, and I ask: can we, collaboratively, reflect these developments in a European statement on NCDs and development as a guide on in the journey towards the next session of the Regional Committee, which will be held in Baku, Azerbaijan, on the eve of the United Nations high-level meeting?

The Oslo consultation was a turning point, when we realized that there were many perspectives on the issue of NCDs within the broader development agenda. We sense from the subsequent discussion that differences are narrower and there is growing ease within Europe with a more concerted approach to NCDs. Can we set up a process to describe this emerging consensus and include it in a statement to be adopted in Baku?

Given that the Region's only formal input to the United Nations high-level meeting would be the report on the Oslo consulation, we can allow ourselves an easier set of non-binding discussions where we try and extend the discussion to ministries of foreign affairs and other agencies and work towards a symbolic statement that could serve even as a focus to gather greater support for tackling NCDs within our Region.



It is for these reasons -a wish to get a go-ahead on the Oslo report, and a wish to make a coordinated input to the Global Conference - that I invited you to this afternoon's gathering.

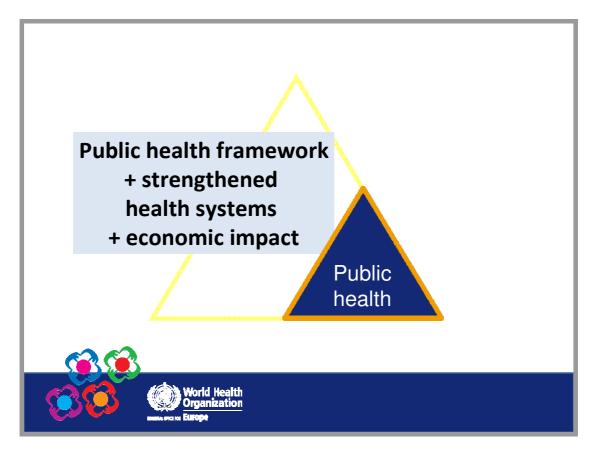
But there is another reason. I would also like us to take this opportunity to consider whether the WHO European Region is interested in making another, more informal, input to the global consultations. What might our contribution be: a European statement on NCDs and development?

Clearly we have made major strides in three areas since the Regional Committee meeting in Moscow. We are nearing completion of the first draft of the European health policy: Health 2020. We are forging ahead with a public health framework for action. And we have completed a broad regional consultation on a European action plan to implement the global action plan and the regional strategy on NCDs. All three are relevant to the development of the proposed statement on NCDs and development.



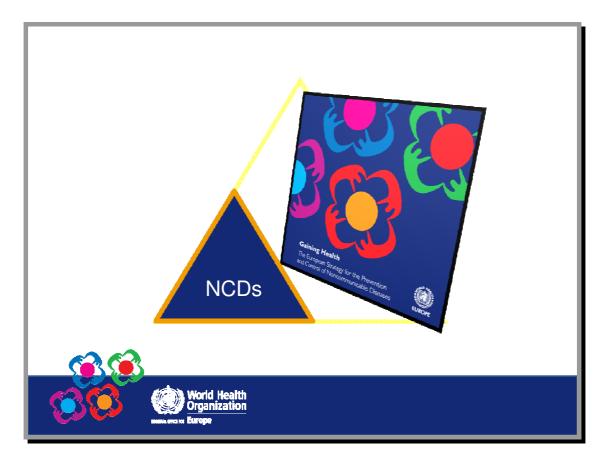
Health 2020 is an over-arching health policy, a document on which to base action for public health in Europe, in the tradition of the old Health for All movement.

Within Health 2020, at least two components will be ripe for consideration in the creation of a European statement on NCDs. We are organizing a specific study on governance for health, reviewing the literature and drawing implications for policy formulation and implementation across a wide range of sectors. We are also conducting a series of studies under the heading of a European review of social determinants of health, building the evidence base to allow policy-makers to address health inequalities through public policy. Both are innovations that have great relevance for NCDs, which feature strongly in Health 2020 discussions to date.



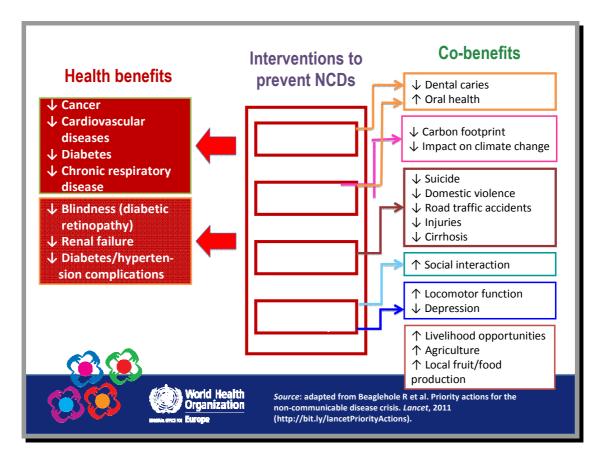
A recent meeting of high-level policy-makers in Andorra considered the progress made since the 2008 conference on strengthening health systems in Tallinn, Estonia, the development of a public health framework for action and specific areas of concern, including: health-system performance and threats to social solidarity in a time of financial crisis.

All of these theoretical developments and country experiences are central to tackling NCDs. In fact, given the burden of NCDs in the Region, it is indeed inevitable that we are developing health systems and public health capacities that seek to respond to NCDs. A statement from Europe on NCDs could not avoid synthesizing these developments and the lessons learned from coping with an epidemic that is now growing in less developed countries.



A third development is the work done on the action plan to implement the European strategy for the prevention and control of NCDs. We have held two consultations with the Standing Committee of the Regional Committee, one with technical counterparts in the Region and one with regional collaborating centres in health promotion, as well as discussions within WHO/Europe on areas of work related to NCDs that range from health systems through infectious diseases to environmental health.

We are working on the third draft of the action plan, which the Standing Committee will review in May. We are headed towards an incremental approach to NCDs that reflects the diversity of capacity in the Region. We are headed towards a set of concrete actions linked to an evaluation framework. We are developing a focused approach to action that resonates well with the global consensus emerging on the priority interventions for addressing NCDs. Our priority actions could give specificity to a European statement, should we agree to develop one.



With this complex illustration, adapted from *The Lancet* article on priority interventions, I would like to address a fourth and final component of the European perspective on NCDs. It is clear that the European Region supports United Nations resolution A/RES/64/265, which focuses on four diseases (cancer, cardiovascular diseases, diabetes and chronic respiratory disease) and their shared risk factors. This level of focus will lead to a specific discussion resulting in a short, focused document.

Nevertheless, in Europe, WHO Member States have strongly indicated that a comprehensive strategy for the Region needs also to consider mental health, violence and injuries, and other chronic conditions such as musculoskeletal disease. Indeed, such a broad view, considering the common pathways of causation and the opportunity for co-benefits between interventions on all these diseases, would form part of a European perspective if we chose to define it in a statement.



Hence my conclusion. At this meeting, I propose that we put the report of the Oslo consultation forward as the European contribution to the Global Conference in Moscow and the United Nations high-level meeting. I propose also that, based on that report, we consider these two questions.

- 1. Would it be desirable to develop a WHO European statement on NCDs and development as a tool to coordinate the European contribution to the United Nations high-level meeting and to raise the priority of NCDs in Europe?
- 2. If so, what would be its content and the plan for its development?

I look forward to your thoughts and our discussions.

Thank you.