

**Fourth High-level Meeting of the UN General Assembly on the
Prevention and Control of NCDs**

**Web-based consultation: Informing key priorities before the next
High-level meeting on NCDs (Phase I: 1 May–17 June 2024)**

Directions

The *WHO Global action plan for the prevention and control of noncommunicable diseases 2013–2030* ([NCD-GAP](#)) provides a road map and a menu of policy options for all Member States and stakeholders, to take coordinated and coherent action, at all levels, to attain the nine voluntary global targets on NCDs. In addition, sustainable development goal (SDG) target 3.4 calls for a reduction by one third of premature mortality from NCDs through prevention and treatment and the promotion of mental health and well-being, by 2030. Accelerating progress on the prevention and control of NCDs, and mental health and well-being will require dedicated and collaborative actions along all six objectives of the NCD-GAP, with an added focus to reduce air pollution and promote mental health as part of the 5 by 5 agenda endorsed by the third political declaration on the prevention and control of NCDs in 2018.

Using the table below, please provide written comments on key priority areas along each objective that can catalyse urgent action and attention by Member States and stakeholders, to accelerate progress in addressing the prevention and management of NCDs, the promotion of mental health and well-being, and the treatment and care of mental health conditions.

#	NCD-GAP objective	Comments on key priority areas
1	To raise the priority accorded to the prevention and control of noncommunicable diseases in global, regional and national agendas and internationally agreed development goals, through strengthened international cooperation and advocacy.	EFA urges WHO to explicitly refer to highly prevalent chronic inflammatory conditions that tend to be forgotten when addressing NCDs, such as atopic dermatitis/eczema, allergy and the chronic respiratory disease such as asthma and chronic obstructive pulmonary disease (COPD). Despite common knowledge, these chronic umbrella diseases present multiple sub-types and severity levels, they are associated with reduced quality of life for patients, and with the risk of life-threatening events. Moreover, EFA encourages WHO to take lung health and its underlying risks to develop comorbidities such as cardiovascular disease, obesity, anxiety and depression.
2	To strengthen national capacity, leadership, governance, multisectoral action and partnerships to accelerate country response for the prevention and control of noncommunicable diseases.	EFA calls the WHO to establish a dedicated indicator on lung health, which is currently missing. Among a broad range of possible options to achieve better lung health, we propose indicators such as reduction of emergency visits for asthma and COPD; asthma-related indicators such as increase in the outgrow rate; percentage of earlier diagnosis of COPD (at stage 1 or 2 rather than 3); reduction of atopic eczema flare-ups.
3	To reduce modifiable risk factors for noncommunicable diseases and underlying social determinants through creation of health-promoting environments.	The impact of social determinants of NCDs is huge and undeniable, as they tend to create, widen and perpetuate social inequalities. In this review of the framework, EFA calls the WHO to also robustly refer to decreasing the impact of commercial determinants on NCDs (i.e. tobacco and vaping commercialisation

		and consumption, use of harmful everyday chemicals and fragrances, use of fossil fuels, food transformation). According to a recently published report by WHO/Europe, exposure to occupation-related carcinogens, asthmagens, and injuries, cause an estimated 2.7 million deaths per year. For more information, see here: https://iris.who.int/handle/10665/376957
4	To strengthen and orient health systems to address the prevention and control of noncommunicable diseases and the underlying social determinants through people-centred primary health care and universal health coverage.	For EFA, multi-disciplinary care is a key element for secondary and tertiary disease prevention to underpin the frontline primary care services. Given the complexity and far-reaching impacts of chronic respiratory diseases, allergy, asthma chronic skin diseases such as atopic dermatitis, EFA advises WHO to instigate a people-centred approach to health and care that invests in health literacy and education, patient empowerment and self-management. Investing in patients supports the continuum of care and can lead to better disease outcomes, less hospitalisations and active citizens.
5	To promote and support national capacity for high-quality research and development for the prevention and control of noncommunicable diseases.	EFA stresses the importance of integrating the perspective of vulnerable groups into research. Patient organisations can bring expertise and added value to national capacities and frameworks, providing with their first-hand experience living with the disease. In a context of increasing digitalisation in the area of health, patients should be instrumental in drawing up research strategies through Patient Reported Outcomes, whether it is for diagnosis, treatment pathway or their own disease management.
6	To monitor the trends and determinants of noncommunicable diseases and evaluate progress in their prevention and control.	WHO has a key role in supporting countries to monitor, evaluate and present progress on NCDs to the various communities at the national level, their impact on healthcare systems and society and their interaction with infectious diseases. For example, For that, robust multiyear country reporting should be put in place and exploited by WHO, in coordination with existing initiatives like the OECD Health at Glance reports or the annual Global Burden of Disease.
*	<i>In addition:</i> To promote and protect mental health and well-being, including prevention and management of mental health conditions, as a vital component of achieving SDG target 3.4.	

Please send this completed form to OnTheRoadTo2025@who.int during the period 1 May–17 June 2024.