

Eastern Mediterranean NCD Alliance Statement – RCM 69 –

WHO/EMRO -10-13 October 2022.

Agenda item: Provisional agenda item 3(a), 3(c), 2(d), 2(f)

Your excellences, ministers of health, heads of delegates, ladies and gentlemen.

Thank you for the opportunity to deliver this statement on behalf of the Eastern Mediterranean NCD Alliance. (EM-NCDA)

The NCD community commends the Member States for their commitment to the prevention and control of NCDs. As the Eastern Mediterranean Region continues to battle a double and triple burden, particularly in low-income countries and countries with political instability and humanitarian crises, prioritizing NCDs is pivotal to accelerating the country's efforts to achieve global NCD targets by 2030.

We welcome the opportunity to review several technical papers, new strategies, and progress reports at the RCM69. Overall, we strongly recommend that all Member States adopt the new policy documents and proposed actions and targets. We need such ambitious targets and bold actions by all sectors (government and nongovernmental) if global NCD, UHC, and SDG targets, are to be met by 2030.

- We express concern that the PLWNCDs continued to suffer inequalities in healthcare access and financial toxicity due to insufficient, funding and competing health priorities.
- We note with caution that PLWNCDs are excluded or marginalized especially in LIC and countries with political instability, where the health system is less responsive to people's needs.

We call on regional leaders and policymakers to take bold actions to

- Ensure meaningful engagement of people living with NCDs, emphasizing person-centered care and NCD
 prevention to promote well-being and work towards achieving universal health coverage by 2030.
- Increased investments in the prevention and control of NCDs, including raising taxes on sugarsweetened beverages, tobacco, and alcohol is a powerful fiscal policy that governments have to use for health and well-being.
- Reorient the health system towards a strong PHC addressing the needs and priorities of PLWNCDs, strengthening the integration of NCD prevention and care in PHC. While prioritizing PHC as a 3-for-1 investment in UHC, health security, and better health and well-being because without a strong primary health care foundation to address growing gaps in essential health services, the most vulnerable communities, like PLWNCDs, will remain most susceptible to any threat.
- Change policies and programs to reduce health inequity and ensure health and well-being for all, leaving no one behind by requiring that patients, patient advocates, frontline health care providers, and communities be included as equal partners in the leadership and management of health care service delivery. Thank You