

WHO Executive Board: Member States' support for fighting NCDs not echoed in current UHC decision

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It was heartening to hear Member States such as Denmark, Malaysia and Moldova tell the recent gathering of the World Health Organization (WHO) Executive Board (EB152) that meeting the needs of people living with noncommunicable diseases (NCDs) is key to achieving universal health coverage (UHC). But the NCD Alliance was disappointed by the inconsistency between these statements and the lack of specific references to NCDs in the texts of the [current decision related to the upcoming UN high-level meeting on UHC](#) [1].

Given that the [report of the WHO Director-General](#) [2] (DG) also noted the NCDs-UHC link, as well as the point that delivering UHC, with a particular focus on primary health care, will be central to achieving greater preparedness and resilience to future health emergencies, we look forward to supporting Member States to integrate NCDs in the approaching UHC negotiations. In turn, Member States assure us that the focus of current text is mainly procedural, with negotiations about the substantive aspects of the relevant decision still ahead of them.

Strong political leadership key to progress on NCDs at the 2023 UN high-level meetings

Recognition that UHC and health security are intertwined goals with strong links within countries' health systems was widespread during the first day of EB152. Based on the premise that "investing in health security strengthens primary health care and health promotion, and vice versa", the [WHO DG's report on strengthening the global architecture for health emergency preparedness](#) [2] stressed the need to promote coherence in a fragmented system. That need for coherence was also emphasised by Member States, in a year that will see a series of UN high-level meetings on health, including those on UHC and on Pandemic Prevention, Preparedness and Response (PPPR). Japan stated that, as G7 chair, it will actively contribute to promoting UHC in the context of PPPR.

But while the decision towards the UN high-level meeting on UHC echoed that clarity about the need for strong primary health care as a way to ensure both health security and UHC, it ignored NCDs. This contrasts sharply not only with the [WHO DG's report](#) [3], which stresses that global progress is not on track to achieve UHC or related Sustainable Development Goal (SDG) 3 targets — including those on NCDs and its risk factors — by 2030, but also with Member States' recognition that NCDs prevention and care services should be part of UHC.

There is an inconsistency in acknowledging that addressing NCDs is crucial to achieve UHC and not mentioning it in the current WHO decision towards the UN high-level meeting. Recognising the needs of people living with NCDs is fundamental for the progressive realisation of UHC and will require strong political leadership. Furthermore, and given the links between UHC and health security, people living with NCDs should be identified as vulnerable populations in all conversations related to preparedness and response for public health emergencies.

Still, it was encouraging to see important steps taken in the decision for the high-level meeting on UHC, which will have real impact in supporting the needs of people living with NCDs. Amongst those is the request to the WHO DG to review the importance and feasibility of using unmet need for health care services as an additional indicator for monitoring UHC, as part of the ongoing WHO review process of health-related SDG indicators. This echoes one of [NCD Alliance's advocacy asks](#) [4], calling for the inclusion of an additional indicator in the UHC service coverage index that covers clinical outcomes for NCD care at primary healthcare level.

Member States support progress on NCD policy and action

Progress on NCD policy and action across the continuum of care, from prevention to rehabilitation, was supported by Member States with the adoption of several decisions that will be considered at the 76th session of the World Health Assembly (WHA76) in May 2023. These steps were welcomed particularly Small Island Developing States (SIDS) for which NCDs are a top priority, as stated by Fiji and Maldives. [For further details on NCDs in SIDS, please refer to this discussion paper](#) [5], which will feed into the Fourth High-Level Meeting of the UN General Assembly on the Prevention and Control of NCDs in 2025.

A landmark was the adoption of a [decision to strengthen diagnostics capacity](#) [6], tabled by the Kingdom of Eswatini. A WHA resolution on this topic would provide for the first time a unique framework for the WHO and Member States to address challenges in access to diagnostics for a broad range of disease conditions, including NCDs.

A further highlight was the endorsement of a [decision for adopting the updated Appendix 3 of the Global NCD Action Plan](#) [7], also known as the NCD 'best buys' and other recommended interventions, which incorporated several of the [comments provided by NCDA and our network](#) [8] during consultations. The decision on Appendix 3 also brings a welcome new approach, with the menu of policy options on NCD prevention and care becoming a living document that allows the incorporation of revised interventions as new data becomes available.

Lastly, it was encouraging to see the approval of a [decision that recognises rehabilitation](#) [9] as an integral part of the continuum of care, and the importance of engaging people with lived experience in it. The inclusive way in which Israel led the consultation process for this decision over the last few months was highly appreciated by civil society. Further details on the full content of other decisions and reports can be found in the [NCD Alliance pre-EB152 advocacy briefing](#) [10].

NCD Alliance enters into official relations with WHO

EB152 ended with yet another landmark for the NCD community, with the NCD Alliance entering into official relation with the WHO. As the only international NGO in official relations with the WHO whose mission is focused on the broad NCD agenda, NCDA is looking forward to continuing to build on this relationship and advance the prevention and control of NCDs.

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Links

[1] https://apps.who.int/gb/ebwha/pdf_files/EB152/B152_CONF7-en.pdf

[2] https://apps.who.int/gb/ebwha/pdf_files/EB152/B152_12-en.pdf

[3] https://apps.who.int/gb/ebwha/pdf_files/EB152/B152_5-en.pdf

[4] <https://ncdalliance.org/resources/ncd-alliance-advocacy-priorities-for-the-2023-un-high-level-meeting-on-universal-health-coverage-uhc>

[5] <https://ncdalliance.org/resources/noncommunicable-diseases-and-mental-health-in-small-island-developing-states---a-discussion-paper-by-civil-society>

[6] [https://apps.who.int/gb/ebwha/pdf_files/EB152/B152\(6\)-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/EB152/B152(6)-en.pdf)

[7] [https://apps.who.int/gb/ebwha/pdf_files/EB152/B152\(11\)-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/EB152/B152(11)-en.pdf)

[8] <https://ncdalliance.org/resources/joint-submission-to-the-2nd-who-consultation-on-the-updated-appendix-3-of-the>

global-action-plan-for-the-prevention-and-control-of-ncds-2013-2030

[9] [https://apps.who.int/gb/ebwha/pdf_files/EB152/B152\(10\)-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/EB152/B152(10)-en.pdf)

[10] <https://ncdalliance.org/resources/ncd-alliance-advocacy-briefing-on-the-152nd-session-of-the-who-executive-board-eb152-30-january---7-february-2023>

[11] <https://ncdalliance.org/why-ncds/universal-health-coverage-uhc>

[12] <https://ncdalliance.org/taxonomy/term/1502>

[13] <https://ncdalliance.org/taxonomy/term/1511>

[14] <https://ncdalliance.org/taxonomy/term/1053>

[15] <https://ncdalliance.org/taxonomy/term/594>

[16] <https://ncdalliance.org/taxonomy/term/30>

[17] <https://ncdalliance.org/taxonomy/term/715>

[18] <https://ncdalliance.org/taxonomy/term/1522>