



The UN General Assembly (UNGA) High-Level Meeting on the comprehensive review and assessment of the progress achieved in the prevention and control of non-communicable diseases

Mr Tezer Kutluk – Opening Remarks 10th July 2014 – New York

Mr President, Mr Secretary-General, Excellencies, ladies and gentlemen,

It is both an honour and a privilege to be here today to represent civil society, to convey the passion we share in addressing Non-Communicable Diseases around the world. We are working together and we are united for a common cause. We are reasserting our global commitment to address NCDs together. The NCD fight is our generation's commitment to ensure that our children and our children's children have healthier, longer lives than you and I can expect.

Thank you to Dr John Ashe, President of the General Assembly, for convening this meeting; to the dedicated Member States present here today; to the World Health Organization under the leadership of Director General Margaret Chan for its continued support; and the NCD Alliance for its efforts to mobilize, unite, and represent a wide and diverse civil society movement.

NCDs cause more deaths than all other diseases combined – an estimated 36 million every year – and they strike hardest at the world's low- and middle-income populations. In my own country, Turkey, over 300,000 people die from NCDs each year, many without access to the preventative interventions, treatment and palliative care that they desperately need.

These diseases do not discriminate. No country – rich or poor – is immune. No country has these diseases under control. No region is exempt.

At some point in time, history will demand an explanation for why the international community approached this crisis in slow motion. For the acceleration in NCDs is largely a crisis of our own creation. We have created a world where more people are overweight than underweight, and where children – even before they are born – are at risk of disease because of factors outside of their control. Economic transition, rapid urbanisation and our 21st century lifestyle is coming at a huge cost to the health and development of current and future generations.

I know that everyone here, whether from Government, civil society, academia or the private sector, is passionate about his or her own cause, whether it is cancer, cardiovascular disease, diabetes, chronic respiratory illness, mental and neurological health or another NCD. Personally, my own journey has been as a paediatric oncologist, researcher and an advocate in the global cancer community.

As many of you may know, childhood cancer exemplifies the gross inequity experienced by those living with NCDs in low- and middle-income countries. While we have the know-how to treat childhood cancer, with over 80% success rates in high-income countries, this can drop to as low as 10% in other settings. Even in Turkey, where treatment and care for childhood cancer exists, there are significant challenges. In my hospital, we recently treated a 4-year old girl called Alia, who is a refugee living in Southern Turkey and presented with advanced retinoblastoma. When we met Alia, her family told us that she had had a white pupil for at least a year, but this had not been brought to medical attention. When the disease progressed to an advanced stage, she was diagnosed and treated, however it was already too late to save her eye. Although retinoblastoma is a curable disease, where an early diagnosis can preserve sight, this was unfortunately not the case for Alia, and she will live with only one eye for the rest of her life. This is but one example of a story that is not unique to Turkey.

Other challenges we face are that in many settings only a fraction of children are being diagnosed and treated, and often with high rates of treatment abandonment. Many others are dying having had no formal diagnosis, no treatment and no access to palliative care and support including pain relief.

These and other stories that I have personally witnessed throughout the world compel me to stand up for the inequity which exists in addressing cancer and other NCDs.

Health is a basic human right. We cannot ignore those who are desperately in need.

I'm grateful to share my perspective, and stand with NGOs and others who are making a difference by calling for immediate increased action to prevent millions of premature deaths from NCDs.

Three years ago, the UN High-level Meeting on NCDs helped convert political inaction into political leadership. It reaffirmed that we know what works, and that cost-effective solutions exist. It resulted in priorities and commitments. It led to global accountability, with the first set of global targets and a goal to reduce the number of premature deaths from NCDs by 25% by 2025. And it put NCDs firmly on the global health and development agenda. I applaud Member States, WHO, the UN and everyone in this room for these bold steps forward.

But it is not enough.

The question now is, this week, when reviewing progress three years on, what needs to be done to carry momentum forward? How do we shift progress at the global level, to national action and implementation? We know there are no magic bullets for this epidemic, and we will not see change overnight. That has certainly been evident in these last three years. So how do we unlock the power of the Political Declaration at the national level, for the hundreds of millions of people with NCDs and the millions more at risk?

Today I call on Member States to do the following;

First, Governments have rightly taken ownership and responsibility for the NCD response. We therefore call for accelerated, coordinated and harmonised national responses to NCDs, through costed multisectoral national plans, a national multisectoral NCD commission, and country-level monitoring and evaluation systems.

Secondly, NCDs are one of the major challenges to sustainable human development in the 21st century, and therefore must be central to the post-2015 development agenda. We have always given our full support to the MDGs. In countries like my own, the MDGs have driven impressive progress on many health issues. But if we are not careful, we could allow all of this progress to slip through our fingers.

If we do not work together to secure a standalone target on NCDs, this will be an enormous missed opportunity. For it will be those future goals that will drive global action and resources on health and development, just as the MDGs have done to date.

Thirdly, Member States and the international community urgently need to address the global resource gap in NCDs, at global and national levels. The struggle for funding for NCDs remains a monumental challenge. The evidence tells us that NCDs are the number 1 killer in the world, yet they receive 1.2% of the \$31 billion development assistance allocated to health. Ladies and gentlemen, it just makes no sense. By investing upfront in NCDs prevention and control, we can guarantee saving not only human lives and misery, but also dollars spent on costly avoidable complications. We call on governments to maximise innovative financing mechanisms that are proven to curb NCDs and raise significant revenue – most notably tobacco taxation; and urge bilateral development agencies to start taking NCD seriously.

Finally, and above all, we need a people's movement for NCDs. A movement that is led by people affected or living with these diseases, is rooted in human rights and social justice, and is active in holding governments to account. We are not just fighting for people's human rights, we are fighting for people's lives. We must join forces, and not let silos to get in the way. Collectively, we must say enough is enough.

Ladies, gentlemen and distinguished guests.

It is our generation's responsibility to stem the tide of NCDs. We must be able look our children in the eye and say that as parents we made every effort to stop them facing the same fear of NCDs which we face today. It is simply not beyond us to make giant steps on this journey. Together, NGOs, the private sector and academia are committed to working with Member States to mobilise action on NCDs.

The time for talk is over. Action is not an option, it is an imperative.