SEOUl DECLARATION

ON NONCOMMUNICABLE DISEASE PREVENTION AND CONTROL IN THE WESTERN PACIFIC REGION

Recognizing the serious and rapidly increasing adverse impact of noncommunicable diseases (NCDs), including cardiovascular diseases, cancers, diabetes and chronic respiratory diseases, on individuals, families, communities, health systems and national economies, and the high prevalence of the risk factors, the countries and areas of the WHO Western Pacific Region participating at the Regional High-level Meeting on Scaling Up Multisectoral Action for Noncommunicable Disease Prevention and Control, declare their commitment to:

(1) provide strong and sustained high-level political support for NCD prevention and control programmes to reduce premature NCD death and disability and health inequalities;

(2) ensure a supportive multisectoral whole-of-government policy environment and a coordinating process to mainstream the response to NCDs involving all stakeholders, including civil society and, where appropriate, the private sector to protect health and to ensure that healthy choices are the easier choices;

(3) reduce the common NCD risk factors (tobacco use; diets high in total fat, saturated and or trans fats, salt and sugar; the harmful use of alcohol; and physical inactivity); and
   ▪ in line with WHO action plans and using the full range of options including legislation, regulation, fiscal measures and healthy public policies and, in particular, accelerate towards the full implementation of the Framework Convention on Tobacco Control; and
   ▪ by addressing the social determinants of health and by leveraging the power of local governments and civil society actions;

(4) strengthen and integrate health systems, based on primary health care to ensure that NCD prevention and control is part of a funded, coherent, balanced, realistic and comprehensive health planning process that is financially feasible and to:
   ▪ deliver services for NCD and their risk factors utilising team based care and the most appropriate health professional for the patient’s needs and including affordable and cost-effective drugs, technologies and services to support evidence-based priority interventions;
   ▪ work towards continuity of quality care from prevention to palliative care across the whole health system and promote a people-centred approach with synergies with other programmes;

(5) prioritise human and financial resources and infrastructure to ensure equitable coverage of priority evidence-based NCD programmes; and

(6) provide integrated but practical monitoring and accountability systems based on strengthened health information systems and, as appropriate, a small number of quantified and timed targets and indicators to assess progress nationally to be reported publicly and to WHO and, if appropriate, the United Nations General Assembly.

In support of these commitments, participating countries and areas request the global community, through the UN High-level Meeting on the Prevention and Control of NCDs, to act in a coordinated way to support global and national multisectoral efforts by:

(1) raising the priority of NCDs on their agendas;

(2) strengthening synergies between NCD programmes and other development priorities, including the Millennium Development Goals and the future global development agenda; and

(3) mobilising additional resources and supporting innovative approaches to financing NCD prevention and control.