



CALL TO ACTION

Prioritizing a person-centred approach to chronic and severe noncommunicable diseases—type 1 diabetes, sickle cell disease and childhood heart diseases

Dar es Salaam, United Republic of Tanzania



We, the participants at the first-ever International Conference on PEN-Plus in Africa (ICPPA), held on 23–25 April 2024 in Dar es Salaam, United Republic of Tanzania, recognize the urgency of the rising burden of noncommunicable diseases (NCDs) across our Region. We are alarmed by the implications for social and economic development across Africa, considering that rising numbers of people under the age of 40 die unnecessarily.

The theme of the conference is, “**Prioritizing person-centred approach to chronic and severe NCDs**”, and it is articulated around Africa's commitment to attaining the highest possible level of health for its people as outlined in the Constitution of the World Health Organization, and also specifically, **The Brazzaville Declaration on Noncommunicable Diseases Prevention and Control in the African Region, The Global Noncommunicable Diseases Compact 2020–2030 (NCD Compact)**. Besides, we are approaching the ‘**Road to 2025: the global NCD deadline**’ to be held in 2025 at the **Fourth High-level meeting of the UN General Assembly (UNGA) in 2025**, and the nine voluntary deadlines set for the prevention and control of NCDs, which aim to achieve a 25% relative reduction in the risk of premature mortality from cardiovascular diseases, cancer, diabetes or chronic respiratory diseases.

There has been significant progress in major indicators like life expectancy, under-5 mortality rates, and improved availability, coverage and utilization of health services. But despite these achievements, inequities in service provision still persist, **with an increasing burden of NCDs (both chronic and severe) and children, in particular, are dying of treatable diseases such as type 1 diabetes, sickle cell disease, and congenital and rheumatic heart disease.**

In September 2015, **Sustainable Development Goal (SDG) 3.4 spoke to the need, “by 2030, [to] reduce by one third premature mortality from NCDs.”** The 2030 Agenda for Sustainable Development requires health systems strengthening, including implementing the Global strategy on integrated people-centred services and ensuring public health security, together with better preparedness and response to disease outbreaks, epidemics and other public health emergencies.

We remain committed to putting people first, promoting synergies and coordination, and engaging all stakeholders towards the goal of reducing premature mortality from NCDs by one third, while leaving no one behind.

WE AFFIRM AND COMMIT TO:

- ➔ call for **increasing recognition of the emergency posed by NCDs across our Region**, the premature loss of lives at all stages of the life cycle, and the grossly inequitable access to prevention, diagnosis, treatment and ongoing care;
- ➔ **advocate strongly for attention to chronic and severe NCDs within existing health systems** by extending prevention, diagnosis, treatment and ongoing care to the primary care level;
- ➔ **put people first, promote synergies and ensure coordination and engagement of all stakeholders** to foster the goal of reducing premature mortality from NCDs by one third, while leaving no one behind;
- ➔ **enhance NCD prevention efforts by scaling up effective public health interventions** to address key modifiable risk factors; and to ensure the full implementation of interventions such as those included in the WHO package of essential noncommunicable disease interventions (WHO PEN) and PEN-Plus and leverage these resources to expand the reach of NCD services;
- ➔ **effectively adopt the Whole-of-Government Approach** to addressing NCDs, including the mobilization of domestic resources as relevant for NCD prevention and care.

CALL UPON:

- ➔ **Governments to fulfil their commitment to the PEN and PEN-Plus regional strategy**, by ensuring that individuals with severe NCDs such as type 1 diabetes, sickle cell disease and childhood heart diseases have access to the level of care required, regardless of their geographical location; implement evidence-based prevention strategies tailored to the specific needs of countries and communities; improve NCD management by strengthening and capacitating primary care services, integrating NCD management across existing health care structures and ensuring the availability of essential medicines and services, using an integrated approach to service delivery.
- ➔ **Governments to provide leadership in public health for the benefit of their communities** through the necessary actions to reduce the known risk factors for NCDs and through the provision of the necessary health services; increase domestic investments; and mobilize and coordinate all stakeholders for a common purpose. This includes a setting-based health promotion approach, by leveraging social behavioural change, forging partnerships among health and non-health sectors, and strengthening engagement with bilateral and multilateral agencies, the private sector, and civil society; and monitoring and reporting progress in addressing social determinants of health that propagate the rise of NCDs in communities.
- ➔ **WHO to intensify its advocacy, and convening role across governments, foundations, civil society, academia and the private sector** to ensure that the SDGs in general, and universal health coverage in particular, remain at the top of the political and development agenda, and that adequate domestic and external resources are mobilized.
- ➔ **WHO to support Member States in creating synergies and resource sharing within health programmes to scale up prevention and care for conditions** such as hypertension and diabetes in pregnancy, to address NCDs and their co-morbidities with HIV and other emergencies such as COVID-19, vaccination against human papilloma virus, hepatitis, and the establishment of integrated early neonatal screening programmes within the maternal and child health unit as key intervention areas for reducing premature deaths from NCDs.
- ➔ **Development partners and the private sector to increase their investments in NCDs**, including in research and innovation and local manufacturing of essential medications.

We thank the United Republic of Tanzania for hosting the conference and the ministers of health of Cabo Verde and Gabon for their presence and support.

We request the WHO Regional Director for Africa to present this Call to action to the 74th session of the WHO Regional Committee for Africa and to the 2025 High-level Meeting of the UNGA; we request governments to present this Call-to-action initiative to the 2025 High-level Meeting of the UNGA to get global support and reduce premature mortality from NCDs by one third in Africa by 2030.

Dar es Salaam, 25 April 2024.