# **Sharjah Declaration on NCDs**

# Civil Society United Towards 2030

15 November 2015







The global burden of non-communicable diseases (NCDs) threatens the health, wellbeing and prosperity of all people everywhere. National governments, the World Health Organization (WHO) and the United Nations (UN) all recognize the need to prevent, treat and manage these diseases and address their social determinants, reduce exposure to risk factors, and build stronger and more sustainable health systems. Doing so is essential to achieving the 2030 Agenda for Sustainable Development (2030 Agenda), including its target to reduce premature deaths from NCDs by one third¹. Investing in efforts to reduce the global NCD burden will improve health outcomes and accelerate the achievement of today's most pressing development priorities.

Civil society is at the centre of this response playing important roles in advocacy, accountability, knowledge exchange and service delivery. We, the signatories of this Declaration, national and regional NCD alliances from across the world, have gathered under the patronage of Her Highness Sheikha Jawaher bint Mohammed Al Qasimi, Wife of the Ruler of Sharjah, Founder and Patron of Friends of Cancer Patients (FoCP), International Ambassador of the World Cancer Declaration for Union for International Cancer Control (UICC) and International Ambassador for Childhood Cancer for UICC, for the first Global NCD Alliance Forum. We come together united in our support for the 2030 Agenda, and commit to doing our part to accelerate action and increase accountability to prevent and reduce deaths, disability, stigma, and discrimination caused by NCDs.

### I. We express our commitment to:

#### Join forces - work together:

- **a.** Mobilize and grow strong NCD civil society alliances at national, regional and global levels, and include in our networks non-health and development actors to leverage synergies for NCDs;
- **b.** Strengthen relationships and partnerships with our governments, relevant UN agencies and other stakeholders toward a whole-of-society response to NCDs;
- **c.** Engage the grassroots in all NCD advocacy efforts, and amplify the voices of people living with and affected by NCDs, in particular those most vulnerable and most at risk.

#### Accelerate action - advocate for change:

- **a.** Support the development and implementation of national NCD plans and targets<sup>2</sup> and advocate for evidence-based policies and programmes across sectors;
- **b.** Encourage the establishment of, and participate in, high-level multisectoral NCD coordination mechanisms at national and regional levels;

- **c.** Increase awareness of NCDs as a sustainable development priority and support the integration of NCDs into national development plans and frameworks;
- **d.** Enhance awareness about NCD risk factors through public education and community empowerment to promote a whole of society response to NCD prevention and control;
- e. Mobilise domestic, bilateral and multilateral resources for NCDs.

#### Increase accountability - monitor progress:

- **a.** Support official monitoring and surveillance processes and mechanisms in collaboration with national governments, WHO, and other regional and international partners;
- **b.** Hold ourselves, our governments and the private sector accountable to respective commitments, using tools such as benchmarking, shadow reporting, and scorecards;
- c. Contribute to a successful UN High-Level NCD Review in 2018 and consecutive reviews.

Recognizing the urgent need to maintain global momentum and accelerate national action for NCD prevention and control, we furthermore call on:

# II. Our governments and policy makers at local, national, regional levels to:

- a. Encourage high-level government authorities across all sectors to champion NCD prevention and control and integrate NCDs into national development plans and frameworks;
- **b.** Accelerate the implementation of agreed plans<sup>3</sup>, political commitments<sup>4</sup>, targets and goals<sup>5</sup> and promote evidence-based, affordable and cost-effective, population-wide interventions;
- c. Allocate adequate, sustained human and financial resources to NCD prevention and control;
- d. Protect public health policies from interference by vested interests, particularly from the alcohol, tobacco and food and beverage industries, and from legal challenges under international trade and investment agreements;
- **e.** Protect the fundamental human right to health and create environments that empower individuals, families and communities to make healthy choices and lead healthy lives;
- f. Ensure all people living with NCDs have access to affordable, quality NCD services, medicines and technologies, across the entire continuum of care, including palliative care;
- g. Engage civil society<sup>6</sup> and people living with or affected by NCDs in policy development, implementation, coordination mechanisms and monitoring, and provide capacity-building to NCD alliances and networks, particularly in low and middle income countries;
- h. Establish robust and transparent monitoring and evaluation systems in order to regularly report on NCD policy progress and health outcomes at national, regional and global level.

## III. The United Nations system and other multilateral organisations to:

- **a.** Mobilize the entire UN system to *Deliver as One for NCDs*, and integrate NCDs into broader human rights, health<sup>7</sup> and development<sup>8</sup> policies and programmes;
- b. Provide technical support to governments in low and middle income countries to achieve agreed NCD goals and targets as part of overall efforts to achieve the 2030 Agenda;
- c. Reduce the global resource gap in NCDs, through the prioritisation of NCDs in bilateral and multilateral development assistance strategies and improve tracking of resources for NCDs<sup>9</sup>;
- **d.** Ensure full and comprehensive civil society participation in the 2018 UN High-Level Review and a strong outcome document with measurable, time-bound commitments.

# IV. The business community to:

- a. Embrace public health objectives in their core business;
- **b.** Provide healthy work environments for all employees through comprehensive and standardized workplace wellness programmes and health promotion activities;
- c. Comply with and refrain from opposing agreed international treaties, codes and national regulations on the production and marketing of unhealthy products, in particular those targeting children<sup>10</sup>;
- d. Implement healthy food environments, including through making healthy and nutritious food affordable and available and applying clear and transparent nutrition labelling<sup>11</sup>;
- **e.** Improve access to affordable, quality assured NCD prevention and control services in public and private facilities, including essential medicines and technologies;
- f. Mobilize resources for the prevention and control of NCDs in keeping with global calls for the involvement of the business sector and the Addis Ababa Action Agenda.

#### V. National and international Media to:

- a. Raise awareness of the scale and human, environmental and economic costs of NCDs;
- b. Expose practices and products that harm public health and fuel the NCD epidemic;
- c. Provide clear, evidence-based information on NCD prevention, including leading risk factors, and NCD treatment and care.

No one sector alone will reverse the NCD epidemic, but working together we have the tremendous opportunity to chart a new course toward health and sustainable human development for a more equitable and healthier future for all.







- <sup>1</sup> UN Sustainable Development Goals, target 3.4, as well as 3.5, 3.6 and the means of implementation targets 3a 3d.
- <sup>2</sup> In line with the WHO Global NCD Action Plan 2013-2020 and the Global NCD Monitoring Framework
- <sup>3</sup> WHO Global NCD Action Plan 2013-2020
- <sup>4</sup> UN Political Declaration on NCDs 2011 and 2014 UN NCD Review and Assessment Outcome Document
- <sup>5</sup> WHO Global NCD Monitoring Framework and the UN Sustainable Development Goals, in particular targets 3.4, 3.5 and 3.6 as well as the means of implementation targets 3a 3d
- <sup>6</sup> NCD civil society includes amongst others: non-governmental and not-for-profit organisations, organisations of patients and youth advocates, healthcare professionals, researchers and academics.
- In particular reproductive, maternal, child and adolescent health and infectious diseases, as well as broader efforts towards health systems strengthening and realizing Universal Health Coverage.
- <sup>8</sup> Including programmes aimed addressing poverty reduction, climate change, nutrition and food security, gender equality and education.
- 9 Including by developing a purpose code for NCDs in the OECD Creditor Reporter System (CRS) tracking Official Development Assistance for health as called for in the UN 2014 Review and Assessment Outcome Document.
- <sup>10</sup> Acting in accordance with the WHO's set of recommendations on the marketing of foods and non-alcoholic beverages to children and the international code of marketing of breast-milk substitutes.
- <sup>11</sup> In accordance with the Codex Alimentarius.