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**CONSIDERATION AND ENDORSEMENT OF THE BRAZZAVILLE DECLARATION
ON NONCOMMUNICABLE DISEASES**

1. In preparation for the United Nations High-level Summit of Heads of State and Government on Noncommunicable Diseases (NCDs) in New York in September 2011 and the First Global Ministerial Conference on NCDs and Healthy Lifestyles jointly organized by the Russian Federation and the World Health Organization in Moscow in April 2011, the WHO Regional Office for Africa organized a Regional Ministerial Consultation on NCDs from 04 to 06 April 2011 in Brazzaville, Congo.
2. The purpose of the Regional Ministerial Consultation was to agree on a common Regional position on NCDs for the Moscow and UN high level meetings and to support Member States in developing, strengthening and implementing policies and integrated national action plans for the prevention and control of NCDs. The Ministers and heads of delegation present at the consultation adopted the Brazzaville Declaration on “NCD Prevention and Control in the WHO African Region”.
3. The Brazzaville Declaration recognized NCDs such as cardiovascular diseases, diabetes, cancers, chronic respiratory diseases, haemoglobinopathies (in particular sickle cell disease), mental disorders, violence and injuries as a significant development challenge in the WHO African Region. The Declaration underscored the need to strengthen national health systems and institutional capacity for NCDs prevention and control.
4. The Regional Committee is requested to endorse the Declaration by adopting Resolution AFR/RC62/WP/7: entitled *The Brazzaville Declaration on NCDs Prevention and Control in the WHO African Region*.

UNITING AGAINST NCDs: THE TIME TO ACT IS NOW.



THE BRAZZAVILLE DECLARATION ON NONCOMMUNICABLE DISEASES PREVENTION AND CONTROL IN THE WHO AFRICAN REGION



ORIGINAL: ENGLISH

We, the Ministers of Health and Heads of Delegation of the WHO African Region, having convened at a Regional Consultation on the Prevention and Control of Noncommunicable Diseases (NCDs) in Brazzaville, Congo, from 4-6 April 2011 in preparation for the 28-29 April 2011 Moscow Ministerial Meeting on Healthy Lifestyles and NCDs; and the United Nations High-Level Summit on NCDs, to be held in New York, USA, in September 2011;

COGNIZANT of the ever increasing double burden of communicable and noncommunicable diseases in the WHO African Region and the associated disabilities and premature deaths;

AWARE of the significant evidence regarding the burden of disease attributable to cardiovascular diseases, diabetes, cancers, chronic respiratory diseases, haemoglobinopathies (in particular sickle cell disease), mental disorders, violence and injuries, oral and eye diseases in the WHO African Region;

NOTING that the major NCDs are linked to common risk factors, namely tobacco use, harmful use of alcohol, unhealthy diets, physical inactivity and in some cases infections;

REALIZING that these risk factors and the systems put in place to deal with the conditions in which people live are shaped by political, social, behavioral, environmental and economic determinants and, in this regard, stressing the need for a multisectoral response to combat NCDs;

REAFFIRMING our commitment to strengthening national health systems as the basis of a comprehensive approach to equitable health outcomes;

ACKNOWLEDGING the ongoing implementation of the Global Action Plan for NCD prevention and control by Member States, WHO, development partners and civil society organizations despite the current global financial crisis and using the challenge as an opportunity for increasing investment to slow, halt or reverse the trend of major NCDs especially among vulnerable groups such as women, children and the elderly;

RECALLING Resolutions WHA53.17 on the Prevention and control of noncommunicable diseases and WHA61.14 on Prevention and control of noncommunicable diseases: implementation of the global strategy; the report of the WHO Commission on Social Determinants of Health (2008); the Ouagadougou Declaration on Primary Health Care and Health Systems in Africa (2008); the Libreville Declaration on Health and Environment (2008); the Nairobi Call to Action for Health Promotion (2009); the Mauritius Call for Action on Diabetes, Cardiovascular Diseases and NCDs (2009); and the WHO Framework Convention on Tobacco Control (FCTC-2003);

RECOGNIZING that although globalization, trade and urbanization are important in human development, they are also major external drivers responsible for widening health inequities within and between countries and populations; that these conditions threaten the achievement of internationally agreed goals, including the Millennium Development Goals and therefore require high level advocacy for health governance and corporate social responsibility;

WELCOMING the convening of the Moscow Ministerial Meeting on Healthy Lifestyles and NCDs; the United Nations High-Level Summit on NCDs and appreciating the leadership role of WHO in the preparation of these major events;

TAKING NOTE of our previous commitments towards implementing the Global Strategy on Prevention and Control of NCDs in the African Region; and

HAVING deliberated on NCDs prevention and control;

Hereby declare that:

1. In the WHO African Region, cardiovascular diseases, diabetes, cancers, chronic respiratory diseases, haemoglobinopathies (in particular sickle cell disease), mental disorders, violence and injuries represent a significant development challenge;
2. Although not currently specified in the MDGs, NCDs form an essential part of the global, regional and national health and development agendas;
3. Heads of State and Government should provide leadership, through the participation of the public sector in partnership with civil society organizations, the private sector and communities, in NCDs prevention and control. The Heads of State and Government should also promote good governance to prevent conflict and disruption of health services;
4. National health information systems should be strengthened and standardized to generate disaggregated data on NCDs, their risk factors and determinants and monitor their magnitude, trends and impact ;
5. Information sharing on NCDs using all appropriate means including information and communication technologies should be promoted and intensified to increase health awareness and empowerment of individuals, families and communities;

6. NCDs prevention and control strategies, guidelines, policies, legislations, regulatory frameworks including the WHO FCTC, should be developed and implemented to protect individuals, families and communities from unhealthy diets; harmful use of alcohol; tobacco use and exposure to tobacco smoke; unsafe food; violence and injuries; advertising of unhealthy products; and infections responsible for certain types of cancers;
7. National health systems should be oriented towards the promotion and support of healthy lifestyles by individuals, families and communities within the primary health care context in order to effectively respond to complex social, cultural and behavioural issues associated with NCDs;
8. Health systems should be strengthened with appropriate attention to inter alia: health financing; training; retention of the health workforce; procurement and distribution of medicines, vaccines, medical supplies and equipment; improving infrastructure; and, evidence-based and cost-effective service delivery for NCDs. There is need to advocate for the integration of health in all policies across sectors in order to address NCD risk factors and determinants;
9. The management of communicable diseases in many countries including global health initiatives can provide ample opportunities to accelerate prevention and control of NCDs. Such opportunities should be identified and harnessed to address integrated care in the context of primary health care and health systems strengthening;
10. Partnerships, alliances and networks bringing together national, regional and global players including academic and research institutions, public and private sectors and civil society organizations should be encouraged and supported in order to collaborate in NCD prevention and control and to conduct innovative research relevant to the African context;
11. Financial resources that are commensurate with the burden of NCDs should be allocated from the national budgets to support NCD primary prevention and case management using the primary health care approach and establish sustainable innovative and new financing mechanisms at national and international levels.

COMMIT OURSELVES;

12. To develop integrated national action plans and strengthen institutional capacities for NCD prevention and control;

URGE;

13. The United Nations to include NCDs prevention and management in all future global development goals;
14. The World Health Organization, partners and civil society organizations to provide technical support to Member States, for implementation, monitoring and evaluation of

recommendations contained in this Declaration, and to support a process of peer review and experience sharing among Member States;

15. Development partners and civil society organizations to provide new and adequate financial resources to address NCDs without jeopardizing current and future funding of the prevention and control of communicable diseases;

REQUEST

16. Heads of State and Government of the WHO African Region to endorse this Declaration and to present it to the United Nations High Level Summit on NCDs as the position of the Region;
17. The United Nations Secretary General to establish a mechanism to monitor progress in delivering on commitments made at the United Nations High-level Summit in September 2011;
18. The WHO Regional Director for Africa to include discussions on the regional NCD strategic plan in the agenda of the Regional Committee in 2012 and report on the progress made in the implementation of this Declaration to the Regional Committee in 2014.

Done in Brazzaville, Republic of Congo, on this 6th Day of April 2011

DRAFT RESOLUTION

AFR/RC62/WP/7: Consideration and Endorsement of the Brazzaville Declaration on Noncommunicable Diseases (Document AFR/RC62/8)

The Regional Committee,

Recalling the adoption of the Brazzaville Declaration on Noncommunicable Diseases (NCDs) Prevention and Control in the WHO African Region by the Ministers of Health and Heads of Delegation of the WHO African Region, convened at a Regional Ministerial Consultation on NCDs Prevention and Control in Brazzaville, Congo, from 4–6 April 2011;

Cognizant of the ever increasing double burden of communicable and noncommunicable diseases in the WHO African Region and the associated disabilities and premature deaths from NCDs;

Aware that NCDs were responsible for more than 3 million deaths in 2010 representing 40% of all deaths in the WHO African Region, and that if current trends continue, NCDs are projected to exceed communicable, maternal, perinatal, and nutritional diseases as the most common causes of death in Africa by 2025;

Realizing that the major NCDs are linked to common risk factors, namely tobacco use, harmful use of alcohol, unhealthy diets, physical inactivity and in some cases infections and that these risk factors, combined with political, social, behavioural, environmental and economic determinants of health, highlights the need for a multisectoral response to combat NCDs;

Reaffirming that health is a fundamental human right and that the commitment to strengthening national health systems is the basis of a comprehensive approach to improved and equitable health outcomes;

Recognizing the financial gap and the critical shortage of skilled human resources for health, and the need for scaling up essential health interventions;

Recognizing the importance of the involvement and empowerment of communities in health development;

Recalling recent commitments including: Noncommunicable diseases: A Strategy for the African Region (2000); Resolution WHA61.14 on Prevention and control of NCDs; the WHO Framework Convention on Tobacco Control (FCTC-2003); the report of the WHO Commission on Social Determinants of Health (2008); the Ouagadougou Declaration on Primary Health Care and Health Systems in Africa (2008); the Nairobi Call to Action for Health Promotion (2009); and the Mauritius Call for Action on Diabetes, Cardiovascular Diseases and NCDs (2009);

Noting that both the United Nations General Assembly Political Declaration on NCDs (September 2011) and the preparatory Moscow Declaration (April 2011) strongly concurred with the Brazzaville Declaration;

Recalling Resolution WHA65.8 adopting a global target of 25% reduction of premature mortality from NCDs by 2025;

1. **ENDORSES** the Brazzaville Declaration on Noncommunicable Diseases Prevention and Control in the WHO African Region;

2. **URGES** Member States:

- (a) to take appropriate action to update their health policies and national health strategic plans in line with the Brazzaville Declaration on NCDs Prevention and Control;
- (b) to build institutional capacity for implementing the Brazzaville Declaration by reorienting health systems towards the promotion and support of healthy lifestyles by individuals, families and communities within the primary health care context with emphasis on the full implementation of existing WHO strategies on tobacco control, diet and physical activity for health and harmful use of alcohol;
- (c) to increase national resources both public and private to implement national policies and strategies for NCDs prevention and control and reduce associated disabilities;
- (d) to strengthen Health systems, especially: health financing; training; retention and expansion of the health workforce; procurement and distribution of medicines, vaccines, medical supplies and equipment; improving infrastructure; evidence-based and cost-effective service delivery for NCDs.

3. **REQUESTS** the Regional Director:

- (a) to continue to advocate for increased resources for NCDs Prevention and Control in the African Region;
- (b) to provide technical guidance and support to Member States for the implementation of the Brazzaville Declaration, and to document and share best practices;
- (c) to support countries to strengthen surveillance, monitoring and evaluation mechanisms for NCDs;
- (d) to report to the Regional Committee in 2014 and thereafter every other year, on the progress made in the implementation of the Brazzaville Declaration on NCDs.