RESOLUTION
OF THE
WHO REGIONAL COMMITTEE FOR SOUTH-EAST ASIA

NONCOMMUNICABLE DISEASES, MENTAL HEALTH AND NEUROLOGICAL DISORDERS

The Regional Committee,

Recalling World Health Assembly resolutions WHA53.17, WHA56.1, WHA57.17, WHA60.23, WHA 64.11 and WHA 65.4, and its own resolutions SEA/RC52/R7, SEA/RC53/R10 and SEA/RC60/R4, relating to the prevention and control of noncommunicable diseases including mental and neurological disorders;

Acknowledging the Political Declaration of the High-Level Meeting of the United Nations General Assembly on the Prevention and Control of Noncommunicable Diseases, the Moscow Declaration adopted at the First Global Ministerial Conference on Healthy Lifestyles and Noncommunicable Diseases Control, and the Rio Political Declaration on Social Determinants of Health;

Reaffirming the World Health Assembly Decision WHA 65.8(7) on follow-up to the High-Level Meeting of the United Nations General Assembly on the Prevention and Control of Noncommunicable Diseases and the adoption of the global target of a 25% reduction in premature mortality from noncommunicable diseases by 2025;

Recognizing that noncommunicable diseases such as cardiovascular diseases, cancers, chronic respiratory diseases and diabetes are the leading cause of premature death and disability, and that the burden is likely to increase in the South-East Asia Region due to population ageing, globalization, changes in dietary patterns, unplanned urbanization and other social determinants;

Recognizing that mental and neurological disorders are common causes of disability, suffering and premature death;
Noting with concern that the rapidly increasing health-care costs associated with the treatment of NCDs, mental and neurological disorders disproportionately affect the poor, impoverish families, and overburden the public health-care systems;

Recognizing the substantial stigma against mental and neurological disorders;

Further recognizing the substantial harm from alcohol use that goes beyond health risks and includes social, psychological and economic risks;

Realizing that effective and affordable interventions are available to modify the common risk factors of NCDs such as unhealthy diet, physical inactivity, tobacco use and harmful use of alcohol;

Recognizing the role of the “life course” approach that emphasizes the critical importance of health promotion and disease prevention strategies to minimize the risk of NCDs, and mental and neurological disorders at each stage of life;

Appreciating that policies in sectors other than health have a major bearing on risk factors and environmental and social determinants of NCDs, and reiterating that there is a pressing need to strengthen multisectoral collaboration at all levels; and

Acknowledging the need for development of standard indicators and targets to monitor the progress towards prevention and control of NCDs and their risk factors at global, regional and national levels;

URGES Member States:

(1) To integrate NCD policies and programmes into national health planning processes and the global and national development agenda, and, by 2013, to strengthen national multisectoral policies and plans for the prevention and control of NCDs, including mental health and neurological disorders;

(2) To address NCD risk factors using the “life course” and an evidence-based approach beginning in the pre-pregnancy period and continuing through childhood and adulthood, including the elderly, with the emphasis on public health interventions;

(3) To accelerate implementation of the WHO Framework Convention on Tobacco Control, the Global Strategy on Diet, Physical Activity and Health, and the Global Strategy to Reduce the Harmful Use of Alcohol with the emphasis on implementation of “best buys”;

(4) To develop and strengthen national strategies and plans to address NCDs with realistic indicators and targets, taking into account results of the global consultations

\footnote{Based on Global Status Report on Noncommunicable Diseases 2010 (WHO)
on the NCD Action Plan and Global Monitoring Framework and voluntary targets, as well as national priority and context;

(5) To strengthen national surveillance systems and information systems, and encourage research on NCD prevention and control;

(6) To develop comprehensive policies and strategies that address the promotion of mental health, and prevention of mental and neurological disorders taking into account the results of the global consultations for development of the Global Mental Health Action Plan;

(7) To ensure adequate financial, technical and human resources for health promotion and primary prevention, and strengthen health systems for early identification, diagnoses and management of acute and chronic NCDs and mental and neurological disorders, particularly at the primary care level;

(8) To enhance participation in all steps of the noncommunicable diseases follow-up processes, including consultations and meetings of WHO Governing Bodies on the Global Monitoring Framework and the setting up of global targets, the Global Action Plan for Prevention and Control of Noncommunicable Diseases, and the comprehensive Mental Health Action Plan;

(9) To collectively advocate for the consideration of global targets for the prevention and control of noncommunicable diseases to cover all major risks, namely, tobacco use, unhealthy diet, physical inactivity and harmful use of alcohol, as well as targets relating to health outcomes and health systems response; and

(10) To collectively advocate for NCDs to be included in discussions at the highest international forums, including in the post-2015 UN Development Agenda; and

REQUESTS the Regional Director:

(1) To work closely with Member States and partner agencies to address the regional and national burden of NCDs, including mental and neurological disorders, and to ensure optimum communication and advocacy messages in support of multisectoral actions for NCD prevention and control through existing forums such as WHO Governing Bodies, the UN General Assembly, the WHO Regional Committees, and other UN regional bodies;

(2) To provide technical guidance and support to Member States for building capacity, and for developing and strengthening national health systems and multisectoral plans and policies for the prevention and control of NCDs, including mental and neurological disorders; and

(3) To support Member States to develop and strengthen national strategies and plans with realistic indicators and targets to address noncommunicable diseases, including mental and neurological disorders;

Fifth meeting, 7 September 2012