



New Delhi Declaration
on
High Blood Pressure

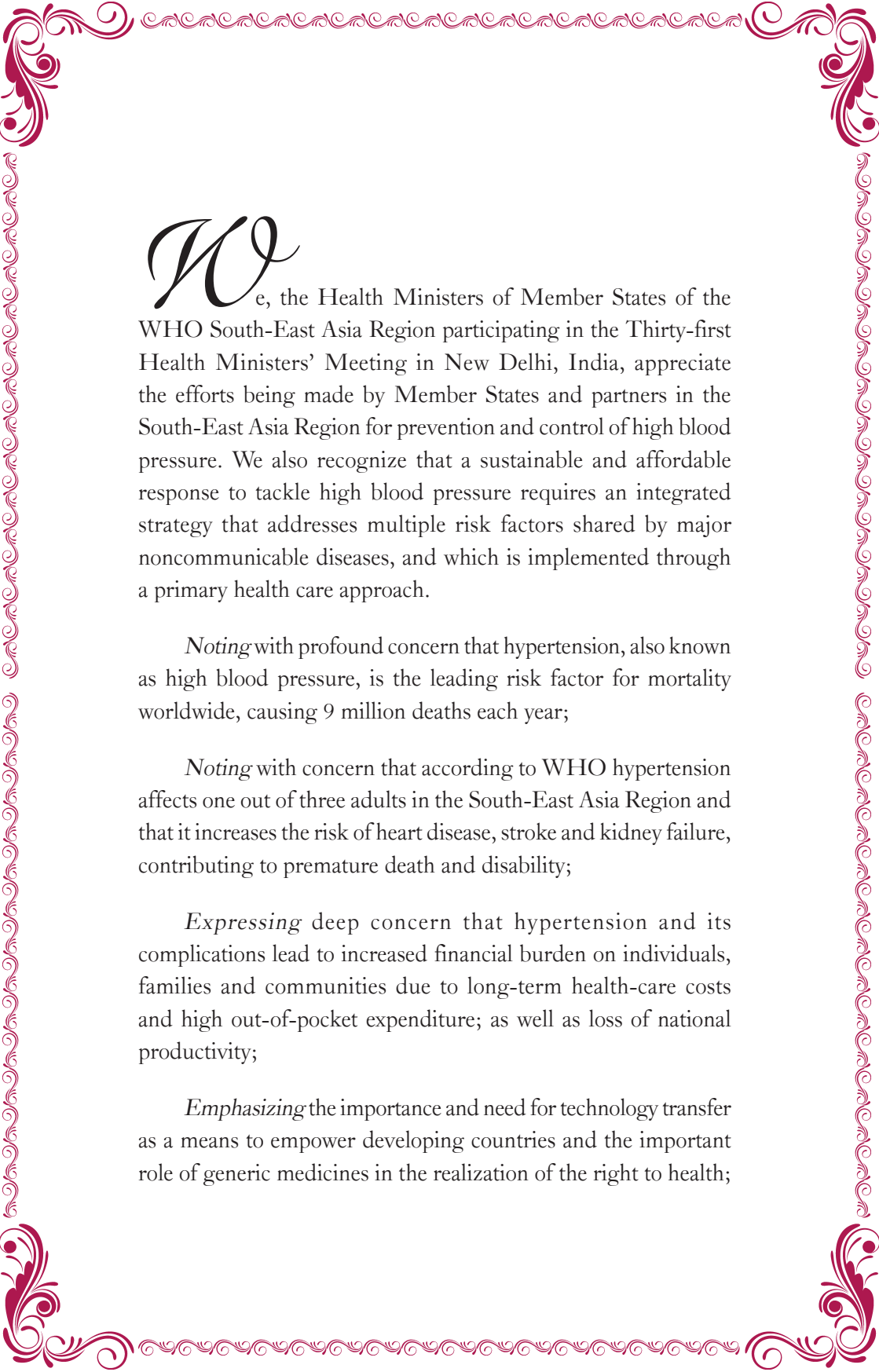
Thirty-first Meeting of Ministers of Health of Countries of
the WHO South-East Asia Region

10 September 2013, New Delhi, India



**World Health
Organization**

Regional Office for South-East Asia




*W*e, the Health Ministers of Member States of the WHO South-East Asia Region participating in the Thirty-first Health Ministers' Meeting in New Delhi, India, appreciate the efforts being made by Member States and partners in the South-East Asia Region for prevention and control of high blood pressure. We also recognize that a sustainable and affordable response to tackle high blood pressure requires an integrated strategy that addresses multiple risk factors shared by major noncommunicable diseases, and which is implemented through a primary health care approach.

Noting with profound concern that hypertension, also known as high blood pressure, is the leading risk factor for mortality worldwide, causing 9 million deaths each year;

Noting with concern that according to WHO hypertension affects one out of three adults in the South-East Asia Region and that it increases the risk of heart disease, stroke and kidney failure, contributing to premature death and disability;

Expressing deep concern that hypertension and its complications lead to increased financial burden on individuals, families and communities due to long-term health-care costs and high out-of-pocket expenditure; as well as loss of national productivity;

Emphasizing the importance and need for technology transfer as a means to empower developing countries and the important role of generic medicines in the realization of the right to health;



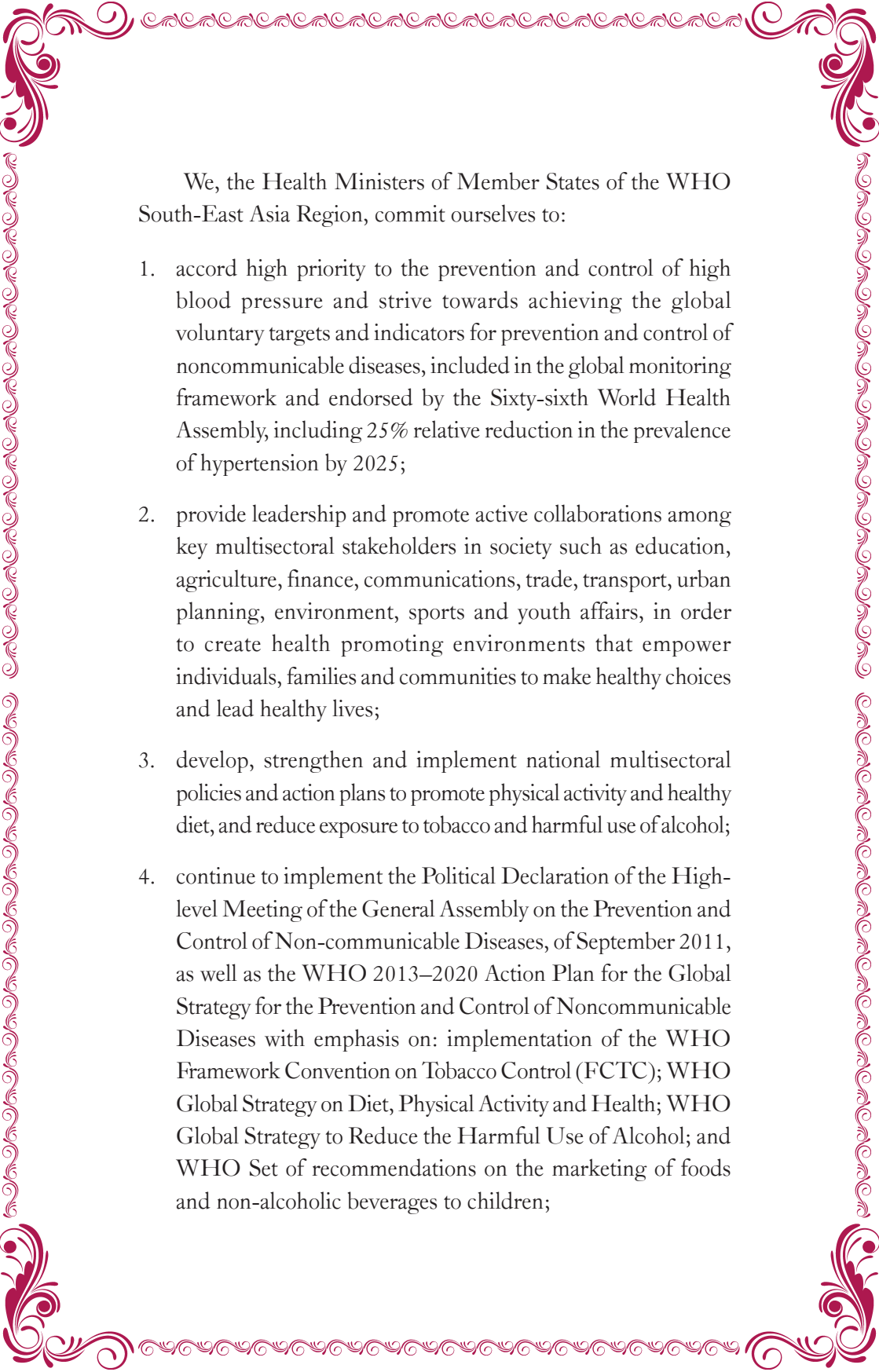
Aware that the poor are disproportionately affected by hypertension due to a higher exposure to unhealthy behaviours, delay in diagnosis and limited access to treatment, thereby resulting in poorer health outcomes;

Noting with concern that the major noncommunicable diseases and their risk factors including hypertension are linked to common risk factors including excessive consumption of salt, insufficient intake of fruits and vegetables, harmful use of alcohol, physical inactivity, tobacco use, excess weight and poor stress management;

Recognizing that poverty, uneven distribution of wealth, lack of education, rapid urbanization and other social and environment determinants of health are important contributing factors to the burden of noncommunicable diseases and their risk factors including hypertension;


Cognizant that cost-effective interventions are available to prevent and control noncommunicable diseases and their risk factors including hypertension throughout the life-course, and that coordinated actions across all sectors of society are required, including partnerships among governments, civil society, academia, international organizations and the private sector;

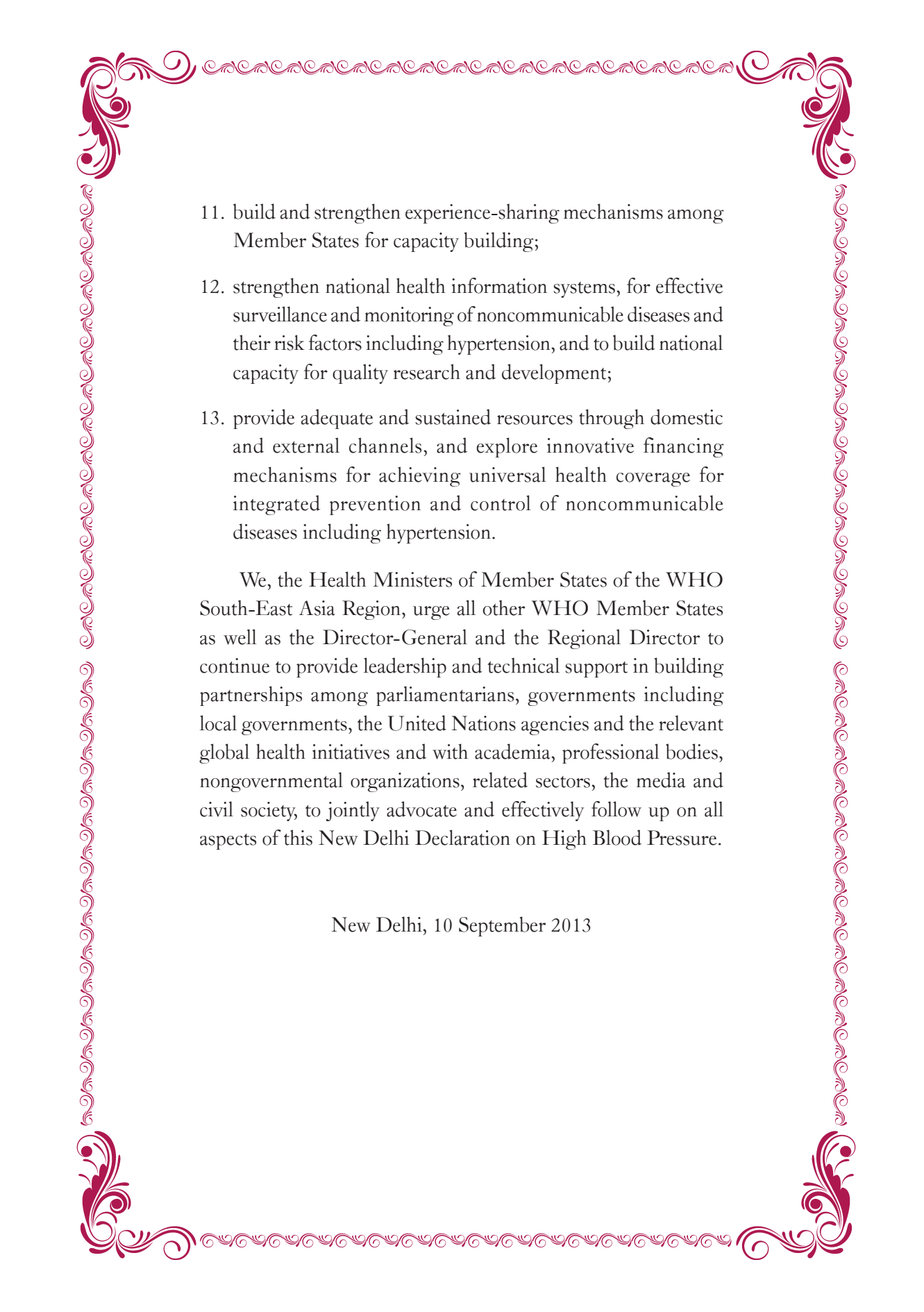
Considering that implementation of public health policies that reduce exposure to behavioural risk factors and promote early detection and treatment of hypertension will prevent heart attacks, strokes and other related conditions, avoiding the need for surgical and expensive tertiary care interventions and thus saving lives and resources;



We, the Health Ministers of Member States of the WHO South-East Asia Region, commit ourselves to:

1. accord high priority to the prevention and control of high blood pressure and strive towards achieving the global voluntary targets and indicators for prevention and control of noncommunicable diseases, included in the global monitoring framework and endorsed by the Sixty-sixth World Health Assembly, including 25% relative reduction in the prevalence of hypertension by 2025;
2. provide leadership and promote active collaborations among key multisectoral stakeholders in society such as education, agriculture, finance, communications, trade, transport, urban planning, environment, sports and youth affairs, in order to create health promoting environments that empower individuals, families and communities to make healthy choices and lead healthy lives;
3. develop, strengthen and implement national multisectoral policies and action plans to promote physical activity and healthy diet, and reduce exposure to tobacco and harmful use of alcohol;
4. continue to implement the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, of September 2011, as well as the WHO 2013–2020 Action Plan for the Global Strategy for the Prevention and Control of Noncommunicable Diseases with emphasis on: implementation of the WHO Framework Convention on Tobacco Control (FCTC); WHO Global Strategy on Diet, Physical Activity and Health; WHO Global Strategy to Reduce the Harmful Use of Alcohol; and WHO Set of recommendations on the marketing of foods and non-alcoholic beverages to children;

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5. implement national salt reduction strategies such as creating public awareness and health education through mass media, food labelling, and regulation of the food industry in order to reduce salt levels in processed food;
 6. create healthy environments by adopting effective national legislation for 100% tobacco smoke-free environments in all indoor workplaces, public transport, indoor public places and other public places consistent with Article 8 (Protection from exposure to tobacco smoke) of the WHO FCTC; promoting access to healthy diet; providing opportunities for physical activity at workplaces, schools and other educational institutions as well as creating facilities for physical activity in public and private settings;
 7. promote universal access to cost-effective prevention and treatment through generic medicines and care for integrated management of noncommunicable diseases including hypertension through a primary health care approach;
 8. strengthen health systems that support primary health care, to ensure an adequate and well-trained workforce, and the availability of affordable, safe, effective and quality medicines and technologies for prevention and control of major noncommunicable diseases including hypertension;
 9. promote access to cost-effective, affordable and quality medicines for all, including through the use, to the full, of the provisions of the TRIPS Agreement which provides flexibility for that purpose;
 10. foster the development and transfer of technology to developing countries, on mutually agreed terms aligned with national priorities;

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11. build and strengthen experience-sharing mechanisms among Member States for capacity building;
 12. strengthen national health information systems, for effective surveillance and monitoring of noncommunicable diseases and their risk factors including hypertension, and to build national capacity for quality research and development;
 13. provide adequate and sustained resources through domestic and external channels, and explore innovative financing mechanisms for achieving universal health coverage for integrated prevention and control of noncommunicable diseases including hypertension.

We, the Health Ministers of Member States of the WHO South-East Asia Region, urge all other WHO Member States as well as the Director-General and the Regional Director to continue to provide leadership and technical support in building partnerships among parliamentarians, governments including local governments, the United Nations agencies and the relevant global health initiatives and with academia, professional bodies, nongovernmental organizations, related sectors, the media and civil society, to jointly advocate and effectively follow up on all aspects of this New Delhi Declaration on High Blood Pressure.

New Delhi, 10 September 2013



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