Resolution


The Regional Committee,

Reaffirming that noncommunicable diseases (NCDs) are the greatest cause of preventable mortality and morbidity in the WHO European Region;

Recalling its resolution EUR/RC56/R2, by which it adopted the European Strategy for the Prevention and Control of Noncommunicable Diseases as a strategic framework for action by Member States in the European Region to implement their country policies and engage in international cooperation;


Recalling its resolution EUR/RC60/R7 by which it endorsed the decisions of the Fifth Ministerial Conference on Environment and Health, as included in the Parma Declaration on Environment and Health;

Recalling World Health Assembly resolutions WHA53.17, WHA60.23 and WHA61.14 by which the Health Assembly endorsed the Action Plan for the Global Strategy for the Prevention and Control of Noncommunicable Diseases;
Recalling World Health Assembly resolution WHA64.11 by which the Health Assembly endorsed the Declaration of the First Global Ministerial Conference on Healthy Lifestyles and Noncommunicable Disease Control (Moscow, 28–29 April 2011) and called on the Director-General of WHO to undertake concerted action and report on progress;

Acknowledging the ongoing processes to raise the priority of NCDs as a global health issue, in particular the Regional High-level Consultation on NCDs (Oslo, 25–26 November 2010), the First Global Ministerial Conference on Healthy Lifestyles and NCD Control (Moscow, 28–29 April 2011), the forthcoming high-level meeting of the United Nations General Assembly on the prevention and control of noncommunicable diseases (New York, 19–20 September 2011) and the publication of the Global status report on NCDs;¹

Having considered the report containing proposals for an action plan for implementation of the European Strategy for the Prevention and Control of Noncommunicable Diseases 2012–2016;²

Recognizing that the European NCD Action Plan 2012–2016 aims to give guidance on concrete evidence-based actions for the prevention and control of NCDs adaptable to Member States’ varying levels of experience and existing policy and legislation, within a framework amenable to monitoring and evaluation;

Fully recognizing that the European NCD Action Plan 2012–2016 could need adjustments in order to become coherent with the comprehensive monitoring framework to be adopted at the World Health Assembly in 2012;

Further recognizing that the European NCD Action Plan 2012–2016 is in line and coordinated with Member States’ existing commitments to implementation of the Global Strategy and Action Plan for the Prevention and Control of Noncommunicable Diseases, the WHO Framework Convention on Tobacco Control, the Global Strategy for the Reduction of the Harmful Use of Alcohol and the Global Strategy on Diet, Physical Activity and Health;

² Document EUR/RC61/12
Affirming that an appropriate approach to NCDs should address, inter alia, their social and environmental determinants and focus in particular on the causes of inequities in vulnerable groups and across the life course;

Further affirming that the causes and consequences of NCDs are connected to mental health, violence and injuries, and musculoskeletal and other chronic conditions, as well as to certain infectious diseases, and that responses to NCDs should seek synergies with programmes directed at these conditions;

Recognizing that the European NCD Action Plan 2012–2016 will be in line and coordinated with the Public Health Framework for Action and the new European policy for health (Health 2020);

1. AGREES that the European NCD Action Plan 2012-2016 offers guidance and policy options for Member States on a series of concrete actions that can be taken in the European Region to achieve measurable improvements in NCD control using existing comprehensive, integrated approaches while taking into account existing national legislation and policies as appropriate;

2. URGES Member States:³
   
   (a) to use the Action Plan according to national needs to identify core actions for strengthening comprehensive, integrated national approaches to NCDs and as a basis for international collaboration;
   
   (b) to strengthen national capacity for health systems to respond to NCDs, including the development of national plans and integrated approaches to surveillance;
   
   (c) to promote and support intersectoral policies to reduce the risks of NCDs including behavioural and environmental risk factors as outlined in the Action Plan;
   
   (d) in accordance with national policies to strengthen their actions for behaviour change and community empowerment in the area of NCDs;
   
   (e) to strengthen the management of NCDs in primary care, providing universal access to clinical prevention and care, using evidence-based approaches and appropriate financing;

³ And, where applicable, regional economic integration organizations
3. CALLS ON international, intergovernmental and nongovernmental organizations, as well as self-help organizations, to support the Action Plan and where appropriate to work jointly with Member States and with the WHO Regional Office to strengthen national policies and plans to respond to NCDs;

4. REQUESTS the Regional Director:

   (a) in collaboration with Member States\(^4\) and building on the outcome of the United Nations High Level Meeting on NCDs and the targets and indicators to be decided upon at the World Health Assembly in 2012, to refine and complete targets and indicators for the core action areas in the NCD Action Plan

   (b) to synchronize monitoring with the comprehensive monitoring framework to be adopted by the World Health Assembly in 2012;

   (c) to cooperate with and assist Member States and organizations in their efforts to implement the priority actions and interventions described in the NCD Action Plan;

   (d) to promote collaboration with governmental and nongovernmental organizations and between Member States, as well as with WHO, other international organizations and regional actors in support of the Action Plan;

   (e) to deliver a progress report to the Regional Committee at its sixty-third session in 2013 and to report back to the Regional Committee at its sixty-sixth session in 2016 on the implementation of the Action Plan.

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\(^4\) And, where applicable, regional economic integration organizations