







REGIONAL COMMITTEE FOR THE EASTERN MEDITERRANEAN

EM/RC70/R.2 October 2023

Seventieth session Agenda item 3(a)

Addressing noncommunicable diseases in emergencies: a regional framework for action

The Regional Committee,

Having reviewed the technical paper on addressing noncommunicable diseases (NCDs) in emergencies, including the regional framework for action on addressing NCDs in emergencies;¹

Recalling United Nations General Assembly resolution A/RES/73/2 (2018), the political declaration of the third high-level meeting of the General Assembly on the prevention and control of NCDs, in which Member States reaffirmed their commitment to "strengthen the design and implementation of policies, including for resilient health systems and health services and infrastructure to treat people living with noncommunicable diseases and prevent and control their risk factors in humanitarian emergencies";

Further recalling decision WHA75(11) of the Seventy-fifth World Health Assembly (2022) on the follow-up to the political declaration, which adopted recommendations for WHO, Member States and implementing partners;

Noting the updated Global action plan for the prevention and control of NCDs 2013–2030, which includes actions related to NCDs in humanitarian settings;

Recalling resolution EM/RC68/R2 (2021) of the Regional Committee on accelerating health emergency preparedness and response – a plan of action, which includes recommendations to Member States and the Regional Director for integrating health emergency preparedness into health system strengthening to achieve the goals of health security and universal health coverage;

Mindful that the fourth United Nations General Assembly high-level meeting on the prevention and control of NCDs will take place in 2025;

Gravely concerned that NCDs are the leading cause of death in the Eastern Mediterranean Region, causing 66.5% of all deaths annually, and noting that NCDs are responsible for one in four premature deaths in the Region;

¹ EM/RC70/3-Rev.1.

Recognizing the complex and challenging situation in the Region due to conflict, social unrest, climaterelated events, political instability and economic constraints, and the resultant health system disruption, human migration and forced displacement;

Noting that the Eastern Mediterranean Region is highly diverse and prone to emergencies caused by various hazards, including conflicts, political fragility and natural disasters, and that it is home to 38% of all those who need humanitarian assistance globally;

Further noting that almost half of all countries and territories in the Region are considered fragile, conflict-affected and vulnerable (FCV), and eight countries are currently facing Grade 3 emergencies;

Recognizing that the health component of humanitarian responses to emergencies has long focused on communicable diseases and injury management;

Mindful that capacity and resources for NCD diagnostic and service provision are often already inadequate in lower- and middle-income countries and in FCV settings, especially at the primary care level, and that NCDs have not yet been formally included in many national health agendas or efforts to expand national benefit packages as part of the all-hazards approach and building back better for emergency preparedness and response;

Recognizing that humanitarian emergencies often disrupt the provision of health services, especially for those with NCDs, due to damage to or destruction of health facilities, limited access to health personnel, unavailability of medication and other supplies, and difficulties in physically accessing health facilities, and that NCD management is generally difficult in humanitarian settings;

Recognizing the lack of comprehensive guidance on essential health services for NCDs during emergencies, service delivery models, and financial and logistical arrangements to ensure delivery of those services;

Acknowledging that challenges faced by people living with NCDs during emergencies can lead to excess mortality and morbidity, that NCD-related complications are higher in emergency settings, and that people living with NCDs are considered more vulnerable during emergencies;

Recognizing that emergency settings are considered the biggest threat to achieving the Sustainable Development Goals (SDGs) due to the consequent major disruption of health services, leading to worse health outcomes and dramatic increases in direct needs;

Acknowledging that addressing NCDs in emergencies is critical to realizing *Vision 2023* and meeting SDG target 3.4 to reduce premature NCD-related deaths by 30% by 2030;

Aware that the COVID-19 pandemic has affirmed the importance of basic public health, strong health systems and emergency preparedness, as well as the resilience of populations to the emergence of a new virus or pandemic;

Noting the global and regional meetings that took place in Cairo, Egypt, in December 2022 and the input received during the consultative meeting with Member States held in June 2023, and the resulting recommendations on addressing NCDs in emergency preparedness and response plans;

- 1. **ENDORSES** the regional framework for action on addressing NCDs in emergencies;
- 2. **URGES Member States to** implement a set of strategic interventions and priority actions for addressing NCDs in emergencies in the Region as an integral part of efforts to ensure the continuity of all essential health services, with a particular emphasis on:
 - 2.1 Integrating NCD care into the standard operating procedures and guidelines for emergency response;
 - 2.2 Strengthening coordination and collaboration with all stakeholders to effectively integrate NCDs in all aspects of emergency response, preparedness and recovery, adopting an all-hazards approach, and addressing priority health needs related to NCDs;
 - 2.3 Securing adequate emergency and transitional funding for NCD care in emergency response and recovery and building health system resilience;
 - 2.4 Ensuring access to essential NCD care, including for acute complications, by adapting NCD service delivery models and expanding essential primary care services for NCDs as part of a minimum benefits package, incorporating digital technology and innovative solutions;
 - 2.5 Prioritizing, procuring and deploying essential, safe, affordable, available, quality and effective NCD medicines, technologies and supplies, and maintaining continuity of medication in emergencies;
 - 2.6 Consistently involving communities and individuals with lived experience in addressing NCD needs during emergencies;
 - 2.7 Engaging operational partners such as other United Nations agencies, nongovernmental organizations and the private sector that provide front-line health services, and collaborating to ensure that NCD care is prioritized;
 - 2.8 Building the capacity of the health workforce to effectively manage NCDs, including by adapting and utilizing relevant WHO packages and tools, such as the WHO package of essential noncommunicable disease interventions for primary health care (WHO PEN) and the WHO HEARTS technical package for cardiovascular disease management in primary health care;
 - 2.9 Conducting effective monitoring, surveillance and assessment of the provision of NCD services during the preparedness, response and recovery phases;
 - 2.10 Taking a proactive role in leading and advancing the research agenda on NCDs in emergencies, including operational evaluations, implementation research and drawing insights from past experiences, such as the COVID-19 pandemic and country-specific cases;

3. **REQUESTS** the Regional Director to:

- 3.1 Provide adequate technical support to Member States to implement the regional framework as an integrated part of national preparedness and response plans and humanitarian response plans, and monitor progress towards its targets;
- 3.2 Strengthen partnerships and collaboration with all stakeholders, including United Nations agencies, civil society organizations and operational actors, in order to support Member States in implementing the regional framework for action, and advocate for increased resource allocation to addressing NCDs in emergencies;
- 3.3 Report on progress to the Regional Committee at its 72nd, 74th and 76th sessions.