

African Health Ministers adopt Brazzaville Declaration on Noncommunicable Diseases

Language English



Brazzaville, 7 April 2011 -The first Africa Regional Ministerial Consultation on noncommunicable diseases (NCDs) ended in the Congolese capital on Wednesday (6 April) with the adoption of the Brazzaville Declaration on NCDs.

The Declaration urged urgent action by various stakeholders to address major NCDs and priority conditions which represent “a significant challenge” to people in the African region: cardiovascular diseases, diabetes, cancer and chronic respiratory diseases, diseases of blood disorder (in particular sickle cell disease), mental health, violence and injuries.

Highlights of the Declaration include commitment by the Ministers to:

- * strengthen and standardize national health systems to generate disaggregated data on NCDs, their risk factors and determinants and monitor their magnitude, trends, and impact;
- * use all appropriate means including information and communication technologies to promote, intensify and increase health awareness and empowerment of individuals and communities;
- * develop and implement NCD prevention and control strategies, guidelines, policies, legislations and regulatory frameworks including the WHO FCTC to protect individuals, families and communities from unhealthy diets, harmful use of alcohol, tobacco use and exposure to tobacco smoke and unsafe food; and from violence and injuries, advertising of unhealthy products;
- * reorient national health systems 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 behavioral aspects associated with NCDs;
- * further strengthen health systems with appropriate attention to, among other things, health financing; training and retaining the health workforce; procurement and distribution of medicines, vaccines, medical supplies and equipment;

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improving infrastructure; and, evidence-based and cost-effective service delivery for NCDs;

- * identify and harness existing health initiatives, including Global initiatives, to accelerate the prevention and control of NCDs and address integrated care in the context of primary health care and health systems strengthening;

- * support and encourage partnerships, alliances and networks bringing together national, regional and global players including academic and research institutions, public and private sectors, and civil society in order to collaborate in NCD prevention and control and to conduct innovative research relevant to the African context;

- * allocate, from national budgets, financial resources that are commensurate to the burden of NCDs to support NCD primary prevention and case management using primary health care approach and establish sustainable innovative and new financing mechanisms at national and international levels.

In the Declaration, the ministers also committed to develop national NCD action plans and strengthening institutional capacities for NCD prevention and control; urged the United Nations to include NCD prevention and control in all future global development goals, and called on WHO, partners and civil society organizations to provide technical support to Member States for implementing, monitoring, and evaluating recommendations contained in the Declaration.

The Declaration specifically requested Heads of State and Government in the region to endorse the Declaration, and present it to the upcoming September 2011 UN General Assembly High-Level Summit on NCDs as the position of the region on NCDs.

The Ministers also requested the UN Secretary General to establish a mechanism to monitor progress of the commitments taken at the UN High-level Summit on NCDs, and called on the WHO Regional Director for Africa to include the regional NCD strategic plan in the agenda of the 62nd session of the WHO Regional Committee for Africa and report progress made in the implementation of the Declaration to Regional Committee in 2014.

Media Contact: AFRO Communication Team: Tel: +47-241-39378/ 39420/39352/39382; E-mail: cam@afro.who.int
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