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## Preamble

Non-Communicable Diseases (NCDs) pose the greatest problem for the health of nations in the 21st century. They are primarily cardiovascular diseases, cancers, chronic respiratory diseases, obesity and diabetes, and contribute to almost two thirds of all deaths worldwide. The cost both in terms of human suffering and money is substantial for diseases which are largely preventable. If the major risk factors for non-communicable diseases were eliminated, around three-quarters of heart disease, stroke and type 2 diabetes and 40% of cancer would be prevented.

A person and people centred approach is essential for their prevention and treatment. The conditions in which people live and work and their lifestyles influence their health and quality of life, which include the four shared modifiable behavioural risk factors for the NCDs —tobacco use, unhealthy diet, physical inactivity and harmful use of substances.

The unequal distribution and burden of non-communicable diseases is largely due to the inequitable distribution of the social determinants of health, action on these determinants, both for vulnerable groups and the entire population, is essential to create inclusive, equitable, economically productive and healthy societies.

The management of NCDs includes detection, screening, treatment and rehabilitation as well as palliative care.

Mental disorders are an important cause of morbidity and contribute to the global burden of non-communicable diseases. Mental health is fundamental to positive health and critical to the adoption of healthier lifestyles by eliminating risk factors such as sedentary behaviour, high salt intake, trans fats and the harmful use of alcohol.

ICPCM's first Geneva Declaration in 2012 on Person Centred Care for Chronic Diseases recognised that a person-centered approach to the promotion and care of health is crucial. People with chronic diseases cannot be effectively cared for without fully engaging them in their own health. Bold new approaches to health promotion and illness intervention need to be developed and integrated within health systems.

The implementation of Ayushman Bharat scheme in India envisages providing care for non-communicable diseases to the hitherto underserved segments of the population.

## Recommendations for Action

We recommend a radical new approach to NCDs initiated in the ICPCM's Declaration of Geneva 2012, the success of which will largely rest on the commitment of every person to engage, act and follow up.

1. Each person should have access to comprehensive health services consistent with the Declarations of Alma Ata and Astana without discrimination and without financial hardship to promote health, prevent

illness, diagnose, and treat acute and chronic diseases through the integration of primary care, multidisciplinary specialist services, and public health.

2. Each person's cultural values and personal pursuits need to be considered in their social context and their care supported by a close collaboration between primary care and public health.
3. Each person with a chronic disease should be fully engaged in partnership with health professionals to achieve joint understanding and joint decision making to prevent and treat such diseases.
4. Each person's management of NCDs should include the detection, screening and treatment of NCDs as well as palliative care.
5. Each person's health literacy as a critical determinant of health and health literacy in all populations and in all educational settings.
6. Each person's ability to control of their own health and its determinants, should be supported through harnessing the potential of new digital technology.
7. Each person should have access to a comprehensive mental health services that are implemented in close coordination with an action plan for the prevention and control of non-communicable diseases at all levels.
8. Each person should be supported by health professionals in an interdisciplinary setting ensuring the integration of health and social services.
9. Each person's health and social needs should be addressed at all stages of the life course, starting with maternal health, including preconception, antenatal and postnatal care, maternal nutrition and reducing environmental exposure to pollution and risk factors such as mercury and continuing through proper infant feeding practices, health promotion for children, adolescents and youth followed by promotion of a healthy working life, healthy ageing and care for people with non-communicable diseases in later life.
10. Each person should have access to a new paradigm in health care based on person-centered public health promotion and education, professional training based on the concept of the personhood of patient (vs what he or she is suffering from) and health research to support the continuing development of effective clinical care and public health actions.
11. Each person in their communities should be empowered and involved in activities for the prevention and control of non-communicable diseases, including advocacy, policy, planning, legislation, service provision, monitoring, research and evaluation.
12. Each person through their communities should advocate for appropriate legislative and regulatory measures, and health promotion interventions so that individuals, families, health professionals, communities, civil society and government can act together to prevent tobacco use, physical inactivity, unhealthy diet, obesity and harmful use of alcohol and to protect children from the adverse impact of marketing.

The ICPCM is convinced that with a concerted effort and a participatory approach, we have the knowledge and the means to control much of the NCD burden globally.