

Statement by Medicus Mundi International to the 66th session of the World Health Assembly on agenda item 13.2, Draft action plan for the prevention and control of noncommunicable diseases 2013-2020 delivered by Marianna Parisotto

Thank you, Chair, for the opportunity to address the distinguished members of the WHA on behalf of Medicus Mundi International and the People's Health Movement.

We welcome the advances in the action plan and the participatory consultation process that led to this draft. We appreciate the stronger commitment to such principles as Social Determinats of Health, Universal Health Coverage and Human Rights.

However, we'd like to express our following concerns:

The action plan gives special emphasis to four types of NCDs. The narrow focus on specific diseases would create a vertical approach rather than a more broadly integrated and multisectoral coordinated response, based on the primary health care approach.

The action plan focuses on four behavioural risk factors presented as harmful individual choices. Such a 'victimblaming' approach disregards the influence on risk and vulnerability shaped by political, social, environmental and economic determinants of health.

Reducing modifiable risk factors needs to be clearly linked to the activities of the alcohol, tobacco and food industries. Nevertheless, the action plan explicitly calls for the involvement of the private sector as one of the international "partners", and there is no mention of an effective management of potential conflict of interest arising from the engagement with corporations representing agribusiness, food, beverage and pharmaceutical industries.

We are concerned about the influence of the pharmaceutical industry in shaping the research agenda and public health strategies. It is therefore fundamental for Member States to conduct independent analyses and evaluations of the efficacy, safety, cost-effectiveness and feasibility of public health measures – including pharmaceutical interventions - in their own contexts.

Furthermore, the comprehensive global monitoring framework focuses on the individualised causes of NCDs, and could restrict interventions to a behavioural risk factor paradigm. NCD targets must explicitly address global and local social determinants and corporate behaviour, including potentially damaging marketing practices.

To address diet-related NCDs, interventions and targets must tackle the systemic problems that generate poor nutrition. The accumulating international evidence highlights powerful structural determinants affecting the availability, affordability, and acceptability of food. This is seen through food price speculation, land grabs, and the longer-standing issues of liberalised trade and foreign direct investment.

In this global context, a focus on behaviour change without enacting policies to address these structural drivers of the food-related NCDs not only obfuscates the true causes of undernutrition and obesity problems, it also shifts the responsibility to individuals, especially the most vulnerable.

We call upon Member States to intensify their commitment to combat the impact of NCDs through effective policies and coordinated actions at global and national level, that address their underlying causes, and structural determinants created by the current model of the global economic governance and power imbalance.

In particular, we urge the member states to implement binding regulations to contain the global marketing of cheap processed food.

There is a stark contradiction between the binding regulations regarding pandemic preparedness and individualising responsibility in the global draft action plan.

Thank you.