**Meeting:**

Seventy-first World Health Assembly (A71/1)

**Agenda Item:**

11.7 Preparation for the third High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, to be held in 2018

**Statement:**

I thank the chair for giving HelpAge International the opportunity to make this statement.

HelpAge welcomes the opportunity presented by the third High Level Meeting, to focus attention on NCDs, and the Director General’s acknowledgment that progress has, to date, been uneven and insufficient.

HelpAge reiterates its concern that WHO continues to emphasise premature mortality, focusing efforts on NCDs towards people aged 30 to 70. We strongly urge the secretariat, Member States and other stakeholders to move away from this narrow focus, in recognition of people’s right to health across the lifecourse. We note with concern the disproportionate focus on premature mortality in both the Director General’s report and the Secretary General’s 2017 progress report.

Both reports state that in 2015 15 million people died prematurely of NCDs. In 2015, approximately 38.7 million people died as a result of NCDs globally[[1]](#footnote-1). Deaths among those aged 30 to 70 constituted approximately 39 per cent of all NCD deaths, with the majority of the remaining 61 per cent occurring in people aged 70 and over. The narrow focus on people aged 30 to 70 risks the exclusion of people over and under this age. The language of ‘premature mortality’ suggests there is an age at which it is acceptable to die. It is discriminatory, risks inequity in access to services, and gives space for ageism within health systems.

For a truly successful High Level Meeting, HelpAge urges Member States and the WHO to commit to an inclusive approach that leaves no one behind. An approach that includes people of all ages in policies, targets and indicators; that ensures data on NCDs is collected for all people and is disaggregated by age; that recognises the positive impact of prevention across the lifecourse; and delivers services targeted and responsive to the complex health needs in older age.

1. Data from Institute for Health Metrics and Evaluation, Global Burden of Disease Compare Data Visualisation [↑](#footnote-ref-1)