



**World Health
Organization**

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Director-General**

**Closing statement at the Regional
high-level consultation of the Americas on
Noncommunicable diseases and obesity
Mexico City, Mexico, 25 February 2011**

Excellencies, honourable ministers, distinguished delegates, ladies and gentlemen,

I thank the government of Mexico for hosting this event.

Your countries have shown great courage and determination in addressing the lifestyle-related factors that are driving the rise of these diseases.

You have looked at strategies and interventions and reached agreement on some ways forward. The September high-level meeting on noncommunicable diseases is an opportunity that the health sector must seize.

It must be a wake-up call, but not for public health. We are already wide awake.

We know the epidemiology, the global trends, and what the shift from affluent societies to poor and disadvantaged populations means in terms of human and economic wreckage. This is my first point.

My second point is that **chronic diseases are no longer just a medical or a public health problem**. They are a development problem, and they are a political problem. The pressure not to make the right decisions will be enormous.

Some will question the need for policy change. They will argue that individual choices are responsible for the rise of cardiovascular disease, diabetes, and cancer. People choose to smoke, to consume too much alcohol, to eat junk food, to sit in front of TV sets and computer screens.

In this logic, the responsibility for the world's 43 million pre-school children who are obese or overweight rests with bad parents. No, it is not bad parents. It is bad policies.

More and more people are living in societies that allow the sale of tobacco products and the seductive marketing of foods and beverages that are cheap, convenient, tasty, filling, and very bad for health.

More and more people are living in crowded urban areas with no playgrounds, no bicycle paths, no jogging lanes, and no fitness centres, of course.

Developing countries are soft targets, easy markets. Many lack even the most rudimentary regulatory capacity to address irresponsible marketing and control the products offered to consumers.

The health sector, acting alone, cannot turn off the tap. The measures needed for primary prevention on an adequate population-wide scale lie beyond the direct control of ministries of health. Making a difference will largely depend on action taken by non-health sectors.

My third point is that the challenge of managing these diseases in resource-constrained settings has been almost totally neglected.

In many wealthy nations, deaths from cardiovascular disease and cancer have declined, thanks largely to the success of anti-tobacco campaigns.

Credit must also go to the powerful interventions that are now available, including measures for screening and early detection, and medicines for reducing blood pressure, lowering cholesterol levels, and controlling blood sugar. Bypass surgery, organ transplantation, chemotherapy, and radiotherapy add to the arsenal.

But these interventions are beyond the reach of the poor. Health systems lack the staff, the medicines, the money, the screening and early detection services, and service models for the delivery of chronic care. Thirty developing countries, half of them in Africa, do not have a single radiotherapy machine.

Ladies and gentlemen,

I will close with **a few words of advice.**

Make primary prevention a top priority. For example, keep pushing for full implementation of the WHO Framework Convention on Tobacco Control.

Use evidence and economic arguments, as you have done, to shape policies at the highest possible level of government and in the international systems.

Continue to make the strengthening of health systems a top priority. Primary health care provides the best model for comprehensive services, from prevention, screening, and early detection, to long-term care that engages communities.

Engage civil society. Civil society can be an especially powerful ally in shaping public views and holding industry accountable for its behaviour.

Engage the private sector. Industry needs to collaborate in making healthy food choices the easy choices and in making medications and other interventions accessible and affordable.

Look at yourselves as leaders. The Latin American “Ciclovias” initiative for promoting physical activity is being copied around the world.

Above all, stand firm, as you have been doing throughout the Americas, and **stay loud.**

Thank you.