

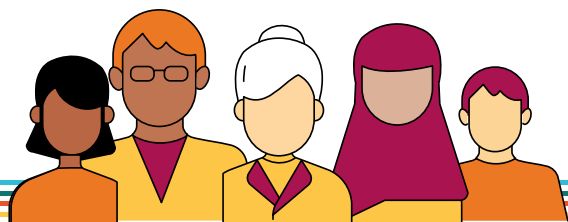
15 SEPTEMBER 2025

# Global Targets Answer the **CALL TO LEAD** on NCDs: **More Needed to Deliver Progress**

For the first time, governments have adopted global and tracer targets for NCDs and mental health—an achievement no previous political declaration has delivered. Securing these targets is a major win showing political commitment at the highest level to achieve accelerated action to meet the 2030 goal.

Yet, the final Political Declaration still falls short. Ambition has been scaled back, monitoring and reporting remain unclear, and the text reflects the limits of political compromise rather than the urgency of the NCD burden. Securing the targets must be only the beginning; countries now need to translate them into bold, measurable national action.

Let this be a clear reminder: the Political Declaration is the floor, not the ceiling. Governments, advocates, and communities must go above and beyond this document to accelerate progress. It is now up to national and regional leaders to fill the gaps left behind, push for stronger implementation, and resist industry interference that continues to undermine public health.

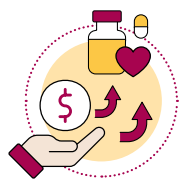


**TIME TO  LEAD**  
**GLOBAL WEEK FOR ACTION ON NCDs**

18-25 SEPTEMBER 2025

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## MOBILISE INVESTMENT

Despite the urgent need for resources, governments failed to agree on global investment targets, and the Political Declaration falls short of committing to the bold, political action we need for financing NCDs. Excise taxes—among the most effective, equitable, and revenue-generating measures—were removed from the targets, and the declaration only calls for “considering” action.



Increasing sustainable funding for health that includes:



specific and measurable financing targets for NCDs strategies and;



maximises the win-win from health taxes and other fiscal measures.

▶ Insufficiently reflected.

▶ No overall financing target developed for NCDs.

▶ Tracer target for financial protection policies is a major step forward, calling for 60% of countries to have policies in place.

▶ Commitment limited to “considering” taxes on tobacco and alcohol.

▶ Excludes sugar-sweetened beverages, other unhealthy foods, and need for health-promoting subsidy reforms.

▶ Tracer target on fiscal measures weakened, reverting to vague language similar to the 2018 declaration and falling short of the more progressive, measurable commitment in the Zero Draft.

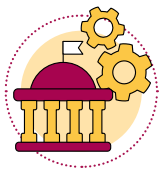
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- ▶ **Countries must now step up to develop national investment targets for NCDs, mental health, and neurological conditions.** The Political Declaration failed to deliver a global commitment, but national governments can still lead by allocating adequate, equitable, and sustainable financing to close the implementation gap—**ensuring that increased investment in NCDs does not come at the expense of other essential health programmes.**
- ▶ **Governments should not wait to scale up health taxes.** Despite weak and vague language in the Declaration, taxing tobacco, alcohol, and sugar-sweetened beverages remains one of the most effective, equitable, and fiscally sound policies available. National-level action is both possible and urgently needed.
- ▶ **Financial protection must be strengthened through national policies.** The Political Declaration sets the bar at only 60% of countries having such policies in place—far too low given the scale of need. Countries should aim to be among those that lead by example, adopting strong financial protection measures that reduce out-of-pocket spending and ensure equitable access to essential NCD and mental health services under universal health coverage.

### SOUNDBITE



**Invest in health, deliver impact. Bold domestic financing commitments and strong fiscal measures are essential to drive real change for NCDs and mental health.**



## ACCELERATE IMPLEMENTATION

The final Political Declaration shows signs of industry influence, taking a weaker stance on implementing proven, cost-effective policies compared to the Zero Draft, WHO's NCD 'Best Buys,' and other WHO recommended interventions. The final document retains an emphasis on strengthening primary health care to achieve Universal Health Coverage, and advances commitments to expanding access to medicines and basic technologies at affordable prices.



Delivering the proven, cost-effective policies to reduce NCD risk factor exposure

Many WHO NCD 'Best Buys' and other interventions included, but not all, align with WHO recommendations:

- ▶ Omission of graphic health warnings and plain packaging for tobacco.
- ▶ Tobacco advertising bans diluted to simple restrictions.
- ▶ Nutrition policies downgraded to optional measures.
- ▶ Weakened commitments on food reformulation, iTFA elimination, and front-of-pack labelling.
- ▶ Alcohol policies weakened and omits key evidence-based measures.
- ▶ Language for the tracer target on "policies and legislative, regulatory and fiscal measures" weak and vague.



Integrating quality NCD interventions into person-centred care and universal health coverage benefit packages

- ▶ Calls to strengthening PHC to achieve UHC.
- ▶ Tracer target for financial protection policies, while needed, lacks ambition—only calling for 60% of countries to have policies in place, rather than the original 80% target.



Expanding access to essential NCD medicines, technologies, and resources

- ▶ Calls for countries to "Promote equitable, sustainable and affordable access to quality-assured vaccines, therapeutics, diagnostics, medicines and other health products."
- ▶ Strong tracer target calling for "at least 80% of primary health care facilities in all countries have availability of World Health Organization-recommended essential medicines and basic technologies for noncommunicable diseases and mental health conditions, at affordable prices, by 2030."

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- ▶ **Countries must act now to operationalize and exceed the Political Declaration's global and tracer targets.** While their inclusion is a positive step, weakened ambition in three of the five tracer targets means national leadership is critical to drive progress and accountability toward 2030 goals.
- ▶ **Governments must fully implement WHO's NCD 'Best Buys,' moving beyond the diluted language in the Declaration.** Evidence shows that these comprehensive measures on NCDs and NCD risk factors save lives, reduce health inequities, and generate strong economic returns: an investment of \$3 per person per year from 2025 to 2030 would save over 12 million lives, add more than 150 million healthy life years, and generate over \$1 trillion in economic benefits.
- ▶ **Governments must confront the commercial determinants of health and safeguard policymaking from industry interference.** Strong protections are needed to ensure that public health policies serve people, not health-harming industries, and to accelerate implementation of effective NCD and mental health measures.
- ▶ **Countries must deliver on the commitment to expand access to essential NCD and mental health medicines, diagnostics, and technologies.** This means ensuring an affordable, reliable supply through primary health care to accelerate progress toward universal health coverage.

## SOUNDBITE



Words won't save lives — countries must turn the Declaration into action, scaling up proven policies and accelerating national implementation.



## ACCOUNTABILITY

The Political Declaration outlined three “fast-track” global targets and five tracer targets creating important benchmarks on the way to achieving the 2030 targets. **The targets are a critical win** as the previous three political declarations stopped short of including such specific measures. However, three out of five tracer targets were weakened in content or ambition during the final stages of negotiations.



By regularly monitoring and reporting to citizens and the global community on an updated set of NCD targets extended to 2030 and beyond; and



By integrating NCD commitments into the post-SDG agenda.

- ▶ Inclusion of three ‘fast-track’ targets and five tracer targets are a historic first for NCD political declarations, setting clear benchmarks for action.
- ▶ Missing clear accountability mechanism to ensure regular, transparent monitoring and reporting against these targets.
- ▶ The next high-level meeting will be in 2031.
- ▶ Does not include reference to NCDs beyond the 2030 agenda.

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**GLOBAL TARGETS ANSWER THE CALL TO LEAD ON NCDs:  
MORE NEEDED TO DELIVER PROGRESS**

- ▶ **Use targets as the floor, not the ceiling.** The inclusion of global and tracer targets provides a foundation, but countries must raise their ambition to drive measurable progress, equity, and accountability.
- ▶ **Act on the “150 million” fast-track targets.** With the commitment to reduce tobacco use, control hypertension, and expand mental health care for 150 million people each by 2030, countries must develop national action plans to translate these global goals into real, measurable outcomes.
- ▶ **Strengthen financial protection policies.** With only 60% of countries expected to have policies in place, governments should aim higher—toward universal protection that reduces out-of-pocket spending and ensures access to essential NCD and mental health services.
- ▶ **Deliver on access and equity.** Strong commitments to affordable medicines and technologies are in the text—now countries must act to make this a reality in every primary health care facility.
- ▶ **Move from planning to action.** Many countries already meet the governance target of having integrated plans; the real test is implementing and scaling those strategies to deliver results.
- ▶ **Leverage data and surveillance to drive action.** Governments must invest in robust data systems and use evidence to guide policy and resource allocation.

**SOUNDBITE**



Targets are the floor, not the ceiling—real progress will come from countries raising ambition, taking decisive action, and holding themselves accountable.

## COMMUNITY ENGAGEMENT

**The Call to Lead on NCDs is rooted in civil society—including people living with and affected by NCDs and mental health conditions. The final text acknowledges their expertise, but overall regresses on social participation.**

- ▶ Civil society is mentioned only once, ignoring its role in mobilising communities, holding governments accountable, and driving change.
- ▶ No commitment is made to formalise inclusive engagement across the policy cycle.
- ▶ No reference to children or young people in participation processes, excluding critical voices in shaping the response.



**SOUNDBITE**



Just one mention of civil society is not enough. It's time for governments to move beyond symbolism and commit to real inclusion—at every stage of the NCD response.

## NEXT STEPS

The Political Declaration provides the baseline—real progress depends on leadership and action at national and regional levels. Governments, advocates, and communities must commit to:

- ▶ **Mobilise and increase domestic and sustainable financing.** Establish national investment targets and scale up fiscal measures like tobacco, alcohol, and sugar-sweetened beverage taxes to fund NCD prevention and care.
- ▶ **Accelerate implementation of proven solutions.** Scale up WHO's NCD 'Best Buys' on tobacco, alcohol, unhealthy diets, physical inactivity and air pollution, while expanding access to affordable NCD and mental health medicines, diagnostics, and technologies through integrated primary health care to advance universal health coverage.
- ▶ **Turn global targets into national accountability.** Develop context-specific roadmaps to achieve—and surpass—the 150 million global targets and tracer targets by 2030, backed by strong surveillance, monitoring, and transparent progress reporting.
- ▶ **Embed meaningful social participation.** Institutionalise the role of civil society and people living with NCDs in national strategies, implementation, and accountability processes.

Please see NCD Alliance's HLM4 supporting documents here, including the full policy briefing on the final Political Declaration



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Let us know what you're doing.  
Write to [gsanchez@ncdalliance.org](mailto:gsanchez@ncdalliance.org)



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