

# TASKFORCE

## on Women and Non-Communicable Diseases

On behalf of the Taskforce on Women and NCDs, we look forward to engaged dialogue at the upcoming United Nations High-Level Meeting on NCDs in September 2018, and to working with the UN and Member States on addressing the commitments that are confirmed in this forum to reduce the global burden of non-communicable diseases and mental health.

We call on the UN and member states to commit to interventions across the lifecourse and **devote greater attention to gender equity in the final outcome document in order to ensure that no one, including girls and women, is left behind in the NCD response.**

This will require a commitment to:

- Promoting a human rights framework and life-course approach for addressing NCD interventions at all ages, inclusive of older women as well as girls, adolescents, and young women who often die prematurely or face long-term disabilities because of late diagnosis or lack of access to treatment to NCDs and mental health.
- Investigating and implementing NCD prevention and control interventions that address and generate data on the underlying – and often gendered – social, economic, and commercial determinants of NCDs, including globally recommended fiscal policies around taxation on sugar, tobacco, and alcohol.
- Striving for equitable coverage of people-centered care and strengthened health systems, and further highlight the opportunity to integrate NCDs into other disease programs, including reproductive, maternal, newborn, child, and adolescent health (RMNCAH). Like communicable disease platforms, NCD prevention and care programs can be integrated effectively into maternal and child health platforms. Integrated, health systems strengthening approaches can be particularly impactful for conditions that affect girls and women across the lifecourse. These include gestational diabetes and pre-eclampsia, which can cause death and have long-term implications for women and their children, as well as breast and cervical cancer, and many adult NCDs that begin in childhood and adolescence.
- Ensuring NCD accountability mechanisms which include targets that are, as possible, disaggregated by gender, age, geography, and socioeconomic status in order to measure progress in reaching all populations living with NCDs – including women and girls in low-income countries, who are often most vulnerable and hardest to reach. Gendered analyses of health care data, in particular, can reveal the gendered dimensions of NCDs

and drive equitable action, regarding exposure to NCD risk, health behaviors, and social norms that affect women and girls' ability to access health services, including palliative care. Recognizing and addressing the impact of inequitable gender norms on caregivers, which disproportionately falls on girls and women and can adversely impact serious health-related suffering of the caregiver, will also be transformative for a gendered response to NCDs.

- Meaningfully including girls and women living with NCDs in low- and middle-income countries at every step of the policy process. Women also play an instrumental role in providing healthcare worldwide, both in the formal health care setting and in caregiving roles in the informal sector and at home. Girls and women impacted by NCDs are well-positioned to be change agents as we address NCDs in the future.

### About the Taskforce on Women and NCDs

The Taskforce on Women and Non-Communicable Diseases ([www.taskforcewomenandncds.org](http://www.taskforcewomenandncds.org)) brings together seventeen global health organizations from the women's health and NCD communities to respond to the unique and growing burden of NCDs on girls and women in low- and middle-income countries. Our work aims to mobilize leadership, expand technical expertise and disseminate evidence to inform policymaking, planning, and services. NCDs, such as cardiovascular disease, cancer, and diabetes, today kill 40 million people each year, of which approximately half are female deaths in low- and middle-income countries.

The NCD epidemic poses a particular burden on women's health, threatening the most vulnerable girls, women, and communities that have been the focus of hard-fought health and development successes over the past decades that are a result of the UN and WHO's longstanding commitment to helping partner governments reduce unnecessary deaths and achieve economic self-sufficiency. NCDs impact girls and women who are left exposed through persistent social, gender, and economic inequalities and pervasive inequities in access to health information and appropriate access to care and life-saving technologies.