

Statement for Multi-stakeholder Hearing on the Prevention and Control of Non-Communicable Diseases and the Promotion of Mental Health and Well-being – May 2025

A Call to Action: Making good on the promise of gender mainstreaming to address global health inequities

NCDs are the leading cause of death and disability for women globally – accounting for nearly two-thirds of all female deaths, up to 19 million deaths every year. Around the world, girls and women living with or at risk of developing NCDs experience unique challenges in accessing prevention, early diagnosis, treatment, and care, particularly in low-resource contexts.

For example, a woman may be unable to access services because her health is not a priority for her family, and she does not have the financial resources needed. She may be unable to travel freely, or take time out from her caring responsibilities.

The determinants of NCDs are also gendered. For example, women are more exposed to indoor air pollution due to the time they spend cooking and may have fewer opportunities to engage in physical activity. In addition, the one-size-fits-all, male-centric bias in health research and medicine leads to under-representation of women, poorer health outcomes, evidence gaps and inefficient health spending for women, girls, and gender minorities.

In recognition of the gendered nature of the challenges, Member States have made repeated commitments at previous High-Level Meetings to integrate a gender perspective into NCD prevention and control. However, 14 years after the first Political Declaration on NCDs, governments have largely failed to translate these commitments into action.

Our recent analysis found that of 64 countries that have integrated English-Language NCD policies, only 13 - just 20% - adopt a gender-responsive approach, incorporating targeted strategies and provisions to address gender-specific needs.

The time for empty promises has passed. We call on governments to ensure the upcoming political declaration includes concrete, actionable measures and accountability mechanisms, and urge you to promote and protect the health and wellbeing of people of all genders through five key actions:

- **First, governments must reiterate their commitment to pursue and promote gender-based approaches and mainstream a gender perspective into multi sectoral national NCD action plans.** This requires governments to prioritise the full, meaningful, and active participation of women and girls in all health-related decision-making processes. It must include governance and decision-making roles for women and girls across policies, programs, and resource allocation. It must also include substantive investments in women's health research, and capacity strengthening efforts for health care providers, civil society and communities.
- **Second, governments must prioritise investments in under-resourced, women-specific NCDs according to need, including by implementing commitments to meet WHO targets on cervical cancer by 2030.** Many NCDs that disproportionately affect or present differently in women often go underdiagnosed or untreated due to gender disparities in access to services along the continuum of care.

- **Third, to break down siloes**, governments must promote a rights-based, life-course approach to strengthening health systems. NCD services – such as access to the HPV vaccine and cervical cancer screening – should be **integrated into routine reproductive, maternal, child and adolescent, menopause and geriatric services, particularly in primary health care settings**. Equitable access to cost-effective digital health solutions can further enhance prevention, diagnosis, treatment, and management across the care continuum, enabling behaviour change and improving access to information.
- **Fourth, to strengthen data and surveillance, governments should work together with civil society and academia, prioritising the routine collection and analysis of data disaggregated by sex, gender, and other intersecting characteristics – including on climate impacts**. Only then can we design and implement effective, targeted interventions and measure progress in reaching all populations.
- **And finally, to deliver accountability, governments must uphold women's health and human rights – implementing recommendations made by the Committee on the Elimination of all forms of Discrimination Against Women**. The CEDAW convention sets out governments' obligations to ensure a woman's right to non-discrimination and substantive equality, including accessing health services, and can be used to hold governments to account for action to address the burden of NCDs among women and girls.

As 2025 unfolds, hard-won rights for women and girls are being rolled back at an alarming pace. This threatens progress towards Universal Health Coverage, and also imposes significant economic costs. The loss of productivity, income, and caregiving potential due to preventable disease and premature death among women undermines household resilience and national economic growth - particularly in low resource contexts.

However, by working together, we can formulate feminist, rights-based solutions to address NCDs; solutions which recognise the multiple identities and social positions women, girls and other genders hold during their lives. By strengthening our commitments and – crucially - translating those commitments into action, we can accelerate progress not only towards SDG3.4, but towards SDG5 and targets across the Sustainable Development Goals.

The Taskforce on Women and NCDs brings together fourteen global health organisations from the women's health and NCD communities to respond to the unique and growing burden of NCDs on women in low- and middle-income countries by mobilizing leadership, expanding technical expertise and disseminating evidence to inform policy making, planning and services.