


# Colombo Call to Action: Strengthening prevention and control of diabetes in the WHO South-East Asia Region

**Regional Commemoration of World Diabetes Day 2024  
'Breaking barriers, Bridging gaps'**

21–22 November 2024  
Colombo, Sri Lanka



## Colombo Call to Action: Strengthening prevention and control of diabetes in the WHO South-East Asia Region

e, the participants of the World Diabetes Day Regional Commemoration at WHO South-East Asia Region held in Colombo, Sri Lanka, on 21–22 November 2024,

1. EXPRESSING DEEP CONCERN about the growing burden of diabetes in the WHO South-East Asia Region, with approximately 246 million people aged 30 years and above living with diabetes and approximately another 500 000 people dying of diabetes annually therein, with more than half of cases occurring prematurely among those aged less than 70 years;
2. RECOGNIZING that only one in three adults with diabetes in the Region receives treatment, and more than 90% of people with untreated diabetes remain undiagnosed;
3. NOTING that more than 260 000 children and adolescents live with type 1 diabetes, with the most among them having limited access to insulin, insulin delivery devices and blood glucose self-monitoring devices that are required for optimum control of the disease, alongside a rising incidence of type 2 diabetes among young people;
4. COGNIZANT OF THE FACT that the burden of diabetes can be significantly reduced through efforts focused on the prevention and control of key risk factors, including obesity, unhealthy diet, physical inactivity and tobacco use;
5. ACKNOWLEDGING that strengthening primary health care is the foundation for accessible NCD services for universal health coverage, with diabetes prevention and management interventions integrated within broader NCD programmes, maternal and child health programmes, and relevant infectious disease programmes;
6. RECALLING
  - (i) World Health Assembly resolutions and Decisions:
    - (a) Resolution WHA74.4: Reducing the burden of noncommunicable diseases through strengthening prevention and control of diabetes;
    - (b) Decision WHA75.11: Follow-up of the Political Declaration of the Third High-Level Meeting of the UN General Assembly on the prevention and control of noncommunicable diseases in May 2022, which adopted five global diabetes targets to be achieved by 2030;
    - (c) Resolution WHA72.8: Improving the transparency on markets for medicines, vaccines and other health products;
  - (ii) Regional Committee for South-East Asia resolutions:
    - (a) Implementation Roadmap for the prevention and control of noncommunicable diseases (NCDs) in South-East Asia 2022–2030 adopted through Regional Committee resolution SEA/RC75/R2 focuses on monitoring progress and the accelerating interventions for NCDs, including oral health and integrated eye care. It emphasizes prioritizing the most impactful actions to achieve the five global coverage targets for diabetes agreed by Member States in Decision WHA75.11,
    - (b) SEAHEARTS: Accelerating prevention and control of cardiovascular diseases in the South-East Asia Region (resolution SEA/RC76/R5) to reach time-bound targets and milestones;
  - (iii) The WHO Global Diabetes Compact with the vision to reduce the risks of diabetes and ensure that all people who are diagnosed with diabetes have access to equitable, comprehensive, affordable, and quality treatment and care;
7. RECOGNIZING that diabetes should be covered through the life course and that optimum diabetes management requires access to affordable, quality-assured insulin and oral glucose-lowering medication, associated health technologies, diagnostic and monitoring capacity, education and counselling, and support from health-care providers and patient groups;

8. RECOGNIZING that equitable access to quality, affordable essential medicines and health technologies, including those for diabetes, is part of the progressive realization of the fundamental right to the highest possible standard of health (in short: “the right to health”);
9. NOTING that significant progress has been made towards achieving the target of 100 million people with diabetes and hypertension to be placed on protocol-based management by the end of 2025;
10. REITERATING support to designing a new, ambitious and achievable Political Declaration at the Fourth UN High-Level Meeting on NCDs in September 2025;

**Call upon national governments and nongovernmental organizations to:**

11. STRENGTHEN efforts to implement SEAHEARTS interventions to further improve the treatment cascade of hypertension and diabetes in primary health, with the aim to achieve the SEAHEARTS milestones fully by 2025;
12. ALIGN national efforts with technical guidance provided by the WHO Global Diabetes Compact;
13. ADVOCATE for regional agreement on renewed SEAHEARTS milestones beyond 2025, leveraging the present momentum to accelerate the prevention and control of diabetes, hypertension and thereby, cardiovascular diseases in general;
14. ENSURE that universal health coverage is promoted so that all people living with diabetes have access to an essential package of care and treatment without out-of-pocket expenditures or financial hardship at the point of care;
15. INVEST in programmes to promote healthy lifestyle interventions by:
  - (i) promoting community-led initiatives grounded in local culture and traditional knowledge including efforts to reduce stigma for people living with diabetes;
  - (ii) adopting healthy setting-based approaches to educate and counsel families and people living with diabetes to make healthier choices and improving awareness about diabetes prevention and self-care management through targeted information and communication campaigns;
  - (iii) strengthening and enforcing public policies, laws, regulations and other measures to address the drivers of obesity and other risk factors for diabetes;
  - (iv) regulating marketing practices, especially those targeting children, to reduce the consumption of unhealthy foods containing excessive sugars, sodium, saturated fats and trans fats, and creating a favourable food environment that promotes healthy lifestyle options;
16. INTEGRATE diabetes prevention and management into the existing programmes at the primary health care level as steps towards the achievement of universal health coverage, by:
  - (i) identifying opportunities to ensure that diabetes prevention and management interventions are fully integrated into existing programmes at the primary health care level for other NCDs (e.g. hypertension), maternal and child health care, and tuberculosis and HIV services;
  - (ii) integrating an essential package of diabetes diagnosis, treatment and care into universal health coverage benefit packages to ensure the delivery of services that are promotive, preventive, rehabilitative and palliative, as well as focused on effective management throughout the life course;
17. STRENGTHEN the capacity of health systems to:
  - (i) offer testing to identify individuals with diabetes, ensuring linkage to the care cascade across all levels of care, including diagnosis, treatment and management, and in addressing complications;
  - (ii) achieve better glycaemic control for people living with diabetes receiving care, through full implementation of nationally or subnationally approved treatment protocols and approaches of WHO HEARTS-D technical packages;

- (iii) provide healthy lifestyle counselling;
  - (iv) implement health management information systems, preferably electronic, to enable longitudinal tracking of people living with diabetes in both public and private sectors. These systems should generate information on national and global targets and serve as a management tool to improve care at the facility level;
18. INVEST in interventions to improve access to diabetes diagnostics, medicines and health products, particularly insulins, and their scientifically sound and cost-effective use by:
    - (i) strengthening the capacity of national regulatory authorities to ensure all diabetes products on the market are quality-assured (including the evaluation of biosimilar insulins);
    - (ii) adapting robust forecasting tools for realistic quantification of requirements as per treatment protocol (including up-to-date patient registries);
    - (iii) ensuring adequate financing to meet requirements through free supply or social health insurance;
    - (iv) strengthening national procurement mechanisms by incorporating market assessments, supplier prequalification, centralized issuance of tenders and other best practices for goods procurement and facilitate sharing of procurement prices regionally or globally;
    - (v) strengthening distribution systems, including the use of digitalized systems and monitoring stock-outs;
    - (vi) scaling up the cold chain infrastructure to ensure the quality of insulin;
    - (vii) regulating prices and distribution mark-ups and eliminating taxes on essential diabetes medicines and blood glucose monitoring devices;
    - (viii) monitoring the availability and prices in facilities;
    - (ix) prioritizing access to HbA1c testing at primary health care facilities in addition to testing blood glucose using a meter and test strips;
    - (x) educating health-care providers through clinical guidelines (including how to switch between insulin types and brands), and raising awareness on diabetes prevention and treatment among people living with diabetes and the public in general;
  19. INVEST in implementation research to foster evidence-informed diabetes prevention and treatment programme design and implementation; and
  20. ESTABLISH national targets aligned to the global diabetes coverage targets to be achieved by 2030, promoting accountability through timely, reliable and sustained national data on risk factors, diseases and mortality, and

**Call upon international partners, development agencies, global health organizations, academia and WHO collaborating centres to:**

21. SUPPORT the implementation of actions by countries and the WHO Secretariat; and

**Request the WHO Secretariat to:**

22. PROVIDE technical support to countries in designing national roadmaps to reach the global diabetes targets within the roadmaps for renewed SEAHEARTS milestones beyond 2025 and aligned with technical guidance provided by the WHO Global Diabetes Compact;
23. SUPPORT forums for political and technical discussions; and
24. PROMOTE research into innovative solutions and documentation and dissemination of best practices.