2023 Bridgetown Declaration on NCDs and Mental Health

The Small Island Developing States (SIDS) member countries leverage the opportunity provided by the SIDS Ministerial Conference on noncommunicable diseases and mental health, held in Bridgetown, Barbados on 14-16 June 2023, to:

1. Reaffirm our commitment to take bold SIDS-specific action to accelerate progress in SIDS to, by 2030, reduce by one third premature mortality from noncommunicable diseases (NCDs) through prevention and treatment and promote mental health and well-being, in line with the 2030 Agenda for Sustainable Development.

2. Acknowledge and reaffirm that the Caribbean Community (CARICOM) Port of Spain Declaration in 2007 was crucial to catalyse the first High-Level Meeting of the United Nations General Assembly on NCDs in 2011 and recognize that SIDS continue to demonstrate global leadership in promoting awareness and actions to address the NCD and mental health epidemic and the climate crisis, as exemplified by the Pacific Islands NCD Roadmap, the SIDS Accelerated Modalities of Action (SAMOA Pathway), the Barbados Declaration on Achieving Sustainable Energy for All in SIDS and the Bridgetown Initiative.

3. Remain deeply concerned that premature mortality from the NCDs, the challenges to the livelihood and wellbeing of people living with NCDs and mental health conditions, coupled with the escalating climate crisis, represent an existential threat to health and development in SIDS.
4. Express our grave concern that progress to address NCDs and mental health needs has been limited and not commensurate with the burden of these conditions, with SIDS being disproportionately represented among the countries with the highest estimated risk of dying prematurely from any of the four main NCDs.

5. Remain deeply concerned that SIDS show the highest rates of childhood and adult obesity worldwide and that the challenge in ensuring healthy diets and effectively responding to NCDs in SIDS is significantly constrained by high dependence on imported food, medicine and diagnostic devices, commercial influence and trade-related challenges.

6. Recognize that SIDS continue to address the disproportionate and repetitive impact of disasters, whose frequency and intensity are further exacerbated by climate change, with economic losses and damage eroding natural and human capital and impeding their progress towards sustainable development. Further acknowledge that these multiple crises have been amplified by the global COVID-19 pandemic and subsequent and continued adverse socio-economic consequences.

7. Recognize that addressing this devastating trajectory for SIDS requires building better resilience, strengthening monitoring and prevention, reducing vulnerability, raising awareness, improving emergency preparedness and response and investing in multi-hazard risk reduction, and addressing the underlying social, economic, and environmental drivers of risk.

8. Recognize that most premature deaths from NCDs and mental health conditions are largely preventable by enabling health systems to respond more effectively and equitably to the health-care needs of people living with and affected by health conditions, and influencing public policies in sectors outside health that tackle shared risk factors.

Having identified the issues and drivers at the heart of the challenges posed by NCDs, mental health conditions and the climate crisis, SIDS:
9. Commit to addressing the nexus of factors through whole-of-system, rights-based and equity approaches that are grounded in local culture and traditional knowledge.

10. Commit to continued global leadership and speaking with a unified voice across all relevant high-level platforms to ensure priority is given to the prevention and control of NCDs and mental health conditions across the interconnecting agendas, such as health and climate change, emergency-resiliency, pandemic preparedness, development financing, biodiversity conservation, sustainable food systems and their commercial drivers.

11. Commit to act in unity and call on the global community including regional and international development banks, bilateral funders, the UN system, non-State actors including civil society organizations, as well as people living with NCDs and mental health conditions, and the private sector to support SIDS through coherent political action, partnerships, resource mobilization and innovations to ensure that the challenges and multi-dimensional vulnerabilities specific to SIDS are addressed.

12. Commit to actions that can address NCDs and mental health conditions as an integral part of climate change resiliency and pandemic preparedness and response and protect people, communities and economies in the face of future emergencies by ensuring uninterrupted access to quality essential service and medicines throughout the life course while reducing the exposure to their shared risk factors.

13. Call on all countries to provide financial and capacity building assistance to SIDS to address the impact of NCDs and mental health conditions in SIDS, including in addressing the environment-nutrition nexus.

14. Welcome the commitments by SIDS, in line with their national priorities, to undertake specific Actions as contained in Annex I of this Declaration for the implementation of cost-effective interventions (including WHO ‘Best Buys’) to accelerate progress on NCDs, mental health and environmental action, including those publicized on the SIDS Commitment Portal for NCDs and mental health.
15. Further welcome the background document on ‘Addressing the triple threat in Small Island Developing States: Noncommunicable Diseases, Mental Health Conditions and the Climate Crisis’ contained in Annex II of this Declaration.

Bridgetown, Barbados
15 June 2023
In accordance with Paragraph 14 of the 2023 Bridgetown Declaration on NCDs and Mental Health, SIDS undertake the following Actions, in line with their national priorities:

**Engage**

- Engage and support SIDS Heads of State and Government in the Global Group of Heads of State and Government for the prevention and control of NCDs and at the 4th UN High-level meeting on NCDs, as well as the 2nd UN High-level meeting on universal health coverage (UHC), ensuring prioritization and action on NCDs, mental health and their risk factors in SIDS at the highest level of government;

- Mobilize and fund community organizations and institutions, including youth and women’s groups, for local contextualized solutions for prevention and control of NCDs, and prevention, diagnosis and treatment of mental health conditions and interlinkages with climate change;

- Engage civil society to tailor, monitor and evaluate SIDS-specific NCD and mental health interventions to national health system contexts and population needs;

- Institutionalize the meaningful and sustained engagement of people living with NCDs and mental health conditions and young people in SIDS in decision-making through formalized participatory approaches that enable contextual, equitable and person-centred solutions;

- Convene SIDS Health, Trade and relevant sectors through multisectoral platforms to establish coherent solutions, protected against undue influence and conflicts of interest, and raise a collective voice in addressing the commercial determinants of health that cause NCDs, are detrimental to mental health and exacerbate climate risks;

- Enhance coordination and cooperation among United Nations and other agencies, entities and frameworks that address the interface of health and climate change, biodiversity, business and human rights, environment, nutrition and emergency preparedness and response;
• Strengthen domestic and global engagement with the private sector, while preventing, mitigating, and managing conflicts of interest, for increased assistance to develop SIDS-contextualised solutions for the prevention and control of NCDs, mental health conditions and the climate crisis;

• Integrate the prevention and control of NCDs as well as mental health promotion, protection and care within the traditional value system of SIDS including religion, sports and culture, to combat the structural and cultural barriers to health and access to health services.

Accelerate

• Domestic investment in addressing NCDs and mental health conditions according to national context and implement the WHO recommended menu of policy options and cost-effective interventions for the prevention and control of NCDs (WHO ‘best-buys’) and mental health;

• Regulation and fiscal measures to address the main risk factors for NCDs – tobacco use, physical inactivity, the harmful use of alcohol and unhealthy diets;

• Regulation of harmful marketing practices to children, fiscal and pricing policies to increase the affordability of healthy foods, in line with WHO ‘best buys’, to address the commercial determinants of health associated with unhealthy diet and the significant and growing burden of childhood obesity in SIDS;

• The full integration of essential NCD and mental health services into primary health care (PHC) and universal health coverage (UHC) seeking greater integration of the prevention and management of NCDs and mental health conditions into UHC commitments at the 2023 UN High-Level Meeting on UHC;

• Update health legislation in line with human rights norms including the decriminalization of suicide and prohibition of coercive practices in the treatment of mental health conditions;

• Development and implementation of cross-sectoral food system policies aimed at increasing local food production and promoting healthy diets and food and nutrition security and integrate them into policies for climate change mitigation and adaptation;
• Facilitate enhanced implementation of the WHO Framework Convention on Tobacco Control (FCTC) in SIDS, in line with the obligations of the WHO FCTC as a means of implementation to reach SDG target 3.4 on NCDs;

• Secure international funding by extending eligibility criteria for SIDS such as through the Multi-dimensional Vulnerability Index;

• Develop a SIDS-specific NCD and Mental Health Implementation Roadmap, including a SIDS Acceleration Plan to STOP Obesity that prioritize and implement the WHO recommended menu of policy options and cost-effective interventions for the prevention and control of NCDs (Appendix 3 of the Global NCD Action Plan 2013-2030) and other WHO tools and packages, including on the commercial determinants of health;

• Devise effective, feasible, graphic, easily understood front of pack labelling policies in SIDS, accompanied by assistance to small producers in SIDS regions to effectively meet standards around nutritional labelling, recognising the high level of food imports and logistical challenges, and essential to increase healthy food literacy and support behavioural change, and school food and physical activity policies;

• Lead health financing reforms in SIDS for enhanced efficiency gains (including through taxes and ending of government subsidies for unhealthy commodities that contribute to NCD risk factors) that allocate adequate funds to cover all people in SIDS by 2030 with climate change-resilient and environmentally-sustainable quality essential health services and quality, safe, effective, affordable, and essential medicines, vaccines, diagnostics and health technologies for the prevention and control of NCDs and the promotion, protection and care of mental health conditions across the continuum of care;

• Establish financial and social protection programs, such as social health insurance, including essential benefits packages, to enable equitable access to quality services, medicines, and health technologies, especially for persons and groups in situations of vulnerability based on their inputs and contributions;

• Strengthen regional and national regulatory mechanisms for the production, pre-qualification and trading of essential medicines and technology by including essential and quality NCD medicines, diagnostics,
and products in national essential medicines and diagnostics lists and in national drug procurement systems;

- Explore culturally appropriate digital health promotion and integrate digital and tele-health services in primary care services to support the prevention, detection and early treatment of NCDs and mental health conditions;

- Use existing technology channels and digital initiatives in SIDS to counter misinformation and improve knowledge and skills of healthcare professionals.

**Invest**

- Policies that reduce greenhouse gas emissions with health co-benefits, including via the reduction of air pollution levels, and in health promotion policies;

- Build the capacity of civil society organisations in SIDS to meaningfully contribute to efforts to prevent and manage NCDs and mental health conditions throughout the life course;

- Implement early warning and response systems, and heat action plans, as well as necessary national health related adaptation action identified through climate change and health Vulnerability and Adaptation assessments;

- Enhance cross-SIDS collaboration among regional intergovernmental entities to enhance capacities for integrated and sustainable local approaches to address NCDs, mental health and climate change, in particular for:
  - advocacy, capacity building, research and accountability to generate integration and coherence across governance, policy and planning.
  - competencies and sustainability of local health finance expertise that can ensure national health insurance models that are universal and can meet the health priorities and needs of people living with NCDs and mental health conditions.
  - multidisciplinary SIDS research partnerships to build a body of SIDS-based evidence related to the commercial and climate crisis drivers.
- competencies and sustainability of an appropriate local health and system-wide workforce that meets the need of SIDS for the effective health promotion and prevention and management of NCDs and mental health conditions, including for addressing psychosocial support needs.

- platforms and mechanisms to enable civil society and individuals with lived experience to engage and participate in relevant national, regional and cross-SIDS, high-level political decision-making fora and processes;

  - Ensure sustained advocacy in regional and global forum for prioritization of NCD and mental health through increase in Official Development Assistance (ODA) attributed to addressing NCD and mental health prevention and control towards a global target of 10% by 2030, including through the second WHO Global Dialogue on Financing National NCD Responses;

  - Continue to advocate for and support the implementation of the UN multi-dimensional vulnerability index, which will respond to the priorities of all SIDS and which recognizes the multiple constraints to economic resilience allowing for the qualification of ODA and foreign direct investment (FDI) in line with their developmental needs;

  - Advocate and support proposals for access to development funds including the Green Climate Fund, the Loss and Damage Fund, biodiversity protection funds and COVID-19 recovery funds;

  - Implement mechanisms for sectors other than health – such as the education, agriculture, energy, transport, finance, business, and trade sectors – to include resources for their contributions to the achievement of national health goals in their plans and budgets;

  - Strengthen or develop appropriate regional procurement mechanisms and models that are able to maximize economies of scale in the acquisition of health and medical technologies.

**Align**

- Engage the several entities of government in a whole-of-government approach to the prevention and management of NCDs, mental health conditions and their risk factors, as well as engaging the relevant societal actors in a whole-of-society approach to a similar end;
• Develop and implement rights-based policies and mechanisms, as part of good governance, to prevent, mitigate, and manage conflict of interest and prevent industry interference and undue influence in NCD and mental health policy-making level, in alignment with regional and international guidance and tools;
• Align to policies on gender, human rights, equity, environment as well as PHC and UHC;
• Prioritize at the whole-of-government level the prevention and control of NCDs and the promotion, protection and care of mental health in national UHC and development plans; climate change and health strategies; COVID-19, natural disasters and other emergencies preparedness, response and recovery plans; and engage in a whole-of-society approach, safeguarded against conflicts of interest, for their implementation, such as the CARICOM National NCD Commissions;
• Urgently develop a whole of government and whole-of-society SIDS action plan for climate change and health resiliency that fully incorporates NCDs and mental health, in line with the UNFCCC, the Paris Agreement, the Alliance of Small Island States (AOSIS) ‘Declaration on the Placencia Ambition Forum’ and the Bridgetown Initiative;
• Strengthen efforts to integrate health considerations in SIDS National Determined Contributions (NDCs), including those considerations related to climate-resilient health systems, prevention and management of NCDs and mental health conditions, and food and water security, and the estimated benefits on NCDs and mental health of climate change mitigation and adaptation action, and develop, implement, and evaluate health national adaptation plans (H-NAPS);
• Request guidance on how utilize the General Agreement on Tariffs and Trade (GATT) Article XX on General Exceptions and the Ministerial Declaration on the emergency response to food insecurity, in the World Trade Organisation (WTO) to improve food systems and food and nutrition security, and preserve and protect the health of the population and the environment, presenting evidence and justifying the planned action;
• Build public sector capacity to cohere commercial and economic determinants of health with strategies to advance the SDGs, including in
public investments, tax agreements, debt restructuring, and governing common goods, services and products that harm or have potential to undermine NCDs, mental health and climate change;

- Monitor the full implementation by SIDS of the Declaration of Barbados and the Programme of Action for the Sustainable Development of SIDS, the Mauritius Strategy for the Further Implementation of the Programme of Action for the Sustainable Development of SIDS and the SAMOA Pathway, including through the monitoring frameworks of the regional commissions.

**Account**

- Set practical, achievable, and evaluable SIDS-specific national objectives and targets for prevention and management of NCDs, mental health conditions and their risk factors, aligned with regional and global targets, SDG3.4 and the Global Monitoring Framework on NCDs and commit to monitoring, evaluating, and reporting progress toward their achievement as well as for the specific targets within the agenda;

- Strengthen surveillance and monitoring to obtain reliable and timely data at national levels, as well as health facility level, on NCD and mental health risk factors, diseases, mortality, as well as on determinants and on national capacities, resources and levels of programmatic implementation for NCDs and mental health conditions, ensuring the data is disaggregated in line with WHO guidance;

- Use available global and regional tools to develop and facilitate a SIDS mutual accountability framework for the implementation of prevention and management of NCD and mental health conditions;

- Enhance context specificity and use of local and traditional knowledge to identify and address key gaps and enablers in SIDS, in particular understanding of the cultural and traditional contexts of implementation and the interlinkages with climate change, environment and emergencies while protecting from the undue influence of commercial and economic actors;

- Consider formulating and enacting access-to-information legislation to facilitate the transparency, monitoring, and accountability of NCD and mental health policies and programmes;
Welcome additional commitments by some SIDS to undertake specific actions for implementation of cost-effective interventions to accelerate progress on NCDs, mental health and environmental action.
Addressing the triple threat in Small Island Developing States: Noncommunicable Diseases, Mental Health Conditions and the Climate Crisis

Introduction

Premature mortality from the NCDs, the enormous problems of the millions of people living with NCDs and mental health conditions coupled with the escalating climate crisis, represent an existential threat to human development in the 21st century. Small Islands Developing States (SIDS) are a distinct group of countries with unique social, economic, commercial, health and nutrition, climate and environmental vulnerabilities. They depend primarily on external resources, including tourism and remittances, with a lack of economic diversity and small economies of scale. SIDS face high trading and transactional costs. While SIDS are 1% of the world’s population and economy, they emit less than 1% of greenhouse gases but are disproportionately and severely affected by climate change and natural disasters. Yet the classification of SIDS as middle- and high-income countries prevents their access to concessionary financing needed to recover from these interconnected challenges. The impact of climate change represents an acute and existential threat for SIDS compounded by the fact that SIDS are disproportionately represented among the countries with populations highest at risk of dying prematurely from NCDs.

The Issues

The burden of NCDs, mental health conditions and their shared risk factors in SIDS

Over half of deaths in SIDS are premature and from NCDs, including cardiovascular diseases, cancer, diabetes, chronic respiratory diseases, and
mental health conditions. SIDS have among the highest rates globally of childhood and adult obesity. Nauru, Cook Islands and Palau have the highest rates of obesity globally. Childhood obesity in SIDS is increasing exponentially. Linked to that, the highest prevalence of diabetes among adults in the world is also projected to be in SIDS, with diabetes prevalence in the Caribbean double the global average. The rate of hypertension is over 30% in almost all SIDS. In Guyana, premature mortality from cardiovascular disease is the highest in the region of the Americas. Rates of mental health conditions reach as high as 15% in the Caribbean and the Pacific, where some SIDS still criminalise suicide. The challenge in responding to NCDs is significant with the NCD epidemic having grown rapidly among SIDS due to disproportionate commercial influence and trade-related challenges. Negative commercial influences are driving high rates of smoking, obesity and sedentary behaviour across these countries.

**Impacts of the COVID-19 pandemic**

The Covid-19 pandemic highlighted the link between health and development and exposed health system vulnerabilities for people living with NCDs and mental health conditions in SIDS. The presence of NCDs and their risk factors increased the severity and mortality rates for COVID-19 patients. WHO data show that NCD screening, management and treatment as well as mental health services were severely disrupted during the pandemic. United Nations Department of Economic and Social Affairs data shows that some SIDS had higher COVID-19 related deaths per 100,000 people than other developing country groups and regions.

**Health workforce challenges**

SIDS face health workforce challenges due to limited capacity to produce, recruit and / or retain health workers. In addition to inadequate numbers being trained in SIDS, the migration of their health workforce, especially specialized nurses and midwifery personnel, are facilitated through active recruitment by High Income Countries. – so-called “reverse foreign aid” where High Income Countries recruit and benefit from highly trained workers without incurring the cost of training. This in turn has an impact on the quality of health services, which has been further affected by the COVID-19 pandemic.

**The drivers**
Climate change and other environmental determinants

NCDs, mental health conditions and climate change interact and undermine health and development in SIDS. This combination threatens fragile health and social services and people's lives and livelihoods. A human rights-based approach while recognising the need for assistance and financing, is needed to address these challenges.

A nexus of factors and underlying drivers are responsible for the negative impact of NCDs and mental health conditions in SIDS, which will require whole-of-system approach.

Climate-sensitive health risks include increased morbidity from NCDs, detrimental impact on mental health and well-being, injury and mortality from extreme weather events, heat related illness, malnutrition including obesity, and food-, water- and vector-borne diseases. These risks also reduce SIDS capacity to provide effective, affordable and climate-resilient health systems to their dispersed and marginalised populations. Climate change impacts on SIDS are disproportionately more severe, as they face loss and damage from sea level rise, increased temperatures, extreme weather events which cause disruption of infrastructure and water security, food sources, housing, education and health care facilities and its workforce. This occurs especially in people living with NCDs, women, children and youth, elder persons, persons with disabilities, indigenous people, the poor, the LGBTQI+ community and other populations at risk or living in vulnerable conditions.

Macro-economic determinants of health: Debt and Financial Security

High levels of NCDs and mental health conditions reduce the quantity and quality of the human capital in SIDs with negative effect on their capacity to generate wealth. The growing adverse effects of climate change have been one of the factors that risks pushing SIDS into unsustainable levels of debt and has served as a key contributor to record high external debt and debt service costs in SIDS in 2021. Most SIDS have been classified as middle-income or above, thereby limiting their access to international development assistance and concessional financing, despite SIDS financial resources being scarce in comparison with the magnitude of their challenges. This makes it harder for SIDS to fund actions on preventing NCDs and mental health conditions and meeting their health and social
care needs. SIDS require specific strategies to avoid disruptions to their development progress owing to the loss of concessionary financing. The international community and the multilateral financial institutions need to address access to development financing for SIDS and support the Bridgetown initiative as well as the development of a multi-dimensional vulnerability index applicable to SIDS.

SIDS face high transactional costs, high import and export costs, supply chain constraints and market monopolisation, as well as, in some cases, irregular international traffic volumes. At the same time, they have to rely on external markets due to narrow domestic production bases. Most food imports are energy-dense, nutrient-poor ultra-processed foods. During emergencies, SIDS suffer disproportionately from disruption to transport networks, particularly via air and sea routes when their natural isolation becomes enhanced.

Commercial Determinants of Health and Trade

Commercial and economic determinants of health including trade are among the key drivers of NCDs and mental health conditions in SIDS. While SIDS neither typically drive the transnational commercial practices causing harm to health, nor benefit from the profits of these practices, these determinants influence the social, economic, and environmental conditions for health, having a greater impact on marginalised populations and creating health inequities. Addressing commercial and economic determinants of NCDs and mental health conditions is vital for sustainable development.

SIDS face challenges in their food systems due to commercial drivers that make healthy diets unavailable and unaffordable. Many SIDS are constrained by the dependence on imported food, which may increase as climate change affects local agriculture and fisheries. Imported processed food, high in sugars and fats, causes obesity, food insecurity, plastic pollution and NCDs in SIDS. Trade and investment agreements often favour multinational commercial actors over SIDS' food security, NCD prevention and climate resilience. The livelihood of many SIDS depends on biodiversity and One Health approaches that consider ecosystem benefits for health and well-being. For many SIDS industries such as
tourism and fisheries are crucial for their economy and can have health-harming and health enabling impacts.

To address negative trade-related and commercial determinants of health, SIDS need to act both individually and collectively to protect their regulatory and policy space in trade and investment agreements, and safeguard policymaking from industry interference and conflicts of interest. SIDS also need to support and enhance sustainable local food production and processing by responsible local commercial actors, including small-holders and family farms.

Response

SIDS have demonstrated global leadership in promoting awareness and actions to address the NCD and mental health epidemic and the climate crisis. The Caribbean Community (CARICOM) Port of Spain Declaration in 2007 was the first time that Heads of Government met to address NCDs and was crucial to catalyse the first High-Level Meeting of the United Nations General Assembly on NCDs in 2011. The Pacific Islands NCD Roadmap and the SAMOA Pathway continue to set the direction for the NCD agenda. As an interconnected network of diverse countries facing common challenges, SIDS have enormous potential for developing and implementing effective responses for addressing the commercial determinants of NCDs and climate-related health impacts. Together, and with support from the global community, they are at a tipping point for catalysing and championing action.

Call to Action

Having identified the issues and drivers at the heart of the challenges posed by NCDs, mental health conditions and the climate crisis, SIDS commit to addressing these by connecting health and climate change, emergency-resiliency, pandemic preparedness, biodiversity conservation, and their commercial drivers through mobilising of resources, showcasing successes, scaling innovations and collaborating with non-traditional partners, across many of the current frameworks and actions plans that guide these interconnecting agendas and vulnerabilities. It is therefore important to have whole-of-government and whole-of-society responses that are grounded in local culture and traditional knowledge and address
the interconnected social, environmental, economic and commercial determinants.

Most premature deaths from NCDs and mental health conditions are largely preventable by enabling health systems to respond more effectively and equitably to the health-care needs of people living with and affected by health conditions, and influencing public policies in sectors outside health that tackle shared risk factors. Effective interventions for NCDs, known as the WHO Best Buys, include reducing tobacco and alcohol consumption, physical inactivity, unhealthy diets, and air pollution levels; improving access and quality of health care; ensuring universal health coverage; and tackling the commercial determinants of health. Effective interventions for mental health and neurological conditions, as set out by the WHO, include treatment of common mental health, neurological and substance use conditions such as depression, epilepsy and alcohol use disorders in primary health care; in addition, interventions at school and in the workplace are also important to both prevention of mental ill health as well as providing mental health support. These interventions have a high return on investment.

SIDS need to escalate their efforts against these influences and threats using a human rights-based approach to address these challenges. This would involve applying human rights principles, particularly the principles of equity and non-discrimination, to health, food, housing, water, environment and sanitation policies that prioritise people, especially those who are marginalised and living in vulnerable conditions especially children. These efforts must be complemented by increased assistance to SIDS from international partners, including relevant private sector, while safeguarding from conflicts of interest.

SIDS will continue to provide global leadership and speak with a unified voice across all relevant high-level platforms to ensure that SIDS issues are given priority through the 2023 Bridgetown Declaration on NCDs and Mental Health and the Actions therein contained in Annex I.