

World Stroke Organization

9.2 SEAHEARTS: Accelerating prevention and control of cardiovascular diseases in the WHO South-East Asia Region

Your Excellencies, Honorable Ministers, distinguished delegates, colleagues,

The Southeast Asian region is witnessing an epidemiological shift toward non-communicable diseases. The SE Asia region alone accounts for over 40% of global stroke mortality, with the value of lost welfare due to stroke estimated at \$67.9 billion, which is equivalent to 2.5% of the region's GDP

Additionally, the region lacks timely access to acute care, while rehabilitation services remain fragmented and concentrated in urban areas.

This gap threatens progress toward achieving SDG targets 3.4 (reduction in NCD mortality) and 3.8 (Universal Health Coverage).

The launch of the Stroke Care Improvement Program by the WHO SEARO through the WHO CC for Stroke Care in 6 countries offers a vital opportunity to change this trajectory and emphasize three key priorities for success:

- 1.Capacity Building for Healthcare Workers- Providing comprehensive training across all levels of the health system to strengthen skills in stroke recognition, acute management, and rehabilitation, thereby enabling better recovery outcomes.
- 2.Sustainable Models of Care Delivery- Implementing innovative, scalable approaches such as the hub-and-spoke model and physician-led care models to ensure timely access to stroke care, even in resource-constrained and remote settings.
- 3.Surveillance Systems- Accurate data is essential to understanding the ground reality of stroke care. Therefore, we propose supporting other Southeast Asian countries in establishing stroke registries and strengthening regional surveillance systems to generate reliable data on incidence, outcomes, and service gaps, thereby enabling and advocating for evidence-based policy and programmatic action.

WSO stands ready to support governments in scaling evidence-based, cost-effective stroke care innovations.

The time to act on stroke is now