

THE OAKLAND STATEMENT

Putting NCDs, Children and Adolescents on the Broader Global Health and Development Agenda

Adopted by acclamation on 20 March 2012

- The Oakland Conference on Non-Communicable Diseases (NCDs) in Children and Adolescents was organized by NCD Child, led by Caring and Living as Neighbours (CLAN), the Public Health Institute (PHI) and Global Health Council (GHC). It was convened at the California Endowment Oakland Conference Center during 19–20 March 2012 in Oakland, California.
- The Conference was attended by more than 80 representatives of nonprofit organizations, for-profit corporations, advocacy organizations, academic and resource institutions, UN agencies, intergovernmental organizations and health care providers.
- Participants have issued this statement so as to synthesize the key challenges, concerns and constraints faced by children and adolescents living with NCDs. It also contains a list of urgent actions necessary to combat and minimize unnecessary and preventable deaths and complications from NCDs. We, the participants in the Oakland conference on NCDs in children and adolescents¹, acknowledge that:
 1. Children and adolescents require special attention and care. They have the right to enjoy the highest attainable standards of health and to access affordable services for early and accurate diagnosis, treatment, follow up care, rehabilitation, pain management and palliative care.
 2. Children and adolescents now constitute about a third of the world's population and nearly half of the population of developing countries. Numbering over 1 billion worldwide, today's adolescents are the largest cohort ever to transition into adulthood.
 3. Effective prevention strategies to redress the increasing global prevalence of NCDs (such as cancer, cardiovascular disease, diabetes, chronic respiratory disease, mental illness and dental diseases) should necessarily integrate children and adolescents. NCDs threaten the future growth, development and economic stability of countries, and a lifecourse approach that addresses the early origins of disease and adoption of risky behaviours in adolescence is required.
 4. Annually, while at least 1.2 million children and adolescents die from NCDs² the actual mortality rate is unknown since NCDs are often not recorded, not considered as notifiable diseases and registries are absent or inadequate. Millions more children and adolescents live with NCDs. In developing and lower-middle income countries, many children and adolescents suffer and die needlessly from highly-preventable and treatable NCDs in part because of low awareness, stigma, societal shame and poverty. A significant number acquire disabilities as a result of late diagnosis or inadequate treatment. NCDs

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 6. There is a huge inequity in the level of care and survival rates for NCDs between high resource and low resource countries. For example, while childhood cancer is curable and has a survival rate of 80-90% in the developed world, in developing countries, survival rates are around 10-30%.
1. The UN Convention on the Rights of the Child defines children as under the age of 18 while the World Health Organization (WHO) defines adolescents as between the ages of 10- 19. Youth is defined by the United Nations (UN) as those between the ages of 15 and 24.
 2. IDF Diabetes Atlas, International Diabetes Federation, Brussels 2010.

