

JOINT STATEMENT
4th ASEAN-CHINA HEALTH MINISTERS MEETING
6 July 2012, Phuket, Thailand

1. WE, the Ministers of Health of ASEAN Member States, representing Brunei Darussalam, the Kingdom of Cambodia, the Republic of Indonesia, the Lao People's Democratic Republic, Malaysia, the Republic of the Union of Myanmar, the Republic of the Philippines, the Republic of Singapore, the Kingdom of Thailand, the Socialist Republic of Viet Nam and the People's Republic of China, convened the 4th ASEAN-China Health Ministers Meeting on 6th July 2012 in Phuket, Thailand. We share our concerns and express our commitment to strengthen our collaboration in the spirit of governments and people of ASEAN and China.

2. We express deep concerns on the increasing trend of tobacco use in several countries. We fully recognise the adverse impact of tobacco use on public health, as well as its social, economic consequences, including the serious health effect of tobacco use and second hand smoke for non-smokers particularly mothers and children. We acknowledge the role of the governments in exercising taxation and regulation to control the increasing trend of smoking. We recognise the roles of the special funds derived from additional levy on the Tobacco and Alcohol Tax to reduce consumption, and also mobilize more funding for health development. We fully understand the roles of Social Determinants of Health (SDH) and Health in all Policies (HiAP) to support tobacco control. We commit to advocate and do the best to incorporate tobacco control in other ministerial agenda in our countries.

3. We recognize and commit to implement the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases (A/RES/66/2). We will collectively support the development, before the end of 2012, for a comprehensive global monitoring framework, including indicators, and a set of voluntary global targets for the prevention and control of Non-Communicable Diseases (NCDs). We agree to prioritise our actions to address four principal NCDs, i.e., cardiovascular diseases, cancers, chronic respiratory diseases, and

FINAL

diabetes, together with the underlying common risk factors, namely unhealthy diet, physical inactivity, harmful use of alcohol, and in particular tobacco use.

4. We note the progress made in ASEAN and China collaboration in the areas of communicable, and emerging infectious diseases including artemisinin-resistant malaria, pandemic influenza, and dengue. We learned of the increasing number of ASEAN and China tourists and the need to increase exchange of surveillance information and disease control experts/field epidemiologists for the purpose of learning and developing a timely containment and control of all epidemic of regional significance.

5. We also note the need for further collaboration pertaining to HIV and AIDS prevention, treatment, and care to facilitate a collective response to achieve the universal call to Zero New HIV Infections, Zero Discrimination, and Zero AIDS-related Deaths.

6. We also note the progress made in the ASEAN and China collaboration in the areas of traditional and complementary alternative medicine; and efforts in information exchanges in facilitating its integration into the national health care system.

7. We acknowledge the efforts made by the ASEAN-China Senior Officials in convening the first two consecutive Meetings. We strongly urge them in maximising the avenue of the ASEAN-China Senior Officials Meeting on Health Development (ASEAN-China SOMHD) to strengthen current collaborations including monitoring the progress of these identified collaborative areas and identifying new areas of working together.

8. We commit to the signed ASEAN-China MOU on Health Cooperation and task the ASEAN-China SOMHD to develop a work plan to concretely implement the signed MOU.

9. We welcome and commend the achievement of China and some ASEAN countries, which strive to achieve Universal Health Coverage (UHC), and

FINAL

those that are moving fast towards UHC. We appreciate and strongly support the collaboration between China and countries in ASEAN in strengthening the policy on UHC and improving quality and coverage of health service provisions. We commit to mobilize more financial and human resources to enrich our collaboration and to achieve UHC as stated in the national health development plan of each country. We have tasked our senior health officials to work closely, share experiences, increase exchange of human resources, and other necessary means to expedite the movements towards universal access to equitable, efficient and affordable essential health services, in order to support the achievement of the Millennium Development Goals.

We look forward to further exchange of views and joint collaboration in health development at our next meeting in the Socialist Republic of Viet Nam in 2014.
