



# General Assembly

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## Seventy-ninth session

Agenda item 127

### Global health and foreign policy

## Resolution adopted by the General Assembly on 6 March 2025

[without reference to a Main Committee ([A/79/L.58](#))]

### **79/273. Scope, modalities, format and organization of the fourth high-level meeting of the General Assembly on the prevention and control of noncommunicable diseases and the promotion of mental health and well-being**

*The General Assembly,*

*Recalling* its resolution [73/2](#) of 10 October 2018, entitled “Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases”, in which it decided to hold a high-level meeting in 2025 on a comprehensive review of the progress achieved in the prevention and control of noncommunicable diseases and the promotion of mental health and well-being,

*Recognizing* that, through the adoption of the 2030 Agenda for Sustainable Development<sup>1</sup> and its Sustainable Development Goals in September 2015, Heads of State and Government made a bold commitment to reduce by one third, by 2030, premature mortality from noncommunicable diseases through prevention and treatment and promote mental health and well-being,

1. *Decides* that the one-day high-level meeting on the prevention and control of noncommunicable diseases and the promotion of mental health and well-being, to be convened by the President of the General Assembly, shall be held at United Nations Headquarters in New York on 25 September 2025 during the general debate of the Assembly at its eightieth session, from 10 a.m. to 6 p.m., and shall consist of an opening segment, a plenary segment for general discussion, two multi-stakeholder panels and a brief closing segment;

2. *Also decides* that the overall theme of the high-level meeting will be “Equity and integration: transforming lives and livelihoods through leadership and

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<sup>1</sup> Resolution [70/1](#).



action on noncommunicable diseases and the promotion of mental health and well-being”;

3. *Further decides* that:

(a) The opening segment, to be held from 10 to 10.30 a.m., will feature statements by the President of the General Assembly, the President of the Economic and Social Council, the Secretary-General, the Director General of the World Health Organization and an eminent champion of the fight against noncommunicable diseases and the promotion of mental health and well-being, selected in consultation with Member States by the President of the General Assembly and giving due consideration to gender balance and geographical representation;

(b) The plenary segment, to be held from 10.30 a.m. to 5.30 p.m., will comprise statements by Member States and observers of the General Assembly; a list of speakers will be established in accordance with established practices of the Assembly, and the time limits for these statements will be three minutes for individual delegations and five minutes for statements made on behalf of a group of States;

(c) The closing segment, to be held from 5.30 to 6 p.m., will comprise summaries of the multi-stakeholder panels and concluding remarks by the President of the General Assembly, as well as a person affected by noncommunicable diseases or mental health conditions;

4. *Decides* that the organizational arrangements for the two multi-stakeholder panels will be as follows:

(a) Two multi-stakeholder panels will be held in parallel to the plenary segment, one from 11 a.m. to 1 p.m. and the other from 3 to 5 p.m.;

(b) The multi-stakeholder panels will address the following themes:

Panel 1: Tackling the determinants of noncommunicable diseases and mental health and well-being through multisectoral and effective governance and collaborative action;

Panel 2: Reshaping and strengthening health systems and all forms of financing to meet the needs of people living with and at risk of noncommunicable diseases and mental health conditions;

(c) Each of the two multi-stakeholder panels will be co-chaired by two representatives, one from a developed country and one from a developing country, to be appointed by the President of the General Assembly from among the Heads of State or Government attending the high-level meeting, in consultation with Member States, taking into account gender balance, level of development and geographical representation;

(d) The President of the General Assembly may invite parliamentarians, local governments, the heads or senior representatives of relevant United Nations entities, and international financial institutions, development partners, civil society, the private sector, academia, medical and scientific associations, Indigenous Peoples, representative organizations of persons affected by noncommunicable diseases and mental health conditions, persons with disabilities and community organizations to serve as speakers on the panels, taking into account gender balance, level of development, geographical representation and the representation of youth and older persons;

5. *Also decides* that the high-level meeting shall approve a concise and action-oriented political declaration, agreed in advance by consensus through intergovernmental negotiations, with a shared vision to mobilize political will and

action at the national, regional and international levels, which builds on the opportunities and challenges in the implementation of previous commitments, including, as appropriate, the consideration of measurable global targets and objectives, to be submitted by the President of the General Assembly for adoption by the Assembly;

6. *Requests* the President of the General Assembly, with the support of the World Health Organization and other relevant partners, to organize and preside over an interactive multi-stakeholder hearing, before the end of May 2025, with the active participation of regional organizations, non-governmental organizations in consultative status with the Economic and Social Council, invited civil society organizations, philanthropic foundations, academia, medical associations, the private sector, broader communities, ensuring the participation and voices of women, children, youth, Indigenous Peoples and people of African descent, representative organizations of persons affected by noncommunicable diseases and mental health conditions, persons with disabilities, as well as appropriate senior-level representatives of Member States, observers of the General Assembly, parliamentarians, representatives of local governments, and relevant United Nations entities, as part of the preparatory process for the high-level meeting, and also requests the President to prepare a summary of the hearing prior to the high-level meeting;

7. *Encourages* all Member States and members of the United Nations specialized agencies to participate in the high-level meeting, including the multi-stakeholder panels, at the highest possible level, preferably at the level of Heads of State and Government, and invites all observers of the General Assembly to be represented at the highest possible level;

8. *Invites* non-governmental organizations with relevant expertise that are in consultative status with the Economic and Social Council to register with the Secretariat to attend the meeting;

9. *Requests* the President of the General Assembly to draw up a list of representatives of other relevant non-governmental organizations, civil society organizations, relevant medical organizations, academic institutions, the scientific community and the private sector who may participate in the high-level meeting, including its panel discussions, taking into account the principles of transparency and equitable geographical representation, with due regard for gender parity, to submit the proposed list to Member States for their consideration on a non-objection basis<sup>2</sup> and to bring the list to the attention of the Assembly, in a timely manner, for a final decision by the Assembly on participation in the high-level meeting;

10. *Encourages* Member States to include in their delegations to the high-level meeting ministers from all relevant ministries, as appropriate, representatives such as parliamentarians, mayors and governors, representatives of civil society, including non-governmental organizations, Indigenous Peoples, people of African descent, persons with disabilities, community organizations and faith-based organizations, academic institutions and the private sector with expertise in noncommunicable diseases and mental health, philanthropic foundations, and networks representing persons affected by noncommunicable diseases and mental health conditions, including persons living with relevant rare diseases, as appropriate, with due regard for gender balance and geographical representation;

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<sup>2</sup> The list will include proposed as well as final names. The general basis of any objections, if requested by one or more States Members of the United Nations or States members of the specialized agencies, will be made known to the Office of the President of the General Assembly and the requester.

11. *Decides* that the proceedings of the high-level meeting and the multi-stakeholder hearing shall be webcast, and encourages the President of the General Assembly, the Secretary-General and the Director General of the World Health Organization to give the highest visibility to the high-level meeting, through all relevant media platforms and information and communications technologies.

*60th plenary meeting  
6 March 2025*

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