DIABETES ALLIANCE

Johannesburg Declaration for Accelerated Action on Diabetes in South Africa

Issued by the Diabetes Alliance and partner civil society organisations, in unified voice with People Living with Diabetes.



Following the 2025 Diabetes Summit held in Johannesburg, South Africa, from 11 to 13 November 2025.

The Diabetes Summit was convened by the Diabetes Alliance, with the support of:

health
Department: Health
REPUBLIC OF SOUTH AFRICA

science, technology & innovation
Department: Science, Technology and Innovation
REPUBLIC OF SOUTH AFRICA

GAUTENG PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

saMRC
advancinglife

World Health Organization
South Africa

WORLD DIABETES FOUNDATION

Vision for a Future Free of Preventable Diabetes Harm

We envision a South Africa where every person, regardless of income, geography, gender, disability, age, or health status, can access equitable, people centred, integrated diabetes prevention and care. We envision a South Africa where preventable complications are eliminated, avoidable deaths decline rapidly, and diabetes is no longer a driver of poverty, disability, and inequality.



Organisations that endorsed the Declaration

















































Preamble: Recognising the Crisis

We, the undersigned civil society organisations, including the Diabetes Alliance, Healthy Living Alliance (HEALA), the African Alliance, Diabetes South Africa, Sweet Life Diabetes Community, SA Diabetes Advocacy, the Society for Endocrinology, Metabolism and Diabetes of South Africa (SEMDSA), the Diabetes Education Society of South Africa (DESSA), the Public Health Association of South Africa (PHASA), the Podiatry Association of South Africa (PASA), the Biokinetics Association of South Africa (BASA), Retina South Africa, the Public Oral Health Forum (POHF), the Rural Doctors Association of Southern Africa (RUDASA), the South African Depression and Anxiety Group (SADAG), Doctors Without Borders (Médecins Sans Frontières / MSF), Orbis International, Clinical Care Platform (CCP), Desmond Tutu Health Foundation, the South African NCD Alliance (SANCDA+), the Nuvoteq Foundation, the Physicians Association for Nutrition (PAN) South Africa, Black Sash, South African Network of Religious Leaders Living with or Personally Affected by HIV and AIDS (SANRELA+), together with People Living with Diabetes, community leaders, researchers, health professionals, and allied stakeholders, gathered at the 2025 Diabetes Summit:

Recognising that diabetes and its complications now constitute one of the most profound and rapidly escalating threats to public health, human development, and economic stability in South Africa.

Alarmed that diabetes is now the leading cause of natural death in South Africa, driving catastrophic levels of disability, premature mortality, and avoidable suffering, and placing extreme pressure on the national health system and the social welfare system.

Deeply concerned that the current response, across planning, budgeting, implementation, and coordination, remains fragmented and insufficient to halt the accelerating epidemic. This fragmentation undermines progress toward Universal Health Coverage and the fulfilment of constitutional rights.

Extremely concerned that the projected cost of diabetes will reach at least R35 billion by 2030, according to national expenditure modelling, posing a direct and existential threat to the financial sustainability of the proposed National Health Insurance (NHI) and the broader health system.

Affirming that every person in South Africa has the constitutional right to equitable, quality, comprehensive, and people centred diabetes prevention and care, including screening, diagnostics, essential medicines, technologies, and psychosocial support, without financial hardship.

Recognising that stigma, discrimination, and blame associated with diabetes, including harmful narratives that frame diabetes as a personal failure, remain pervasive in communities, workplaces, schools, health facilities, and the media, and that such stigma undermines prevention, delays diagnosis, erodes mental health and wellbeing, discourages care-seeking, and violates the dignity and human rights of People Living with Diabetes;

Recognising that diabetes disproportionately affects low-income households, women, rural communities, people living in informal settlements, and those experiencing intersecting vulnerabilities including disability, HIV, oral diseases, mental health conditions, and food insecurity, and that any national response must explicitly address these inequities.

Believing that this moment requires unity, courage, and accountability across society.

Committing South Africa to meet the WHO Global Diabetes Compact and SDG 3.4 target of reducing premature mortality from diabetes and other non-communicable diseases (NCDs) by at least 30 percent by 2030, through equitable, costed, and accountable national action.

Recognising that Heads of State and Government, through the United Nations General Assembly, have committed to strengthened national and global action on noncommunicable diseases, including prevention, treatment, multisectoral leadership, and universal health coverage; and noting that South Africa has endorsed and integrated these commitments into its national response to NCDs, in alignment with the WHO Global Action Plan on NCDs and the WHO Global Diabetes Compact, which call for accelerated country action on diabetes prevention, diagnosis, treatment, and equitable access; while recognising that the gap between commitment and implementation reflects not a lack of evidence, but insufficient political prioritisation and accountability.

We hereby issue this Johannesburg Declaration as a mandate for urgent national action and commit to holding all stakeholders accountable for its realisation.

Our Commitments as Civil Society and People Living with Diabetes

Independent Accountability

Establish an independent, civil society led accountability mechanism to track, monitor, and publicly report on national and provincial progress against this Declaration and the National Strategic Plan for NCDs.

Grassroots Mobilisation and Community Voice

Strengthen a national grassroots advocacy movement that ensures People Living with Diabetes in every province are meaningfully involved in shaping policies, monitoring services, and demanding transparency in resource allocation.

Unified Policy Platform

Consolidate a coordinated civil society policy platform that leverages the expertise of public health specialists, nutritionists, researchers, community leaders, patient advocates, and People Living with Diabetes to drive evidence-based reforms.

Community Support, Education, and Empowerment

Scale up community-based peer support, treatment literacy, and diabetes education initiatives to ensure that People Living with Diabetes are equipped with the knowledge, tools, and psychosocial support they need to live healthy and fulfilling lives.

Reducing Stigma and Discrimination

Commit to actively addressing diabetes-related stigma by promoting respectful People-First Language; amplifying lived experience; challenging harmful myths and blame-based narratives; and advocating for stigma-free policies, workplaces, schools, and health services that uphold dignity, equity, and inclusion for People Living with Diabetes.



Our Call to Action

We call on the highest offices of the State to implement decisive reforms that match the scale of the crisis.



His Excellency Cyril Ramaphosa

To the President of the Republic of South Africa

Declare Diabetes a National Public Health Priority Crisis

- Immediately declare the diabetes epidemic a National Public Health Priority Crisis, recognising the scale of mortality, economic loss, and health system strain associated with uncontrolled diabetes.
- Enable emergency measures, accelerated decision making, and the mobilisation of financial and human resources.

Champion a Multisectoral National Response

- Mandate and lead a High Level Multisectoral and Multistakeholder Mechanism housed in the Presidency that coordinates action across Health, Finance, Basic Education, Higher Education, Social Development, Agriculture, Trade and Industry, Transport, and Treasury.



Minister Enoch Godongwana

To the Minister of Finance and National Treasury

Ring Fence Health Promotion Levy (HPL) Revenue for NCDs

- Establish a permanent, protected, dedicated funding stream for diabetes and NCD prevention, sourced in part from the Health Promotion Levy, to finance national and provincial responses and sustain civil society and community led initiatives.

Allocate Sustainable Public Financing for NCDs

- Commit to increasing public financing for NCDs so that no less than 5% of national health expenditure is dedicated to the diabetes response by 2030, in line with international recommendations for NCD financing and the Abuja health financing commitments.



Minister Pakishe Aaron Motsoaledi

To the Minister of Health and Provincial Health Departments

Institutionalise Meaningful Participation of People Living with Diabetes

- Establish funded, formal structures that ensure continuous, compensated participation of People Living with Diabetes in policy development, programme design, implementation, and monitoring in accordance with the principle "Nothing about us without us".

Provincial and Local Government Accountability

- Require all provinces and metropolitan or municipal health authorities to develop costed diabetes action plans with annual public reporting on screening, supply chains, workforce staffing, complications, and mortality.

Mobilise and Strengthen Human Resources

- Appoint full time senior Diabetes Programme Managers at national and provincial levels, with adequate operational budgets to strengthen and coordinate the diabetes response.

Integrate Diabetes into Primary Health Care and Universal Health Coverage

- Ensure that comprehensive diabetes screening, diagnostics, education, and long-term management are fully integrated into all levels of primary health care, with parity alongside HIV, TB, SRHR, oral health and mental health services.

Establish a National Diabetes Registry and Digital Monitoring System

- Develop and implement a national diabetes registry and digital surveillance system by 2027, linked to existing HIV and TB health information systems.



To the Food, Beverage, Retail, and Private Health Sectors

- Reformulate ultra-processed and high sugar foods to reduce population level risk.
- Implement transparent front of pack nutritional labelling.
- End targeted marketing of sugary and unhealthy foods to children.
- Ensure private medical schemes provide adequate coverage for essential diabetes diagnostics and technologies.



Professor Ntobeko Ntusi

To the South African Medical Research Council

Establish a National Diabetes Research and Innovation Agenda

- Convene leading scientists, clinicians, civil society partners, innovators, and affected communities to define national diabetes research priorities across prevention, diagnosis, treatment, complications, and health systems strengthening.
- Ensure this agenda is public, time bound, and aligned with national health system needs and the Medium-Term Strategic Framework.

Incentivise Innovation in Diagnostics, Therapeutics, Digital Tools and Devices

- Use the SAMRC's health innovation mandate to stimulate local development of next generation diagnostics, digital self-management tools, risk stratification technologies, and accessible screening solutions tailored to South African settings.

Strengthen Surveillance, Modelling, and Epidemiology

- Expand epidemiological work on diabetes including modelling disease burden, mapping geographic and demographic patterns, and analysing inequities in access and outcomes.
- Build on SAMRC leadership in national surveys, demographic surveillance systems, and research collaborations with the National Department of Health.

Invest in Community Led Monitoring and Community Based Research

- Fund community generated data, patient reported outcomes, participatory research, social determinant mapping, and lived experience studies to strengthen a rights-based, equity centred national response.

Support Locally Relevant Implementation Science

- Conduct implementation research on service delivery models, workforce optimisation, integrated care, and models incorporating nutrition and mental health across diverse provincial contexts.

Advance Equity in Research Leadership

- Direct research funding toward young scientists, Black African scientists, women, and researchers located outside major metros to ensure that the national diabetes knowledge base reflects population realities.



Honourable Angela Thoko Didiza

To the Parliament of South Africa

Conduct a Parliamentary Inquiry into the Diabetes Crisis

- Mandate the Portfolio Committee on Health, jointly with Finance, Basic Education, Social Development, Trade and Industry, and Cooperative Governance, to conduct a public inquiry into systemic failures driving diabetes mortality and morbidity and to issue binding recommendations with clear timelines.

Conclusion and Commitment to Oversight

This Declaration aligns with the WHO Global Diabetes Compact, the African Union's Continental Strategy for NCDs (2022 to 2030), the SADC Regional Strategy on NCDs, and the UN Sustainable Development Goals.

This Declaration reflects the unified voice of civil society organisations, People Living with Diabetes, and South African communities.

We commit to a biennial national review of progress against this Declaration, co-hosted by civil society, People Living with Diabetes, and government, with publicly available scorecards and recommendations.

We reaffirm our commitment to rigorous oversight, principled advocacy, and sustained mobilisation. We will not relent until diabetes prevention and care receive the political urgency, financing, and national prioritisation this crisis demands.

The time for half measures has passed.

The time for a decisive national response is now.

Adopted in Pretoria, South Africa, 23 February 2026.

