Social and Structural Determinants of Non Communicable Diseases (NCDs) – Lessons from the evaluation of the 2007 CARICOM Heads of Government NCD Summit Declaration

TTMA 22nd Annual Conference
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T. Alafia Samuels, Principal Investigator NCD Summit Declaration; Director, Chronic Disease Research Centre, UWI
Presentation

- Life expectancy and mortality disparities
- NCD mortality
- NCD risk factors
- Heads of Government response
- Evaluation of NCD Declaration
- Accelerating action
International LE targets met by most countries

...population growth has dropped to replacement levels and life expectancy is relatively high...

A positive picture. But not the whole picture...
“Monitoring variation within the Caribbean”
Disparities in the African diaspora

- Diabetes: 77.7, 71.4, 64.5
- Cerebrovascular: 73.6, 71.5, 67.9
- Heart: 76.7, 71.4, 67.9
- Cancer: 73.2, 71.5, 67.9
- Respiratory: 73.2, 71.5, 67.9
- Injury: 73.6, 71.4, 67.9
CVD-DIABETES Premature Mortality

Women (0-64 yrs)

- **Guadeloupe**
  - 2000: 24 per 100,000
  - 2010: 17 per 100,000

- **Trinidad**
  - 2000: 134 per 100,000
  - 2010: 84 per 100,000
CVD-DIABETES Premature Mortality

Men (0-64 yrs)

French Guiana
- 2000: 52 per 100,000
- 2010: 38 per 100,000

Trinidad
- 2000: 189 per 100,000
- 2010: 135 per 100,000
Country example: Belize

Within-country disparities by gender and ethnicity
Presentation

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Age adjusted mortality rates/100,000 population, selected countries 2010 data

Source: PAHO Basic Indicators 2012
Caribbean NCD mortality

- NCDs: Heart attacks, stroke, diabetes, cancers are the leading causes of premature death
- NCD mortality in the Caribbean is the highest in the Americas, (78% of all deaths in 2010)
- 76% of all premature deaths (ages 30 – 69) are caused by NCDs (double rates in North America)
- Hypertension is the leading risk factor for death
- Diabetes prevalence is double global rates
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### NCDs: Risk factors

**4 Diseases, 4 Modifiable Shared Risk Factors**

<table>
<thead>
<tr>
<th></th>
<th>Tobacco Use</th>
<th>Unhealthy diets</th>
<th>Physical Inactivity</th>
<th>Harmful Use of Alcohol</th>
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<tr>
<td><strong>Cardiovascular</strong></td>
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<td><strong>Diabetes</strong></td>
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<td><strong>Cancer</strong></td>
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<td><strong>Chronic Respiratory</strong></td>
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Evolution of the Problem
<table>
<thead>
<tr>
<th>Rank</th>
<th>Country</th>
<th>%</th>
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<tbody>
<tr>
<td>1</td>
<td>Nauru</td>
<td>82</td>
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<tr>
<td>2</td>
<td>Tonga</td>
<td>81</td>
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<td>3</td>
<td>Micronesia</td>
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<td>5</td>
<td>Samoa</td>
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<td>6</td>
<td>Niue</td>
<td>70</td>
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<tr>
<td>7</td>
<td>Kuwait</td>
<td>67</td>
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<td>8</td>
<td>Barbados</td>
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<td>9</td>
<td>Palau</td>
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<td>10</td>
<td>Trinidad</td>
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<tr>
<td>11</td>
<td>Dominica</td>
<td>60</td>
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<tr>
<td>12</td>
<td>Egypt</td>
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<td>13</td>
<td>USA</td>
<td>55</td>
</tr>
<tr>
<td>14</td>
<td>Jamaica</td>
<td>53</td>
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</table>
ADULT OVERWEIGHT/OBESITY TRENDS IN THE CARIBBEAN

- Male
- Female

<table>
<thead>
<tr>
<th>Decade</th>
<th>Male (%)</th>
<th>Female (%)</th>
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<tbody>
<tr>
<td>1970s</td>
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<td>1990s</td>
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<tr>
<td>2000s</td>
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</table>
Risk excess by gender in CARICOM

- Women twice as likely to be obese
- Women 60% more likely to have diabetes
- Rates of tobacco use and alcohol abuse are half or even lower in women compared to men
The Man Problem

- 10 - 20% men current tobacco smokers
- Binge drinking among men 5+ drinks at one time in last 7 days
  - Barbados (2012) 25%
  - Dominica (2008) 33%
  - Trinidad & Tobago (2012) 34%
- Higher rates of injuries
- Low health service utilization
- Worse control of chronic conditions
- Higher death rates at every age
WHO's commission on social determinants of health

- SDH = “conditions in which people are born, grow, live, work and age, including the health system”
- “These circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices.”

http://www.who.int/social_determinants/en/
Limited data

• Very limited within-country data on disparities / inequalities / inequities by social determinants
  – education, income and occupation

• Need to start collecting and analysing data in this way within the Caribbean.
Presentation

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Sir George Alleyne speaks on health and development
In response to the NCD epidemic:
September 2007 CARICOM Heads of Government issued
the groundbreaking Port of Spain Declaration:

**Uniting to Stop the Epidemic of Chronic Non-communicable Diseases**

With its global resonance, the Declaration paved the way for:
- 2011 UN High-Level Meeting (UNHLM) on NCDs
- World Health Organization’s international monitoring framework, with nine global targets and 25 indicators
2007 POS NCD Declaration

• Fully convinced that the burdens of NCDs can be reduced by
  – comprehensive and integrated preventive and control strategies
  – at the individual, family, community, national and regional levels and
  – through collaborative programmes, partnerships and policies
  – supported by governments, private sectors, NGOs and our other social, regional and international partners;
NCD Mandates and Commitments

15 Point Declaration, 27 commitments

• “All of Government” and “All of Society” response

• National, multi-sectoral NCD Commissions

• Risk factor reduction, including:
  o implementation of Framework Convention on Tobacco Control (FCTC)
  o multi-sectoral food and nutrition plan
  o promotion of physical activity in schools and workplaces

• Improved quality of care for those living with NCDs

• Workplace Wellness Programmes

• Caribbean Wellness Day
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POS Evaluation Grid annually 2008 - 2015
Goal of the formal evaluation

• To evaluate, seven years on,
  – Learn lessons that will support and accelerate its further implementation
  – Inform the attainment of the UNHLM NCD commitments

• April 2014 - March 2016 – research
• April 2016 – March 2017 – dissemination
Research Partners

• UWI
  – Chronic Disease Research Centre
  – Public Health Group, Cave Hill
  – Department of Community Health and Psychiatry, Mona
  – HEU, Centre for Health Economics, St. Augustine
  – Institute of International Relations, St. Augustine

• G8 Research Group, University of Toronto
• Healthy Caribbean Coalition
• Caribbean Public Health Agency
• Pan American Health Organization
• CARICOM
• Canadian International Development Research Centre (funders)
EVIDENCE BRIEFS

The Evaluation of the 2007 CARICOM Heads of Government Port of Spain NCD Summit Declaration
Research highlights
Barriers to Success: Risk Factors

- Increase in foreign investment increased **Westernized diets** and fast food with low nutritional value
- Reliance on food imports limits reach of legislative action including quality, and affordability of healthy foods
- Overreliance on physical activity promotion in terms of sports and exercise limits broader reach
- Alcohol as core industry creates a barriers to political will for legislative action
- Short project funding rather than sustained budgets hamper sustainability of actions
- Undernutrition and food poverty as parallel concerns limit impact of obesity related health education
- Increase in foreign investment increased Westernized diets and fast food with low nutritional value

Increase in foreign investment increased Westernized diets and fast food with low nutritional value.
Barriers to Success: SUMMARY

- Lengthy bureaucratic process of policy formulation to implementation discourages action and motivation.
- Geographical barriers: remoteness curtailing healthcare access/roll out; water scarcity for agriculture; small population with limited human resources.
- Political will a reflection of public awareness and acceptability, e.g. emphasis on personal responsibility.
- Limited reliable surveillance and evaluation of local initiatives to provide local evidence base.
- International political and economic barriers to effective legislation and initiatives (e.g. food labelling and availability of healthy options).
- Limited reliable surveillance and evaluation of local initiatives to provide local evidence base.
Policy responses and lessons learned

• NCDs need to be given higher political priority
• The all-of-society and all-of-government response needs strengthening
• There are widely differing levels of implementation of Summit Declaration mandates related to:
  – Country size
  – Resources
  – Burden of NCDs...
Policy responses and lessons learned

*lowest* levels of implementation:

the macro determinants of diet and physical activity.

highest levels of implementation:

- clear guidance (i.e. protocols or ‘blue prints’)
- support from regional organisations (e.g. CAREC/CARPHA for risk factor surveys, WHO/FCTC for tobacco control)
- Local champions (e.g. Mike’s Bikes)
Investing: Potential role of tobacco and alcohol taxes
Investing: Potential role of tobacco and alcohol taxes

• Study in three countries; Grenada, Jamaica, Trinidad and Tobago:
  – Revenue generated from increasing taxes on tobacco and alcohol could exceed US$ 37 million
  – 300% more than the estimated US$ 12.6 million cost of World Health Organization ‘best buy’ NCD interventions...
Investing in health

2014 taxation on tobacco

Target taxation  75%
• St. Lucia  63%
• Suriname  56%
• Barbados  42%
• Trinidad & Tobago  30%
• Guyana  25%
• St Vincent & Gren  17%
Jamaica: Investing In Population Health

- National Health Fund (NHF) since 2008, partially financed by a tax on tobacco
- access to selected health benefits and subsidized NCD medications
- private and public sector projects with an emphasis on prevention.
Declaration’s international impact

• Summit helped shape global governance of chronic diseases
• Paved the way for the 2011 UN High-Level Meeting (UNHLM) on NCDs
• Over half of the 27 CARICOM Summit commitments were reflected in the UNHLM NCD Declaration
• Caribbean Wellness Day/Week has been promoted by PAHO in the region of the Americas
Set of 9 voluntary global NCD targets for 2025

- Harmful use of alcohol: 10% reduction
- Physical inactivity: 10% reduction
- Salt/sodium intake: 30% reduction
- Tobacco use: 30% reduction
- Essential NCD medicines and technologies: 80% coverage
- Drug therapy and counseling: 50% coverage
- Diabetes/obesity: 0% increase
- Premature mortality from NCDs: 25% reduction
- Raised blood pressure: 25% reduction
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Accelerating action
Individual action can reduce the impact of health hazards, but socio-economic factors make the job harder.
Recognize that behavioural changes alone will not be enough.
Levels of Intervention

- Supportive politics & governance
- Supportive environments
- Supportive health systems
- Changing individual behaviours
- Improving quality of clinical care
Dr. Chan, DG WHO June 10, 2013

• “Globalization of unhealthy lifestyles...is a political issue. It is a trade issue. It is an issue for Foreign Affairs

• Few Governments prioritize Health over Big Business”
Social determinants of child obesity

- marketing to children
- childcare
- school environment
- agricultural law
- food systems
- enforcement
- built environment
- Fiscal measures
Taxes on Sugar-Sweetened Beverages

- 2014 – Mexico
- 2015 – Chile, Barbados, Dominica, St Vincent & Grenadines
- 2016 - ? Belgium, Britain??
- India, Phillipines, Indonesia – considering
  CDRC doing research on SSB tax price, sales, process in Barbados, in discussions with Dominica
Partners

• Heads of Government
• Ministers of Health
• Permanent Secretary / Chief Medical Officer
• All of Government
• All of Society
  – Civil society, private sector
  – Community organisations
• Regional bodies
• International partners
Bahamas:

Faith based initiatives - Seventh Day Adventists
GUYANA FITNESS WALK, led by Minister Ramsammy included the differently-abled
Port of Spain, Trinidad:
Love that body, move that body
• What we do in the physical and fiscal environment has more potential for impact than health education and one-to-one counselling
Changing

CONSUMPTION

PRICE trumps

HEALTH EDUCATION

Office of the Chief Medical Officer, St. Kitts & Nevis
CARICOM communiqué 37th CARICOM Heads of Government Conference July 4-6, 2016 highlights renewed commitment to NCDs
“As the Tenth Anniversary of the historic Port of Spain Declaration “Uniting to fight the Non-Communicable Diseases (NCDs) draws near, the Heads of Government recognised the progress made in addressing the issue. They acknowledged, however, that progress was variable and agreed to adopt a more holistic approach.......
In this regard, they pledged to address issues such as the
   – banning of smoking in public places;
   – trade related measures;
   – banning advertisement of potentially harmful foods which specifically target children; and
   – elevating taxes on foods high in sugar, salt and trans-fats.”
Thank You