



*The Evaluation of the 2007 CARICOM Port-of-Spain
NCD Summit Declaration*

**CHAPTER 3: National and regional trends in
NCD mortality, morbidity and risk factors**

POS EVALUATION GROUP



AIMS AND METHODS

Aims

For CARICOM member states:

- To describe recent trends in NCD mortality, morbidity and risk factors: 2000 to 2013
- To determine if they are on track to achieve the goal of reducing premature NCD mortality, by 25%, by 2025
- To identify gaps in current data on NCD mortality, morbidity and risk factors

Sources of Data

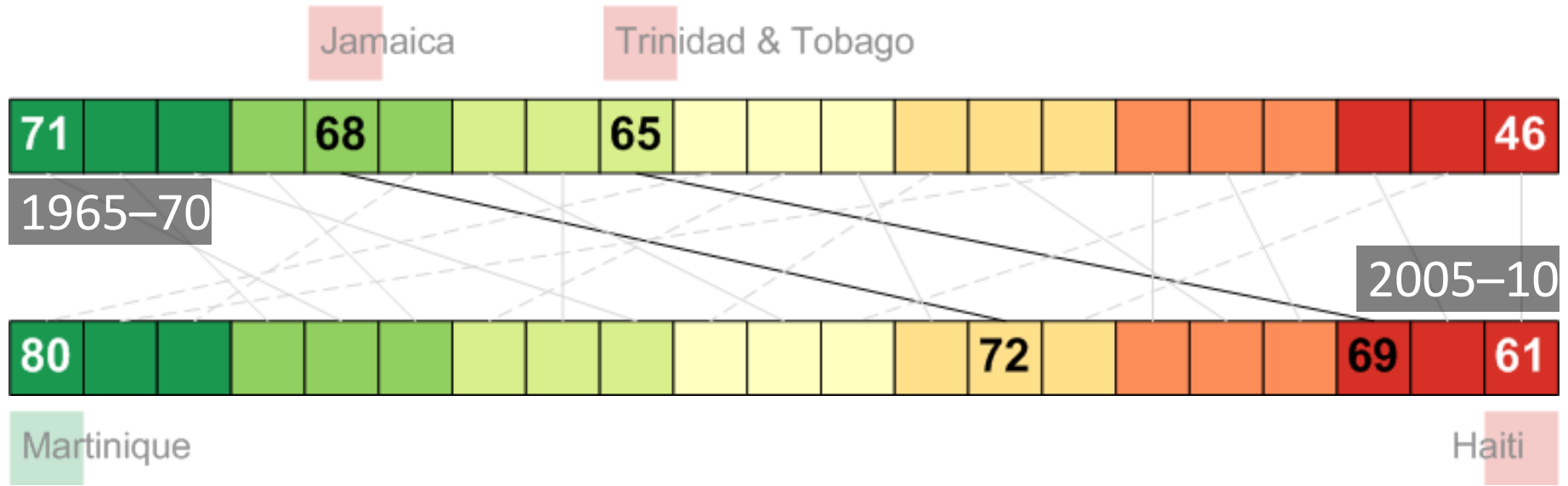
- The mortality data bases at CARPHA, PAHO/WHO and the Global Burden of Disease Study
- Population size and age structures from the UN Population Division and national census reports
- Risk factor surveys: WHO STEPS surveys, Global School Health and the Global Youth Tobacco Surveys
- Disease registers e.g. Barbados National Register
- WONDER database, Centres for Disease Control, USA
- NIH-funded project on disparities in health in the Caribbean and United States
- CARPHA scoping exercise for gaps in data and quality

Limitations, gaps, discrepancies in data

- No countries had risk factor data before and after the Port of Spain Declaration
- Jamaica and Haiti no mortality data to PAHO/WHO
- Smaller CARICOM states (8 with <90,000 population)
 - unstable mortality rates
 - not included in global level analyses
- PAHO/WHO and GBD sometimes show different trends e.g. Guyana
- Few countries with population based disease registers or standardised utilisation data

MAIN FINDINGS

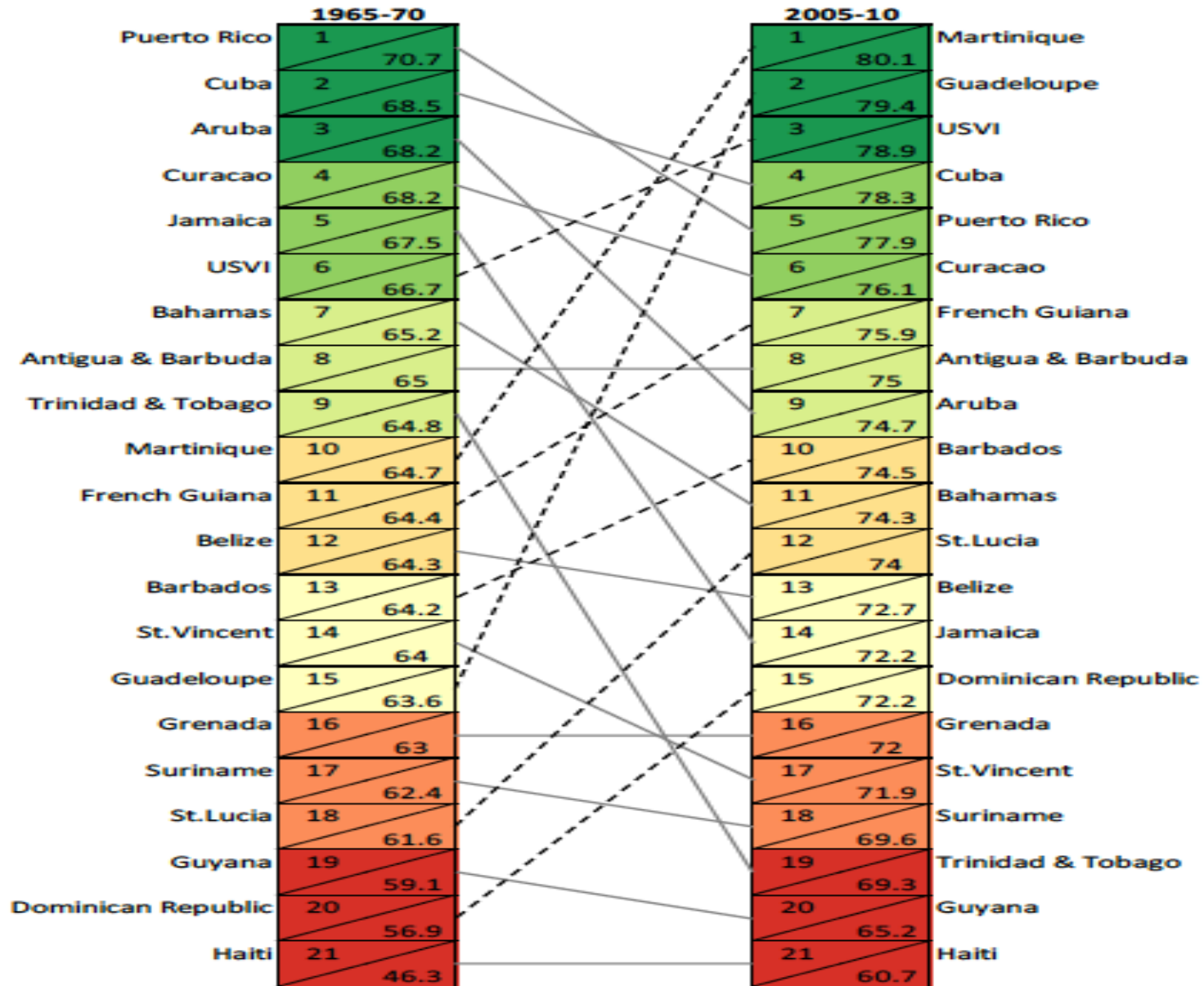
Country LE in the Caribbean



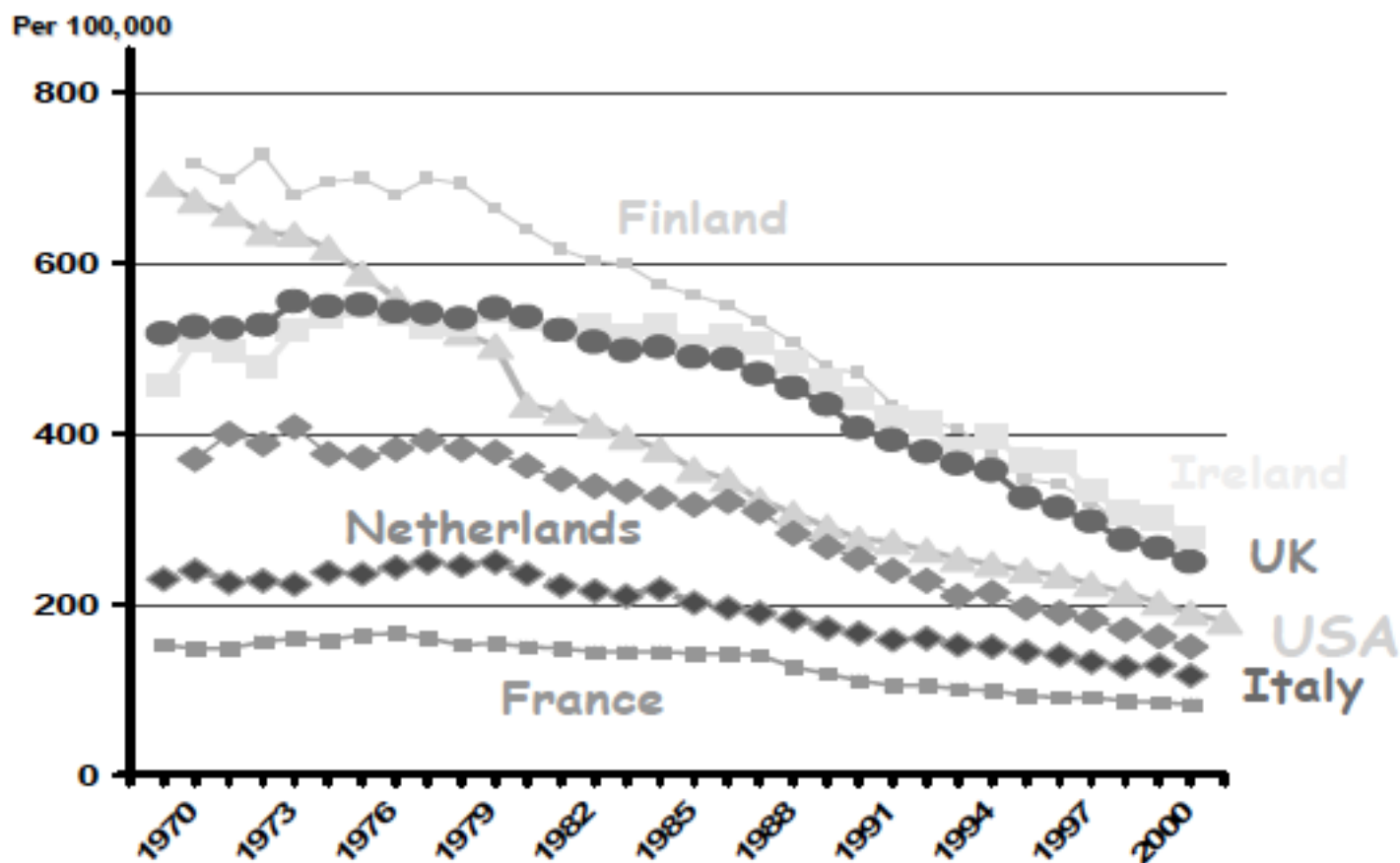
“Monitoring variation within the Caribbean”



FIGURE. Life expectancy at birth in 1965-70 and 2005-10 among 21 Caribbean territories



International CHD mortality trends in men, 1968-2003



Source:WHO statistics 2005 Men aged 35 - 74, Standardised

Mortality Trends in CARICOM states

Major NCDs

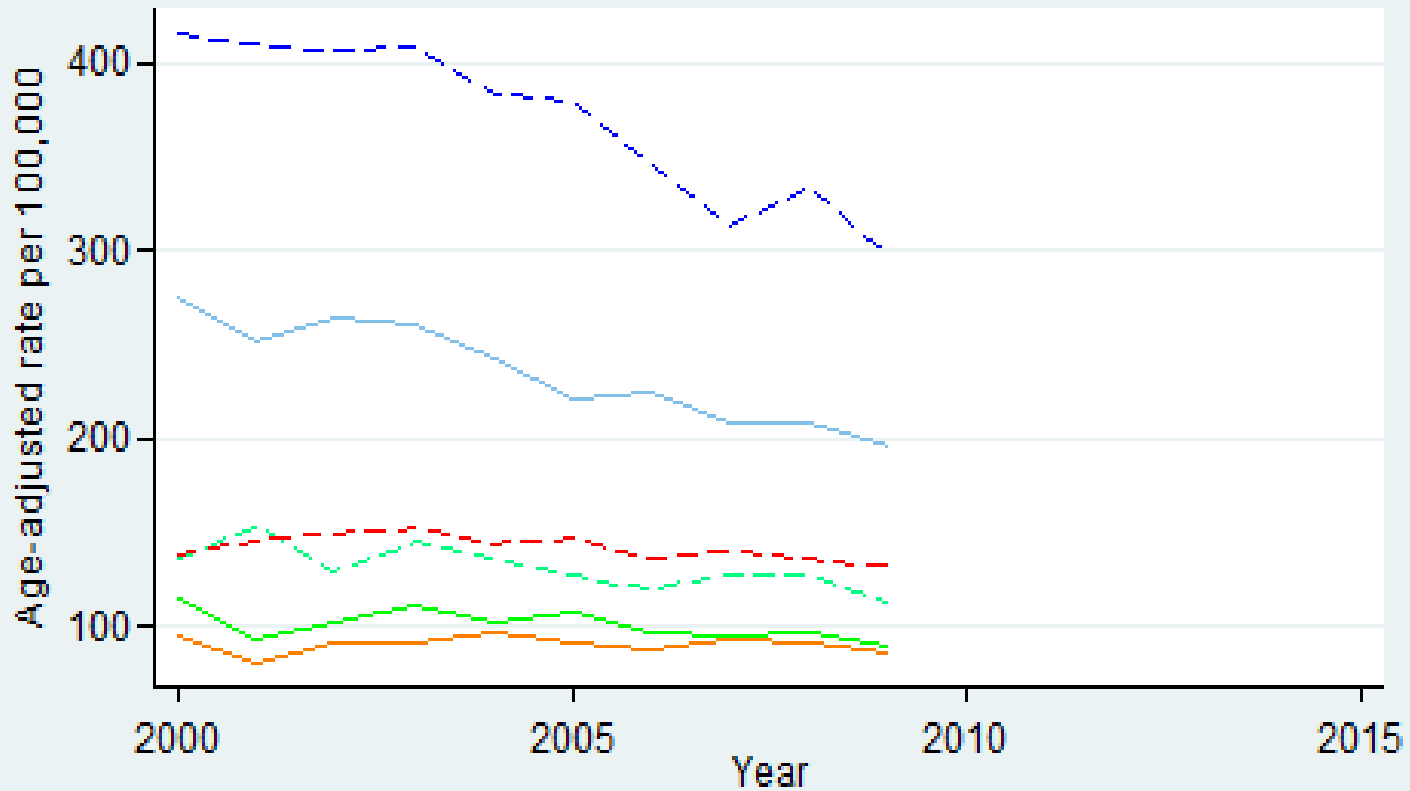
- 76% premature deaths (30 – 69 yrs) from NCDs
- Caribbean - slowest rate of decline in premature NCD mortality of all sub-regions in the Americas
- CVD and diabetes-related mortality account for the largest declines in NCD-related deaths

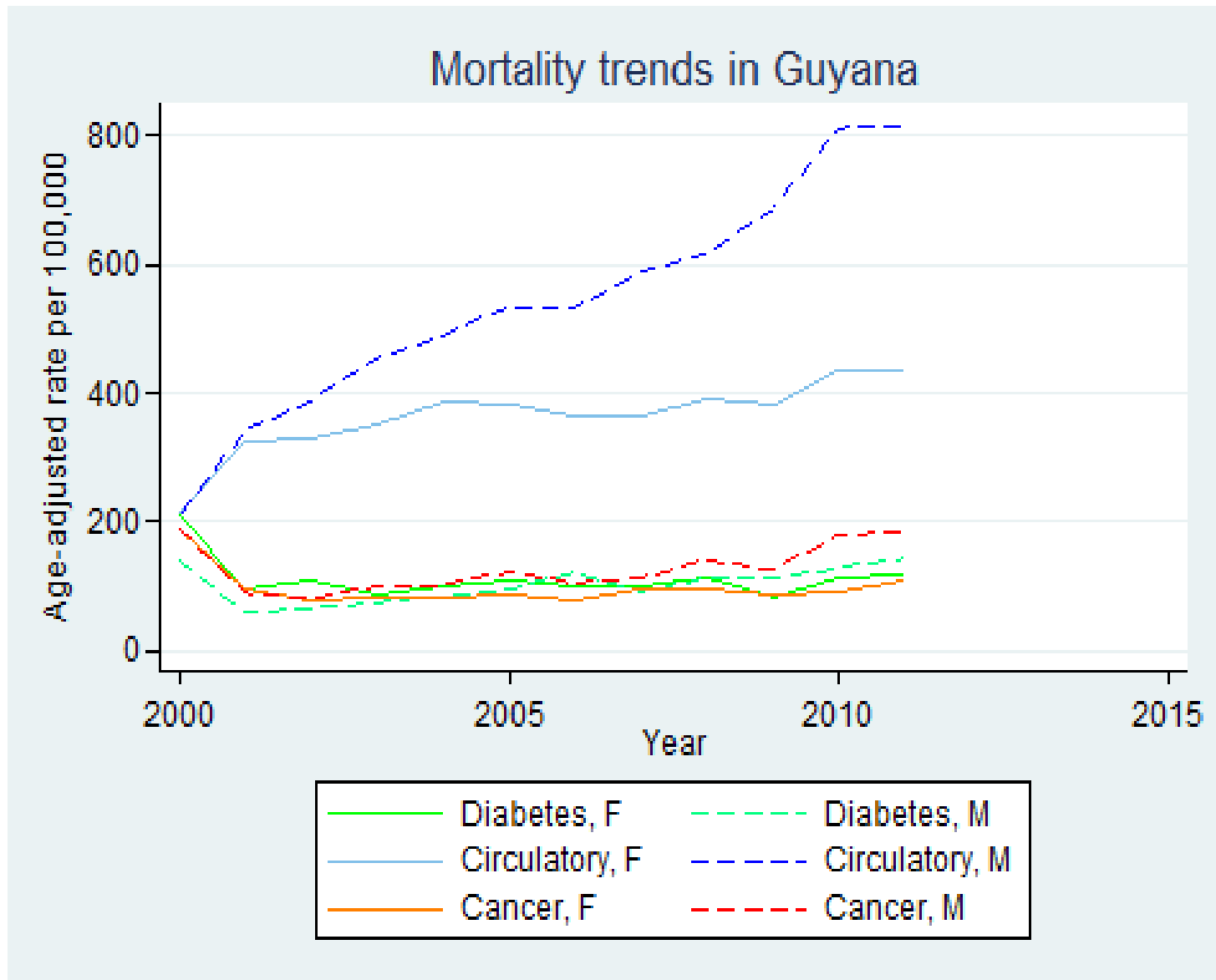
Source: Comprehensive Meeting Report: Forum of Key Stakeholders in NCDs: Advancing the NCD Agenda in the Caribbean, June 2015, PAHO/WHO



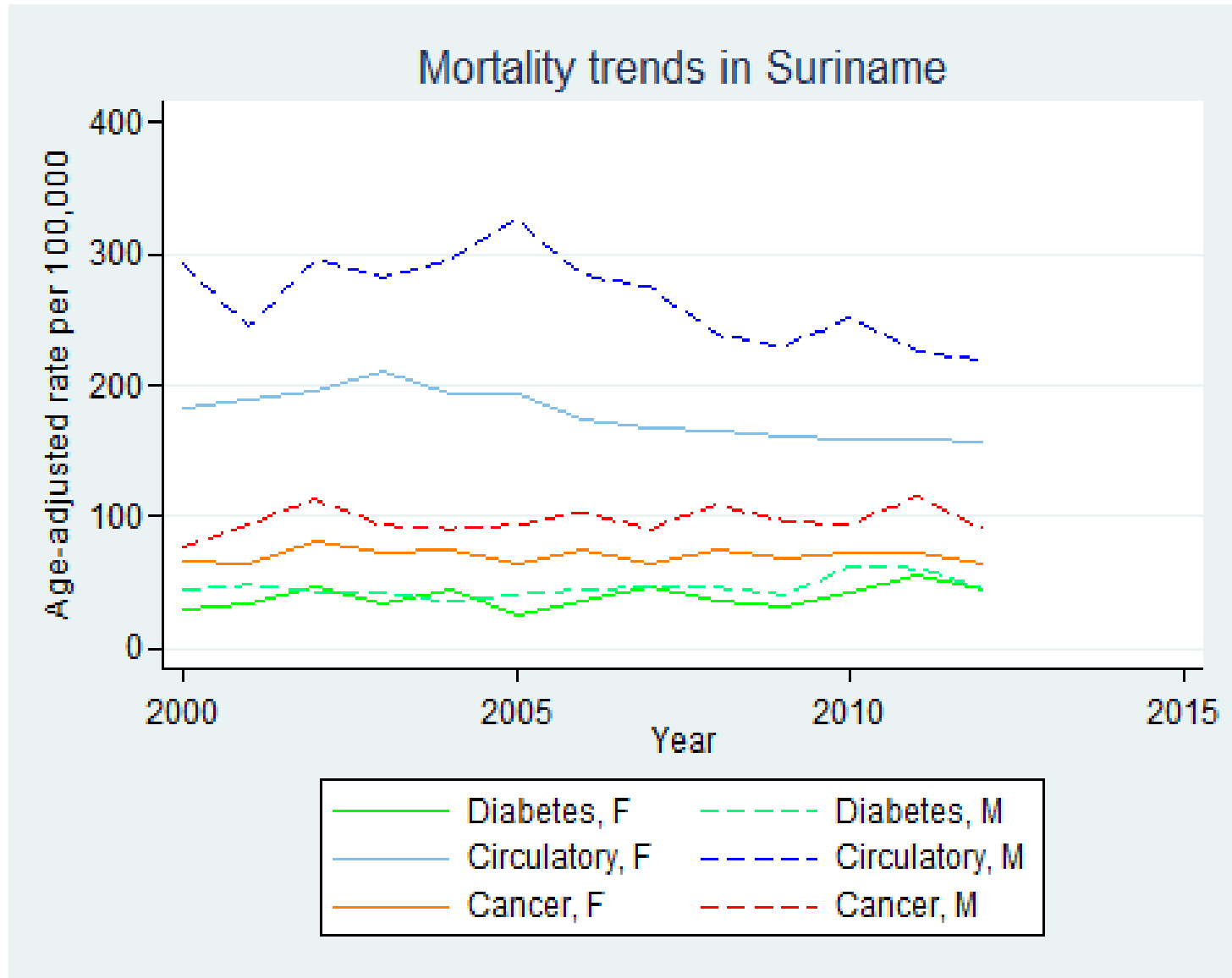
Source: PAHO mortality database

Mortality trends in Trinidad and Tobago





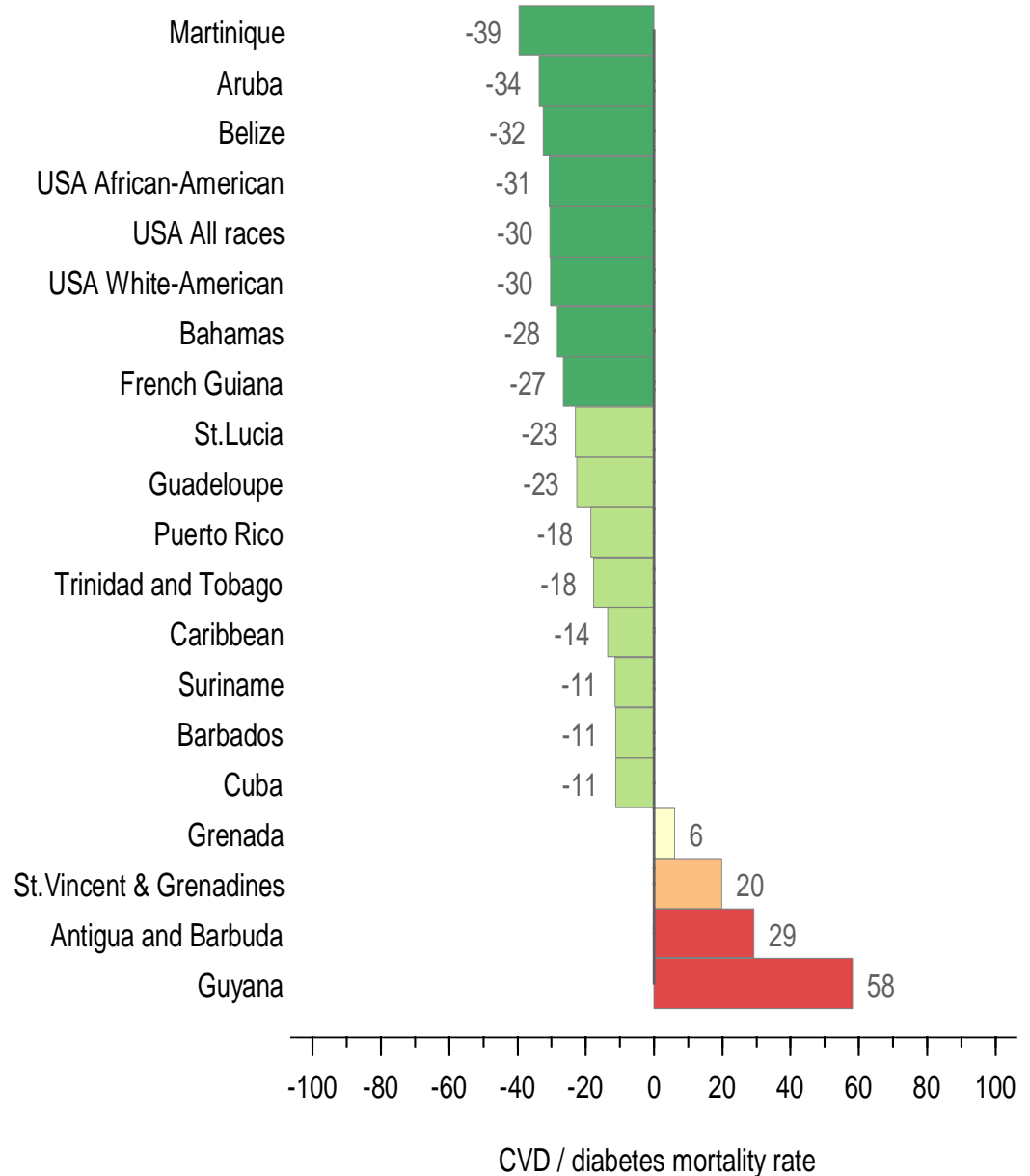
Source: PAHO mortality database



Caribbean Unity in Health
LOVE THAT BODY

cardiovascular
disease and
diabetes account
for 30 to 40% of all
deaths

% changes in
mortality rates
from
cardiovascular
disease and
diabetes 2000 to
2010 (Hambleton
et al)

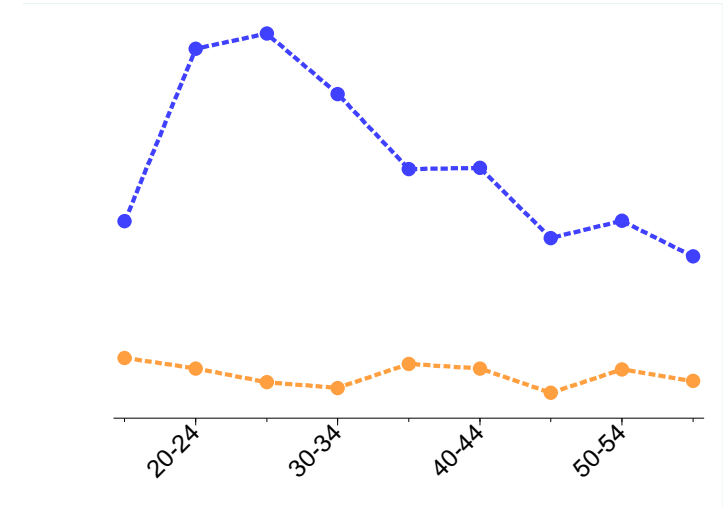
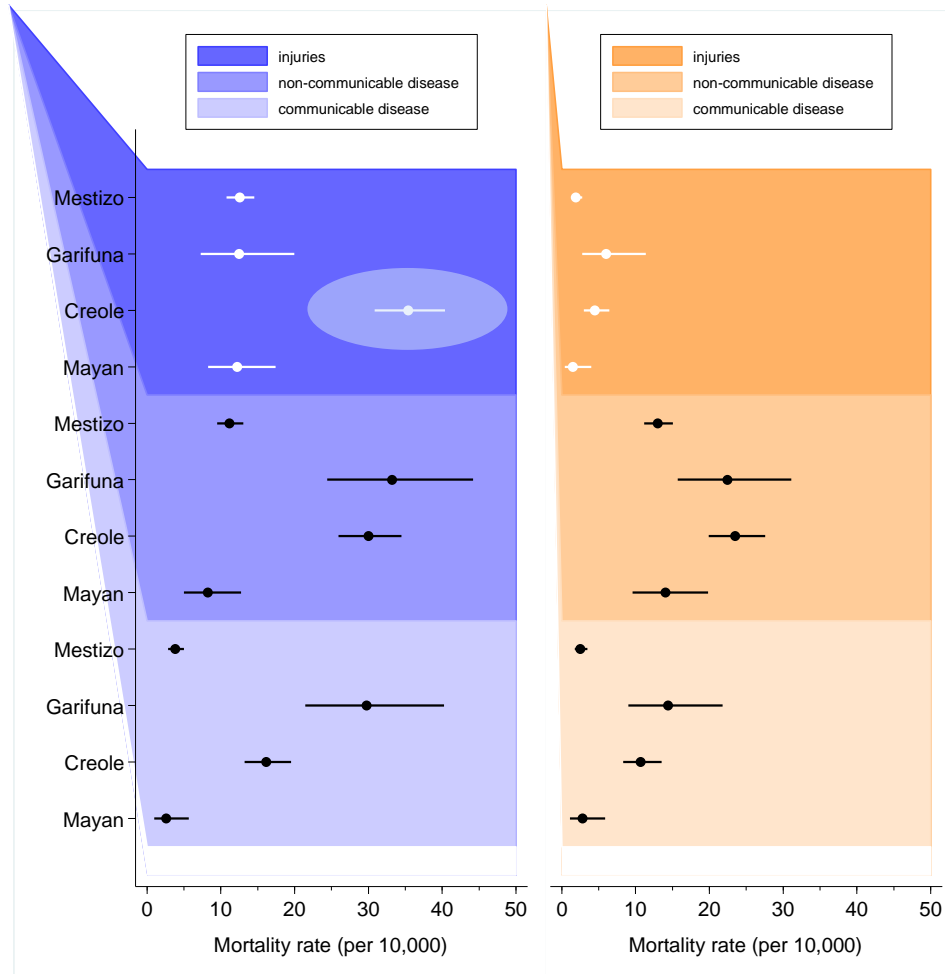


Between country disparities

- There are large variations in NCD-related mortality between CARICOM members
- An understanding of the determinants of these differences is needed to design, implement and evaluate interventions to reduce them
- Much better use can be made of available data - regional institutions and CARICOM members

Country example: Belize (Morey et al)

Within-country disparities



INCIDENCE AND PREVALENCE DATA

Incidence of disease

- Very limited robust NCD incidence data
- Barbados has a population-based register
 - incident cancers, myocardial infarction and stroke.
- Jamaica Cancer Registry in city of Kingston
 - Cancer Incidence in capital city only

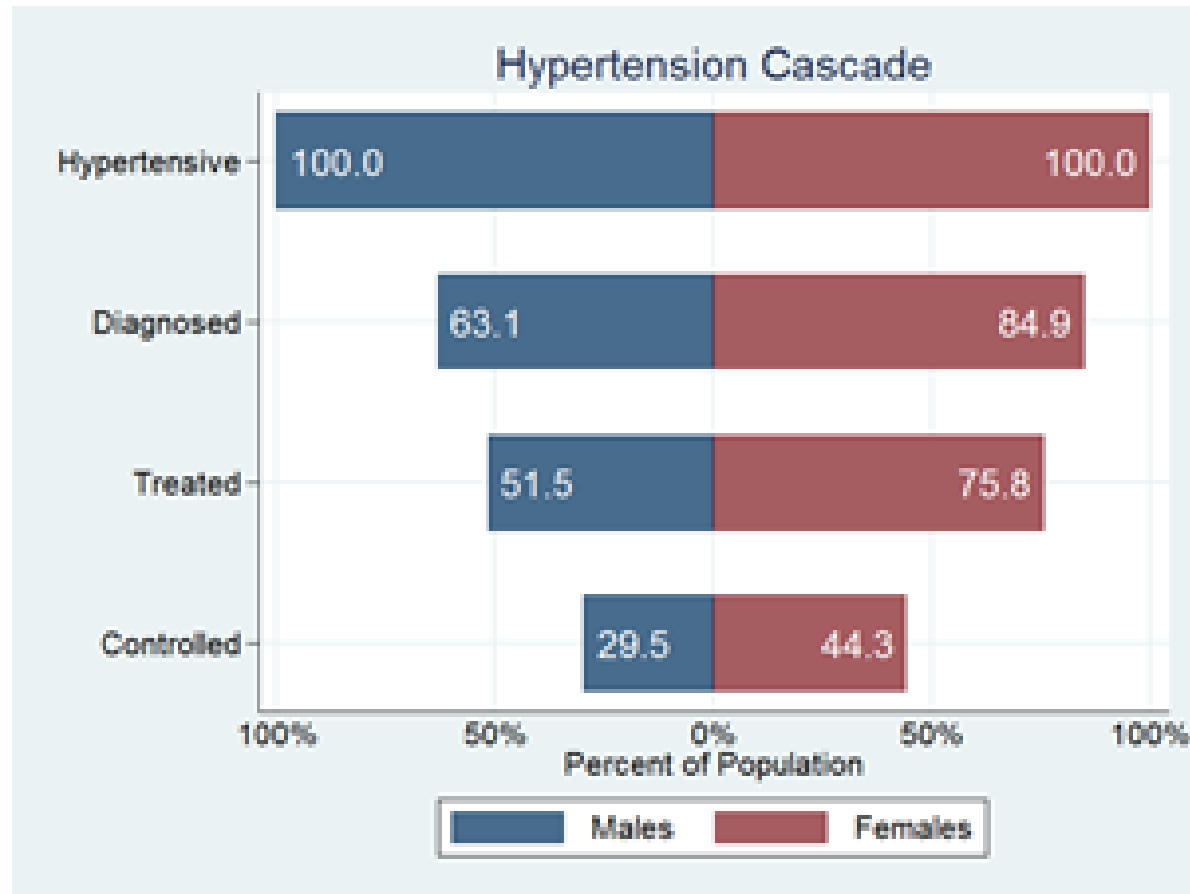
Prevalence of diabetes, hypertension

- From population based NCD STEPS and equivalent Risk Surveys in adults ≥ 25 years
- 12 CARICOM members have surveys since 2000
- 8 surveys within the past 5 years

- overweight and obesity (1 in 2; to 4 out of 5 adults)
- diabetes (1 in 10 to 1 in 4 adults)
- hypertension (1 in 5 to over 1 in 2)

Detection, treatment and control:

Hypertension in Barbados (Health of the Nation 2012)



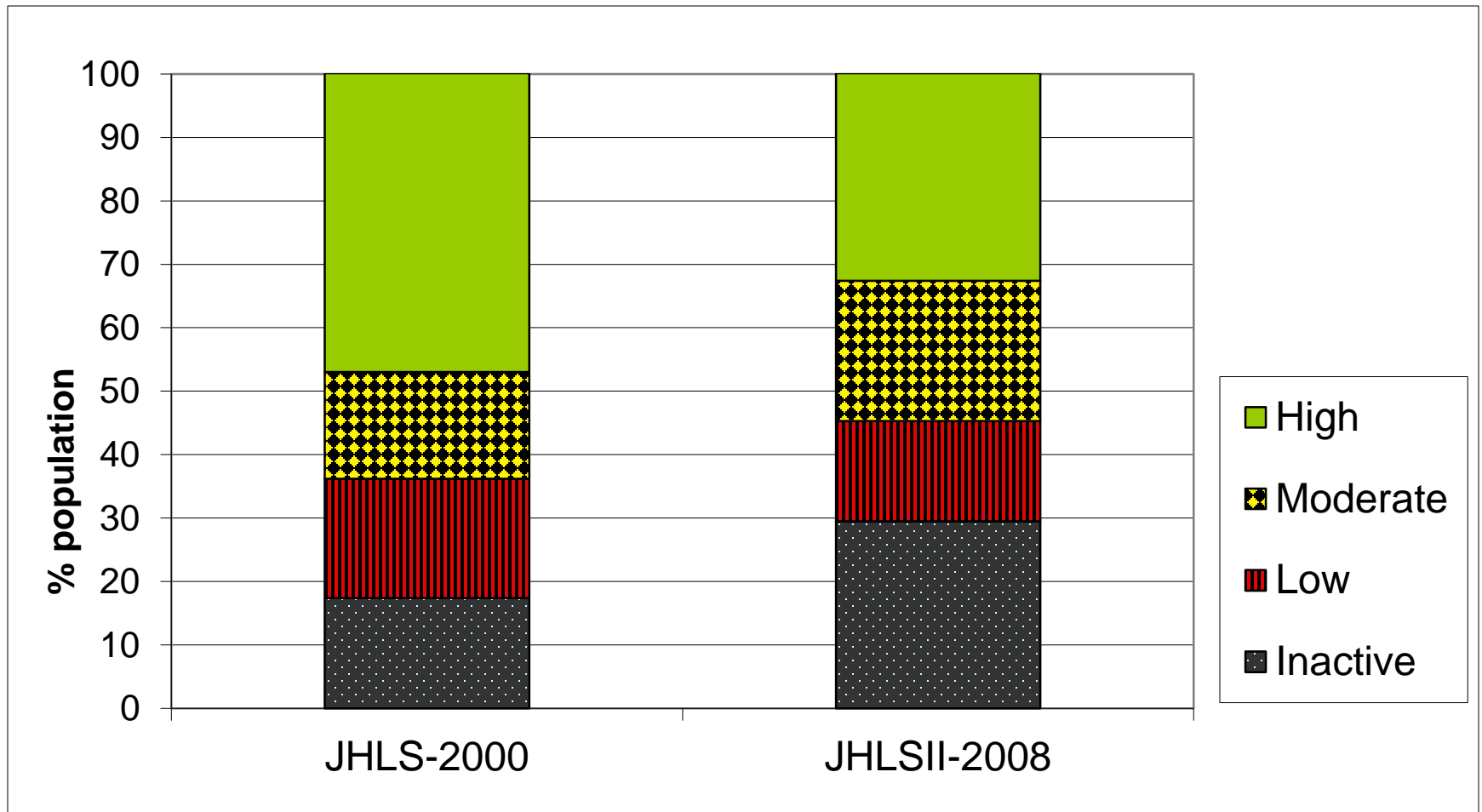
Risk excess by Gender

- Women twice as likely to be obese
- Women 60% more likely to have diabetes
- 1 in 5 men report binge drinking
- 10 - 20% men current tobacco smokers
- Rates of tobacco use and alcohol abuse are half or even lower in women

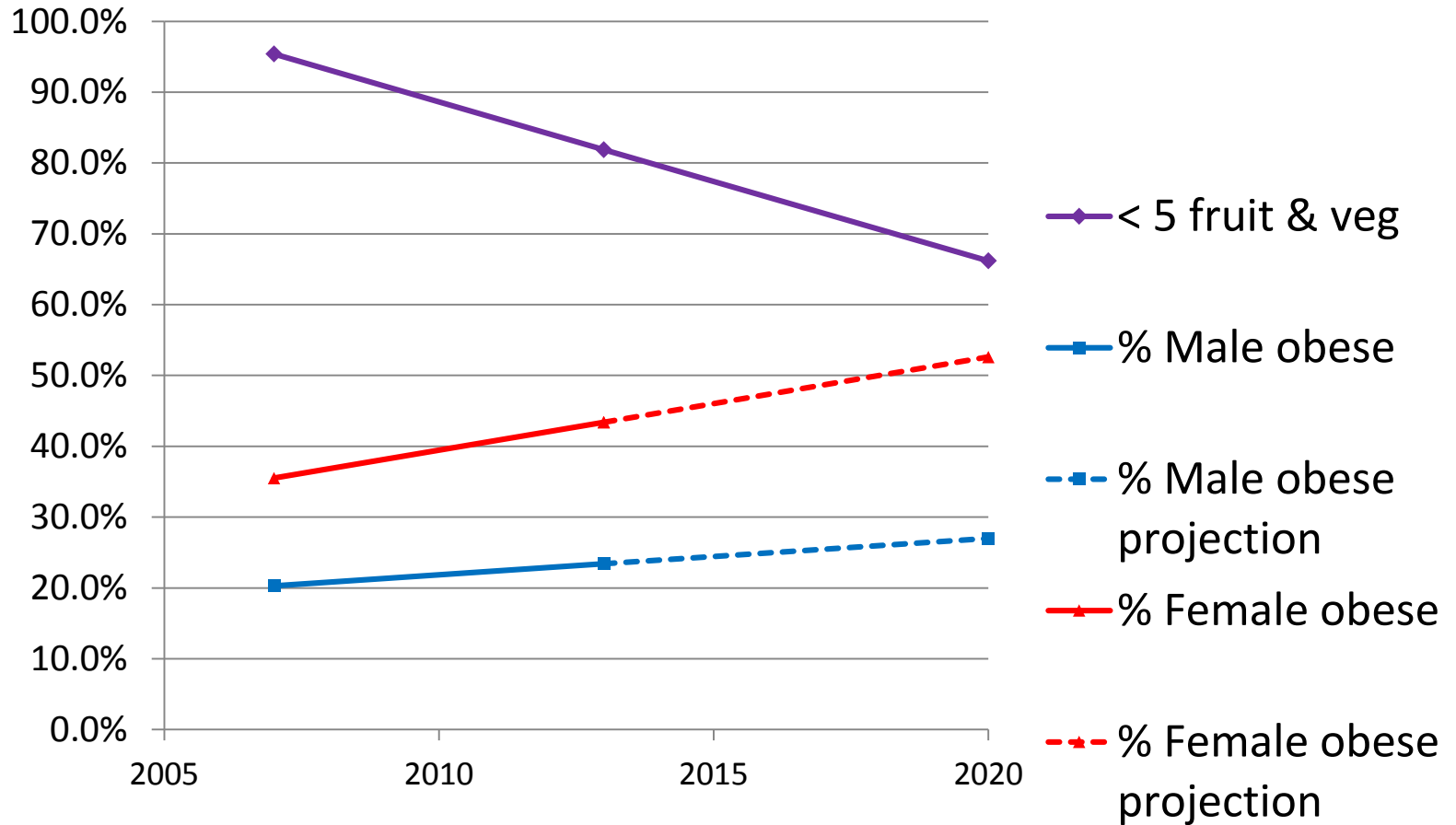
Trends in Risk Factors

Physical Activity Categories 2000 - 2008

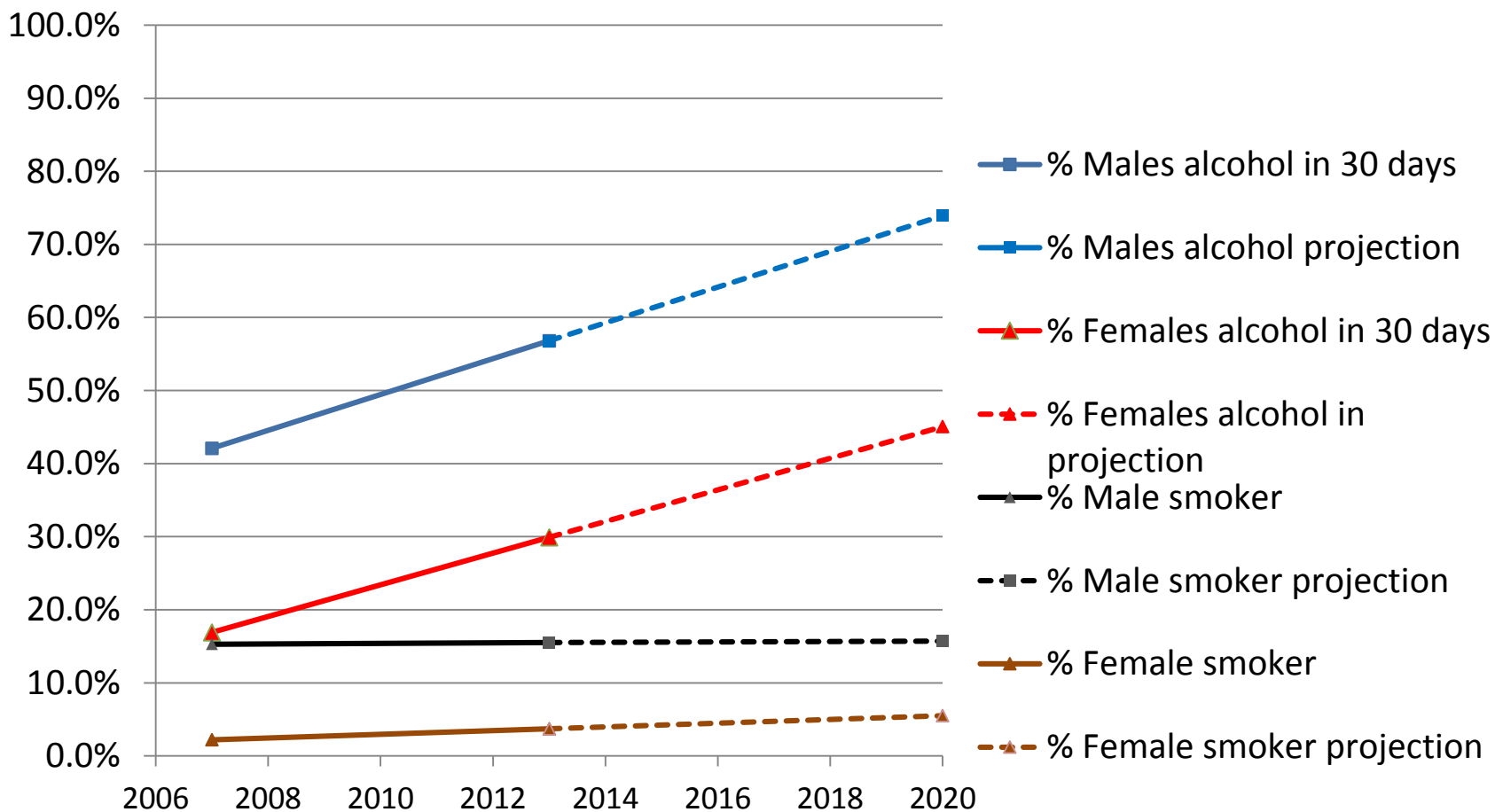
Jamaica Healthy Lifestyles Surveys



Trends in risk factors in Barbadian adults, 2007, 2013, projected to 2020



Tobacco and Alcohol use in Barbadian adults, 2007, 2013, projected to 2020



Risk in children 13 – 15 years (GSHS, GYTS: 18/20 countries)

In every member state

- < a third of school children with recommended of levels of physical activity
- Childhood obesity: $\geq 10\%$ in most countries
- Overweight and obesity is increasing in children

2. Meeting WHO NCD mortality targets : 25 by 2025

- WHO Global targets: 25% reduction in premature (30 - 69 years) NCD mortality by 2025
- Based on available PAHO data (Global Burden of Disease for Jamaica and Haiti), only 8 of the 20 CARICOM members are on course to meet this target

Conclusions and potential actions

- Make better use of available data to describe and monitor the NCD burden. E.g. social determinants analyses of available risk factor survey data and mortality data.
- Provide training to country epidemiologists in mortality and morbidity analysis facilitated by CDRC/UWI.
- Use a standardised format health facility-based data on NCDs
- Increase the number of NCD registries within the region in order to guide and evaluate interventions.
- Continue to provide training to physicians to improve the quality of death certification.
- Further investigate the basis of differences in trends in NCD mortality in order to design, implement and evaluate interventions to reduce these disparities.