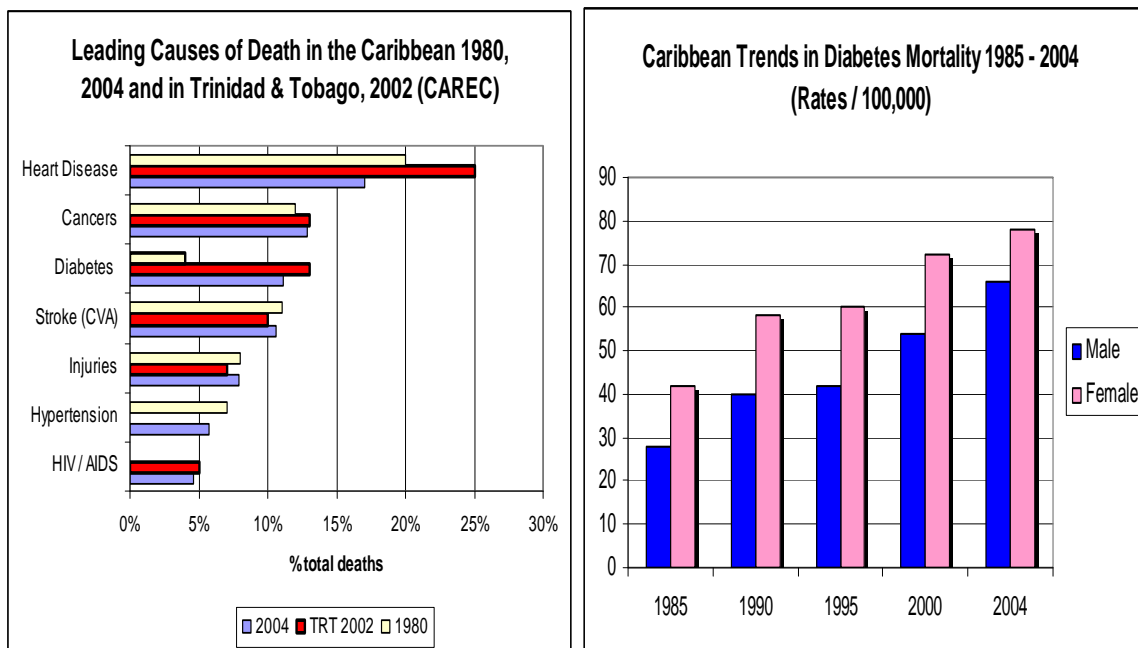


## Responding to NCD, Gender, and Ethnicity in Trinidad and Tobago

Over the last twenty years, non-communicable diseases (NCD), including diabetes and heart disease, have been the leading causes of deaths in Trinidad and Tobago (T&T), accounting for over 60% of all deaths. The prevalence of heart disease in T&T is double that found in North America. Mortality due to diabetes is ever increasing for men and women, with women bearing the greater share of diabetes-related deaths. However, a 2004 study found that 16.2% of T&T respondents had been told by their doctor or nurse that they had diabetes; and more than half (58.1%) never had their cholesterol tested.



The cost of diabetes to Trinidad and Tobago also can be measured in financial resources. In 2001, the estimated total cost of diabetes in T&T was US\$ 484 million, or 5.21% GDP; hypertension cost US\$ 259 million, or 2.79% GDP. In 2005 the public expenditure on drugs for the treatment of diabetes and hypertension was US\$ 52.5 million. In 2008, that figure doubled to US\$ 111.7 million, and in 2009 it increased to US\$121.8 million or almost US\$ 15 per capita.

### *Gender and NCD in Trinidad and Tobago*

Trinidad and Tobago's Men's Health Caravan Project found particular gender-related challenges in providing men with NCD prevention information. Men in T&T were less likely than women to seek health care and follow a health regime. Additionally, T&T men preferred to receive health promotion information from other men in all male spaces and preferred seeing male medical practitioners.

In assisting T&T men to improve their nutrition, exercise, and healthcare-seeking behavior, the Caravan Project discovered that the men's female partners needed to be targeted as well. In T&T, women prepare and serve food to their households. Women also help connect male family members with health services.

### *Ethnicity and NCD in Trinidad and Tobago*

Trinidad and Tobago's two major ethnic groups face differing risks for NCD. Approximately 40% of the country's population is of East Indian descent, and 40% is of African ancestry. A 1998 study revealed that, among all patients older than 35 years, 13% were diabetic and 27% were hypertensive, with significantly greater prevalence of diabetes in the East Indian population. This prospective study also found that the relative risk of a cardiac event was at least twice as high in East Indian men and women as compared to other ethnic groups.

Indo-Trinidadian and Tobagonians' risk for diabetes may be related to the community's practices. A high-carbohydrate and high-calorie diet comprises 95% of the traditional meals in the East Indian community. Additionally, overconsumption of alcohol, tobacco smoking, and lack of exercise predisposes this population to NCD.

### *Working Together on NCD: Trinidad and Tobago and Mexico*

In September 2011, a team of Mexican Ministry of Health and Pan-American Health Organization (PAHO) officials visited Trinidad to share lessons learned in developing gender-responsive health education materials on diabetes. The team undertook site visits to two Trinidadian pilot sites for distribution of adapted health education brochures. Additionally, the Mexican team and its T&T counterparts from the Ministries of Health and of Gender, Youth and Child Affairs conducted a workshop on gender and diabetes with approximately 30 T&T health workers and members of the Chronic Disease Support Group. Workshop objectives included:

- ❖ building a common conceptual base about gender approaches and their application to the diagnosis, treatment and care of diabetes and other NCD;
- ❖ analyzing gender differences between groups of women and men and the impact of these differences on their lives and their health outcomes;
- ❖ based on these findings, designing an intervention proposal to integrate gender approaches in the management of diabetes and other NCD with a strong component of monitoring and evaluation; and
- ❖ increasing health care workers' awareness of gender and cultural biases in health care delivery.