# NCD Agenda in the Caribbean curação

## **Global best buys**



#### Harmful use of alcohol

- Regulate commercial and public availability of alcohol
- Restrict or ban alcohol advertising and promotions
- Use pricing policies such as excise tax increases on alcoholic beverages



#### **Diet and physical activity**

- Reduce salt intake
- Replace trans fats with unsaturated fats
- Implement public awareness programmes on physical activity
- Promote and protect breastfeeding





- Reduce affordability of tobacco products by increasing tobacco excise taxes
- Create by law completely smoke-free environments in all indoor workplaces, public places and public transport
- Warn people of the dangers of tobacco and tobacco smoke through effective health warnings and mass media campaigns
- Ban all forms of tobacco advertising, promotion and sponsorship



#### Cardiovascular disease and diabetes

- Drug therapy (including glycaemic control for diabetes mellitus and control of hypertension using a total risk approach) and counselling to individuals who have had a heart attack or stroke and to persons with high risk ( $\geq 30\%$ ) of a fatal and nonfatal cardiovascular event in the next 10 years
- Acetylsalicylic acid (aspirin) for acute myocardial infarction



#### Cancer

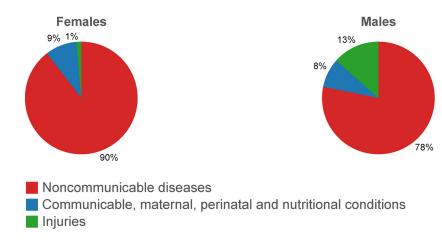
- Prevention of liver cancer through hepatitis B immunization
- Prevention of cervical cancer through screening (visual inspection with acetic acid [VIA] linked with timely treatment of pre-cancerous lesions)





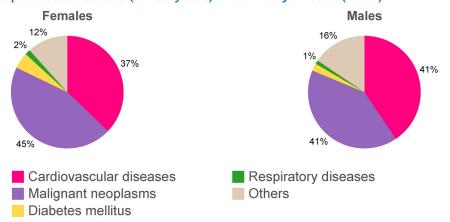
#### **Premature Mortality**

Percentage of premature deaths (30-69 years) by groups of causes (2007)



83% of deaths in 30-69 year-old in Curação were caused by NCDs in 2007

#### Percentage of premature deaths (30-69 years) from 4 major NCDs (2007)

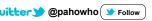


71% of deaths in 30-69 year-old in Curação were caused by the 4 priority NCDs in 2007

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## **WHO STEPwise approach**

The WHO STEPwise approach to noncommunicable disease (NCD) risk factor surveillance (STEPS) is a simple, standardized method for collecting, analysing and disseminating core data on the established risk factors that determine the major disease burden.

http://goo.gl/jBStMj

## **Global Schools-Based Health Survey**

The Global school-based student health survey (GSHS) is a collaborative surveillance project designed to help countries measure and assess the behavioural risk factors and protective factors in 10 key areas among young people aged 13 to 17 years.

http://goo.gl/fq88jb

## **Global Youth Tobacco Survey**

The GYTS is a school-based survey designed to enhance the capacity of countries to monitor tobacco use among youth and to guide the implementation and evaluation of tobacco prevention and control programmes. The GYTS uses a standard methodology and can be used to monitor seven Articles in the WHO FCTC.

http://goo.gl/GrjJrW

## **Tobacco Questions for Survey**

The Tobacco Questions for Surveys (TQS) provides a standard set of questions on tobacco use, and key tobacco control measures. These measures have been defined by the WHO Framework Convention on Tobacco Control (WHO FCTC). The questions are taken from the core questionnaire of the Global Adult Tobacco Survey (GATS), and can be used as a standalone module or included in other surveys in any combination.

http://goo.gl/NiVWrr

## **Global targets**





1. **25%** relative reduction in the **overall mortality** from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases.





2. At least 10% relative reduction in the harmful use of alcohol, as appropriate, within the national context.





3. A **10%** relative reduction in prevalence of **insufficient physical** activity.





4. A 30% relative reduction in mean population intake of salt/sodium.





5. A **30%** relative reduction in prevalence of current **tobacco use**.





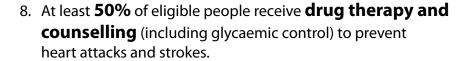
6. A 25% relative reduction in the prevalence of raised blood **pressure** or contain the prevalence of raised blood pressure, according to national circumstances.





7. Halt the rise in diabetes and obesity.







9. An 80% availability of the affordable basic technologies and **essential medicines**, including generics required to treat major noncommunicable diseases in both public and private facilities.