NCD Agenda in the Caribbean GRENADINES

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

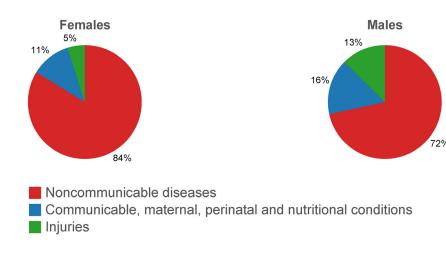
- Prevention of liver cancer through hepatitis B immunization
- Prevention of cervical cancer through screening (visual inspection with acetic acid [VIA] linked with timely treatment of pre-cancerous lesions)





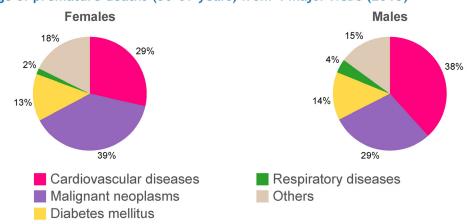
Premature Mortality

Percentage of premature deaths (30-69 years) by groups of causes (2013)



76% of deaths in 30-69 year-old in Saint Vincent and the Grenadines were caused by NCDs in 2013

Percentage of premature deaths (30-69 years) from 4 major NCDs (2013)



64% of deaths in 30-69 year-old in Saint Vincent and the Grenadines were caused by the 4 priority NCDs in 2013

http://www.paho.org facebook PAHO-WHO Like Lwitter @pahowho pollow

NCD Agenda in the Caribbean SAINT VINCENT AND THE GRENADINES

Risk Factors

Prevalence of Behavioural Risk Factors ————————————————————————————————————	
Heavy Episodic Drinking ¹	Adults (15+ years): • Males: 9.6 % • Females: 0.9 % • Both: 5.3%
Insufficient Physical Activity ²	Adults (18+ years): • Males: No data available • Females: No data available • Both: No data available Adolescents (11-17 years): • Males: 84.4% • Females: 88.6% • Both: 86.6%
Current Cigarette Use ³ Current Tobacco Use ⁴	Adults (19+ years): • Males: 26.4% • Females: 3.5% • Both: 13.5% Youth (13-15 years): • Males: 23.6% • Females: 14.6%
Prevalence of Riological Risk Factors	• Both: 19.4%

Prevalence of Biological Risk Factors

Hypertension (18+ years):⁵

Males: 26.3%Females: 21.7%Both sexes: 24%

Overweight BMI ≥25 Kg/m² (18+ years):⁷

Males: 47.6%Females: 59.1%Both: 53.3%

Diabetes (18+ years):6

Males: 9.3%Females: 10.5%Both sexes: 9.9%

Obesity BMI ≥ 30 Kg/m² (18+ years):⁷

Males: 15.1%Females: 28.6%Both: 21.8%

WHO. Global Status Report on NCDs 2014. Geneva, 2014

PAHO. Regional Mortality Information System 2014

PAHO. Tobacco Control Report for the Region of the Americas 2013. Washington, DC, 2013

INDICATORS DESCRIPTION

- 1. Age-standardized prevalence of heavy episodic drinking among adolescents and adults, as appropriate, within the national context.
- 2. Age-standardized prevalence of insufficient physical activity.
- 3. Percentage of the adult population who smoked cigarettes during the past 30 days.
- 4. Percentage of the population 13-15 years old that used at least once, any tobacco product, smoked or smokeless, during the past 30 days.
- 5. Age-standardized prevalence of raised blood pressure among persons aged 18+ years (defined as systolic blood pressure ≥140 mmHg and/or diastolic blood pressure ≥90 mmHg) and mean systolic blood pressure.
- Raised blood glucose (fasting glucose ≥7.0 mmol/l (126 mg/dl) or on medication for raised blood glucose or with a history of diagnosis of diabetes)
- Age-standardized prevalence of overweight and obesity in persons aged 18+ years (defined as body mass index ≥ 25 kg/m² for overweight and body mass index ≥ 30 kg/m² for obesity)

Global targets





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



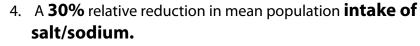


2. At least **10%** relative reduction in the **harmful use of alcohol**, as appropriate, within the national context.



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









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





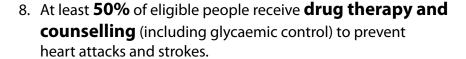
6. A **25%** relative reduction in the prevalence of **raised blood pressure** or contain the prevalence of raised blood pressure, according to national circumstances.





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.