

Measuring and Engaging the Business Sector Response to NCDs

THE CARIBBEAN NCD PRIVATE SECTOR FORUM

MEETING REPORT

Healthy Caribbean Coalition
September 2015



NCD Alliance
PUTTING NON-COMMUNICABLE DISEASES
ON THE GLOBAL AGENDA

Healthy Caribbean Coalition
Measuring and Engaging the Business Sector
Response to NCDs
THE CARIBBEAN NCD PRIVATE SECTOR FORUM

Convened by:
The Healthy Caribbean Coalition (HCC) with support from the Commonwealth Secretariat
on June 4th, 2015 at the Courtyard by Marriott, Bridgetown Barbados





TABLE OF CONTENTS

1	Message from the Private Sector.....	5
2	Acknowledgements.....	5
3	Acronyms & Abbreviations.....	7
4	Executive Summary	1
5	Introduction	4
6	Background.....	5
6.1	The Private Sector and NCDs	5
7	Participant Summary	6
7.1	Participating Enterprises.....	8
8	Forum Objectives and Expected Outcomes.....	10
9	Session Summaries.....	11
9.1	Opening Remarks Summary	12
9.2	Presentation Summaries	14
9.3	Discussion Session: HCC Private Sector Report and emerging good practices across the Region.....	29
9.4	Breakout Groups to feed into the FFA: Inward Facing Initiatives; Outward Facing Initiatives	32
9.5	Finalization of Draft Private Sector Commitment Statement on NCDs.....	34
9.6	Closing Comments	35
10	Conclusions & Recommendations.....	38
11	Next Steps	41
12	Annexes	42
12.1	List of Participants.....	42
12.2	Forum programme.....	46
12.3	Full Text accounts of Opening Remarks.....	48
12.4	Caribbean Private Business Sector: Statement of Support On Prevention and Control of NCDs	55
12.5	Meeting Evaluation.....	58
12.6	Meeting Presentations.....	60
12.7	Meeting Materials.....	60

1 MESSAGE FROM THE PRIVATE SECTOR



Sagicor, a leading financial services, health and general insurance company in the Caribbean is pleased to have taken part in the 'Caribbean Non Communicable Disease (NCD) Private Sector Forum: Measuring and Engaging the Business Sector Response to NCDs' held on the 4th June 2015. Sagicor is honoured to have been invited to deliver a message on behalf of the companies that attended the Forum.

Sagicor congratulates the Healthy Caribbean Coalition and its partners the NCD Alliance, the Caribbean Public Health Agency (CARPHA), the NCD Alliance and the Commonwealth Secretariat for hosting such an important meeting with the Caribbean private sector.

This meeting facilitated the sharing of experiences and discussions on how the sector might play a more important role in the multi-sectoral approach to prevention and control of NCDs in the Caribbean and in particular contribute more effectively to the National NCD Commissions, which are the institutional frameworks that have been established to effect such an approach.

The adverse impact of NCDs on attendance at work, on productivity and on employee morale is well known, as is the recognition that programmes and initiatives at the workplace can effectively address these issues. Additionally, the role of the private sector in contributing to the creation of enabling environments that facilitate healthy lifestyles of workers and their families and their communities is also well known.

The private sector has a proud record of contributing to health and development in the Caribbean as is evident in its response over the past decade to the threat posed by HIV Aids in the Region. Sagicor recognises that NCDs, causing as they do, some 7 out of every 10 deaths and requiring significant expenditure, represent a significant present day challenge to development among CARICOM countries.

The private sector in the Caribbean is a strategic partner in the ongoing development of Caribbean people and as was demonstrated during the Forum, many companies are presently engaged in prevention and control of NCDs through workplace wellness programmes and support of healthier environments.

Sagicor has over the past years supported the efforts of regional civil societies to strengthen the multi-sectoral and specifically the civil society and the private sector response to the NCD epidemic. The private sector delegates that attended the Forum heard the call for private sector companies in the Region to increase support to prevent and control NCDs both within their businesses and in the communities in which they operate. That call can best be heeded by the formation of an alliance of Caribbean private sector businesses.

We look forward to the realisation of this initiative.

Dr Patricia Downes-Grant
President and CEO
Sagicor Life Inc

2 ACKNOWLEDGEMENTS

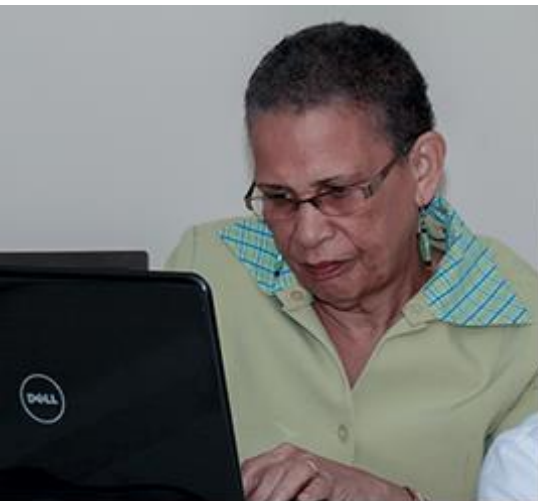
This meeting was supported with funding from the Commonwealth Secretariat. This is a new partnership for the HCC and it has been a pleasure working with team the Commonwealth Secretariat, led by Health Advisor, Dr. Magna, Aidoo.

I would like to thank the following who contributed significantly to the successful outcome of this meeting:

- Dr. Lynda Williams, Consultant for the Private Sector Survey and Framework for Action.
- Mrs. Paula Trotter Rapporteur for the meeting.
- The Meeting Attendees representing the business sector from across the Caribbean.
- The Board of Directors & Volunteers of the Healthy Caribbean Coalition.

Special thanks are extended to Dr. Cary Adams, Chair of the NCD Alliance; our Patron, Sir George Alleyne; and our special Advisor Dr. James Hospedales for their unwavering support of the HCC and our vision, and their invaluable contribution to this meeting.

Maisha Hutton
Executive Director, HCC



3 ACRONYMS & ABBREVIATIONS

BDF	Barbados Diabetes Foundation
CARICOM	Caribbean Community
CARPHA	Caribbean Public Health Agency
CSO	Civil Society Organisation
HCC	Healthy Caribbean Coalition
NCD	Non communicable disease
NCDA	NCD Alliance
NGO	Non Governmental Organisation
PAHO	Pan American Health Organisation
PPP	Public Private Partnership
RSR	Regional Status Report
UN	United Nations
UWI	University of the West Indies
WHO	World Health Organisation
WWP	Workplace Wellness Programmes



4 EXECUTIVE SUMMARY

In June 2015, 40 business executives representing 24 companies from diverse sectors across the Caribbean met at the 'Caribbean NCD Private Sector Forum: Measuring and Engaging the Business Sector Response to NCDs' in Barbados to discuss the issue of NCDs (non-communicable diseases). The primary objectives of the Forum were to provide an opportunity for senior business executives to discuss mechanisms for implementing and strengthening private sector-led workplace wellness programmes and outward facing community initiatives; and to explore strategies to strengthen the capacity for public private partnerships (PPPs) through more effective interaction with government and civil society. The **key outcomes** were:

- Sharing and exchange of knowledge and experience about the role of the private sector in the multisectoral response to NCDs.
- Presentation of findings of a survey of wellness programmes in private sector and of the role that the sector has played thus far in the wider community in NCD prevention and control.
- Presentation of a Caribbean Private Sector Response to Non Communicable Diseases (NCDs): A Framework For Action (FFA)
- Sharing and discussion around a Statement of Support of the private sector's response to the prevention and treatment of NCDs.

Prior to the meeting an electronic, self-administered survey of the knowledge, attitudes and practices of the private sector in their response to the NCD epidemic; was sent to 54 companies selected and invited to attend the meeting. Thirty-five (35) of these companies completed the survey (response rate 65%). Key survey findings were:

- The majority 28 (80%) of companies offered worksite wellness programmes to their employees but only 13 (37%) had ever conducted a health risk appraisal of their workforce.
- Conventional health insurance, onsite disease screening, health education and occupational safety were the most commonly offered programmes and human resource personnel were largely responsible for both the implementation and evaluation of the programmes.
- Lack of resources for programmes, need for cost/benefit analysis and lack of dedicated staff were thought to be the most significant barriers to implementation of worksite wellness programmes.
- When asked about the perceived role of different groups in the prevention and control of NCDs among employees and in the community, over 70% of respondents were of the view that individuals and their families had the largest role to play.
- Caribbean companies have been involved in philanthropy and to a lesser extent in health advocacy; but few had ever participated in joint public/ private or private/ civil society programmes for combating NCDs.

The forum provided a unique opportunity for organisations to share and discuss workplace wellness activities which ranged from isolated one-off activities to fully developed and integrated programmes. One of the region's leading diverse conglomerates, presented various aspects of their workplace initiative which included: risk assessments to determine priorities; wellness committees; Employee Assistance Programmes; in-house wellness competitions; and the

establishment of partnerships with insurance agencies to reduce premiums. A leading bakery shared their ongoing journey in voluntary reformulation leading to a 20% reduction in the salt content of their whole-wheat loaf of bread. Similarly, efforts to incrementally reduce sugar levels in sugar sweetened non-alcohol beverages were shared by a leading regional soft drink manufacturer. The challenges of the design and implementation of policies to govern labelling in a setting where the majority of products are imported were also addressed. The role of Chambers of Commerce and Employers Confederations as drivers of workplace wellness was explored.

A Framework For Action, aimed at assisting the private sector in implementing or expanding worksite wellness programmes and expanding community involvement was presented at the meeting and the attendees discussed needs for implementation or expansion of programmes within their companies. A draft Private Sector Statement of Support on NCDs to be finalised in the months following the meeting was discussed with inputs to the statement gathered from the company representatives for incorporation into the final report. Efforts to obtain endorsement of the Statement of Support are ongoing.

Key Recommendations for more effective participation of the Caribbean private business sector in the prevention and control of NCDs which emerged from the Forum were the need to:

- Develop **resources to build private sector knowledge and awareness of key NCD issues** including the burden of disease, and the existing **policy and programming** environment as well as best practice business sector responses to NCD policy and programming both within the workplace and within the communities they serve and in which they operate.
- Develop an evidence-based **business case for NCD action**. Encourage research to determine the cost savings of WWP and more broadly measure the cost savings of taking action around NCDs from a corporate perspective whether this be in the form of WWP or outward facing initiatives related to a company's products and services or supporting local communities.
- Develop **tools** to support implementation of **workplace wellness programmes** (such as the Framework for Action discussed in this report) recognising that programmes may range from very simple low cost interventions to larger more comprehensive programmes requiring more significant investment of resources.
- Develop **sector-specific tools** to guide private sector in **leveraging core competencies** to support NCD prevention and control.
- **Target Senior Management** when seeking to gain buy-in for an NCD response.
 - Heads of Government should seek to engage with top CEOs in the region in partnership with an established business coalition or alliance (*see below).
- Engage **Chambers of Commerce and Employers Confederations** as a vehicle for reaching the collective business community.
- Seek to establish a **Caribbean Business Coalition or Alliance** of the regional private sector leadership who have a demonstrated commitment to address NCDs in their workplace and communities. The '*Caribbean Private Business Sector: Statement Of Support On Prevention And Control Of NCDs*' provides a platform from which to identify and mobilise committed business leaders around the concept of forming a regional alliance for business in support of NCDs.

- Document past, current and planned NCD focussed **private sector-led initiatives** both within workplaces and within communities. The HCC Private Sector Situational Analysis discussed in this Forum report is an excellent starting point and can be built upon.
- Create a **platform to showcase** workplace wellness programmes and outward facing initiatives such as the reformulation of products, philanthropic efforts, etc.
- Promote **private sector representation in national NCD multisectoral mechanisms**.
- Strengthen the **capacity for public private partnerships**
 - Build the **capacity** of the private sector to more effectively collaborate with civil society and the governments
 - Build the **capacity** of civil society to more effectively collaborate with the private sector
 - Build the capacity of the public sector to more effectively collaborate with the private sector
- Develop **conflict of interest policies** to provide a framework for partnering with the private sector.



5 INTRODUCTION

The Caribbean Private Sector Forum for business executives held at the Courtyard Marriott Hotel, Barbados on Thursday 4th June, 2015, was convened by the Healthy Caribbean Coalition (HCC) with official partners of the Forum, the Caribbean Public Health Agency (CARPHA) and the NCD Alliance (NCDA), with support from the Commonwealth Secretariat (COMSEC).

The meeting of regional business executives, representing a wide cross section of industries, was aimed at creating a “safe space” for sharing of experiences and dialogue around greater engagement of the region’s corporate sector in the multisectoral response to the prevention and control of NCDs. The event was a further contribution of the HCC to the advancement of ‘whole of society’ approaches in control and prevention of NCDs, and follows on a series of activities including: the NCD Alliance/ Medtronic funded NCD Regional Status report developed in 2014; a detailed report on National NCD Commissions (NNCDCs) to be launched in September 2015; and the COMSEC funded Implementation Framework for NNCDs.



6 BACKGROUND

In 2007 Heads of Government of CARICOM met in Port of Spain to discuss NCDs. It was at this time that the leadership of the region, re-emphasised that NCDs were a major health, economic, and development issue; requiring all sectors of society including the private sector (business community) to come together to play their part separately and collectively to address the issue. In 2008 the Healthy Caribbean Coalition (HCC) was established arising out of the Heads of Government meeting as a regional NCD Alliance and network of health and non-health NGOs, private sector and others both regionally and internationally to *"harness the power of civil society, in collaboration with government, private enterprise, academia, and international partners, in the development and implementation of plans for the prevention and management of chronic diseases among Caribbean people"*.

6.1 THE PRIVATE SECTOR AND NCDs

NCDs - heart disease and stroke, diabetes, some cancers and chronic lung conditions – are responsible for 7 out of every 10 deaths and account for more than 60% of the expenditure of health budgets in most Caribbean countries. Collectively, these diseases have a significant impact on workplace productivity, absenteeism and the wider economy. There is a strong rationale and incentive for businesses to implement workplace wellness programmes targeting primary prevention of risk factors and early management of NCDs. Companies that are taking a more comprehensive and planned approach to workplace health and wellness have seen increases in productivity and reductions in health care costs for workers. Additionally, the private sector has an important role to play in prevention and control of NCDs by engagement with the wider community beyond the workplace in a partnership with government and civil society in which the private sector brings to bear its strengths of product power, philanthropy and shared values, and contributes to efforts aimed at provision of a healthier environment resulting in healthier people.

There is significant global focus on the role of the private sector in the NCD response including the creation of enabling environments and the implementation of incentive structures supportive of public-private partnerships leading to accelerated action both within the workplace through workplace wellness initiatives; and within communities. Leveraging the tremendous influence of the business sector whether through product reformulation; innovative research and development of medicines and technologies; strengthening of healthy supply chains to address access issues; or generally drawing on the significant resource capacity of this sector of society is required in the "whole of society" response to prevention and control of NCDs.

7 PARTICIPANT SUMMARY

Participants at the Forum included senior decision-makers from across the region (see Figure 1 below) representing key sectors in the private sector including financial services, food and beverage manufacturing, agriculture, tourism, insurance, media and communications (Table 1). Representatives of national NCD Commissions, civil society, regional public health institutions and the HCC, also participated in the forum. The full list of participants is found in the annexes.

TABLE 1: CATEGORY OF ORGANISATION	TOTAL
Diverse Conglomerates	5
Manufacturing	9
Finance	4
Banking	1
Hotels	3
Media	3
Retail	4
Telecommunications	1
Government	2
Insurance	6
Chambers Of Commerce	1
Employers Federation	1
Airlines	1
Civil Society/Academia/ Regional Public Health Institutions	13
Total	54

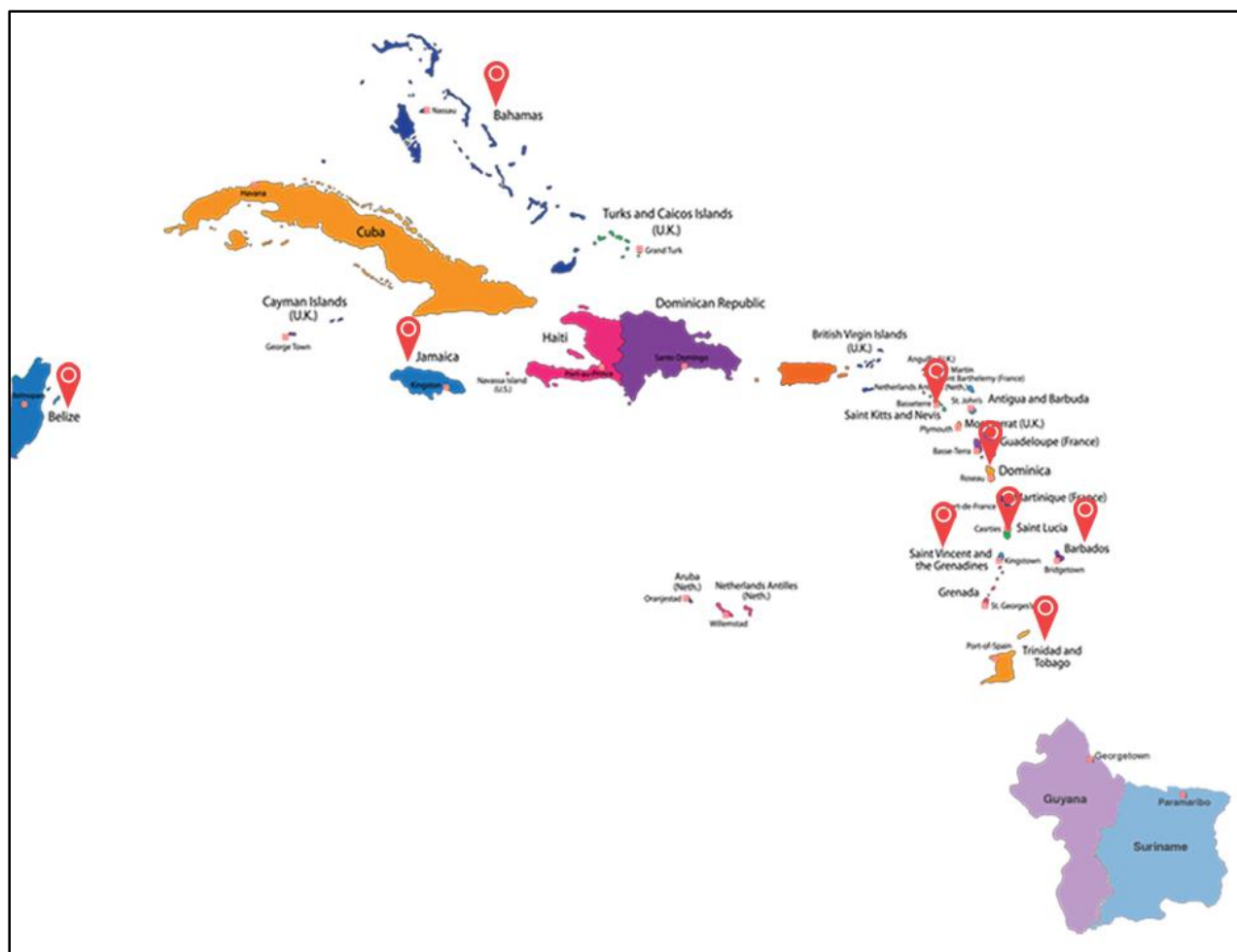


Figure 1: Map of the geographical location of participants





7.1 PARTICIPATING ENTERPRISES

Participating enterprises are listed below:

- Ansa McAl (Barbados) Ltd /Bryden Stokes Ltd.
- Banks Holdings Ltd
- Barbados Chamber of Commerce and Industry
- CIBC First Caribbean
- Citrus Products of Belize Ltd
- Collins Ltd.
- Courtyard by Marriott Bridgetown
- Digicel (Barbados)
- Dominica Coconut Products Ltd. - Colgate Palmolive
- GECCU/ General Employees Co-Operative Credit Union Limited
- Guardian Group
 - Guardian General Insurance Limited
 - Guardian Holdings Limited
 - Guardian Life of the Caribbean Limited
- Hilton Barbados
- Interactive Media Ltd.
- Liat (1974) Ltd.
- Nation Publishing Co. Ltd
- Nestlé Trinidad and Tobago Ltd and Nestlé Caribbean Inc.
- Price Waterhouse Coopers
- Purity Bakeries, Goddard Enterprises Ltd.
- Sagicor Life Inc.
- The Massy Group
- The SOL Group
- The St Kitts Nevis Anguilla Trading and Development Company Limited
- The St. Lucia Employers Federation
- Wibisco - The West India Biscuit Company

8 FORUM OBJECTIVES AND EXPECTED OUTCOMES

The primary objectives of the Forum were to provide an opportunity for senior business executives to discuss mechanisms for implementing and strengthening private sector-led workplace wellness programmes and outward facing community initiatives; and to explore strategies to strengthen the capacity for public private partnerships (PPPs) through more effective interaction with government and civil society. The Forum supports at the regional level the WHO Global Coordination Mechanism (GCM)/NCD Working Group on how to realize governments' commitments to engage with the private sector for the prevention and control of NCDs.

The **expected outcomes** of the Forum were:

- Sharing and exchange of knowledge and experience about the role of the private sector in the multisectoral response to NCDs.
- Presentation of findings of a survey of wellness programmes in private sector and of the role that the sector has played thus far in the wider community in NCD prevention and control.
- Presentation of a Caribbean Private Sector Response to Non Communicable Diseases (NCDs): A Framework For Action (FFA)
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9 SESSION SUMMARIES

The one-day meeting started with a brief opening plenary session, followed by presentations and small working group sessions. The Forum Programme is found in Annex II. The proceedings are summarized below in the following sections. Full text accounts of the opening remarks are shown in Annex III.

9.1 OPENING REMARKS SUMMARY

Opening Welcome, Objectives and Introductions

Sir Trevor Hassell, President, Healthy Caribbean Coalition (HCC)

Sir Trevor Hassell opened the meeting by welcoming all present. He extended a special welcome to Honourable Dr. John Boyce, Minister of Health, Barbados, Dr. Cary Adams, Chair of the NCD Alliance (NCDA), Dr. Magna Aidoo, Health Advisor, the Commonwealth Secretariat and Dr. James Hospedales, Executive Director of the Caribbean Public Health Agency (CARPHA). He expressed appreciation for the tremendous response of the private sector to the HCC's invitation to attend the meeting and gave a brief profile of the participants. Sir Trevor further explained that the meeting had been convened as a result of HCC's strong conviction that the Caribbean private business sector has a vital role to play in the development of Caribbean people and in tackling any conditions that threatened their wellbeing. The health and economic burden of the NCDs and their mounting impact on people, businesses and societies was highlighted. He then summarised the objectives and expected outcomes of the meeting, emphasizing the importance of the need for increased engagement of the Caribbean private sector in all aspects of the response to NCDs.

Opening Remarks from the Commonwealth Secretariat (COMSEC)

Dr. Magna Aidoo, Health Advisor, COMSEC

Dr. Aidoo acknowledged the presence of the Honourable Minister of Health and other distinguished guests, and welcomed the participants. She brought greetings on behalf of the Secretary-General of the Commonwealth Secretariat (COMSEC). She expressed her appreciation to the Government of Barbados and the HCC for hosting the meeting and bringing together an influential group of participants to discuss the issue of tackling NCDs. The role of the COMSEC was briefly outlined and reference was made to the 2013-2017 Strategic Plan in which the Health Section has been mandated to assist member countries in developing national health policy frameworks to achieve universal health coverage and to tackle the growing burden of non-communicable diseases. Participants were reminded of the global economic burden of the NCDs and the disproportionate burden of diseases borne by low- and middle- income countries. Dr. Aidoo further stated that proven, effective strategies for NCD prevention and management existed. Increased awareness of the significance of the problem, changes in cultural and lifestyle practices, reorientation of health priorities and policies, and the concerted involvement of all sectors of society were needed to successfully combat the NCDs. Dr. Aidoo expressed the hope that the meeting would help participants to recognize their responsibilities in this regard and motivate them to join in tackling non-communicable diseases in the region.

Greetings from the Caribbean Public Health Agency (CARPHA)

Dr. James Hospedales, Executive Director, CARPHA

Dr. Hospedales acknowledged the presence of the Honourable Minister of Health and other distinguished guests, and greeted the participants. He reiterated the theme of the meeting, stressing the importance of the participation of the private sector in addressing the NCDs which, he noted, imposed significant costs in health, economic and development terms. He briefly discussed the structure and role of CARPHA and highlighted the areas of work relating to NCD prevention and control. In concluding, he stated that he looked forward to the discussions on mechanisms in which an all-of-society response to NCDs could be achieved particularly with the involvement of the private sector.

Opening Remarks

Hon. John Boyce, Minister of Health, Barbados

The Honourable Minister acknowledged the presence of the distinguished guests and welcomed all present. He began by congratulating the HCC and all of its forerunners for their valuable work in addressing the NCDs which, he stated, was one of the greatest challenges to development of the region. He extended a special welcome to the private sector participants and expressed his appreciation for their contributions in Barbados and throughout the region.

The Minister gave the assurance that the Government of Barbados will continue to play its part in the fight against NCDs. He noted that a United Nations Interagency Task Force, on a recent visit to Barbados, had commended the Ministry of Health, private sector and other organizations in Barbados for their work in addressing the NCDs, but had indicated that there was still much to be achieved to make a significant difference. The Minister was of the view that it was time that Barbados considered measures such as taxation and legislation to more effectively tackle common NCD risk factors. Referring to the spiralling costs of treating NCDs and their complications, he emphasised the need for investing in effective preventive strategies. In this connection, he mentioned the plans by the Ministry of Health to target the youth to encourage the adoption of healthy eating and other positive lifestyle practices. The quality of imported foods, including the need to eliminate trans fats from the food supply and the increasing popularity of binge drinking; were highlighted as major concerns. The need for the cooperation of the alcohol industry in promoting a responsible approach to the use of alcohol was noted. The Minister also commended the local Chamber of Commerce and other private sector organizations that have been organizing and supporting wellness initiatives. He shared plans to engage the private sector directly in efforts to contain the problem of NCDs particularly through work with the youth based on his belief that youth-focussed strategies would yield the greatest returns. In closing, he urged participants to take the discussions seriously, and to treat this forum as an opportunity to significantly contribute to policy in Barbados. Minister Boyce underscored the government's support for any developments or outcomes from the meeting that would support the effective prevention and control of NCDs.



CARIBBEAN COALITION

"A multi-stakeholder alliance for combating chronic diseases"

Established 2008

The **Health Caribbean Coalition** has as its primary focus the harnessing of the power of civil society in partnership with government, private enterprise, and academia, to develop and implement strategies for the reduction of NCDs through lifestyle changes, the better management of risk factors, and supportive policies.

Address the common risk factors of excessive alcohol consumption, tobacco use, and to promote healthy diets and active lifestyles collectively across the whole of the region.



9.2 PRESENTATION SUMMARIES

Governments Responding to the Epidemic of NCDs

Dr. James Hospedales, Executive Director, CARPHA

Dr. Hospedales began with an overview of the NCD epidemic. Globally, the four major disease groups were a rising challenge particularly for low- and middle- income countries (LMICS). Data for 2000-2012 revealed that they were among the leading causes of death in the Caribbean. A shared set of behavioural risk factors (exposure to tobacco smoke, harmful use of alcohol, unhealthy diets and physical inactivity) increased the risk for NCDs. Obesity, a result of the combination of poor diets and physical inactivity, posed a major risk for chronic disease and disability. Prevalence levels of obesity and other risk factors, and the environmental factors driving these trends were highlighted. The premature morbidity and mortality associated with the major NCDs particularly in the LMICS led to lost productivity and contributed to household poverty.

The presenter informed participants that the implementation of interventions at the level of risk factors helped to reduce the health and economic burden of NCDs. Reference was made to the WHO “Best buys” for NCD prevention and control which were proven cost-effective interventions that can help guide the prioritization of intervention approaches. These included population- based measures and an essential package of clinical interventions.

Dr. Hospedales continued by outlining the actions taken by Caribbean governments in response to the NCD epidemic. Chief among these was the 2007 Port of Spain Declaration on NCDs, and he reported that there was the annual monitoring of countries’ compliance with the twenty-seven commitments acquired under the declaration. An evaluation of progress in achieving stated indicators was in progress and the findings will be used to facilitate acceleration of implementation. Other areas of collective action by governments in the region were also outlined. In identifying strategies for moving forward, Dr. Hospedales commented on the ageing of the population and the importance of protecting and promoting health to reduce the health care costs of NCDs. In this regard, he pointed to the need to address the barriers to implementing the proven cost-effective interventions, and the promotion of the all-of-society approach in combating the NCDs. He further called for increased public engagement in the fight against NCDs; the strengthening of governments’ regulatory and legislative capacities; the need for capacity building within both the public and private sectors for measuring impact of interventions; and a continued focus on actions to achieve the 2025 global NCD targets.

Why NCDs Matter to the Private Sector

Dr. Cary Adams, Chair, NCD Alliance (NCDA)

Dr. Adams welcomed participants and said he relished the opportunity to talk with representatives of the private sector, having worked in that sector for twenty-two years. He indicated that with 3.4 billion people in employment, the workplace offered a platform to improve the health of half of the world's population and to significantly contribute to the achievement of the NCD 25x25 targets. Having reviewed the targets, his presentation then focused on the following areas: the many benefits to businesses of investing in wellness programmes including increases in employee satisfaction and a reduction in staff turnover and absenteeism; the external factors which may influence or drive successful businesses to address NCDs and their risk factors; the best practice employee wellness programmes which deliver beneficial outcomes; and, the importance of integrating family and community involvement for maximizing programme impact. Examples of programme interventions by some successful big businesses, including banks in the USA and Europe were cited. In the concluding remarks, Dr Adams reminded participants that the impact of NCDs on businesses is expected to increase as the working population ages but there were proven preventive interventions that were relatively simple to implement and which would yield positive benefits in both the short and long term. It was also noted that assistance and support for programme implementation were available at the global, regional and local levels.

Discussion

A number of issues were raised by participants in the discussion session following the presentations by Dr. Hospedales and Dr. Adams. One participant enquired about the reason for the worsening trends in the NCDs despite ongoing preventative initiatives. This was attributed to the lack of improvement in the social, cultural and environmental factors which were driving the epidemic. The lack of commitment at regional, national and individual levels to seriously address the NCD problem was cited as another reason. A lack of political will and the need for a strong legislative agenda in support of NCD action were also identified as hindering factors.

Further discussion focused on the need for creating supportive environments conducive to the adoption of healthy behaviours. Attention was drawn to experiences in implementing workplace wellness programmes (WWPs) and the reluctance of employees to participate or to act on educational messages. Some participants were of the view that WWPs have limited impact because of the lack of opportunities for reinforcement in the wider environment. It was argued that policy change might prove difficult to achieve because of the public's mistaken perception of what constituted indicators of development or progress, and the technological advances which have led to changes in lifestyle patterns. Concern was also expressed about school curricula at the secondary level with its heavy academic workload, which precluded student participation in regular physical activity. Another comment related to the plight of low-income households and their difficulties in accessing healthy foods. It was also noted that more people, including children, ate outside the home but there were few, if any, healthy options in eating places or school canteens.

Another view expressed was the seeming lack of attention to the promotion of physical activity at the policy level including the provision of appropriate spaces and the promotion of physical education in schools. Dr. Kenneth George, Senior Medical Officer in charge of NCDs, Ministry of Health, Barbados was asked to respond to this observation. He explained that obesity was the major driver of the NCDs in Barbados; therefore, attention was given to the promotion of healthy diets as well as regular physical activity. Guidelines on physical activity for every stage of the life course have been prepared and circulated. A national action plan for childhood obesity to be released in coming weeks includes strategies for increasing activity levels. Dr. George noted that, in the implementation of the action plan, there will be many opportunities for private sector involvement and called on the private sector to work with government in supporting school-based interventions.

Two points were raised in relation to developing enhanced nutritional labelling in the region: the need to be aware of other countries' regulations and requirements, and secondly, the importance of having simple, clear labelling schemes which will help consumers to make better choices. Dr. Hospedales concurred with the views expressed and observed that many countries have successfully addressed the labelling issue through joint approaches involving governments, consumer associations and companies. He alluded to interesting experiments in some Latin American countries and the UK in the last year and half, which would provide useful lessons in this area. Dr. Adams also described a project in Victoria, Australia, in which a mobile app was developed, and used by consumers to scan food items and obtain information for making food choices.

A question directed to Dr. Adams inquired about the availability of information and resources which can be used by businesses for demonstrating the economic benefits of WWPs. In response, Dr. Adams confirmed the availability of a growing body of evidence but cautioned that while scientific evidence was useful in guiding planning, it was also important to take into account the nature and culture of the company in developing programmes. In addition, he underscored the need for committed executive teams within companies which would promote, guide and support the wellness initiatives and listed examples of simple actions that companies could take to promote wellness.

In his comments on the discussion points, Sir Trevor reminded participants of the importance of the three sectors of society – government, private sector, civil society - working together, and encouraging and supporting each other, in taking the necessary actions in confronting the challenges identified.



The Caribbean Private Sector Response to Non Communicable Diseases (NCDs): A Situational Analysis, including Key Components of Effective Private Sector Responses to NCDs: Inward Facing and Outward Facing Initiatives

Dr. Lynda Williams, HCC

The presentation began with a brief review of current trends in NCDs and the risk factors. Dr. Williams emphasized that a multisectoral social partnership between government, the private sector and civil society was essential in the fight against NCDs. She commented that based on the situational analysis which she conducted the Caribbean private sector response to the NCD epidemic could best be characterised thus far as being largely well-intended but uncoordinated, and usually not sustained. The audience was asked to take a both inward and outward look in trying to decide what their companies could do to contribute to NCD prevention and control. They were reminded about the link between NCDs and poverty and the vicious cycle that ensued: NCDs and their risk factors worsen poverty, while poverty contributed to increased rates of NCDs.

Dr. Williams then discussed the Caribbean Private sector survey explaining the rationale, objectives, methods and findings of the survey. She explained that little research was available on the attitudes and practices of the Caribbean private sector with respect to initiatives undertaken for NCDs. The survey was a brief “first look” to assess strengths and weaknesses of the private sector response and to facilitate a framework for action and future health planning/programme development for NCDs. Data collection was through a self-administered confidential, electronic questionnaire of 28 questions; thirty-five surveys were completed with a response rate of 65%. Key survey findings were:

- The majority 28 (80%) of companies offered worksite wellness programmes to their employees but only 13 (37%) had ever conducted a health risk appraisal of their workforce.
- Conventional health insurance, onsite disease screening, health education and occupational safety were the most commonly offered programmes and human resource personnel were largely responsible for both the implementation and evaluation of programmes.
- Lack of resources for programmes, need for cost/benefit analysis and lack of dedicated staff were thought to be the most significant barriers to implementation of worksite wellness programmes.
- When asked about the perceived role of different groups in the prevention and control of NCDs among employees and in the community, over 70% of respondents thought that individuals and their families had the largest role to play.
- Caribbean companies had been involved in health advocacy and philanthropy but few had ever participated in public/ private or private/ civil society partnerships for combating NCDs.

A report of the private sector survey and the framework for action can be found online at www.healthycaribbean.org/meetings-june-2015/june-4/resources/The-Caribbean-Private-Sector-Response-to-NCDs.pdf.

Discussion Session

Dr. Adams enquired as to the number of respondents to the survey that worked in Human Resources (HR) Departments. The question was followed by his comment that based on his experience,, HR personnel usually had a difficult time in promoting and obtaining support for wellness initiatives in the face of competing organizational priorities. He suggested that it was critical that HR managers have a toolkit to help them make the case that these initiatives can deliver return on investment to the company in short and long term in order to obtain Board-level buy-in. He considered the preparation of a toolkit for HR personnel as an important output of current and future engagement with the private sector.

In response to Dr. Adams' comments, the Director of HR, Hilton Barbados Resorts, explained that, in Hilton worldwide, there was a People First Programme which included a wellness component. In her experience, gaining support from CEOs was not difficult. Sometimes, however, there was resistance from employees because of time constraints; many were anxious to leave work at the end of their shifts. She also informed the meeting that approval has been granted for the opening of a fitness facility for Hilton employees in Barbados in the near future.

Dr. Coombs reported that a company in Trinidad and Tobago has started a 'one minute' wellness initiative with the support of the CEO and Board Chairman in which each senior manager is required to give a 1-minute talk on wellness at meetings of executive management; and, a similar activity also takes place at board meetings. This activity is included in the managers' performance appraisals.

The Human Resource Manager at St. Kitts Nevis Anguilla Trading & Development Company (TDC) shared his company's experience and in doing so agreed that it was often difficult to have wellness initiatives, if labelled as such, discussed at the board level in the absence of an institutionalized wellness program operating at all levels in the company. He pointed out that initially HR Department at the TDC adopted the approach of partnering with other organizations, e.g. offshore medical school, the health department, in carrying out screening and educational activities in the company. The HR department also designated a day in September as 'Wellness Day' during which a special activity is usually implemented. Increasingly new activities have been added so that at present, amongst other things, the company supports annual health examinations for at-risk employees.

The Operations Officer, HR, at the General Employees Co-Operative Credit Union Limited (GECCU), St. Vincent and the Grenadines, reported that her department has prepared a draft WWP for the company which will be reviewed by all staff to obtain their inputs and buy-in. In the interim, the credit union has started an on-site exercise programme after working hours for staff and the general membership. The Operations Officer of the GECCU shared with the meeting experiences in resistance from some staff members who were not willing to stay on after work but she hoped that the Day'

upcoming discussion on the draft WWP would help to increase motivation and defuse this resistance. She indicated that the company also conducts a 'Health Appreciation Day' twice yearly on which health screening by the Ministry of Health is offered to employees and members.

A representative of the Guardian Holdings Group mentioned his company's wellness initiatives in Trinidad, Jamaica and Curacao and reported that there were plans to extend programme activities first in Trinidad and then to the rest of the Group.

In his comments, Sir Trevor congratulated Dr. Williams on her excellent work and stated that, as far as he was aware, the study was the first of its kind to be undertaken in the Caribbean, and HCC has plans to expand the survey to include wider representation of Caribbean businesses. He noted that the survey findings revealed that many companies conducted 'Wellness Days'. He reminded participants that the Port of Spain declaration called for the observance of an annual Caribbean Wellness Day and he expressed the hope that as an outcome of this meeting there would be increased involvement of the private sector in the Annual Wellness Day activities.



Inward Facing Initiatives: Promoting and Creating an Enabling Environment For Healthy Behaviours Among Workers – The Massy Group Experience

Ms. Amanda McMillan, Group Manager, Employee Benefits, Massy Group

Ms McMillan gave a brief profile of the company: a diversified regional conglomerate with 60 operating companies in the Caribbean basin and over 11,000 employees. The company's purpose, vision and values were described. She indicated that wellness promotion was an important part of the corporate value of 'love and care'. Key steps in the development of the pilot wellness program were outlined. These included the formation of a Group-wide committee incorporating employees at all levels, who were passionate and energized about health & wellness; the development of a wellness vision which has been shared with all staff and communicated to new staff during their orientation; research/review of medical plans and data from service reports to inform programme content; programme design which was customized to suit the company culture and employee needs and interests; launching and implementation; and, evaluation. Lessons learned from the pilot phase will help in the development of the Health Management Policy to be rolled out in 2016. Ms. McMillan also identified other critical aspects of program development: commitment and support from executive management; research to establish the evidence base for planning; careful budgeting and judicious use of program resources; strategies for increasing employee engagement including the offering of incentives; and, the building of stakeholder partnerships for effective program implementation.

Outward Facing Initiatives: Voluntary Reformulation of Food Products – The reduction of salt in bread. The Purity Bakeries Experience

Mr. Chris Symmonds, Sales and Distribution Manager for Product Development and Marketing, Goddards Group/Purity Bakeries

Mr. Symmonds introduced his presentation with the observation that the thus far two-year journey of salt reduction at the Purity Bakeries started in 2012 when Sir Trevor Hassell threw out a challenge to management to measurably lower the salt content in their major bakery products. The company first considered whether this was something important enough to devote the kind of time, investment and risk, which it would entail. The support of the full management team was attained which was a critical step. A number of factors influenced the company's decision. One was the realization that many adults were consuming significant amounts of sodium daily, sometimes in excess of 40% of recommended daily amounts, and that yeast raised bakery products was the largest single food contributor to daily sodium intake according to the 2010 Institute of Medicine report. The reality of these trends placed a significant burden of responsibility on the company as the biggest bakery in Barbados and one of the largest in the Caribbean region.

In beginning the journey of salt reduction, the company was mindful of the successes in salt reduction in the food industry but was also aware that the same level of success had not been achieved with many bakery goods. It was noted that baked goods represented a great challenge to salt reduction, because of the range of baked goods and the roles that salt/sodium played in the production process. The presenter then outlined the Purity experience in salt reduction in three of their best selling products. These products were chosen because of their relatively high sodium content which would make the trials more challenging but had the potential to be more impactful if successful. After several months of tests, the first milestone breakthrough came in

October 2013 when a five per cent reduction was achieved. By November 2014, the company had achieved its first internal goal of a reduction in overall salt content in a range of main products by twenty per cent. A comparison with three leading North American brands of grain loaf showed that Purity's reformulated Wonder brand of whole wheat bread had lower sodium content than two of the brands; the Purity bread was also lower in total fat, saturated fat and sugar compared to these brands. It was the intention of the company to build on these significant achievements and continue the work in the reformulation of products with plans to extend the range of products to include pastry/sweet products. In relation to other outward facing initiatives, it was pointed out that the company strongly believed it was important to marry nutrition with physical activity and thus has been supporting initiatives for physical activity promotion particularly among young children.



Comments Following The Presentation:

Sir Trevor observed that twenty-five per cent of Caribbean people suffered from hypertension and there were good data that showed that this high prevalence was linked to the population's salt or sodium intake. Therefore the challenge was to encourage people to ingest less salt. He complimented Purity Bakeries on their efforts in this connection which served as a very good example of a potentially important type of initiative in the Caribbean.

A participant inquired whether athletes required additional salt and the response given was that there was no physiological reason for an increased requirement among athletes or very active persons.

Dr. Hospedales complimented Purity Bakeries on taking up the challenge of salt reduction but pointed out that Purity's efforts would be strengthened if other bakery and food manufacturing companies followed the company's example. He added that concerted action by all food companies would eliminate the risk of losing sales to competitors. Dr. Adams suggested that in addition to product reformulation, there were other simple measures that could be taken to reduce salt intake and referred to a recent agreement reached between the Buenos Aires Health department, Argentina, and the hotel and restaurant federation in the province to remove salt shakers from the tables at eateries.

Other participants were asked to recount any experiences they had in product reformulation. The representative from Banks Holdings Limited reported that during the past year the company had been trying to reduce the sugar content of their locally produced non alcohol beverages. He confirmed that these trials were being documented and added that they were also testing products with little or no added sugar, but these products were not generally well received by consumers and he stressed the value of consumer education. The Wibisco delegate spoke about the company's efforts in reducing the sugar content of one of their popular brand of cookies. During the last two years, the company had carried out a number of production trials resulting in a twelve per cent reduction in the sugar content of the cookies. The reformulated products were reintroduced to the market without any special promotion. He admitted that there was an opportunity for salt reduction in their line of crackers but the company has started with the addition of fibre to these products. The Nestle representative indicated that they were given a mandate by Nestle to reduce the salt, sugar and fat content in foods marketed for children. In some products, the sugar content had been reduced by 22% to 50%. He cautioned that taste was an important consideration in the reformulation process in order to retain consumer appeal and reiterated the importance of all food companies joining in the efforts to ensure that companies that reformulated products were not at a competitive disadvantage in doing so.

Outward Facing Initiatives: Corporate Social Responsibility and the NCDs

Stephen Robinson, Vice President, Pensions, Sagicor

Mr Robinson first drew attention to the high and increasing costs of treating NCDs in the Caribbean based on data of health claims processed by Sagicor, which is one of the largest health insurance companies in the Caribbean. He shared that in 2013, customers were charged figures ranging from US\$6 million in the OECS to US\$13 million in Barbados, and Trinidad and Tobago, for the treatment of the NCDs.

The presenter then went on to discuss Sagicor's corporate initiatives internally to address NCDs which included the implementation of a number of wellness programmes within the Sagicor workplace as a key long term HR management strategy. The components included preventative care; promotion of healthy eating and physical activity; and, health screening and education. He observed that collectively there was a lot that Sagicor and other private sector entities could do to improve eating practices. He indicated that Sagicor offered incentives to increase employee participation in the wellness activities such as discounted rates for gym membership; and, reduction in insurance premium rates based on rates of participation in wellness activities and improvements in health status indicators. Examples of outward facing initiatives were also provided that covered sponsorship of a number of community-based activities, and partnerships with HCC on many initiatives across the region.

The Role of Employer Organizations in facilitating Private Sector led NCD Action

Dr. Victor Coombs, Representative, Employers' Consultative Association

The restructuring and downsizing of companies, as a result of the global financial crisis, has had a major impact on the workplace including measures for safeguarding employee health and safety. Dr Coombs pointed out that companies have adopted different approaches for improving levels of productivity and profitability, and cost containment. There was increased recognition of the value of safe and healthy workers in this regard. The presenter alluded to the high cost of employee turnover and rising health care expenditures. Analysis of medical claims data by health risk levels showed that NCD risk factors such as inactivity, alcohol consumption and high blood pressure were among high cost items. Health care costs increased with each additional risk factor. Data was then presented on the substantial health and economic costs of the major NCDs and their risk factors in the Caribbean. Reference was made to successful NCD-related project interventions in Trinidad and Tobago and elsewhere in the world. Participants were encouraged to learn from these experiences and to plan interventions for the prevention and control of the four major NCDs and related risk factors. Dr Coombs concluded by highlighting the leading role of the Employers' Consultative Association in Trinidad and Tobago in improving workers' health.

Outward Facing Initiatives: Engaging with civil society and government to drive NCD Policy – The Barbados National NCD Commission

Dr. Kenneth George, Ministry of Health, Barbados

Dr George began by pointing out the distinction between upstream and downstream determinants in relation to NCDs and encouraged the private sector to consider the whole spectrum of factors. He explained that it was generally believed that focusing efforts upstream resulted in less disease downstream. He continued by discussing the burden of NCDs and their risk factors in Barbados as measured by causes of mortality and morbidity and the prevalence of behavioural and biological risk factors. It was stressed that implementation of any policy or intervention for addressing NCDs required the involvement of various actors - government; civil society; private sector and other non-state actors. In this connection, the presenter discussed the composition of the National NCD Commission in Barbados and the roles and contributions of the various members and partners. He also indicated that a NGO health desk was established in the Barbados Ministry of Health in 2011 to act as a communication channel between the NGO community and government. Due to human resource challenges, the desk has been dormant but efforts were currently being made to reactivate it. He emphasized that the Ministry of Health, along with the NNCD Commission, has tried to promote the 'All- of –Government' approach as evidenced by the appointment of the Inter-Ministerial committee to discuss issues related to NCDs. There were also ongoing efforts aimed at attaining the 'All-of-society' approach and ultimately the 'Health in all policies' approach across all sectors for NCD prevention and control.

Following his presentation, Dr. George was asked to share his views on how the Barbados NCD Commission served as a platform for facilitating private sector engagement with government and civil society in support of the national NCD programme. In response, he explained that the Commission, inaugurated in 2007, had representation from several entities including the private sector and many civil society groups. There were many occasions on which the Commission successfully reached out to the private sector and the Ministry of Health has also engaged the private sector in a number of practical ways. He noted that there was room for strengthening the level of engagement and regarded this meeting as an opportunity to continue the dialogue about future areas of collaboration.

Caribbean Private Sector Response to Non Communicable Diseases (NCDs): A Framework for Action (FFA)

Dr. Lynda Williams, HCC

Dr. Williams in her introduction to the draft Framework for Action (FFA) indicated that it had been produced to assist the Caribbean private business sector to participate fully in the response to the chronic, non-communicable disease (NCD) epidemic. She pointed out that it is grounded on the key determinants of the leading NCDs, promotes a life course approach to NCD prevention and control, and is evidence-based. The overall objective of the FFA as Dr Williams highlighted was to reduce the burden of NCDs and related risk factors within the region through implementation of integrated, sustainable and cost effective policies undertaken in a coordinated manner and based on the multisectoral approach. The FFA focuses on two programmatic areas: workplace wellness; and community involvement. The objectives and lines of action including indicators and activities were outlined for the workplace wellness component. The specific objectives for each line of action for community involvement were also described.



It was emphasized that the private sector's commitment to multisectoral collaboration with the taking of small but significant and meaningful steps together with ongoing monitoring and evaluation were required for the successful implementation of effective health promotion interventions.

Following Dr. Williams' presentation, participants attending the Forum discussed the draft FFA in breakout groups. Their comments are listed in the next section, Special Participants Inputs.



9.3 DISCUSSION SESSION: HCC PRIVATE SECTOR REPORT AND EMERGING GOOD PRACTICES ACROSS THE REGION

Strategies for Engaging the Private Sector

Participants discussed whether NCDs were perceived as a sufficiently significant issue to merit the collective attention of the Caribbean private sector. There was general consensus that the collective business community did not yet feel that NCDs were an urgent and pressing issue warranting sustained investment of resources. The views of participants were solicited regarding strategies for engaging the private sector and possible mechanisms for mobilizing increased private sector involvement in NCD prevention and control. The following comments and suggestions were offered:

- **Create a sound business case for NCDs.** Sensitisation and awareness building on the **impact of NCDs on businesses; the importance of sustained interventions; and the benefits of investing in WWP**, are critically needed.
 - It was observed that the recent HCC private sector survey helped in increasing awareness.
 - HCC should make presentations at companies and also extend the survey to other companies as an awareness raising strategy. The survey could be administered through chambers of commerce or employers' associations.
 - Obtaining relevant data to demonstrate impact sometimes proved difficult so there will be need to work with healthy insurance companies to encourage them to share information e.g. diagnosis on claim forms. Insurance companies should also be encouraged to support preventive services and to provide incentives to clients who reach health goals.
 - Small companies should be targeted as well. They should be given guidance on type of programmes which they can implement given their resource constraints.
 - The notion that NCDs are creating the 'new energy crisis' – a crisis of energy of labour thus the need to reduce the energy costs of labour by promoting wellness and productivity - should be promoted.
 - Another point raised by one of the private sector participants was the need for increased attention to uniformity and consistency in messaging and the development of a unified and collaborative approach by health NGOs in efforts aimed at NCD prevention and control. In response, Sir Trevor said that these issues will be discussed at the meeting to be hosted by HCC on Saturday June 6th. The participants at that meeting will discuss whether there was any merit in Caribbean countries forming National NCD Alliances involving all the disease-specific associations and other partners. Such coalitions he opined would be helpful in developing a more unified approach at country level and help to strengthen the work of HCC at the regional level.
- **More opportunities and platforms needed for sharing and exchanging information** on successful experiences among companies are needed.
 - The role of HCC was mentioned in this regard and the view was expressed that more publicity should be given to its work and the partnerships it has developed. Sir Trevor made the comment that HCC's main remit was to civil society but it has also partnered with some private sector agencies. Under the umbrella of two of

HCC's strategic areas, communication and advocacy, the HCC would be keen to use their online platform to share the successes of private sector agencies in responding to NCDs.

- Dr. Hospedales supported the call for more information sharing as a way of stimulating increased private sector action but advised that increased attention should be given to baseline data collection, and documentation and evaluation of programme activities, to assess impact.
- **Target senior management** of organizations especially if there is a person at that level who has an interest and passion for healthy living because he/she can influence decision-making and help in changing the culture of the organization. It will be more difficult to obtain support if CEOs and the top management team do not share the vision of proposed interventions. Targeting of chief financial officers in addition to CEOs should be considered.
 - One participant noted that many private sector leaders who responded to the survey perceived NCD prevention/wellness as an **individual responsibility** indicating an apparent lack of appreciation of its impact on levels of productivity and the company's bottom line; and thus the broader role and responsibility of the workplace.
 - Dr. Adams suggested that a **management mind-shift** was required and companies needed to be persuaded to think of investments in wellness in the same way as they viewed investments in training and staff development which were beneficial to the individual as well as to the company.
 - While management support is critical, there will also be need to **mobilize employee interest and participation** so information should also be shared on the impact of NCDs on individuals, families and communities and the importance of preventive actions.
- **Identify a focal point** in the company (not necessarily in top management). Managers with responsibility for Occupational Health and Safety (OSH) might be likely candidates because they usually have a clearer understanding of issues and the links with OSH.
- **Lobby the national chambers of commerce** and gain their support for NCD action. In addition, try to obtain the commitment of the private sector through an agreement with the Heads of Government at a regional level.

Public-Private Partnerships

Sir Trevor commented that governments have demonstrated a clear commitment to addressing the NCD issue adopting a 'whole of society' approach. The challenge was the translation of this commitment into action with the involvement of the private sector and civil society. Therefore he asked participants for their opinions on how civil society, government and the private sector could work together to combat the increasing burden of NCDs. National NCD Coordination mechanisms such as National NCD Commissions are ideal vehicles for developing stronger public-private partnerships around NCDs. Civil society and the private sector should advocate for **private sector representation on these national NCD coordinating mechanisms** to facilitate the sharing of perspectives on the NCD problem in policy development and to obtain commitment to a multisectoral response. The observation was made that partnerships between government and the private sector on health-related issues led by the private sector were not always productive because of government's apparent reluctance on occasions to contribute to such programmes. It was suggested that a promising approach might be increased collaboration between the private sector and faith-based organizations whose membership comprise one of

the large target groups for NCD prevention and control. These organizations should be encouraged to develop programmes and seek support from the private sector.

Private Sector Leadership

While HCC has, among others, championed the role of the private business sector in the prevention and control of NCDs in the Caribbean, it was hoped that the private sector would take over the leadership role in this area. The HCC believes that the private sector could play a significant role in all major issues affecting development in region and NCDs was one of those issues. One of the value added outputs of the forum would be the identification of corporation(s) with a demonstrated track record of prioritising health and wellness both within and outside of their workplaces. The leadership within these organisations would be well placed to showcase their initiatives as a model and example to other enterprises throughout the region. Sagicor is such a company which has demonstrated this level of commitment and leadership around the issue of NCDs. In closing this session, Sir Trevor commented on the significant level of support which HCC has received from Sagicor, including the provision of funds to support the HCC secretariat



9.4 BREAKOUT GROUPS TO FEED INTO THE FFA: INWARD FACING INITIATIVES; OUTWARD FACING INITIATIVES

Participants were divided into three (3) groups to discuss the Framework For Action (FFA) in order to solicit feedback which would then be incorporated into the final FFA. The summaries of the group discussions are below:

Group 1

- General comments: The draft FFA produced by Dr Williams was considered to be a very good tool for informing action by the private sector in the prevention and control of NCDs. The monitoring and evaluation component was important. There was a tendency to move from one programme activity to another without allowing sufficient time for the programme's impact to emerge. The establishment of baseline data and continued data collection were crucial and should be used in programme evaluation. The tailoring of the programme to suit employees' needs was an important aspect of programme planning.
- The core elements in programme development should be identified in the FFA:
 - Policy development and communication to all stakeholders.
 - Articulation of vision and mission statements.
 - Defining programme objectives.
 - Planning the intervention.
 - How to develop the plan; key steps in the planning process.
 - Identification of Champions - persons of influence; leaders.
 - Identification of key partners and stakeholders.
 - Encourage participation of the trade unions and allow them to take ownership of the programme.
 - Assignment of individual and collective responsibilities – the latter facilitates accountability to one another.
 - Formation of a committee – should include staff from various levels of the organization.
 - Inclusion of educational activities – use of the intranet to support internal health education.
 - Identification of mechanism(s) for providing regular feedback to staff on progress of activities.
 - Liaising with HR department re provision of incentives, to be linked to participation in activities and health outcomes.
 - Development of stepwise framework outlining simple steps which can be used by varying sizes of companies with varying levels of resources.
 - Include menu of evidence-based interventions.
 - Preparation of the programme budget – identify items to be costed.

Group 2

- Best practice should be presented and recommended but it should be recognized that specific initiatives in particular businesses may need to be adapted to suit local circumstances of the business.
- Wellness at work tends not to be part of formal policies of a business but wellness activities may be conducted.

- Using 'competition' as a stimulus for employee engagement is very effective.
- Guidance on 'how to write a plan' would be useful.
 - Plans should start with collection of baseline data.

Group 3

- In the FFA:
 - Identify or recommend structure for policy dissemination.
 - Promote the offering of incentives as a means of encouraging employee participation in programme activities.
 - Include a social marketing and communication line of action.
 - Give more guidance to the elaboration of monitoring and evaluation procedures.
 - Promote the use of health and safety committees and OSH legal framework for developing integrated response to NCDs.
- Publicize this meeting and seek further support of Heads of Government for NCD action.
- Recommend structure or mechanism for standardization of NCD prevention programme approaches.
- Encourage the use of the HIV model for developing an institutional structure for NCD response.
- Seek leadership from Chambers of Commerce in the Region for promoting programme development and sharing best practice in the private sector.



9.5 FINALIZATION OF DRAFT PRIVATE SECTOR COMMITMENT STATEMENT ON NCDS

Sir Trevor Hassell explained that one of the expected outcomes of the meeting was a private sector statement of support for a “multisectoral approach to prevention and control of NCDs in the Caribbean. He informed that a draft statement of support had been produced prior to the Forum for discussion among delegates and participants and was intended to be an aspirational statement which would serve as a stimulus and a motivator for bringing about change, and was not one with specific requirements or timelines. Sir Trevor then reviewed the main sections of the draft statement. A few comments were made regarding the wording and content of the statement, including that it should be more positive in its affirmations; include information to encourage companies to invest in production of healthier food products. Dr. Hospedales suggested that the statement of support should be worded in such a way that is especially appealing to private sector management.

At the conclusion of the discussion of the draft statement of support it was agreed that HCC would edit the document mindful of the comments and inputs of participants after which a final version will be prepared for consideration and possible signature by the Forum attendees. It was also agreed that copies of the statement of support would be shared with CEOs of private sector businesses, and to employers’ associations of the Caribbean.

Subsequent to this meeting, the statement was finalised in consultation with leadership of selected private sector companies. The final version of the statement of support is found in the annexes. As of September 1, 2015, the Statement was supported by the following organisations:

- General Employees Co-Operative Credit Union Limited (GECCU), St. Vincent & the Grenadines
- Guardian Group of Companies
- Massy Group
- Liat (1974) Ltd



9.6 CLOSING COMMENTS

Sir George Alleyne, Patron, HCC

Sir George applauded the HCC on convening the meeting of private sector representatives. He briefly touched on the role of a civil society organization in relationship with government and the private sector and suggested that there should be some form of institutional framework through which these sectors could work together in carrying forward many of the things discussed in the meeting. He alluded to a point made earlier in the meeting about the engagement of the private sector at the regional level in supporting NCD action and proposed that this could be achieved through the Caribbean Business Coalition which has standing with Caribbean governments. He then went on to explain three reasons why businesses would be interested in NCD action. First, as part of corporate philanthropy, which was not only the giving of money but also included the provision of skills and technology. He expressed the hope that private sector agencies would channel this assistance towards addressing the common risk factors for NCDs. The second reason related to the concept of shared value where companies invest in actions that have social value but which also contributed to their bottom line; and third, for the development of their human capital. Sir George stressed the need to share and publish any Caribbean data that showed the savings from WWPs because there was not much of this type of data available. He ended by suggesting that as an outcome of the meeting it could be said that there was general acceptance of the draft commitment statement which indicated that there was agreement that the private sector had a role to play in NCD prevention and control.



Dr. Cary Adams, Chair, NCDA

In his closing comments, Dr. Adams reminded participants about some of the important issues discussed in the meeting: a number of wellness activities were taking place in the private sector in the region, but more still needed to be done; there was need for better planning, more documentation and increased attention to evaluation to determine impact; a platform for the sharing and exchange of information and experiences was required; and, creating more urgency about NCDs should be a consideration. He pointed out that some essential elements in starting up WWPs were identified: obtaining CEO and board level support; identification of champions; the need to plan and re-plan; obtaining employee buy-in through the provision of incentives; and, the use of insurance data to make the case for investing in WWPs and for program evaluation.

Dr. Adams also shared ideas on some possible private sector initiatives and approaches: increased participation in Caribbean Wellness Day and other special Days to showcase the wellness initiatives by companies and to raise the profile of their businesses; and, secondly, increased collaboration among companies in jointly implementing simple but effective initiatives e.g. One Million Steps, including the organization of competitions with incentives for good performers and the recognition of winners at a regional level. He reminded participants about the pivotal role played by Caribbean governments and individuals in raising global awareness about NCDs which led to the UN summit on NCDs in 2007 and urged them not to undervalue what has been achieved in this region. He called for collective action in improving children's health. Participants were also encouraged to celebrate small accomplishments such as persuading their CEOs to send a letter to HCC stating the company's commitment to help in the fight against NCDs. He ended with two recommendations: efforts should be made to use the influence of Heads of Governments to organize a meeting of top CEOs in the region to discuss the role of the private sector in NCD prevention and control; and secondly, the global NCD framework and targets should be used in discussions within companies and should be viewed as a motivational tool to mobilize interest and action.



10 CONCLUSIONS & RECOMMENDATIONS

As we transition into the post 2015 development era, faced with a multitude of development challenges, most critical of which may be the exploding epidemic of NCDs, strategic partnering with the private sector will be critical to achieving positive scalable impact.

The quotations below are extracted from the 'Series of Dialogues on Means of Implementation of the Post-2015 Development Agenda. Engaging with the Private Sector in the Post-2015 Agenda. Consolidated Report on 2014 Consultations' a report jointly published by the United Nations Industrial Development Organization (UNIDO) and the United Nations Global Compact. They underscore the central role the business sector must play in tackling perhaps one of the most pressing development challenges this region will face in the coming decades.

'Building vibrant and systematic partnerships with the private sector is a vital prerequisite for the successful implementation of a transformative agenda to accelerate poverty reduction and sustainable development in the post- 2015 era'.

- Li Yong, Director General of United Nations Industrial Development Organization (UNIDO)

'The future Sustainable Development Goals framework should go beyond the conceptualization of the MDGs. In addition to eliminating poverty, the new framework will need to address the drivers of change, such as economic growth, job creation, reduced inequality and innovation that makes better and more careful use of natural resources. Industry plays a prominent role in advancing all these drivers.'

'The private sector is not only a source of financing, but is also an actor in development. '

The HCC, in unison with the regional and international public health community has urged governments, civil society and the corporate sector, to recognise the scourge of non communicable diseases as a developmental issue which requires a concerted coordinated 'whole of society' approach in which all three of these actors are fully engaged. Although our core focus is civil society, and in particular health and non-health NGOs, we recognise the need to mobilise partnerships between ourselves, the private sector and government. Our work on National NCD Commissions (NNCDC meeting held in June 2015 and the publication of two reports: 'A Civil Society Report on National NCD Commissions in the Caribbean: Towards a More Effective Multisectoral Response to NCDs. Part I'; and 'A Civil Society Report. A Framework for the Establishment And Strengthening of National NCD Commissions: Towards a More Effective Multisectoral Response to NCDs. Part II') has contributed significantly to the dialogue of government-led multisectorality. Through the HCC report: 'The Caribbean Private Sector Response to Non Communicable Diseases: A Situational Analysis and Framework or Action' and this Forum, we have begun the process of engaging the Caribbean private sector in this important conversation. Globally, the HCC is contributing to this important issue through representation on 'The WHO GCM/NCD Working Group on how to realize governments' commitments to engage with the private sector for the prevention and control of NCDs'.

The Forum successfully highlighted many achievements and challenges in attaining greater private sector engagement in the response to NCDs. There appeared to be wide consensus of the need for more action by the three sectors of society working collaboratively and contributing

to the achievement of the NCD global targets and the Sustainable Development goals. The decisively important role of the private sector was stressed. It was suggested that private sector entities in the region are well positioned to play a leadership role in accelerating progress in NCD prevention and control. Participants were keen to share their perspectives on these issues and to learn about private sector initiatives in the areas of product reformulation, workplace wellness and support to community-based interventions. It was recognized however that while these efforts were commendable there was considerable further potential for extending the scope and range of activity. In the areas of workplace wellness and community support, a call was made for increased attention to the documentation of planning and implementation processes, and programme evaluation. The draft FFA was considered a useful resource for improving the quality of interventions and suggestions were made for strengthening the draft document.

Obtaining buy-in at executive management level was identified as a major challenge in initiating wellness initiatives. Participants repeatedly stressed the need for improved strategic communication with CEOs and management teams to inform them about the effects and costs of NCDs, the role of the private sector in addressing NCDs, and the benefits in both the short and long term to businesses of investing in workplace wellness initiatives. There was collective consensus that tailored, user-friendly, tools are needed to assist senior personnel in making the business case for action both to organisational leadership and to employees. In promoting interest in investment; cross-organisational sharing of information and experiences was identified as a major strategy to build sector-wide awareness and ultimately buy-in.

Key **Recommendations** emerging from the Forum are listed below:

- Develop **resources to build private sector knowledge and awareness of key NCD issues** including the burden of disease, and the existing **policy and programming** environment as well as best practice business sector responses to NCD policy and programming both within the workplace and within the communities they operate in and serve.
- Develop an evidence-based **business case for NCD action**. Encourage research to determine the cost savings of WWP and more broadly measure the costs savings of taking action around NCDs from a corporate perspective whether this be in the form of WWP or outward facing initiatives related to a companies products and services or supporting local communities.
- Develop **tools** to support implementation of **workplace wellness programmes** (such as the Framework for Action discussed in this report) recognising that programmes may range from very simple low cost interventions to larger more comprehensive programmes requiring more significant investment of resources.
- Develop **sector-specific tools** to guide private sector in **leveraging core competencies** to support NCD prevention and control.
- **Target Senior Management** when seeking to gain buy-in for an NCD response.
 - Heads of Government should seek to engage with top CEOs in the region in partnership with an established business coalition or alliance (*see below).
- Engage **Chambers of Commerce** and **Employers Confederations** as a vehicle for reaching the collective business community.
- Seek to establish a **Caribbean Business Coalition** or **Alliance** of the regional private sector leadership who have a demonstrated commitment to address NCDs in their

workplace and communities. The *'Caribbean Private Business Sector: Statement Of Support On Prevention And Control Of NCDs'* provides a platform from which identify and mobilise committed business leaders around the concept of forming a regional alliance for business in support of NCDs.

- **Document** past, current and planned NCD focussed **private sector-led initiatives** both within workplaces and within communities. The HCC Private Sector Situational Analysis discussed in this Forum report is an excellent starting point and can be built upon.
- Create a **platform to showcase** workplace wellness programmes and outward facing initiatives such as the reformulation of products, philanthropic efforts, etc.
- Promote **private sector representation in national NCD multisectoral mechanisms**.
- Strengthen the **capacity for public private partnerships**
 - **Build the capacity** of the private sector to more effectively collaborate with civil society and the governments
 - **Build the capacity** of civil society to more effectively collaborate with the private sector
 - **Build the capacity** of the public sector to more effectively collaborate with the private sector
- Develop **conflict of interest policies** to provide a framework for partnering with the private sector.



11 NEXT STEPS

The HCC commits to the following next steps:

- Finalise and disseminate the report: *'The Caribbean Private Sector Response to Non Communicable Diseases: A Situational Analysis and Framework of Action'*.
- Seek further regional business sector support for NCD action through endorsement of the *'Caribbean Private Business Sector: Statement Of Support On Prevention And Control Of NCDs'*, or through a more general statement of support that recognises that the private sector has a role to play in the prevention and control of NCDs in the Caribbean.
- Explore the possible establishment of an informal Caribbean regional alliance of engaged private sector organisations committed to a strengthened business sector response to NCDs.
- Explore documentation of the private sector led workplace wellness programmes and outward facing initiatives aimed at addressing NCDs.
- Hold the private sector, where applicable, accountable for actions which directly and indirectly hinder efforts aimed at NCD prevention and control.
- Where possible, promote and support the strengthening of civil society, private sector partnerships in support of strengthened workplace responses to NCDs.
- Promote private sector representation on National NCD Commissions or equivalents.
- Continue to support national, regional and international advocacy around greater engagement of the private sector in the response to NCDs such as *'The WHO GCM/NCD Working Group on how to realize governments' commitments to engage with the private sector for the prevention and control of NCDs'* of which HCC President is a technical advisor/ working group member.



12 ANNEXES

12.1 LIST OF PARTICIPANTS

TITLE	FIRST NAME	SURNAME	POSITION	NAME OF ORGANIZATION
Mr.	Cary	Adams	CEO/ Chair	The Union for International Cancer Control/ NCD Alliance
Mr.	Nigel	Adams	Executive Manager	Guardian General Insurance Limited
Dr.	Magna	Aidoo	Health Advisor	Commonwealth Secretariat
Sir	George	Alleyne	Director Emeritus/ Patron	PAHO/Healthy Caribbean Coalition
Ms.	Karen	Alleyne	Senior Marketing Manager	Massy (Barbados) Ltd
Mr.	Neville	Alleyne	Health and Safety Advisor	The SOL Group
Mr.	Henry	Anderson	Director	Citrus Products of Belize Ltd
Ms.	Glorie	Babooram	Vice President, Group Insurance Sales	Guardian Life of the Caribbean Limited
Mr.	Michel	Beneventi	Country Manager	Nestlé Trinidad and Tobago Ltd and Nestlé Caribbean Inc.
Mr.	Richard	Bourne	Director	Collins Ltd.
Hon.	John	Boyce	Minister of Health	Ministry of Health, Barbados
Ms.	Teshorne	Caine	Administrative Manager	Interactive Media Ltd.
Mrs.	Deborah	Chen	Executive Director	Heart Foundation of Jamaica/Jamaica Coalition for Tobacco Control
Dr.	Victor	Coombs	Director/Chair	Healthy Caribbean Coalition/NCD Commission Partners Forum TT
Mrs.	Cheryl	Corbin	HR Manager	Hilton Barbados
Mr.	Richard	Cozier	CEO/Managing Director	Banks Holdings Ltd
Mr.	Jean-Luc	Cumberbatch	HCC IT	HCC
Ms.	Jose	Cumberbatch	HCC Volunteer	HCC
Mr.	Robin	Cumberbatch	Division Manager	Nestlé Trinidad and Tobago Ltd and Nestlé Caribbean Inc.
Mrs.	Denise	d'Abadie	Consumer Relations and Public Affairs Manager	Nestlé Trinidad and Tobago Ltd and Nestlé Caribbean Inc.
Mr.	Frere	Delmas	Country Manager	Massy (Barbados) Ltd

TITLE	FIRST NAME	SURNAME	POSITION	NAME OF ORGANIZATION
Mr.	Carl	Farley	Group Operations Manager	The SOL Group
Mr.	Robert	Fevrier	Board of Directors, Member	The St. Lucia Employers Federation
Mr.	David	Forde	Rooms Manager	Courtyard by Marriott Bridgetown
Dr.	Kenneth	George	Senior Medical Officer of Health, NCDs	Barbados Ministry of Health
Mr.	Ranuca	Hamlet	Manager, Internal Communications,	Guardian Holdings Limited
Sir	Trevor	Hassell	President, Chair	Healthy Caribbean Coalition/NCD Commission, Barbados
Ms.	Joan	Henry	Industrial Nurse	Dominica Coconut Products Ltd. - Colgate Palmolive
Mr.	Shawn	Hercules	HCC Youth4NCDs Lead	Healthy Caribbean Coalition
Mr.	Andy	Hope	General Manager	Purity Bakeries
Mrs.	Valerie	Hope	Head of Marketing and Corporate Communication	Nation Publishing Co. Ltd
Dr.	James	Hospedales	Executive Director	Caribbean Public Health Agency (CARPHA)
Mrs.	Maisha	Hutton	Executive Director	Healthy Caribbean Coalition
Ms.	Sonya	John	Executive Manager Airports and Customer Service	Liat (1974) Ltd.
Mr.	Dennis	Knight	Human Resource Manager	The St Kitts Nevis Anguilla Trading and Development Company Limited
Mr.	Michael	Marshall	Director	Ansa McAl (Barbados) Ltd/Bryden Stokes Ltd.
Ms.	Amanda	McMillan	Group Employee Benefits Manager	The Massy Group
Mrs.	Lisa	Moore	Snr Mgr, Human Capital	Price Waterhouse Coopers
Ms.	Cornelia	Moses	Operations Officer/HR	GECCU/GENERAL EMPLOYEES CO-OPERATIVE CREDIT UNION LIMITED
Dr.	Mortimer	Moxey	Medical Advisor/ Director	Bahamas Diabetes Association/ Healthy Caribbean Coalition

TITLE	FIRST NAME	SURNAME	POSITION	NAME OF ORGANIZATION
Mr.	Keston	Nancoo	Group Vice President, Human Resources	Guardian Holdings Limited
Mr.	David	Neilands	NCD Commission Member	Barbados NCD Commission
Mr.	Adrian	Padmore	General Manager	Wibisco
Ms.	Rachele	Proverbs	HCC Volunteer	HCC
Mr.	Kerrigan	Roach	Head of Human Resources	Digicel (Barbados)
Mr.	Stephen	Robinson	VP Pensions	Sagicor Life Inc.
Ms.	Kendra	Santos	HR Consultant for Retail, Business and International Banking	CIBC First Caribbean
Dr.	Karen	Sealey	Independent International Health Consultant, Former PAHO Senior Adviser	INDEPENDENT
Ms.	Tracey	Shuffler	President	Barbados Chamber of Commerce and Industry
Mr.	Clyde	Sobers	Assistant Vice President – Group Insurance	Sagicor Life Inc.
Mr.	Chris	Symmonds	Sales & Distribution Manager	Purity Bakeries
Mr.	Ravi	Tewari	Group Chief Executive Officer	Guardian Holdings Limited
Mrs.	Laura	Tucker-Longsworth	President, Director	Belize Cancer Society/ Healthy Caribbean Coalition
Dr.	Lynda	Williams	NCDs Private Sector Specialist Consultant	Healthy Caribbean Coalition (HCC)

BEAN COALITION

combating chronic disease
established 2008

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12.2 FORUM PROGRAMME

FORUM PROGRAMME JUNE 4, 2015 COURTYARD MARRIOTT, BARBADOS		
TIME	ACTIVITY	SPEAKER
8.00 am – 8.30 am	REGISTRATION	
8.30 am – 8.40 am	Opening Welcome, Objectives & Introductions	Sir Trevor Hassell <i>President, HCC</i>
8.40 am – 8.45 am	Opening Remarks from the Commonwealth Secretariat	Dr. Magna Aidoo <i>Health Advisor, COMSEC</i>
8.45 am – 8.50 am	Greetings from CARPHA	Dr. James Hospedales <i>Executive Director, CARPHA</i>
8.50 am – 9.00 am	Opening Remarks	Hon. John Boyce <i>Minister of Health, MOH Barbados</i>
Session I	Chairman	Sir Trevor Hassell
9.00 am – 9.20 am	Governments Responding to the Epidemic of NCDs	Dr. James Hospedales
9.20 am – 9.40am	Why NCDs Matter to the Private Sector	Dr. Cary Adams <i>Chair, NCD Alliance</i>
9.40 am – 10.30 am	Discussion	Moderator
10.30 am – 10.45am	HEALTH BREAK	
Session II	Chairman	Dr. Victor Coombs <i>Director, HCC</i>
10.45 am – 11.05 am	Caribbean Private Sector Response to Non Communicable Diseases (NCDs): A Situational Analysis, including Key Components of Effective Private Sector Responses to NCDs: Inward Facing and Outward Facing Initiatives	Dr. Lynda Williams <i>HCC</i>
11.05 am – 11.30 am	Discussion	Dr. Victor Coombs
11.30 am – 12.00 pm	Inward Facing Initiatives: Promoting and Creating an Enabling Environment For Healthy Behaviours Among Workers – The Massy Group Experience	Ms. Amanda McMillan <i>Massy Group</i>
12.00 pm – 12.30 pm	Outward Facing Initiatives: Voluntary Reformulation of Food Products – The reduction of salt in bread. The Purity Bakeries Experience	Mr. Chris Symmonds <i>Purity Bakeries</i>
12.30 pm – 1.30 pm	LUNCH	

Session III	Chairman	Laura Tucker-Longsworth <i>HCC</i>
1.30 pm – 1.40 pm	Outward Facing Initiatives: Corporate Social Responsibility and the NCDs	Mr. Stephen Robinson <i>VP, Pensions, Sagicor</i>
1.40 pm – 1.50 pm	The role of Employers Organisations in facilitating Private sector led NCD Action	Dr. Victor Coombs <i>Employers' Consultative Association</i>
1.50 pm – 2.00 pm	Outward Facing Initiatives: Engaging with civil society and government to drive NCD Policy – The Barbados National NCD Commission	Dr. Kenneth George <i>MOH Barbados</i>
2.00 pm – 3.00 pm	Discussion Session: HCC Private Sector Report and emerging good practices across the Region	Dr. James Hospedales
3.00pm – 3.15pm	LIQUID BREAK	
Session IV	Chairman	Debbie Chen <i>Executive Director, HFJ</i>
3.15 pm – 3.45pm	Caribbean Private Sector Response to Non Communicable Diseases (NCDs): A Framework For Action (FFA)	Dr. Lynda Williams
3.45 pm – 4.30 pm	Breakout Groups to feed into the FFA Inward Facing Initiatives Outward Facing Initiatives	Moderators: Dr. Lynda Williams & Dr. James Hospedales
4.30 pm – 5.00 pm	Finalisation of Draft Private Sector Commitment Statement on NCDs	Sir Trevor Hassell Dr. Lynda Williams
5.00 pm – 5.20 pm	Closing Comments	Dr. Cary Adams
5.20 pm – 5.30 pm	Evaluation & Wrap up	Mrs. Maisha Hutton <i>Executive Director, HCC</i>
5.30pm	WORKSHOP CLOSES	

12.3 FULL TEXT ACCOUNTS OF OPENING REMARKS

Opening Welcome, Objectives and Introductions

Sir Trevor Hassell, President, Healthy Caribbean Coalition (HCC)

Good morning everyone. Finally we have made it. Is it not quite remarkable that we have assembled this gathering of representatives of Caribbean private sector businesses to discuss health and wellness and prevention and control of NCDs in the Caribbean? I am Trevor Hassell, and I am President of the Healthy Caribbean Coalition (HCC), and I would like on behalf of the directors of HCC to welcome all of you to this meeting of Caribbean private sector businesses as we seek to measure, to engage and to promote the business sector response to the chronic diseases in the Caribbean. I would like to extend a special welcome to the Honourable John Boyce, Minister of Health, Barbados, who very kindly agreed at very short notice to be with us despite conflicting commitments. Your presence, Minister, reflects well your demonstrated leadership in chronic disease prevention and control. I would also like to extend a special welcome to Dr. Cary Adams, Chair of the NCD Alliance (NCDA), and to Dr. Magna Aidoo of the Commonwealth Secretariat, both of whom have arrived from the United Kingdom for this meeting, and to Dr James Hospedales, Executive Director of the Caribbean Public Health Agency (CARPHA), visiting from nearer home, Trinidad and Tobago.. In welcoming everyone, I wish to express appreciation of the tremendous response of the private sector to our invitation to attend this meeting. Let me share with you a very brief profile of delegates – we have diverse conglomerates: manufacturing; finance; banking; hotel; media; retail; telecommunications, Chambers of Commerce, and the airlines industry. Delegates present today represent some of the major private sector businesses throughout the Caribbean and from all CARICOM countries excluding Haiti and Guyana.

Today's meeting has been convened by the HCC because of our firmly held position that the Caribbean private business sector, is an important sector and has a vital role to play in the development of Caribbean people and in tackling any conditions or any set of circumstances that frustrate the development of Caribbean people. The development challenge today is that in virtually every Caribbean country lifestyle triggered chronic diseases (heart disease and stroke, diabetes, cancers and lung conditions) account for more than 60% of health budgets. Seven out of every ten of us in the Caribbean die from one or more of these chronic diseases. A quarter of adults in the Caribbean have a chronic disease. These lifestyle illnesses result in tremendous financial burden to individuals, families, businesses, and countries, with reduced quality of life, poor productivity and absenteeism in the workplace.

And so what is the primary objective of today's meeting? Essentially, it is to provide an opportunity to discuss how the private sector may implement and strengthen workplace wellness programmes; and, equally importantly, some would say more importantly, to discuss and consider how the private sector may more effectively interact with government and civil society in the prevention and control of NCDs.

The outcomes of our discussions today will include presentations and discussion of a pre-conference survey of wellness programmes, and will provide a snapshot of the role that some private sector businesses in the Region are playing in NCD prevention and control. We will share and exchange knowledge and experience about the role of the private sector in the multisectoral

response to NCDs, and we will review and aim for agreement on a Statement of Support from the private sector on chronic disease prevention and control in the Caribbean. This statement of support will be used as a catalyst and stimulus, and possibly, a driver of greater and more effective engagement of the private sector in the Caribbean in all aspects of the response to NCDs.

Once again, I extend a big welcome to everyone and look forward to much interesting discussion as we seek to chart a way forward together in addressing the tremendous health and economic burden of the chronic diseases, which, as was said by a former Caribbean Prime Minister, has the potential to reverse all the gains that we have achieved since independence unless appropriate action is taken by all of us. It is with those deliberately few opening remarks and welcoming comments, that I now move on the agenda and take great pleasure in inviting Dr. Magna Aidoo from the Commonwealth Secretariat to provide her opening remarks. I will dispense with detailed introductions since detailed biographies of the faculty are included in your conference packs, but suffice it to say, Dr. Aidoo is the Health Advisor at the Commonwealth Secretariat and the lead person on NCDs. She is a significant supporter of the Caribbean's 'whole of society' approach to the prevention and control of NCDs.

Opening Remarks from the Commonwealth Secretariat

Dr. Magna Aidoo, Health Advisor, COMSEC

Thank You. Sir Trevor, ladies and gentlemen, I may just repeat bits of what has already been said but I think it just goes to reiterate the enormity of the reasons why we are here. Honourable Minister Boyce, colleagues from the HCC, and distinguished ladies and gentlemen, good morning. I would like to welcome you all. First, I would like to extend greetings from the Secretary-General of the Commonwealth Secretariat (COMSEC), Mr. Kamallesh Sharma and my colleagues. It really is a distinct pleasure to be here to consider with you so an important a topic as non-communicable diseases and their impact within the Caribbean region.

I must express our appreciation to the Honourable Minister of Health, Dr. John Boyce, for taking time to officiate this event, and also to the Government of Barbados for hosting this event. Special thanks are due to Sir Trevor Hassell and Mrs. Maisha Hutton, of the HCC, for organizing this event, and for bringing such a significant population of professional groups together to share among ourselves, and to debate the whole issue of tackling NCDs within the region as well as those who can influence public health, lifestyle, diet, the working environment and so on within the region.

We are the Commonwealth, a unique institution, which embraces rich, low and middle-income countries. The Commonwealth consists of 53 member countries, and is home to 2 billion people, which is about a third of the world's population. Together, we make a huge family of diverse cultures, who nevertheless share a history and language, although we have a couple who are bilingual.

The overarching role of the COMSEC is expressed in our mission statement. This includes a vision that we should be a force for peace, for democracy, for equality and respect, and for good governance. We try to act as a catalyst for global consensus, and we advocate sustainable development and the eradication of poverty.

Starting in 2013, COMSEC embarked on a new strategic plan, from 2013 to 2017. The Health Section has been directed to focus on assisting member countries in developing national health policy frameworks to achieve universal health coverage and to tackle the growing burden of non-communicable diseases.

As for this event, our focus today is on the Caribbean region and the prevalence within them of non-communicable diseases as been mentioned already by Sir Trevor. NCDs are a major concern today, globally as well as within the Commonwealth and in highly developed economies as well as developing ones. NCDs are health conditions not usually caused by infectious agents, such as bacteria, parasites and microbes. NCDs are of long duration and often slow progression. The main groups of NCDs are: cardiovascular disease including hypertension and stroke; cancers, of various kinds; diabetes and its complications of retinal and renal failure, etc.; and, chronic respiratory diseases. In some countries, these definitions include mental health, and sometimes violence is also included. Taken together, NCDs are the leading cause of global deaths today. They are predicted to rise within the next ten years to overtake the communicable diseases as cause of premature deaths. In some ways, that is a measure of our success in combating infectious diseases and other causes of mortality amongst the young, People are living longer, and a lot of NCD prevalence is among older people, but the causes of many NCDs are rooted in earlier years.

We know that NCDs can be prevented, managed and treated with success, if diagnosed early. In this context, the Global Sustainable Report on NCDs, published in 2011 by the World Health Organization, makes interesting reading. It makes one wonder or question: are people dying earlier of NCDs in low- and middle- income countries because of the risk factors or are they higher in those countries than in any other – or is it because of a lack of resources for early detection?

Many member countries of the Commonwealth have health care systems which are already under strain from other burdens, struggling to meet existing needs with tight budgets, and often losing trained medical personnel who may migrate for all sorts of reasons. It may be that health spending priorities have got to change. And in some ways it may not always be about attracting funding, it might be about doing things differently. But in order for health systems to get to that point it requires all other sectors to play their part as has already been said and I am sure by the end of the two days, in particular today, we will get to some way of bringing others on board to recognize their responsibilities. It is my belief that the solution to some of these problems may also be about lack of recognition of the importance, lack of ability for wanting to change some of the cultural practices that we have developed over the years.

So joining up activities of different institutions in society to tackle NCDs makes a huge sense. We can improve engagement around these issues, between State-run public sector and private sector establishments, locally and regionally, active business community, the academic sector, and civil society together. This is what is meant by the phrase ‘multisectoral approach’ or ‘private and public partnership’ — because we believe each and every sector has a role to play in improving the health of the population.

A multisectoral approach makes especially good sense for tackling NCDs because research is telling us that the root cause of many of these ills lies in human behaviour, such as trends towards eating more energy-dense food, increased tobacco and alcohol use, and reduced physical

activity. Other causes are environmental. And on that note, I just wish us all a pleasant day and hope that by the end of today, we will be able to bring people on board to tackle non-communicable diseases in the region of the Caribbean. Thank You.

Greetings from the Caribbean Public Health Agency (CARPHA)

Dr. James Hospedales, Executive Director, CARPHA

Thank you very much Sir Trevor, good morning ladies and gentlemen, Minister Boyce. It is a real pleasure to be here in Barbados on occasion of the meeting with HCC and some of the Caribbean private sector. That having been said, I would not say much more now. We will be focusing on it during the day, how important the role and participation of the private sector, excluding the tobacco industry, is in the solution to this problem that we face, that is costing a lot in health terms, in dollar terms, in development terms and affecting future generations as more and more problems emerge among children and adolescents. But we will be going into all of that in great depth.

It is my pleasure to bring you greetings from CARPHA which is your public health agency, headquartered in Trinidad and Tobago, in Federation Park, with offices in Jamaica and St. Lucia. CARPHA is a merger of the five former regional health institutions: CAREC which does a lot with the laboratory network and infectious diseases and so on; the Food and Nutrition Institute which deals with healthy diets and food security; the Environmental Health Institute, which is in St. Lucia, has become our Environmental Health and Sustainable Development shop so they do, besides water, health and sanitation etc., quite a lot on climate change and coastal zone management. Climate change has a connection with what we are talking about today and there is money to be made from what we are talking about today, giving our private sector audience hints of what is to come. Then we also have an office in Jamaica, Pharmaceutical Quality Control. So these five parts make up the Caribbean integrated single public health agency which has been operational since 2013. I have the honour and privilege to be its first director. There will be many more directors but there will only be one first director. I am from Trinidad and Tobago originally and look forward to the work of today in advancing this issue of how to get an all-of-society response particularly the involvement of the private sector.

Opening Remarks

Hon. John Boyce, Minister of Health, Barbados

Thank you very much, Sir Trevor, Dr. Magna Aidoo, Dr. Cary Adams, Dr. James Hospedales, important private sector partners in this journey – I want to start by recognizing and congratulating the HCC and all of the forerunners to the HCC. As Sir Trevor quite rightly stated, governments of the Caribbean, in the 2007 Port of Spain declaration, recognised that NCDs was one of the greatest challenges to development of the region. He referred to the political statement by our late colleague David Thompson who indicated that it actually threatened to reverse the gains of the Caribbean and in fact, the world.

I want to specially welcome the private sector partners to this forum. And I say so with thanks and appreciation for the work that has been done so far in Barbados and the Caribbean. But pardon me if I stick to Barbados. In Barbados, by the private sector in cooperating with government through our Health Promotion Unit at the Ministry of Health and of course with the

HEALTHY CARIBBEAN COALITION

"A society alliance for combating chronic diseases"

Established 2008

The Coalition has as its primary
corner of civil society in
private enterprise,
partners, to develop and
of NCDs through
lifestyles, the better
supportive

Address the common
excessive alcohol
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NCD Commission, the government body which is in the business of promoting the management of the NCDs. Of course Sir Trevor is much too modest a person to indicate that he heads the Commission in Barbados and leads that work along with his work at HCC.

The global burden of NCDs is spiraling at an alarming rate. I think we have heard and read enough about the causes and opportunities to treat and deal with NCDs that we need, in the words that I have heard already this morning to 'talk the talk' but more importantly, we need to 'walk the walk'. In this regard, I can assure you that government will continue to play its part. About two years ago, we introduced the no smoking ban in public spaces, and I do believe that the no smoking ban may have to be relooked and probably tweaked a bit to extend beyond just outside of a door. I know I am certainly affected when someone uses the law to step outside to smoke a cigarette while I am sitting inside because there are still vents that allow tobacco to infiltrate the public space. So I believe that may have to be looked at.

In a recent visit to Barbados, the UN interagency committee commended the work of the Ministry of Health, private sector and other organizations in Barbados in tackling and promoting the treatment of NCDs, however, they indicated that we still have a way to go in respect especially to forging a regime that will make a difference. Certainly I believe that government has opportunity to lead in this regard, and I have had, and I know that the private sector has had, discussions with the Minister of Finance and the Ministry of Finance as they are preparing the 2015 budget to be delivered on June 15th. It is time that Barbados looks at taxation maybe and legislation to tackle even more strenuously the question of the causes of NCDs. We know that tobacco is a no-no; we know that the abuse of alcohol is a no-no; we know that lack of exercise also contributes to the NCDs that are being referred to. It would be good timing in my view for the government to help the people of Barbados, sometimes you have to urge people in the direction that is best for them, by making sure that we recognize the pain or the harm that we cause when we abuse these substances.

But of course the bill eventually lands at our feet, more often than not at the Queen Elizabeth Hospital where Barbadians are entitled to and obtain health care but that bill continues to spiral out of control as we try to contain and try to treat the effects of NCDs. The point must be made therefore that if we can prevent the NCDs from occurring in the first place, we would have done a lot of good work in this battle. In this regard, the Ministry of Health is leading the charge of looking at our student population in a very serious way. We believe that the battle against NCDs, not that I want to leave us out of this fight or give the impression that there is no hope for us the older members of the population, but I do believe that the battle against the NCDs is an investment and the team at the Ministry of Health often refers to it as something that we will reap the benefits of maybe twenty years down the road. So if we can get our children to eat healthy, if we can get parents to ensure that diets provided to children are healthy diets, if we can get our manufacturers and our importers to import healthy diets, we would have gone a long way in starting to shape the patterns which we would like to see evolve with the treatment and fight against NCDs.

Of course we say alcohol, we say tobacco but we need also to reach deep into the composition of many products that come to our shores and that we eat every day. We need to look at trans fat. There are some countries in the world that have already gone to the stage of indicating what quality of foods will be imported into their countries and what quality of foods will be available on our supermarket shelves in this regard. This is a situation which I can easily describe as 'out of hand', and I think most of you will agree with me, in terms of our offerings in our supermarkets

etc. And it is something we must address. I want to assure the private sector, however, we have no intention in addressing this in a one sided manner or a top heavy manner. We want to work with you so we can share with you the messages, we can share with you the benefits that we are seeking to achieve, so you can so shape the role of your organization and shape your approach to this new paradigm and help us on that journey to make sure that Barbados continues to be a healthy country. We must not disregard efforts that have already been made. Certainly, the alcohol industry has moved to a position where it wants to cooperate with the government, Ministry of Health and civil society organizations like the HCC to shape a policy that helps to promote responsible drinking. How well that message has gone down with Barbadians is for your own judgement. We have anecdotally felt that binge drinking in Barbados has become a fad and it is very dangerous where many young people and adults engage in binge drinking. It is a very harmful pastime which needs to be nipped in the bud. The alcohol industry is willing to work with the Ministry of Health and the private sector to promote a responsible approach to use of alcohol. They do not think they will lose money and believe it will help to ensure a healthy population.

I want to recognize the work of other private sector organizations in Barbados, the Chamber of Commerce, as the body corporate, has led the way in large measure in organizing the private sector responses to wellness. And almost weekly I am invited to open or participate in activities that promote healthy lifestyles or promote exercise as part of our daily regimes. Therefore I want to use this occasion to congratulate the private sector. I do not want to call any names because I may leave out some very important players. But Sir Trevor listed many of you that are here today, I noticed that he skipped right over government as he reviewed the list, but I think this was an innocent error. I want to recognize the presence of our deputy permanent secretary in health and Dr. George who is to make a presentation.

I really want to encourage you as you go about your work today, and over the next couple of days, to think on some of things we have said, and look at the positive side of the entire objective of this exercise. Be assured that as a government, and certainly me, as a Minister of Health, have no intention of punishing anyone. But I want to start to engage the private sector directly in efforts to contain this problem of NCDs. I want to encourage the private sector and our NGOs to engage our youth more because I believe that is the opportunity that will most benefit all of us and will reduce the burden of health care costs which so strangles our nation, and so strangles not only Barbados, but strangles the entire world. You can read wherever you care to browse; you can read about countries that are battling NCDs and the costs of treatment of NCDs. In closing I want again to urge you to take these discussions very seriously, treat it as an opportunity to help lead policy in Barbados and also be assured of your government's total support for any developments, any outcomes from these meetings that will help in this important battle against NCDs. I want to wish you God's blessing and a wonderful session.



12.4 CARIBBEAN PRIVATE BUSINESS SECTOR: STATEMENT OF SUPPORT ON PREVENTION AND CONTROL OF NCDs

Caribbean Private Business Sector

STATEMENT OF SUPPORT ON PREVENTION AND CONTROL OF NCDs

We, the Caribbean Private Business Sector, represented at the Caribbean Civil Society led conference: *'Measuring and Engaging the Business Sector Response to NCDs: The Caribbean Private Sector Forum'* held at the Courtyard Marriott Hotel in Bridgetown Barbados on June 4, 2015, now indicate our support to address the Caribbean epidemic of NCDs through actions in our workplaces, in our products and services and within the communities we serve.

1. WE ACKNOWLEDGE/ RECOGNISE THE FOLLOWING:

- a. Non-communicable diseases (NCDs), including diabetes, hypertension, heart diseases, stroke, cancer, mental illness and chronic lung disease, are occurring in epidemic proportions in all countries of the Caribbean and are major causes of premature death, suffering, disability and excessive financial burden;
- b. There are four key behavioural risk factors: physical inactivity, unhealthy diets, tobacco use and harmful use of alcohol, that increase the risk of NCDs and that reduction of these risk factors, early detection of disease and provision of effective and affordable treatment, are required to prevent and control NCDs. To make meaningful reduction in NCDs it is necessary to take action on the broader factors which influence people's health behaviour: the conditions in which they are born, grow, live, **work** and age, and the influence of society – the underlying social, economic, political, environmental and cultural factors broadly known as social determinants;
- c. The onset of NCDs can be delayed by promotion of appropriate healthy choices and that these choices should be made in environments that promote physical activity, promote choices of foods low in salt, refined sugars and unhealthy fats; reduce consumption of and exposure to tobacco and limit intake of alcohol;
- d. NCDs are a threat to the economies of the Caribbean and that through premature loss of the productive work force and burgeoning healthcare costs, they can cause a decline or reversal of the region's developmental and economic gains;
- e. A "whole of government and whole of civil society response" is needed to address the NCD risk factors and that this can only occur through engagement and effective collaboration between government, the private business sector and civil society;
- f. Through collaborative efforts with government and civil society, the private sector can play a key role in both national and regional efforts to combat NCDs through ensuring the wellness of employees; health advocacy, networking, coalition building, service delivery programmes, mobilization of resources, empowerment of local communities and special groups and provision of technical assistance and expertise.

2. WE THEREFORE DECLARE OUR COMMITMENT TO ASSIST IN THE RESPONSE TO NCDs AND WE WILL AS FEASIBLE WITHIN OUR RESPECTIVE COMPANIES:

1. Adopt a corporate wellness policy that aims to implement or increase sustainable worksite wellness programs offered to our employees by promoting healthy lifestyles; creating supportive environments for physical activity and healthy nutrition; providing continuing health education, promoting disease screening, and much more;
2. Advocate for and participate in, partnerships between governments, the private business sector and civil society that aim to develop and implement multi-sectorial strategies for the prevention and management of NCDs at the national and regional levels;
3. Support national policies on health education and promotion particularly among youth, women and other population groups at high risk for the development of NCDs;
4. Advocate and provide support for development of national policies on tobacco, diet and nutrition, physical activity and use of alcohol;
5. Advocate and provide support for national policies on water, air and land pollution and engage in: recycling non-biodegradable materials; composting biodegradable materials; reducing harmful factory emissions and ensuring safe disposal of industrial waste;
6. Utilise our competencies in business and finance to enhance and support government and civil society efforts to: strengthen healthcare infrastructure; increase availability and distribution of affordable medication and health technologies; increase availability of health and social protection systems; create sustainable healthcare financing and reduce poverty;
7. Contribute in whatever way is feasible in assisting individuals in making healthy dietary choices by contributing to the development of healthy nutritional environment, including product reformulation (reducing levels of salt, refined sugars and unhealthy fats in foods and beverages), improvement of nutritional labelling, reducing the marketing and promotion of unhealthy foods to children, and conforming to known national and international standards for salt, sugar and fat content in foods and beverages, where these exist.



12.5 MEETING EVALUATION

Thirty-one participants completed the workshop evaluation. Fifty-two participants were asked to complete the evaluation form (excludes HCC core team) with a response rate of 60%.

Overall the forum was well reviewed. The findings from the evaluation form are presented below in tabular format.

I. CONTENT

	Excellent	Good	Fair	Poor
1. Covered Useful Material	77%	23%	0%	0%
2. Relevant to My Organisational Needs and Interests	75%	25%	0%	0%
3. Well Organized	71%	29%	0%	0%
4. Presented at the Right Level	55%	45%	0%	0%
5. Sufficient time allocated to discussion sessions	19%	61%	19%	0%
6. Useful Visual Aids and Handouts	26%	65%	6%	3%

II. PRESENTATIONS

	Excellent	Good	Fair	Poor
1. Overall Instructor's/ Speaker's Knowledge	90%	10%	0%	0%
2. Overall Instructor's/ Speaker's Covered material clearly	65%	35%	0%	0%
3. Overall Instructor's/ Speaker's Responded well to questions	71%	26%	3%	0%
4. Overall Instructor's/ Speaker's allowed for adequate participant input	35%	45%	19%	0%
5. The meeting was interactive	58%	35%	6%	0%
6. Well organized	71%	29%	0%	0%
7. Relevance of Discussion Sessions	65%	35%	0%	0%

III. SUMMARY FEEDBACK

1. Do you have any suggestions for how the meeting could have been improved?
 - Allow more time for discussions
 - Highlight health as an investment for good life rather than prevention of NCD's
 - Sections were rushed due to rich and extensive content; could have been 2 days
 - More time for presentations, 10 minutes is insufficient
 - Improve time management
 - Provide presentations to participants
 - Explore ways of getting more participation from those who did not come
 - Include more physical activities/ icebreakers
 - More group discussions and documentation
 - Additional and longer presence of Ministry officials especially education and finance
 - Give the presenter a remote control to change the slide her/himself
2. What should HCC do to build on the momentum of this meeting? What are key next steps?
 - Seek to expand awareness and possible leeway to local HCC to give greater focus to more companies regardless of size
 - Collate and disseminate information and presentations
 - Promote HCC Caribbean wide awareness
 - Establish mechanism to move initiatives to individuals, companies or countries
 - Improve communication and social media
 - Partnership with national chamber of commerce of auditory
 - Establish a core group to ensure continued networking of participants to drive agenda
 - Invite quarterly contributions from companies and share best practices via link to newsletter
 - Development a data base plan
 - Share information from meeting
 - Opportunities to share initiatives
 - Do a 6 month survey on work done since meeting
 - Engage activities in the private sector; each company interested in developing a working program should provide 2-3 individuals who are champions of the cause
 - Engage CEO/CFO of companies
 - Engagement of business groups
 - Follow through with employers representatives with regard to developing and implementing workplace wellness programmes
 - HCC needs to do more to get their message out; more promotion of their agenda
 - Have direct meetings with company leaders to get commitments on specific actions each company will take

- Develop data specific to the Caribbean on NCD's now and compare in some years time to gauge impact of initiatives
- Be very active on any wellness presentation by members
- Publicize what took place
- More communication needed
- Develop an action plan and share with participants; even assign responsibilities by company
- Repeat with new attendees
- Follow up

3. Do you have any general comments about this experience?

- Excellent initiative with HCC, COMSEC, CARPHA and NCD Alliance
- Follow up action plans developed among participating organizations
- Excellent overall
- Very informative
- Great exposure
- Incorporation in company wellness programme and health initiatives
- Well-organised
- Better awareness will drive better programmes
- Maintain a mailing list of participants to keep them informed, receive their feedback and allow for sharing for the private sector
- Getting the message out the NCD's aren't individual issues but 'environmental'
- Great to hear perspectives of those involved in attempting to make changes in their products
- Must make sure this kind of meeting does not become a 'talk shop'
- The meeting was useful

12.6 MEETING PRESENTATIONS

All presentations are available on the HCC website in pdf format. They can be found at this link: <http://www.healthycaribbean.org/meetings-june-2015/june-4/#slides>.

12.7 MEETING MATERIALS

All meeting materials including the programme, handouts, and photos, are available on the HCC website. They can be found at this link: <http://www.healthycaribbean.org/meetings-june-2015/june-4/>.



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