

National NCD Commissions in the Caribbean: Towards a More Effective Multisectoral Response to NCDs

Summary of In-Country Consultation Antigua & Barbuda, 8-10 August 2016

Commonwealth Secretariat (COMSEC)
Healthy Caribbean Coalition (HCC)

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10 August 2016

General issues

Purpose of the visit

Technical cooperation with Ministries of Health undertaken by the Commonwealth Secretariat (COMSEC), in partnership with the Healthy Caribbean Coalition (HCC), aimed at the more effective functioning of National NCD Commissions (NNCDCs), or their equivalents (Wellness Commissions)



Objectives of the visit

1. Foster more detailed review and awareness of the draft *Framework for the Establishment and Strengthening of National NCD Commissions: Towards a More Effective Multisectoral Response to NCDs, Part II*, in order to contribute to the establishment and/or strengthening of the Wellness Commission, based on the years of experience that the HCC has in this area
2. Obtain feedback from Wellness Committee/Wellness Commission on the draft Implementation Framework (IF):
 - its usefulness
 - the extent to which it has been/will be used
 - satisfaction with its content and organization
 - challenges to its use
 - the extent to which it addresses the needs of the Wellness Committee/Wellness Commission
 - suggestions for its improvement, thus facilitating its finalization, dissemination, and implementation



Background

- Antigua & Barbuda (ATG) has a Wellness Committee, coordinated by MoH, comprised of 18 health sector representatives; framework for the Committee's actions is the National NCD Policy
- 12 Wellness Committee members participated in the consultation (some members away on vacation)
- Activities are underway to establish a **multisectoral Wellness Commission**
 - Proposal drafted by Wellness Committee, suggesting Wellness Commission membership and terms of reference (ToR)
 - Awaiting approval by Minister of Health, who will invite representatives of other sectors
- Limited awareness of the COMSEC-HCC NNCD-related documents:
 - Civil Society Report on National NCD Commissions in the Caribbean: Towards a More Effective Multisectoral Response to NCDs, Part 1
 - Draft Framework for the Establishment and Strengthening of National NCD Commissions: Towards a More Effective Multisectoral Response to NCDs, Part II



Meeting with Minister of Health & the Environment

- MoH and Government very committed to addressing NCDs; ATG is poised for change, and progress has been made, including:
 - Ban on use of plastic bags in supermarkets
 - Tobacco legislation almost ready
 - Salt reduction program developed, to be implemented
- However, more needed:
 - Coordination of entities involved in NCD prevention and control, including Medical Benefits Scheme (MBS), Health Information Unit (HIU), and MoH
 - Committed person/s to lead/participate in national multisectoral Wellness Commission
 - Focus on:
 - Legislation, taxation, e.g. of sugar-sweetened beverages (SSB)
 - Schools, especially regarding physical activity
 - Overall physical activity – recreational spaces, parks; ATG Government willing – negotiated technical cooperation from Queen’s Canopy Trust

Wellness Committee issues/concerns (1)

- Functions of the Wellness Commission – will they include implementation of projects/programs?
- Relationship between Wellness Committee and Wellness Commission
- Incentives for meaningful participation in the Wellness Commission – stipends?
- Process for establishing the Wellness Commission – can review process used by Public Service Commission and its applicability to the Wellness Commission
- Size of Wellness Commission – how many members?
- Level of representation in Wellness Commission – decision-making authority and continuity important



Wellness Committee issues/concerns (2)

- Methods of selection of Commission Chair and members – Chair should have a health background, and job descriptions with required competencies would be helpful; members must be able to transcend partisan politics and demonstrate commitment and objectivity
- Resources for sustainability, including funding and determination of full-time/part-time human resource needs, based on functions of Commission
- Mental health issues must be addressed
- There must be more advocacy and greater communication with the public and other key stakeholders, e.g. on the Port of Spain Declaration, SDGs, and other frameworks



Clarifications (1)

- Main purpose of Wellness Commission is to facilitate the national multisectoral response to NCDs as per the 2007 CARICOM Heads of Government Port of Spain Declaration
- Commission will determine whether its functions will include implementation of projects/programs according to its mandate and capacity
- It will be important for Commissioners, especially from non-health sectors, to be made aware of social determinants of health, and HiAP, whole-of-government, whole-of-society approaches to NCD prevention and control
- Wellness Commission membership in the early stages could be determined by identifying a project to reduce NCD risk factors and the relevant key stakeholders; this project would be the initial focus of the Commission



Clarifications (2)

- Though there may be no plan to raise taxes on alcohol at this time, the harmful effects of alcohol and its impact on health can be promoted and advocacy undertaken for actions taken to reduce same
- The COMSEC-HCC NNCDCC establishment/strengthening documents (Parts I and II) can provide useful guidance for the establishment of the ATG Wellness Commission
- Wellness Committee will continue to exist; its role, functions, and relationship with the Commission will be defined
- Mental health will be addressed as part of NCD prevention and control
- A communication strategy for the Commission is essential, identifying target audiences; products; and means of communication, including social media, facilitated by IT upgrades as necessary



Feedback on Draft Implementation Framework for Establishment/Strengthening of NNCDs



Overall comments

- Good guide; document gives a sense of what a Commission should be about, and can be tailored to country specificities
- In-depth content, but not all “doable” in terms of ATG; might not be able to adopt everything, but can pull a lot from it to frame the Commission going forward
- Helps with differentiation between Wellness Committee and Wellness Commission
- Flow of the document should be improved for easier reading



Specific comments (1)

- 6 core principles of successful NNCDCs – all acceptable
- 11 steps for the establishment of NNCDCs – all valid and useful
- 26 general recommendations for NNCDC actions – generally OK, but:
 - #2: No Inter-ministerial Task Force exists; advocacy for its establishment ongoing; Cabinet may carry out relevant functions
 - #5: **Will need technical cooperation (TC) for legislation, regulation, taxation regimes**
 - #12: Issue of controlling various organizations that may be providing information or interventions to the public that are incorrect or unproven; MoH needs to be able to regulate
 - #s15, 16: Can build on existing hospice care, Government Residential Assistance and Care for the Eligible Elderly (GRACE) program, and support group for persons caring for elderly parents



Specific comments (2)

- 26 general recommendations for NNCCDC actions – generally OK, but (cont.):
 - Under “Communicate” (#s 18-20): Add partnerships/liaison with the media
 - #23 – difficult to be independent of government, given government representation and funding of the Commission – objectivity and non-partisanship to be emphasized
 - #26 – **Will need TC for establishing NCD registries**
- 19 recommended NNCCDC actions for key risk factors – all acceptable
- Challenges for existing NNCCDCs and options to address them – OK



Specific comments (3)

- Roles of government sectors in the NNCDC:
 - MoH should also share information among NNCDC members, including on relevant international declarations, resolutions, and agreements
 - Other sector roles – satisfactory
 - Must use existing national policies, plans – and regional ones, where appropriate – to drive Commission’s work, e.g. ATG’s Food & Nutrition Security Policy
- Roles of civil society (CS) – satisfactory.
 - However, some roles, e.g. dissemination of successes to the media, are not unique to CS
- Roles of private sector (PS) – satisfactory
 - Issue raised regarding contribution of PS to the Commission itself – perhaps not, given its role as equal partner on the Commission, though that would not exclude resource mobilization from the PS for the Commission’s work



Specific comments (4)

- Monitoring and evaluation (M&E) NNCDC
 - Should Chair of Commission have direct access to Prime Minister (PM), or always observe protocol and go through Minister of Health (MOH)? No consensus, but suggestion: Chair should be able to approach PM (or GG) with MOH's concurrence
 - Commitment of Chair – need to assess leadership skills, competencies, and performance. Commitment is subjective, need objective assessment
 - Dedicated staff – look at expectations of the Commission and see what needs to be done; need dedicated admin staff, but not necessarily technical staff – can be hired/procured as needed, including for project planning and implementation
 - Training of NNCDC members – in HiAP, SDH, whole-of-government, whole-of-society approaches
- M&E National NCD Program - OK



Priorities for TC for ATG NNCDC

- Determining how the other Commissions work, to learn from them, have more hands-on discussion – networking, information-sharing
- Planning and implementation of specific activities e.g. communication strategy, media blitz
- Development of NCD strategic plan; NCD policy exists, but no implementation plan – Wellness Committee will develop the plan
- Research – provision of Research Officer/Administrative Officer
- Possible development of project to address **childhood obesity** incorporating salt and sugar reduction:
 - Build on planned intervention for salt reduction, targeting primary school children;
 - Consider including documentation of the problem; tax on SSB; and establishment of parks and recreational areas



Possible TC partners for ATG NNCDC

- PAHO/WHO
- CDC – health promotion, statistics
- COMSEC-HCC
- CARPHA – working on NCDs; had a roundtable with countries regarding Caribbean Wellness Day 2016
- OECS Health Desk



Useful resources for ATG NNCDC

- Legal authority/instrument
- Terms of reference
- Conflict of interest policy
- Code of ethics
- Strategic plan
- Communication strategy



Motivating factors for Wellness Committee members

- Establishment of the Committee “overdue” – enthusiastic to participate
- Public health provides a “bird’s eye” view that clinical services lack - broader perspective of health
- Information-sharing through communication and outreach is important to help people stay healthy
- Commitment to helping people prevent illness and maintain health for a healthier nation
- Important for personal and professional development
- Members can learn from each other
- Complements health-related work carried on outside of the MoH
- Practices healthy lifestyle and wants to motivate others to do the same



Success factors for Wellness Commission (1)

- Funding that can continue
- Committed people
- Clarity on the purpose of the Commission
- Clearly defined roles and responsibilities
- Technical resources – expertise in different areas: communication, nutrition, medical/public health expertise
- Focus must be tied into national strategic plan for health; needs to be something that facilitates individual buy-in
- Political support



Success factors for Wellness Commission (2)

- Multisectoral involvement; other sectors to see this as part of their plan and actions
- Wide promotion of the POSD, including to Cabinet – what it is, what it means
- Accurate statistics on NCDs – some figures exist, but are not complete; mortality data available, but morbidity less so; behavioural risk factor survey needed
- Data collection would be facilitated by implementation of unique ID system in ATG



Next steps

- Present outputs of consultation to CMO
- Obtain feedback on the recommendations from the consultation, especially for TC
- Discuss process for establishment of Commission with PS and CMO, including review of NNCCDC documents
- Propose deadline for establishment of Wellness Commission – in 6-8 months?
- Arrange interaction with successful NNCCDCs to obtain practical guidance – COMSEC-HCC can help, based on request through CMO; BRB and VCT NNCCDCs are possibilities



**THANK YOU FOR YOUR
ATTENTION, COOPERATION, AND
HOSPITALITY!**

