IMPLEMENTATION OF THE MANDATE OF HEADS OF STATE TO STRENGTHEN THE MULTI-SECTORAL RESPONSE TO NCDS IN THE CARIBBEAN:

NATIONAL NCD COMMISSIONS & EQUIVALENTS IN CARICOM:

Dr. Alafia Samuels
Senior Lecturer, Faculty of Medical Sciences, UWI
NNCDCs: Current status, future prospects

- Burden of NCDs in CARICOM
- Genesis of NNCDC
- Evaluation and Strengthening of NCD Commission led Policy Initiatives
- Profile of 10 functional NNCDC
- Successes, challenges, lessons learned
- Recommendations – critical issues
BURDEN OF NCDS IN CARICOM
Age adjusted mortality rates/100,000 population, selected countries 2010 data

- Trinidad & Tobago
- Belize
- Cuba
- Barbados
- Saint Lucia
- Dominica
- North America

Legend:
- Diabetes
- Heart disease (IHD)
- Stroke (CVA)
Premature NCD mortality: % NCD deaths <60 yrs

Source: WHO Country Profiles, estimates for 2008
GENESIS OF NNCDC
“Establishment of multisectoral mechanisms to facilitate integration of relevant aspects of the non-communicable disease strategic plan into national policies, plans and programs;”
2004: Well Bermuda conceived

- Well Bermuda aims to provide a unifying vision so we can achieve better results in our efforts to improve the health of all residents.

- Prioritisation of our most important health concerns was ... towards creating a common agenda for health across all sectors.
2004: Barbados

2006: Core NCD posts
Senior Medical Officer of Health (NCDs); Senior Health Promotion Unit

2007:
Multi-sectoral NCD Commission

2009:
NCD Commission
National Strategic Plan
2007: CARICOM Heads of Government
Port of Spain NCD Summit Declaration

“Uniting to Stop the Epidemic of Chronic NCDs"
Heads explicitly recommend NNCDCs or analogous bodies

- “strongly encourage the establishment of National Commissions on NCDs or analogous bodies to plan and coordinate the comprehensive prevention and control of chronic NCDs”.

2011 / 2014 United Nations

NCD commissions endorsed; defined as:

- “a high-level commission, agency or task force for
  - engagement, policy coherence and mutual accountability ...
  - to implement health-in-all-policies and whole-of-government and whole-of-society approaches, and
  - to monitor and act on the determinants of non-communicable diseases, including social and environmental determinants”.
STRENGTHENING & EVALUATION OF NNCDC LED POLICY INITIATIVES
2011 CARICOM / PAHO NCD plan for CARICOM countries
NNCDC tools from CARICOM
Regional NCD plan 2011-2015

**PRIORITY ACTION # 5: PROGRAMME MANAGEMENT**

10. **PROGRAMME MANAGEMENT, PARTNERSHIPS AND COORDINATION**

10.1.1) Inter-sectoral NCD Commissions or analogous bodies appointed and functioning in at least 10 countries by 2012, and in all countries by 2014

10.1.2) Model Terms of Reference (TOR) define multi-sectoral composition, mandates to make policy recommendations, and to evaluate NCD programmes, .. by 2012

10.1.5) Training in NCD prevention and control, partnerships, programme management and evaluation for Ministry of Health personnel and members of the national NCD Commissions in at least 8 countries by 2013

- National Non Communicable Diseases (NCD) Commissions Guidelines and Recommendations

- Model Terms of Reference, membership, development and function
Gap Analysis – POS

Nutrition - Trans fat, trade, labelling

Workplace wellness in 50%

Treatment
Gap Analysis – Regional NCD plan (2011-2015) indicators

■ Policy achievements
   – current and planned studies of risk factor and burden of disease data
   – Affordable generic drugs formulary

■ Future steps
   – scaling up of evidence-based treatment
   – evaluation of on-going programmes
   – sustained multi-sectoral engagement
   – legislative action across Government ministries.
Specific PAHO country supports re NNCDCs

- Dominica, St. Vincent & Grenadines, St. Kitts & Nevis re
- NCD Commissions
- NCD plans
- 2010 and 2011 regional NCD meetings
- Direct country supports
2010 & 2011 CARICOM NCD team meetings

2011 MULTI SECTORAL PARTICIPATION

- NCD FP / CMO from 17/20 CARICOM states
- 6 members TT NCD Partners Forum (Chamber of Industry & Commerce, Diabetes Assn, Mike’s Bikes, National PTA, TSTT (telecom),
- 6 academic staff from UWI St. Augustine
- 2 members of HCC Executive
- 5 PAHO advisors
Included discussions on the structure and functioning of NNCDCs.

Prof Trevor Hassell, Chairman of the Barbados NNCDC, briefed incoming Jamaica NNCDC chair Prof. Rosemarie Wright-Pascoe.
HCC NCD plan for CARICOM Civil Society
a Caribbean civil society health revolution

- Pan Caribbean social and traditional media campaign to inform and educate about chronic diseases

- A Civil Society Regional Status Report: Responses to NCDs in the Caribbean Community assessed the Caribbean response to NCDs, from a civil society perspective including a rapid assessment of National NCD Commissions
PORT-OF-SPAIN DECLARATION
- UPDATE ON THE EVALUATION
Prof Unwin Reported
EVALUATION AT COUNTRY LEVEL: BARBADOS
Chronic Disease Policy in Barbados

Analysis and Evaluation of Policy Initiatives

C Guell, TA Samuels, TA Hassell, N Unwin

September 2013
Barbados NCD Policy Review

- Significant NCD policy ... in a coordinated way driven by the MOH.
- '...the Government of Barbados has provided most of the funding for NCD policy formulation and implementation.'
- However several non-MOH key informants were unaware of the process and of many policy initiatives.
Policy Challenges

- Delay of alcohol policy related to both the economic and social role of alcohol production and consumption
- Need to improve NCD quality of care by promoting evidence-based clinical guidelines, improve educational outreach and monitor clinical process and outcomes
- Importance of leadership of policy entrepreneurs: Political vision and commitment
  - Sustainability: Need succession planning
PROFILE OF 10 FUNCTIONAL
NNCDC
### Meeting Inauguration and frequency

<table>
<thead>
<tr>
<th>Country</th>
<th>First Meeting</th>
<th>Meetings in last 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>BERMUDA</td>
<td>2005</td>
<td>4</td>
</tr>
<tr>
<td>BARBADOS</td>
<td>2007</td>
<td>10</td>
</tr>
<tr>
<td>BELIZE</td>
<td>2009</td>
<td>3</td>
</tr>
<tr>
<td>GRENADA</td>
<td>2010</td>
<td>12</td>
</tr>
<tr>
<td>JAMAICA</td>
<td>2011</td>
<td>11</td>
</tr>
<tr>
<td>TRINIDAD &amp; TOBAGO</td>
<td>2011</td>
<td>8</td>
</tr>
<tr>
<td>BAHAMAS</td>
<td>2013</td>
<td>2</td>
</tr>
<tr>
<td>BVI</td>
<td>2013</td>
<td>5</td>
</tr>
<tr>
<td>ST LUCIA</td>
<td>2013</td>
<td>3</td>
</tr>
<tr>
<td>GUYANA</td>
<td>2014</td>
<td>NA</td>
</tr>
</tbody>
</table>
Government membership of 10 functional NNCDCs

- Ministry of Education
- Ministry of Agriculture
- Min of Transport
- Min Local Govt or Mayors
- Ministry of Trade
- Bureau of Standards
- Min of Consumer Affairs
- Town Planners
Civil Society membership of 10 functional NNCDCs

- Health NGO: high membership
- University: moderate membership
- Trade Union: moderate membership
- Faith based organizations: moderate membership
- Sports Groups: moderate membership
- Women’s’ groups: low membership
- Youth groups: low membership
Private Sector membership of 10 functional NNCDCs

- Private health sector
- Health insurance
- Media
- Manufacturers
- Food retailers
SUCCESES, CHALLENGES, LESSONS
# Governance

<table>
<thead>
<tr>
<th><strong>SCOPES AND LOCATION OF THE COMMISSIONS</strong></th>
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<tbody>
<tr>
<td><strong>SUCCESSES</strong></td>
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<td></td>
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<tr>
<td><strong>CHALLENGES</strong></td>
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<tr>
<td><strong>LESSONS LEARNED</strong></td>
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</tbody>
</table>
## Governance

<table>
<thead>
<tr>
<th><strong>SUCCESES</strong></th>
<th><strong>LEADERSHIP</strong></th>
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<tbody>
<tr>
<td></td>
<td>The Chairs of the Bermuda and Barbados lead long-standing, successful Commissions.</td>
</tr>
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<table>
<thead>
<tr>
<th><strong>CHALLENGES</strong></th>
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<tbody>
<tr>
<td></td>
<td>Some NCD Commissions have appointed Ministry of Health officials as Chairs, which re-enforces the view that NCDs are a “health problem”.</td>
</tr>
<tr>
<td></td>
<td>Perception - personal responsibility</td>
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<td></td>
<td>Environmental changes not seen as core preventive measures by most in other Ministries and by many in health - within MOH, Health NGOs</td>
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<table>
<thead>
<tr>
<th><strong>LESSONS LEARNED</strong></th>
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<tbody>
<tr>
<td></td>
<td>The NCD Chair must be seen to have a wider reach than the Ministry of Health to have the credibility to lead a truly multi-sectoral response.</td>
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<tr>
<td></td>
<td>Importance of National and Regional/International NCD Champions, to promote the NCD agenda</td>
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<tr>
<td><strong>SUCCESSES</strong></td>
<td>Bermuda (2005) and Barbados (2007) have long-standing functional Wellness and NCD Commissions</td>
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<tr>
<td><strong>CHALLENGES</strong></td>
<td>St. Lucia Commission had a 2-year hiatus following a change in political administration.</td>
</tr>
<tr>
<td></td>
<td>Dominica is seeking a New Chairperson. Last met in 2010.</td>
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<tr>
<td></td>
<td>Trinidad &amp; Tobago Partners Forum on hiatus</td>
</tr>
<tr>
<td><strong>LESSONS LEARNED</strong></td>
<td>Appointment of NCD Commissions should be for a fixed term, unrelated to changes in political administration.</td>
</tr>
<tr>
<td>SUCCESSES</td>
<td>4 Commissions have strategic plans. The Barbados NCD Commission plan is the Ministry of Health’s NCD Plan</td>
</tr>
<tr>
<td>------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>CHALLENGES</td>
<td>Commissioners, MOH staff lack of clear direction / appreciation of roles and functions; unclear relationships with Ministry of Health</td>
</tr>
<tr>
<td></td>
<td>3 Commissions do not have strategic plan</td>
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<tr>
<td></td>
<td>Low capacity in monitoring and evaluating</td>
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<td></td>
<td>Inadequate sharing information within and among sectors</td>
</tr>
<tr>
<td>LESSONS LEARNED</td>
<td>If there is not a single plan for NNCDC &amp; MOH, NNCDC needs a plan to complement MOH plan. Technical support to develop plan, support implementation, monitoring and evaluation</td>
</tr>
<tr>
<td>Operations</td>
<td></td>
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<td>------------</td>
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</tr>
<tr>
<td><strong>SUCCESSES</strong></td>
<td></td>
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<tr>
<td>Barbados and Bermuda have engaged with multiple sectors</td>
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<tr>
<td><strong>CHALLENGES</strong></td>
<td></td>
</tr>
<tr>
<td>How to make NCDs a societal issue for anyone beyond just health: define and operationalize multi-sectoral response</td>
<td></td>
</tr>
<tr>
<td>Stakeholders: implementing policy measures in other sectors is often a low priority</td>
<td></td>
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<tr>
<td>Engaging with the community to translate knowledge into behaviour change</td>
<td></td>
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<tr>
<td><strong>LESSONS LEARNED</strong></td>
<td></td>
</tr>
<tr>
<td>The role of the environment in promoting healthy behaviors needs to be communicated more effectively</td>
<td></td>
</tr>
</tbody>
</table>
**Approaches: “All-of-Government”**

| SUCCESSES | Barbados has established an Inter-Ministerial Task Force on NCDs with a budget.  
<p>|           | Bermuda and BVI Commissions have signed an MOU between the Ministry of Health &amp; other Ministries of Government |
| CHALLENGES | Getting political support for an “all of Government” – “health in all policies” response to the NCD epidemic |
| LESSONS LEARNED | There needs to be dedicated budget for inter-sectoral NCD work as Line Ministries are not going to spend their scarce financial resources in addressing a “health problem”. |</p>
<table>
<thead>
<tr>
<th>Approaches: “All-of-Society”</th>
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<tbody>
<tr>
<td><strong>SUCESSES</strong></td>
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<tr>
<td><strong>CHALLENGES</strong></td>
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<tr>
<td><strong>LESONS LEARNED</strong></td>
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</table>
## Human Resources

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<tbody>
<tr>
<td><strong>SUCCESSES</strong></td>
<td>Wide range of all sectors on many NNCDCs</td>
</tr>
<tr>
<td></td>
<td>Supports from MOH technical staff</td>
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<tr>
<td><strong>CHALLENGES</strong></td>
<td>Weak methods of appointments of NNCDC membership</td>
</tr>
<tr>
<td></td>
<td>Inadequate representation of Town Planners, M. Trade, Faith-based org, food retailers/manufacturers</td>
</tr>
<tr>
<td><strong>LESSONS LEARNED</strong></td>
<td>Many commissions do not have true multi-sectoral membership.</td>
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<td></td>
<td>NCD Commissions cannot function effectively without human and organizational resources.</td>
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</table>
## Financial Resources

<table>
<thead>
<tr>
<th>SUCCESES</th>
<th>Although no NCD Commission has all the resources they would like, 4/9 have either Ministry of Health budget or other funds. MOH Barbados has funded NNCDC, risk factor surveillance and disease registry</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHALLENGES</td>
<td>No country has implemented POS#4: Use of tobacco and alcohol taxes to support NNCDCs NCDs often are not included in national development plans to determine external aid</td>
</tr>
<tr>
<td>LESSONS LEARNED</td>
<td>Joint funding needed for multi-sectoral programmes</td>
</tr>
</tbody>
</table>
“We do well in developing policies and strategic plans, but we are very unimpressive in migrating from plan to programme... more attention needs to be paid to a kind of implementation science – a way of breaking down why these things never get translated into evaluable programmes.”

Dr. Omowale Amuleru-Marshall, Chair, NCD Commission, Grenada.
OTHER MECHANISMS FOR MULTI-SECTORALITY
Dominica

- No functional NNCDC
- Celebrates one month of Caribbean Wellness
- Including CSOs: Faith Based Organizations, Health NGOs, Youth, Healthy Community, Older persons NGO, academia,
- Private: Financial Institutions, Insurance Organizations, Business community, music industry Alternate health organizations
- Govt: Ministry of Education, and Health districts
Working with Partners in St Lucia
LARGER COUNTRIES - INNOVATIONS
GUYANA CWD 2011: Krowdar group provided traditional indigenous music for the Heritage Walk. (Working with the Ministry of Amerindian Affairs)
GUYANA FITNESS WALK, led by Minister Ramsammy included the differently abled
Bahamas: Faith based initiatives - Seventh Day Adventists

RAISING THE STANDARD FROM
Super-Size Families

Obesity

Starting MONDAY FEB. 26, 2007 @ 5:30pm
Bahamas Academy Auditorium • Wulff Road

8 EIGHT WEEKS to Wellness Program

What’s in it for You?
• Blood Pressure, Blood sugar & Cholesterol screening*
• Aerobic / Exercise Classes
• Health Education Classes
• Cooking Classes
• Weight Management Seminar

Register NOW: $25.00 Adults / $15.00 Children

Space is Limited!!!

For Further Information on the program or the screening process, Please call
Bahamas Conference of Seventh-day Adventists @ (242) 341-4022
CSO & Private Sector led community-based health promotion

Diego Martin Ciclovia in T&T
The Caribbean’s 1st ciclovia:
Started on 1st Caribbean Wellness Day Sept 13th 2008

- Every Sunday, 6am to 9am - 2 km Diego Martin H’way
- includes a Physical Activity class

5 years approx 50 times each year = 250 events
Mr. Michael Phillips, (Mike’s Bikes), the driving force behind the five years of Weekly “ciclovia” in Diego Martin. Seated at the projector, Ms. Yvonne Lewis, Director of Health Promotion, MOH
The youth taking advantage of the blocked roads as “streets for wellness”
REGIONAL SUPPORTS FOR MULTI-SECTORALITY
Mobilizing partners: CWD Fact Sheets 2009

Caribbean Wellness Day

Caribbean Heads of Government, in response to the heavy burden of noncommunicable diseases on the citizens of the region, issued the Port of Spain Declaration in September 2007, “Uniting to Stop the Epidemic of Chronic Non-Communicable Diseases,” and declared that the second Saturday in September should be celebrated each year as Caribbean Wellness Day.

We invite you to join us on September 12 and help support this initiative.

Promoting Healthy Lifestyles in the Workplace

Caribbean Wellness Day

Chronic Diseases
Healthy Living and Faith-Based Organizations

Virtually all religions see good health as a God-given gift that should be protected to ensure both human and societal development. In Christianity, the human body is a “temple of the Holy Spirit” (1 Cor 6:19-20) that should be cared for out of reverence for God. In Islam, health is seen as the greatest blessing after faith itself, and every Muslim has the duty to safeguard that blessing. In Hinduism, essential practices such as morning baths, Yoga, and vegetarianism promote hygiene and health.
Chronic Diseases

Caribbean Heads of Government, in response to the heavy burden of noncommunicable diseases on the citizens of the region, issued the Port of Spain Declaration in September 2007, “Uniting to Stop the Epidemic of Chronic Non-Communicable Diseases,” and declared that the second Saturday in September should be celebrated each year as Caribbean Wellness Day.

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Healthy Lifestyles and Schools

Chronic Diseases in the Caribbean
Facts and Figures

Caribbean Heads of Government, in response to the heavy burden of noncommunicable diseases on the citizens of the region, issued the Port of Spain Declaration in September 2007, “Uniting to Stop the Epidemic of Chronic Non-Communicable Diseases,” and declared that the second Saturday in September should be celebrated each year as Caribbean Wellness Day.

We invite you to join us on September 12 and help support this initiative.
Working with the Media

Regional NCD newspaper supplement
Sunday, Sept 25th 2011

Cover photo:
Scotiabank Women Against Breast Cancer 5K, Port of Spain, September 2011

Sponsored by Pepsico
RECOMMENDATIONS: Identifying Critical issues

- GOVERNANCE
- LEADERSHIP AND MANAGEMENT
- FUNCTIONS, OPERATIONS,
- RESOURCES: MEMBERSHIP, PERSONNEL, FUNDING, TECHNICAL SUPPORTS
Collaborating for Healthy Living: From Bottlenecks to Solutions

The Imperatives: A five star framework
To ensure a multistakeholder collaboration is effective and has impact, it should be built around five features:
1. Trust and transparency
2. Clear objectives, monitoring and evaluation
3. Effective governance
4. Secured resources
5. Strong leadership
Mission

- NNCDCs of the Caribbean the most suited instrument for achieving the multi-sector approach
- Should their primary purpose be
  - holding the state accountable vs. the multi-sectoral effort
  - Advocacy and advise only
- How to harness bottom-up e.g. CWD multi-sectoral collaborations
National consciousness

- How to articulate and promote an “all-of-Government” and “all-of-society” response to this sustainable national development issue, perceived as exclusively a health problem
  - Need to foster “indignation” at this tsunami of premature death
- How to sell “health promoting environments”
Governance

- Appointment: fixed term, unrelated to political cycle
- Transparent appointments
- Address conflict of interest between sectors of the NCD Commissions
- Establish NCD inter-ministerial commissions or equivalents with clear deliverables, joint funding
Countries with small populations

- Consider broader based National Health & Wellness Commission
  - include HIV/AIDS, Mental Health and other chronic diseases e.g. SKN, Bermuda

- Organisation of Eastern Caribbean States (OECS) should consider an OECS NCD Commission with Sub-Committees at country level
Capacity Building proposals

- Regional Secretariat
  - comprising PAHO, CARICOM, CARPHA, UWI and HCC to provide technical assistance and support

- NNCDCs in CARICOM networking
  - share best practice
  - national, regional, international representation

- Linkages with research facilities
  - inform actions, assess outcomes of NNCDC
All of Society

- Facilitate formal networks of Health NGOs e.g. NCD Alliance in country
- Relations with private sector:
  - potential conflicts of interest - guided by international best practice guidelines
  - IFBA or equivalent to support private sector NCD programmes – workplace wellness, product reformulation
Clinical Quality of Care

- Critical role of improved control and management of NCDs,
  - Screening, access, delivery of quality care for those living with NCDs. Media for patient ed

- Advocate for Health Information systems designed for reporting QOC metrics

- Advocate for chronic care for all chronic diseases
  - NCDs and infectious e.g. HIV/AIDS, TB
# ACTION FRONTS

## 1. Upstream = Multi-Sectorial

<table>
<thead>
<tr>
<th>Ministry</th>
<th>Sector</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>Trade</td>
<td>Trade</td>
<td>Fair Trade <em>Health over Profit</em></td>
</tr>
<tr>
<td>Finance</td>
<td>Tax</td>
<td>Higher taxes on unhealthy food</td>
</tr>
<tr>
<td>Agriculture</td>
<td>Food Production</td>
<td>Subsidies for indigenous production</td>
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<tr>
<td>Media</td>
<td>Social Marketing</td>
<td>Raise public awareness and enhance self-care</td>
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<td>e.g. <em>Eat What You Grow, Grow What You Eat</em></td>
</tr>
<tr>
<td>Education</td>
<td>Education</td>
<td>Sports/Physical Activity Intra- (not extra-) Curricula</td>
</tr>
<tr>
<td>Town Planner</td>
<td>Physical Planning</td>
<td>Green Spaces for recreation. “Pedestrian Only” thoroughfare</td>
</tr>
</tbody>
</table>

## 2. Downstream Factor = Health Sector

Office of the Chief Medical Officer, St. Kitts & Nevis
WAY FORWARD

Pillars: Strong Leadership, Secured Resources, Effective Governance, Clear Objectives, Trust & Transparency

Step 1: Head Government .... Not the Minister of Health

- Mobilize Stakeholders ... Issue Call to Action to form Commission
- Ensure Enabling Policy, Legislative and Program/Service Environment
- Provide Adequate Resources to Line Ministries
- Provide seed money to NCD Commission
- Appoint a liaison (senior rank)
WAY FORWARD

Pillars: Strong Leadership, Secured Resources, Effective Governance, Clear Objectives, Trust & Transparency

- Step 2: Stakeholders

- Given official authority and autonomy to self-organize and act
- Establish Commission
  - Leadership and Governance Structures
  - Decide Program of Work and Budget
  - Undertake fund-raising
  - Implement
  - Ongoing Performance Assessment
  - Account to Cabinet

Office of the Chief Medical Officer, St. Kitts & Nevis
CARICOM: NNCDC WAY
FORWARD MILESTONES

On or before June 2016

1. Establish Regional NCD Secretariat. Name convenor
   - Via recommendation of CMOs and COHSOD/Caucus

2. CARICOM Heads of Government:
   - Nominate National Focal Point for their country
   - Agree to performance expectations and reporting schedule

3. Regional NCD Secretariat
   Interfaces with Regional Sector Focal Points & Partners
   - Health = COHSOD - CS Health Desk, OECS Health Unit, CARPHA, PAHO
   - Trade = COTED
   - Agriculture = CARDI, IIICA
   - Education = UWI, CXC, SGU
   - Media = CAMP
Need for multi-sectorality

RE IMPACT ON CONSUMPTION AT LOWEST INCOME LEVELS

PRICE > HEALTH EDUCATION

Office of the Chief Medical Officer, St. Kitts & Nevis