Evidence of Multi-sectoral Action in the Caribbean – Preliminary Findings of the Port of Spain Declaration Evaluation

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Overview of talk

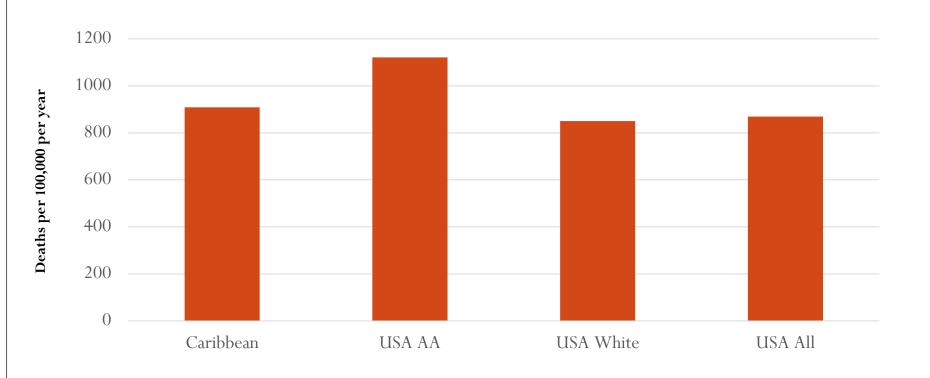
- Context
 - CARICOM and its political response to NCDs
 - Trends in mortality, contribution of NCDs
- The Port of Spain Declaration Evaluation
 - Objectives and time frame
 - Identifying policy gaps and predictors of compliance
 - Increasing effective policy implementation



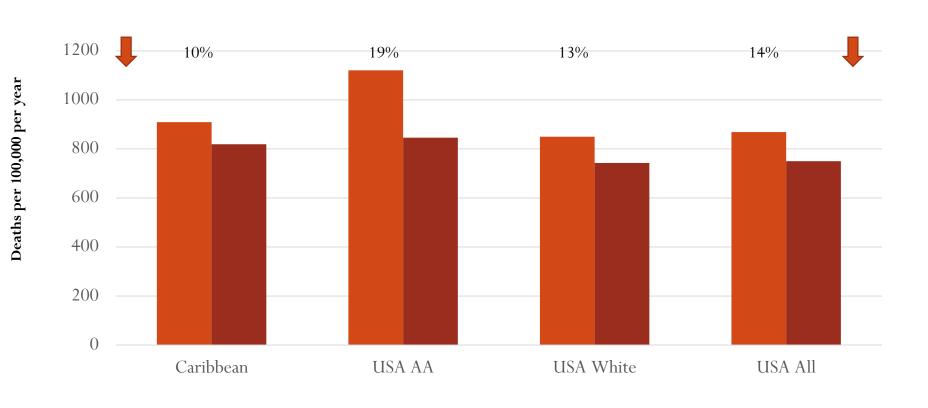
Port of Spain Declaration on NCDs

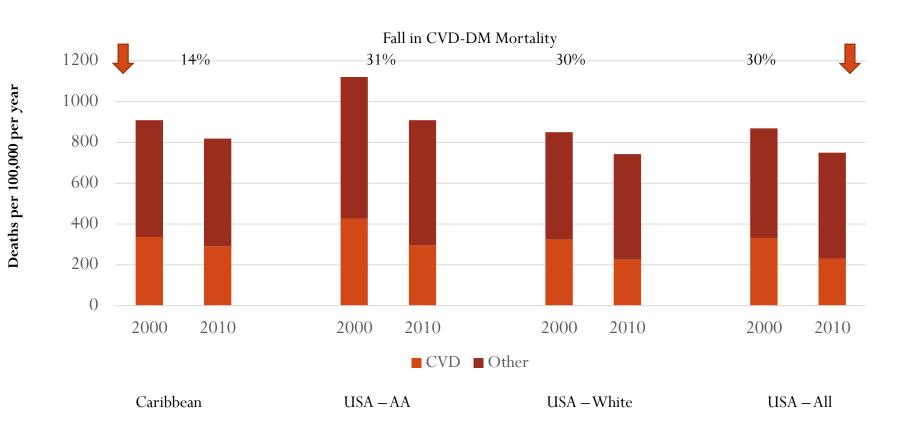
- 15 Point Declaration, 27 commitments
- Including:
 - National, multi-sectoral NCD Commissions
 - Risk factor reduction, including:
 - Implementation of FCTC
 - Multi-sector food and nutrition plan
 - Promotion of physical activity in schools and workplaces
 - Health care, quality and coverage
 - Surveillance
 - Caribbean Wellness Day
- Contributed to the 2011 UNHLM

All Cause Mortality in the Caribbean and US, Year 2000

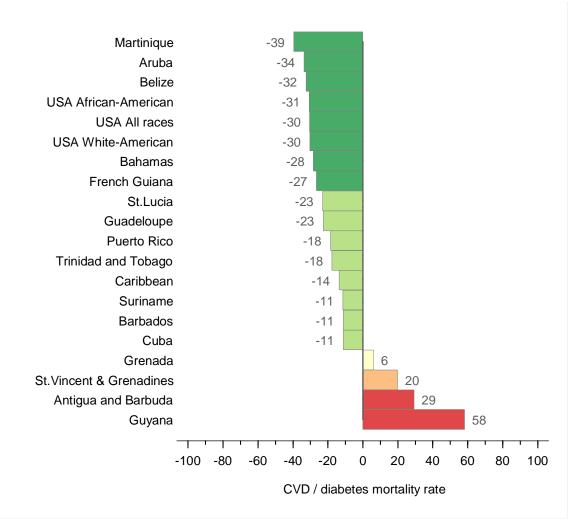


Change in all Cause Mortality in the Caribbean and US, 2000 to 2009





Percentage change in cardiovascular diseases and diabetes mortality between 2000 and 2009 for 16 Caribbean territories, and for the United States



Factors likely to underlie the differences in trends in CVD-DM mortality

- Differences in trends in risk factors
 - E.g. smoking, aspects of diet, physical activity, obesity, blood pressure, cholesterol

- Differences in trends in coverage of effective healthcare
 - E.g. effective treatment of blood pressure, glucose, hypercholesterolaemia, acute myocardial infarction, acute stroke, heart failure etc



Port Of Spain Declaration Evaluation (POSDEVAL) 2014 - 2017
Public Health Group Cave Hill

THE CARICOM POLITICAL DECLARATION ON NCDS SEVEN YEARS ON: AN EVALUATION TO **ACCELERATE FURTHER MULTI** SECCTORAL IMPLEMENTATION

POSDEVAL funded by

















Port of Spain Declaration Evaluation

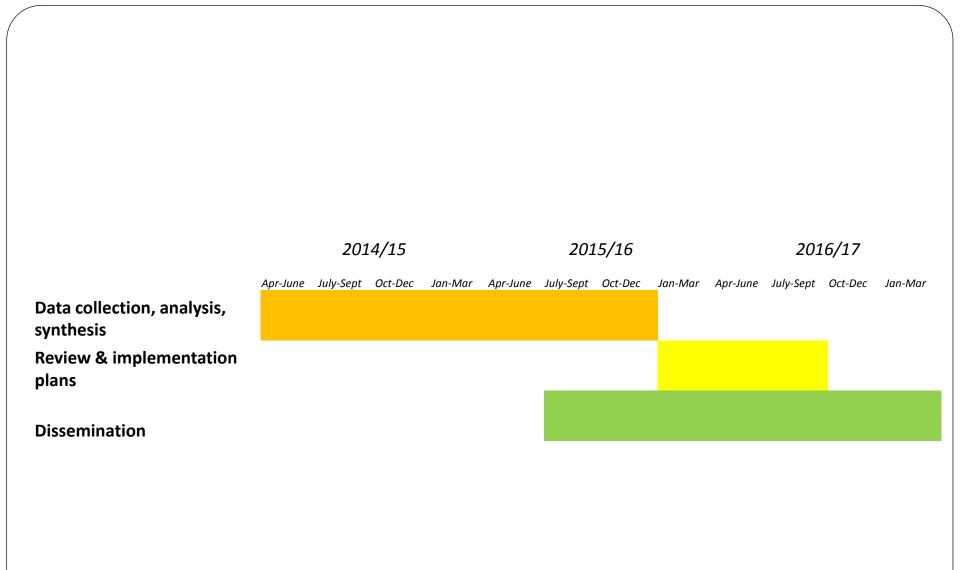
- Supported by the Canadian International Development Research Centre (IDRC)
- Coordinated, on behalf of CARICOM and PAHO, by UWI
 Cave Hill Public Health Grp & CDRC
 - Nigel Unwin PI, Alafia Samuels co-PI
- Funding became available in April 2014 and the project will run until March 2017.

Overall objective

- To evaluate, seven years on, the implementation of the POS Declaration in order to:
 - Learn lessons that will support and accelerate its further implementation
 - Inform the attainment of the UNHLM NCD 9 voluntary targets
 - Includes a 25% reduction in NCD mortality

Detailed objectives

- To add to knowledge within the 20 CARICOM members
 - Identify gaps in policies and surveillance
 - Identify predictors of success, and difficulties
 - Potential revenue from tobacco and alcohol
- To add to knowledge on the regional and international impact
 - Including roles of regional organizations
- To review the findings with policy makers and agree priorities for increased implementation
 - Workshop, January 2016, organized with CARICOM
 - Fill gaps in policy and surveillance
- To communicate this knowledge to appropriate audiences
 - Led by Healthy Caribbean Coalition, with Regional Health Communication Network



Identifying Policy Gaps and Predictors of Compliance

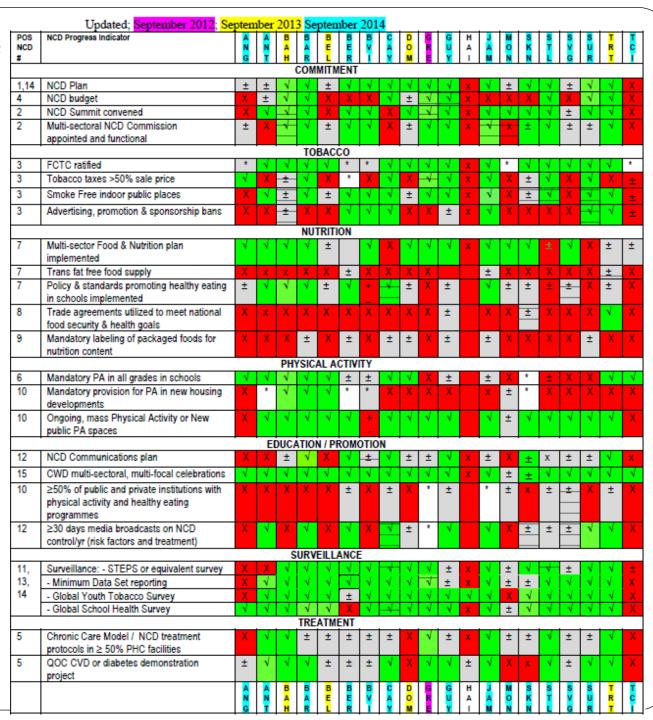
All 20 CARICOM Members

- Monitoring grid completed by NCD focal point
 - Covers 27 commitments of the POS Declaration
 - Predictors of good and poor compliance based on wide range of available national characteristics
- Implementation of FCTC
 - Using PAHO reporting tool
 - Including the UKOTs
- Caribbean Wellness Day evaluation
 - Phone interviews and online questionnaire completion

Port of Spain Declaration Monitoring Grid

Potential predictors of compliance being examined include:

- Population size
- GDP per capita
- Leader presence at POS
- Burden of NCDs
- Proportion female MPs



Identifying Policy Gaps and Predictors of Compliance

In-depth case studies, to determine:

- Degree of policy development and implementation, and agreement with what is reported in the grid
- Use of multi-sectoral approaches including the engagement of civil society, the private sector and Government ministries and agencies in addition to Health
- Factors associated with success and those associated with difficulties in achieving (a) and (b)
- What evidence exists on the impact of the implementation on risk factors and health outcomes.

Case study countries/territories

	Population ['000]	Population category	Case study	Econ' study
Haiti	9,993	>5mill		
Jamaica	2,741	1-5 mil	Yes	Yes
Trinidad & Tobago	1,341		Yes	Yes
		250-		
Guyana	754	999,000		
Suriname	525			
Bahamas	343			
Belize	312		Yes	
Barbados	286		**	
Saint Lucia	161	<250,000		
Grenada	108		Yes	Yes
Saint Vin' & Gren	104			
Antigua & Barbuda	87		Yes	
Dominica	73			
Bermuda	68			
Cayman Islands	50			
Saint Kitts & Nevis	50		Yes	
Turks & Caicos Islands	43			
British Virgin Islands	25		Yes	
Anguilla	15			
Montserrat	5			
TOTAL	17,084			

Case studies, methods and progress

- Mixed methods
 - Key informant interviews
 - Range of sectors
 - Policy documents analysis
 - Review of health data and trends (where possible)

- All seven countries visited
- Over 70 interviews in total
- Policy documents collected
- Data analysis workshop next week
 - Policy statements and implementation
 - Understanding successes and difficulties

In Summary, Evaluation of the Port of Spain Declaration:

Add to knowledge

- Gaps in policy statement & implementation
- Gaps in surveillance
- Predictors of successful multi-sectoral policy development
- Potential for revenue from tobacco and alcohol taxation

Review and prioritise with policy makers

• Work up and agree plans for increased implementation

Dissemination

• In support of implementation

Investigators on the evaluation

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Dr James Hospedales	Caribbean Public Health Agency	Trinidad & Tobago
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Prof Karl Theodore	UWI, St Augustine	Trinidad & Tobago
Prof Andrew Knight	UWI, St Augustine	Trinidad & Tobago
Dr John Kirton	University of Toronto	Canada
Dr Rudy Cummings	CARICOM Secretariat	Guyana
Prof Sir Trevor Hassell	Healthy Caribbean Coalition	Barbados
Dr Godfrey Xureb	PAHO Eastern Caribbean Office	Barbados

Acknowledgements:
Investigators and some of the workers on the evaluation

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Dr. George Leveridge	DrPH Candidate	Researcher - Objective 3			
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