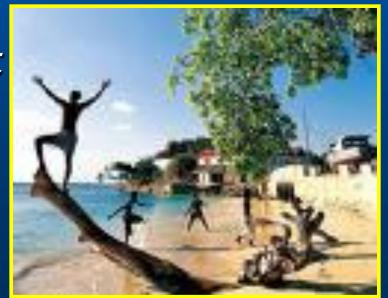
HEALTHY CARIBBEAN 2008

First Caribbean Chronic Disease Conference:

A Wellness Revolution Event October 16-19 2008 Christ Church, Barbados



OVERVIEW

 Burden of chronic disease and prevalence of physical inactivity in the Caribbean

Evolution of physical activity promotion

 Opportunities for physical activity promotion initiatives in the Caribbean



Caribbean PA Inactivity Prevalence:

One half of adults are sedentary

More females

More urban

• 17-38% engage in planned exercise



CARICOM Heads of Government Summit on NCD's

September 15, 2007 Port of Spain, Trinidad

Promoting Physical Activity in the Caribbean

May 6, 7 2008 Port of Spain, Trinidad

Caribbean Regional Private Sector Meeting on NCD Prevention and Control

May 8, 9 2008 Port of Spain, Trinidad

EVOLUTION OF PROMOTING PHYSICAL ACTIVITY



ESTABLISH HEALTH AND OTHER BENEFITS



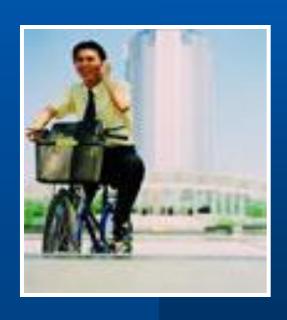


ESTABLISH IMPORTANCE AS A RISK FACTOR



ESTABLISH GUIDELINES

ACHIEVABLE VIA ACTIVITIES OF DAILY LIVING









DOCUMENT PREVALENCE OF INACTIVITY (SURVEILLANCE)



ECONOMICS AND DEVELOPMENT RATIONALE





Cost Effectiveness of Community-Based Activity Interventions

Am J Prev. Med 2008; 35 (4) Roux, Pratt, et al

 Study assessed *cost-effectiveness (CEA) of population – wide strategies to promote physical activity in adults and followed disease incidence over a lifetime.

 *Dollars per quality – adjusted life year (QALY) gained relative to no intervention.



Four Intervention Strategies Previously Recommended By the Task Force on Community Preventive Services:

- Community wide Campaigns.
- Individually adapted health behavior change.
- Community social support interventions.
- Creation of or enhanced access to physical activity information and opportunities.



Conclusions:

- 1. All evaluated PA interventions reduced disease incidence.
- 2. All evaluated PA interventions were cost-effective.
- 3. Compared with other well accepted preventive strategies the PA interventions offered good value for the money
- 4. Results support using these interventions as part of public health efforts to promote physical activity
- 5. In considering PA interventions, CEA is a valuable adjunct to other factors such as program reach, feasibility, community priorities and resources.



DOCUMENT THE MANDATE (RESOLUTIONS, ETC.)

"WHO Calls For Action to Tackle Social Injustice"

•Targeted preventive campaigns, for example about the risks of inactive lifestyles, can help close the health gap.



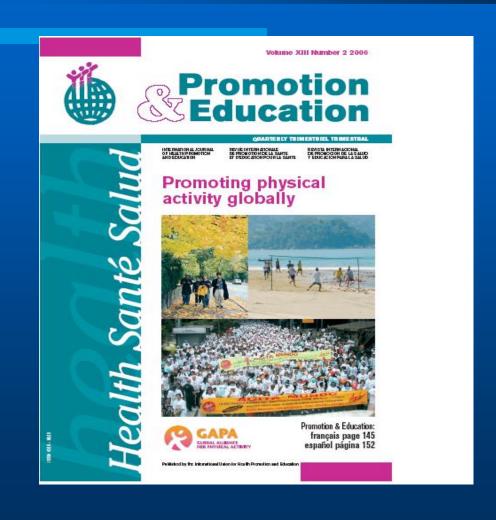
AWARENESS ACTION

CAPACITY BUILDING





RESOURCES/PROGRAMS

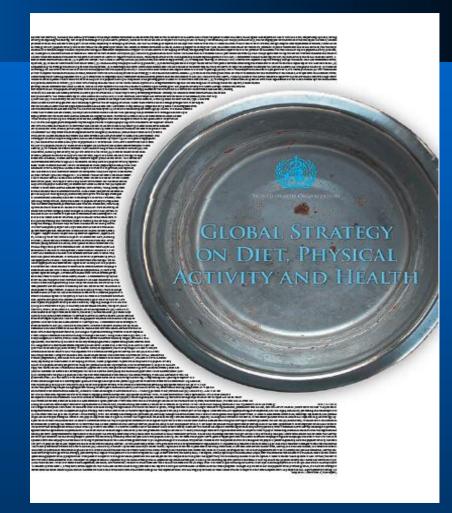


INTERSECTORAL INNOVATIONS





WHO STRATEGY AND ASSISTANCE TO IMPLEMENT





ADVOCACY FOR DEVELOPMENT OF NATIONAL PLANS

PA ATTRIBUTES

PROMOTING PHYSICAL ACTIVITY IS EXCITING, POSITIVE, MARKETABLE AND TIMELY

Synergy:

PA complements other important national policy issues such as nutrition, urban safety, tobacco control, environmental health, transportation and sport.

It encourages positive action not prohibition



The message is simple and consistent

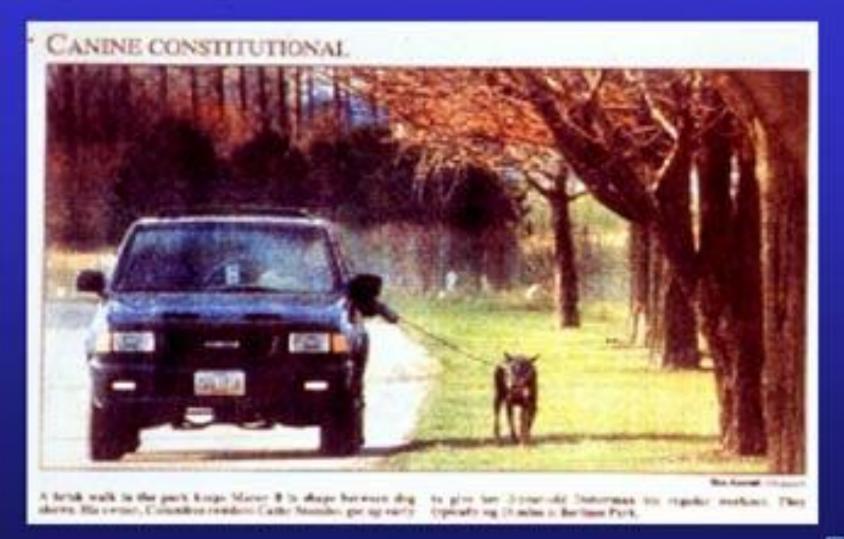
It is relatively free from opposing lobbies, special interest groups

Recommendations can be achieved via enjoyable activities of daily living (walking the dog e.g.) or sport





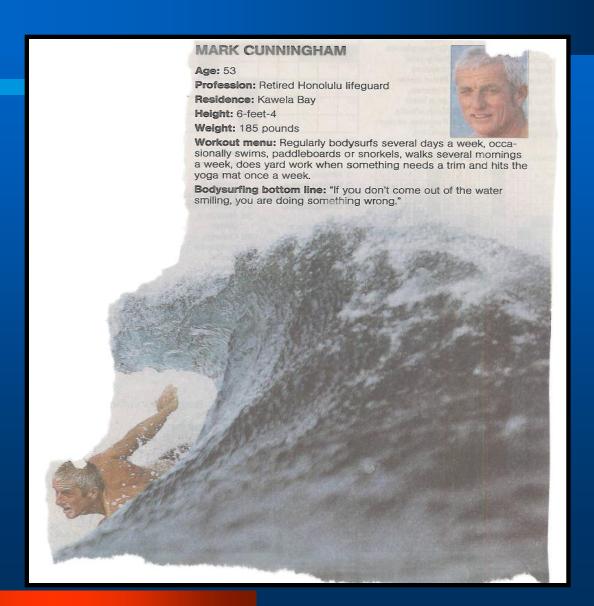
Lifestyle Changes that Promote Sedentary Behavior







Mark Cunningham



BENEFITS APPLY ACROSS POPULATIONS

Benefits extend beyond health alone to workplace issues such as productivity and absenteeism





Benefits to quality of life for older adults especially relevant with aging populations





Increased awareness of NCD burden and obesity prevalence provides incentive





Specific plans and interventions can be tailored to individual country circumstances



Promoting physical activity must be opportunistic according to individual country politics, culture, capacity.



Plans/ initiatives can be broad spectrum from simple to sophisticated and can start through alternative sectors.



ELEMENTARY EXAMPLE....





Winning sport season promotes population level interest



SOPHISTICATED EXAMPLE:

• Collect data to individualize country prevalence of inactivity, NCD rates, and demonstrate potential economic and other benefits to be gained by increasing population levels of PA.



COST SAVING MECHANISM:

Minimize data collection by using international consensus data



GETTING STARTED



GOOD PRACTICES IN NATIONAL PUBLIC HEALTH PLANNING APPLIED TO PHYSICAL ACTIVITY

- Make the case (health and others)
- Consult with key stakeholders; identify partners
- Comprehensive inter-agency planning; shared responsibility of coalitions/ task forces
- Multiple strategies at different levels
- Identify "what, who, timeline, \$\$"
- Evaluation (process and outcome)



WHICH SECTOR LEADS?

- HEALTH
- SPORT
- TRANSPORTATION / URBAN PLANNING
- EDUCATION
- DEVELOPMENT
- GOVERNMENT
- NGO'S
- PRIVATE SECTOR
- ENGAGING OTHERS IS ESSENTIAL



A WORD ABOUT EVALUATION





Strategies / Venues

- National plan / intersectoral committee
- Worksites
- Schools
- Transportation Policies
- Recreational Facilities
- Healthy spaces in uniform design
- Training for teachers and healthcare workers



Summary of Fundamental PA Promotion Considerations:

- Physical inactivity is associated with increased risk of many chronic diseases and resultant economic consequences.
- Risks decrease with increases in physical activity
- Other benefits accrue from PA.
- Globally, and in the Caribbean, there are high levels of physical inactivity as well as chronic diseases.
- There is evidence that public health efforts can increase physical activity.
- PA interventions can be cost effective.
- PA initiatives are synergistic with other public health efforts.

Mexico: Vamos Por Un Million De Kilos

- 1PA in schools
- Encourage employers and unions to give workers exercise time
- Renovation or building of sports facilities
- Nutrition education and healthier food choices in schools
- Weight loss challenges
- Media campaigns promoting healthy food choices and PA











Thank You







