



The Evaluation of the 2007 CARICOM Port-of-Spain NCD Summit Declaration

CHAPTER 7: Surveillance

POS EVALUATION GROUP



Aims

Surveillance is needed to track and monitor trends in mortality, morbidity and risk factors

Aim: To critically review NCD reporting required from member states and:

- Rationalise NCD reporting to various stakeholders
- Revise and improve POS Evaluation grid
- Identify gaps in NCD data collection, collation and analysis

Rationalise NCD reporting

21 NCD Reports requested from countries

Frequency of Reporting	Reports	Surveys with sampling frame
Annually	<ol style="list-style-type: none"> 1. POS grid (UWI) – August 2. Mortality data (CARPHA to PAHO) 3. CCH 4 (Caribbean Cooperation in Health) 	
2 yearly	<ol style="list-style-type: none"> 1. WHO Global Report on the Tobacco Epidemic/monitor implementation of six tobacco control policies/interventions – Dec 2016 2. WHO FCTC Parties Progress Report – April 2016 3. WHO global Information system on alcohol and health (GISAH) – Dec 2017 4. WHO Mental Health Atlas - ? date due 5. PAHO Report on Plan of Action for the Prevention of Obesity in Children and Adolescents 	
3 yearly	<ol style="list-style-type: none"> 9. WHO Country capacity survey – July 2018 10. PAHO Risk Factor regulatory capacity monitoring tool – Dec 2018 11. WHO Global Status Report on Road Safety – multi-sectoral – January 2018 12. PAHO/WHO Global Monitoring Framework (GMF) - May 	<ol style="list-style-type: none"> 13. Nutrition Survey 14. PAHO - Add CKD treatment, Treated ESRD, Social protection, Strategic fund for drugs, Seatbelts 15. PAHO Health Analysis Unit – Services & Coverage
5 yearly	<ol style="list-style-type: none"> 16. WHO Global Information System on Resources for the Prevention and Treatment of Substance Use Disorders every 4 years – 2018 17. PAHO Coverage of micronutrient supplementation programs - 2020 	<ol style="list-style-type: none"> 18. STEPS NCD risk surveyor equivalent 19. GYTS (Global Youth Tobacco Survey), GSHS (Global School Health Survey), 20. GATS (Global Adult Tobacco Survey) or include core GATS key policy questions add to STEPS 21. Nutritional indicators (anthropometric, anemia, vitamin A, yodo, breastfeeding) – no fixed date

NCD reporting requirements

- Multiple (21 and 3 to come) NCD reporting requirements for countries:
 - PAHO/WHO e.g. NCD Global Monitoring Framework from 2011 UNHLM on NCDs;
 - The Sustainable Development Goals;
 - The Caribbean Public Health Agency;
 - The Port of Spain NCD Declaration grid.
- Challenge to respond, especially smallest countries

Data from Other Sources

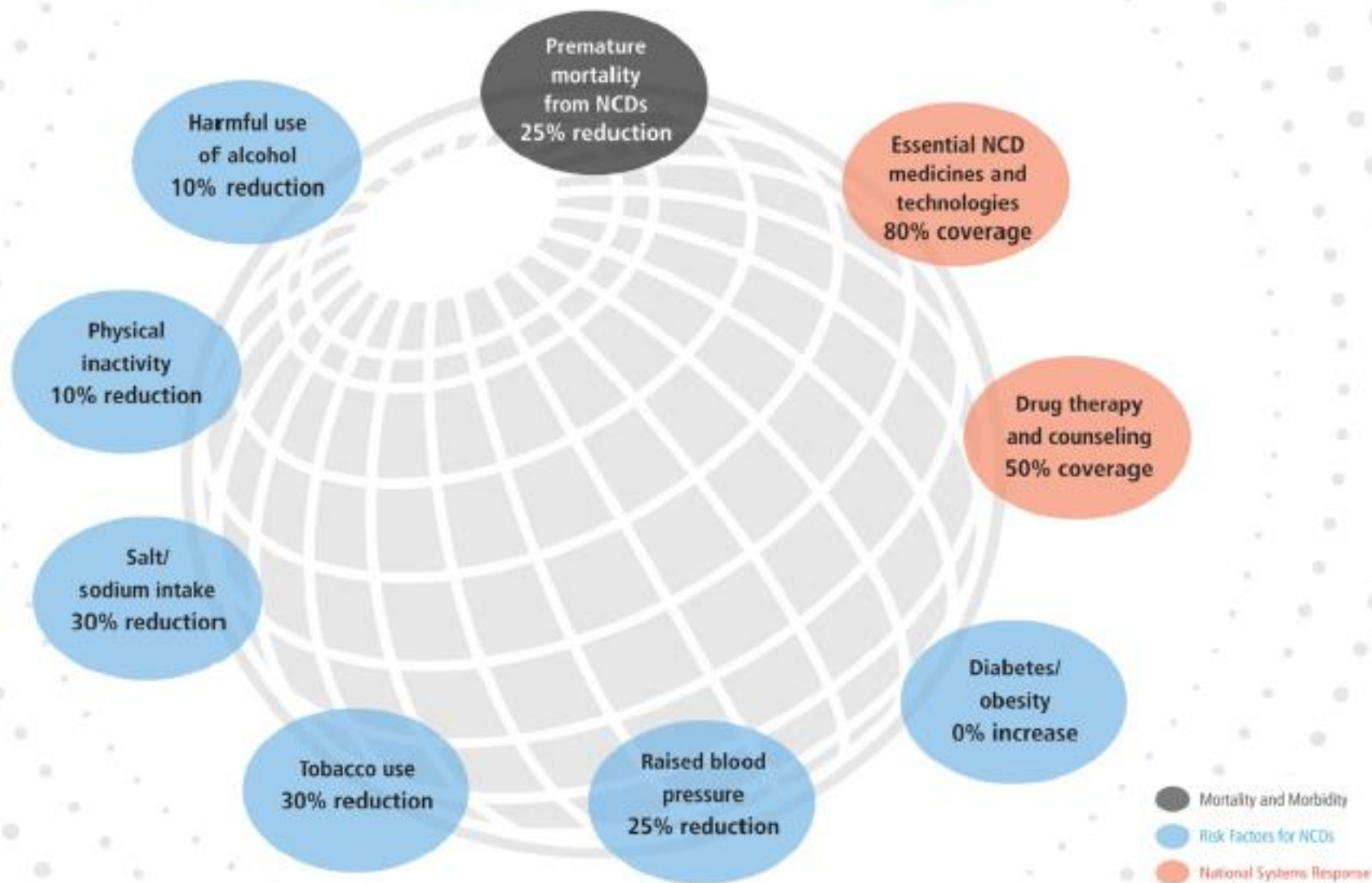
- Some data not available or available from non-health agencies
 - Age, sex, ethnicity stratified census data for denominator – to report age-sex-ethnic specific rates needed to monitor inequalities.
 - Police for injuries data
 - Ministries of Trade, Finance, Agriculture for food and taxation data
- Data are not always shared with regional organisations.
- Other UN and international agencies may have relevant data e.g. ECLAC, UNICEF and others
 - Need for a scoping review and align, rationalise and share data

Mental Health, Injuries & HIV

- In auditing burden on countries mental health including dementia, and injuries / disabilities must be included. This would be consistent with multilateral processes.
- HIV has transitioned to chronic disease so should be included in chronic disease management.
- NCDs can learn lessons from HIV for example information systems can provide framework for strengthening systems for all chronic disease.

WHO Global Monitoring of NCDs

Set of 9 voluntary global NCD targets for 2025



Caribbean Unity in Health
LOVE THAT BODY

Global Monitoring Framework

Mortality & Morbidity

Unconditional probability of dying
between ages 30 and 70 years
from cardiovascular diseases, cancer,
diabetes or chronic respiratory diseases

Cancer incidence by type of cancer

Risk Factors

Harmful use of alcohol (3)
Low fruit and vegetable intake
Physical inactivity (2)
Salt intake
Saturated fat intake
Tobacco use (2)
Raised blood glucose/diabetes
Raised blood pressure
Overweight and obesity (2)
Raised total cholesterol

Total number of related indicators in brackets

National Systems Response

Cervical cancer screening
Drug therapy and counseling
Essential NCD medicines & technologies
Hepatitis B vaccine
Human Papilloma Virus vaccine
Marketing to children
Access to palliative care
Policies to limit saturated
fats and virtually eliminate
trans fats

25 Indicators

Reporting UN NCD Indicators

- Sources of data for 25 indicators
 - STEPS Risk surveys (8)
 - GYTS, GSHS (3)
 - Special survey (3)
 - Policy review (3)
 - Cancer registry (2)
 - Mortality data (1)
 - No evident source (5)
- CARICOM members data availability:
 - Ranges from 1/25 to 18/25
 - Half the countries can report 12/25 or less

MOST DIFFICULT TO REPORT	COMMENTS
3. Alcohol per capita consumption/yr in males and in females	Production, export and import statistics possible, but tourist consumption will be included. Gender estimates possible from STEPS
5. Alcohol-related morbidity and mortality in youth and in adults	There is no routine testing for alcohol use
15. Mean % from saturated fats in males and in females	There is no capacity to estimate saturated fats
24. Hepatitis B vaccination rates in target populations	There is no defined target population or mechanism to monitor Hep B vaccination
18. Prop high CVD risk with drugs & counselling	There is no systematic categorization into CVD high risk. There are few electronic records in the private sector
19. Availability of NCD meds & basic tech in public / private sector	There is limited data from the private sector

Rationalising Surveillance and Reporting Going Forward

Situate and rationalise reporting by categories

- 1.CONTEXT
- 2.INPUT / PROCESS
- 3.OUTPUTS
- 4.OUTCOMES
- 5.IMPACT

POS grid - process data; revised to use standardised questions from e.g. WHO Country Capacity Survey

PAHO/WHO “Compendium of Indicators for Monitoring Regional and Global NCDs Response in the Americas” **includes** 41 PAHO core indicators,- outcomes and impact,

Propose use of POS Grid and PAHO Indicators to monitor NCD domain of CCH4

Request PAHO and WHO rationalise NCD reporting - small countries capacity

Revise and improve POS Evaluation Grid

NCD Progress Indicator Status / Capacity by Country in Implementing CARICOM POS NCD Summit Declaration
Updated: **September 2014; September 2015**

	NCD Progress Indicator	ANG	ANT	BAH	BAR	BEL	BER	BVI	CAY	DOM	GRE	GUY	HAI	JAM	MON	SKN	STL	SVG	SUR	TRT	TCI
COMMITMENT																					
1,14	NCD Plan	±	±	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	✓	±	✓	✓	✓	✓	✓	±
4	NCD budget	X	±	✓	✓	X	X	X	✓	±	✓	✓	X	✓	X	±	✓	X	✓	✓	✓
2	NCD Summit convened	X	✓	✓	✓	X	✓	✓	X	✓	✓	✓	X	✓	✓	✓	±	✓	✓	✓	X
2	Multi-sectoral NCD Commission appointed and functional	±	±	✓	✓	±	✓	✓	X	±	✓	✓	X	✓	X	±	✓	±	±	✓	X
TOBACCO																					
3	FCTC ratified	*	✓	✓	✓	✓	*	*	✓	✓	✓	✓	X	✓	*	✓	✓	✓	✓	✓	*
3	Tobacco taxes >50% sale price	✓	X	±	✓	X		X	✓	✓	✓	✓	X	X	X	±	±	X	✓	X	±
3	Smoke Free indoor public places	X	✓	±	✓	±	✓	✓	✓	±	✓	✓	X	✓	X	±	±	X	✓	✓	±
3	Advertising, promotion & sponsorship bans	X	X	±	X	X	✓	✓	✓	X	X	±	X	±	X	X	±	X	✓	✓	±
NUTRITION																					
7	Multi-sector Food & Nutrition plan implemented	±	✓	✓	✓	±		✓	X	✓	✓	✓	X	✓	✓	±	±	✓	X	±	±
7	Trans fat free food supply	X	X	X	X	X	±	X	X	X	X	X	X	±	X	X	X	X	X	±	X
7	Policy & standards promoting healthy eating in schools implemented	±	✓	✓	✓	±	✓	X	✓	±	±	±	X	✓	±	±	±	±	X	±	±
8	Trade agreements utilized to meet national food security & health goals	X	X	X	X	X	X	X	X	X	X	±	X	±	X	±	X	X	X	✓	X
9	Mandatory labeling of packaged foods for nutrition content	X	X	X	±	X	±	X	±	±	X	±	X	±	X	X	X	X	±	X	X
PHYSICAL ACTIVITY																					
6	Mandatory PA in all grades in schools	✓	✓	✓	✓	✓	±	±		✓	✓	✓	±	X	±	X		±	X	X	✓
10	Mandatory provision for PA in new housing developments	X		✓	✓	✓			X	X	X	±	X	±	±		X	X	X	X	X
10	Ongoing, mass Physical Activity or New public PA spaces	X	✓	✓	✓	✓	✓	±	✓	✓	✓	✓	X	✓	±	✓	✓	✓	✓	✓	X
EDUCATION / PROMOTION																					
12	NCD Communications plan	X	X	±	✓	X	✓	✓	✓	±	±	✓	X	±	X	±	X	±	±	✓	✓
15	CWD multi-sectoral, multi-focal celebrations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	✓	±	✓	✓	✓	✓	✓	✓
10	≥50% of public and private institutions with physical activity and healthy eating programmes	±	✓	X	X	X	±	X	±	X		±	X	✓	±	X	±	±	X	±	±
12	≥30 days media broadcasts on NCD control/yr (risk factors and treatment)	X	✓	X	✓	X	✓	X	✓	±		✓	X	✓	X	±	✓	±	✓	✓	±
SURVEILLANCE																					
11, 13, 14	Surveillance: - STEPS or equivalent survey	X	X	✓	✓	✓	✓	✓	✓	✓	✓	±	X	✓	±	✓	✓	±	✓	✓	±
	- Minimum Data Set reporting	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	±	X	✓	±	X	✓	✓	✓	✓	X
	- Global Youth Tobacco Survey	X	✓	✓	✓	✓	±	✓	✓	✓	✓	✓	✓	✓	X	✓	✓	✓	✓	✓	X
	- Global School Health Survey	✓	✓	✓	✓	✓	X	✓	✓	✓	✓	✓	X	✓	±	✓	✓	✓	✓	✓	X
TREATMENT																					
5	Chronic Care Model / NCD treatment protocols in ≥ 50% PHC facilities	X	✓	✓	±	±	±	±	±	±	✓	±	X	✓	±	±	✓	±	±	✓	X
5	QOC CVD or diabetes demonstration project	±	✓	✓	✓	±	±	±	✓	X	✓	✓	±	✓	X	X	✓	±	✓	✓	X
		ANG	ANT	BAH	BAR	BEL	BER	BVI	CAY	DOM	GRE	GUY	HAI	JAM	MON	SKN	STL	SVG	SUR	TRT	TCI

Legend: ✓ In place ± In process/partial information X Not in place * Not applicable □ No

Revision of Port of Spain Monitoring Grid

- Since 2008, NCD focal points completed the NCD Monitoring Grid each year.
- New grid improved
 - Definition of indicators (36)
 - uses questions from other surveys, reducing duplication
- Pilot testing April and May
- Deployed July 2016 for reporting to Ministers Caucus September 2016

Identify gaps in NCD data collection, collation and analysis

GAPS	RECOMMENDATIONS
<p>Unique Identifiers for citizens, thus the risk of double-counting.</p>	<p>Need regional programme for unique identifiers for each citizen</p>
<p>Data quality - Lack of standardized data collections formats across agencies and across countries, e.g. different age-groupings</p> <p>Data validation across agencies</p>	<p>Regional and national cross-agency standardized data collected formats developed and adapted by countries,</p> <p>Ongoing training in data reconciliation, and data cleaning.</p>
<p>Mortality data</p> <p>Poor certification by physicians and inappropriate coding of deaths</p> <p>underlying cause of death not being reported</p>	<p>Ongoing training in death certificates and coding</p> <p>All causes of death: immediate, underlying and contributory documented to facilitate Multiple cause analysis</p>

GAPS	RECOMMENDATIONS
<p>Morbidity data - Few national registries for NCDs – heart attacks, stroke, diabetes, hypertension, cancer, asthma</p> <p>Diabetic and hypertensive registers in PHC facilities are rarely consistent and standardized.</p> <p>Data generated rarely collated or analyzed to monitor the health situation.</p>	<p>Define a standardized format for data collection in public and private sector</p> <p>Build capacity for standardized data collation and reporting and analysis.</p> <p>Strengthen country capacity for cancer surveillance through IARC Caribbean Cancer Registry Hub at CARPHA.</p>
<p>Census data</p> <p>Sex and 5-year age-group of census data for calculation and standardization of rates are often not shared by the Statistical Depts.</p> <p>Inter-censal estimates are often not available</p>	<p>Build capacity at national statistical offices in the respective countries to share sex and age-group census data and to routinely generate annual population estimates distributed by sex and five-year age-groups.</p>

Conclusions and potential actions

Heads of Government

- National data audits and sharing of data across sectors for
 - UN NCD monitoring
 - SDGs
 - Setting and monitoring national priorities
- Joint programmes with Ministries of Education
 - monitor and address childhood obesity
 - authorised and funded

Conclusions and potential actions

For regional bodies:

- CDRC/UWI agreements with countries to
 - Procure, guard and use STEPS data for disparities analysis within and between countries.
 - Train and build capacity of country epidemiologists.
- POS Declaration: updated regional NCD plan 2016 – 2025, aligned with PAHO, adapted to CARICOM
- NCD response of regional bodies should be monitored.
- Greater alignment with other Small Island Development States (SIDS)

Conclusions and potential actions

Countries should:

- Align data collection for WHO global NCD monitoring e.g.
 - data from 18 year olds for global WHO STEPS surveillance
- Combine surveys e.g.
 - Conduct Global Youth Tobacco Survey and Global School Health Survey at the same time in the same venues;

Summary

- Too many, overlapping, demands for reporting being made on countries.
- Requesting agencies need to collaborate and rationalise reporting demands.
- Need for support and capacity building for countries to make full use of the data collected, e.g. STEPS.
- Regional organisations should continue to enhance training and capacity building in reporting NCD indicators.
- Greater collaboration between regional and international organisations on monitoring, (e.g. UNICEF - nutrition surveillance; UN Environment Programme on climate change).
- National data audits and sharing across sectors for UN NCD global monitoring and SDGs should be authorised.
- Align with Pacific Islands and Small Island Developing States (SIDS) re environmental indicators and NCD indicators.