Preventing and controlling noncommunicable diseases in the Caribbean

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Noncommunicable diseases (NCDs) in the Caribbean represent not only a major health problem, but also a serious economic challenge. NCDs cause the death of some 16,000 persons prior to age 70 annually, making an obvious impact on economic productivity. The goal is to avoid 5,000 of those deaths per year by 2030 and to reduce the upward cost spiral.

The Caribbean has been acknowledged as a global leader in advocating for the prevention and control of NCDs, but that leadership has slipped. The region is not on track to fulfill the mandates of the Port of Spain Declaration, the WHO target of 25 × 25, or the Sustainable Development Goals target of 30% reduction in premature mortality from NCDs by 2030. This shortfall can be corrected only through vigorous political action and by directing adequate resources at the challenge. The multisectoral dimension of NCD prevention and control must be addressed by engaging all sectors, from agriculture, trade and consumer affairs, to education, transport, and urban planning, with high priority being given to finance.

The region must provide access to quality health services as treatment, which must not suffer at the hands of prevention. Prevention is key, especially among the Caribbean’s young population. Reducing physical exercise time in school and permitting constant advertising of foods high in sugar, fat, and salt to children are examples of lack of policy coherence. Policy coherence is needed at the local level, but we must recognize the need for regional approaches, such as a Caribbean-wide mandatory front of package nutrition labeling, model legislation, and cooperating in trade-related measures. Unfortunately, there are complex barriers, such as a reluctance to address the harmful use of alcohol for fear of confronting what is labelled as our “party” culture or hurting the industry and the jobs it provides; and a tendency to stay indoors and avoid physical activity due to fear of being robbed in unsafe places.

To ensure continued leadership, the Caribbean Community (CARICOM) Heads of Government should announce at the forthcoming 2018 United Nations High Level Meeting, the decisions they have taken in areas such as: mandatory front of package nutritional labeling; banning advertisement of potentially harmful foods that specifically target children; and the appropriate fiscal policies to reduce the consumption of tobacco, alcohol, and sugar-sweetened beverages.

The present publication summarizing the evaluation of the Port of Spain declaration is a rich trove of information to guide action. It makes excellent recommendations in the categories of supportive policies and governance, supportive environments, supportive health systems, changing individual behavior, and improving the quality of clinical care. However, it also points out the gap between the declaration and the actions, which underscores the need for implementation research. We have to understand the barriers to the uptake of evidence, as well as how to frame that evidence and how to build all of society alliances. Effective programs for NCD prevention and control will require unprecedented partnerships between and among all parts of society, including patients, families, and communities, as well as the different loci and levels of care. There must be involvement by the essential parts of government, the private sector, and especially, civil society. Institutional support from CARPHA, CARICOM, and other regional entities is critical to these efforts and needs to be appropriately resourced.

The collection of available, relevant data to provide evidence for informing priorities and practice continues to be a challenge. In some countries, the basic data are not shared. In addition, there are requests from international agencies for


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data that are not available or have to be sourced from non-health agencies. Small countries also have to face the challenge of receiving numerous requests for reports from various agencies without the human resources necessary to comply.

Most of the Caribbean region consists of small island developing states (SIDS). It needs to align itself with the Pacific islands to make the case that SIDS are highly dependent on imported food due to lack of economies of scale and diversity in production. This dependence contributes to having among the highest rates of NCDs in the world. SIDS need special attention from the international community. The Caribbean is justly proud of its pioneering role in the global promotion of NCD prevention and control. It must now take equal pride in implementing its own commitments and targets. This evaluation clearly shows the way.