

# Health Challenges in the Small Island Developing Countries of the Pacific and the Caribbean



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## **Key Message:**

**Health and disability caused by NCDs have the rippling effects to individuals, households, societies and represent significant impediments for economic growth.**

# Overview of Presentation



- Health Context
- Non Communicable Diseases (NCDs) \* as a health crisis
- NCDs as an economic / development crisis
- World Bank Support and Next Steps - “The Roadmap” in the Pacific and a Regional Approach in the Caribbean
- Discussion - What we can do now?

\* Eg Diabetes; heart attacks, strokes, and cardiovascular disease; cancer; etc

# Health Context

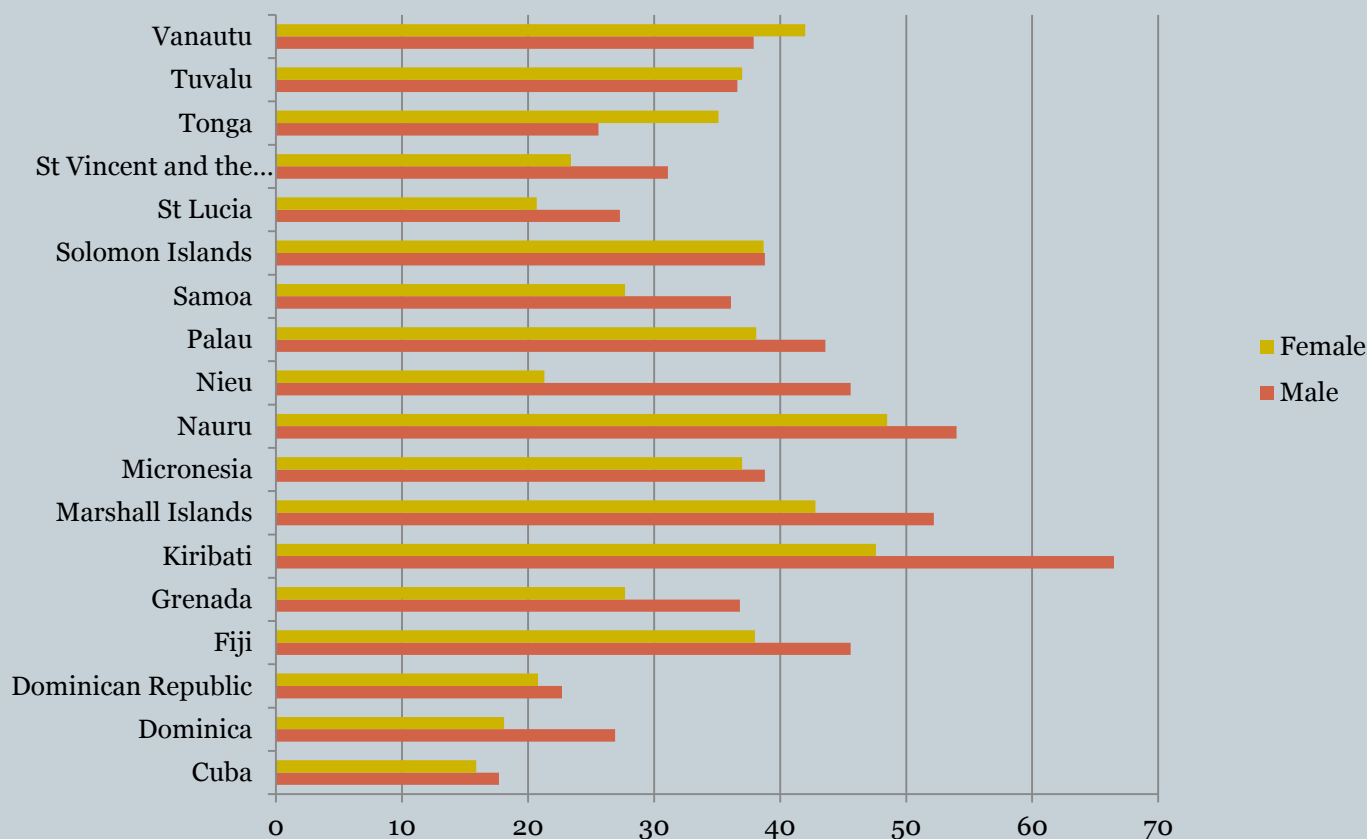


- **Notable achievements in health:**
  - Good MCH outcomes but inequities (PNG worst maternal mortality)
  - General acceptance of relevance and value of PHC
  - Relatively low OOP for health care(exception PNG)
  - Social cohesion is good but violence against women and youth unemployment of concern
- **Challenges:**
  - Coverage of health services patchy
  - Weak information systems
- **Significant variations among countries**

# A Substantial Burden of Premature NCD Deaths in the Pacific and the Caribbean



Proportion of premature NCD deaths, 2010



# Risk factors driving the crisis



**Smoking** : Kiribati, PNG and Tonga in top 10 countries in the world.

**Nutrition**: Many top 10 obese countries in world are PICs. Eg 84 % overweight and 59% obese in Tonga (STEPS). Role of sugary drinks, salt.

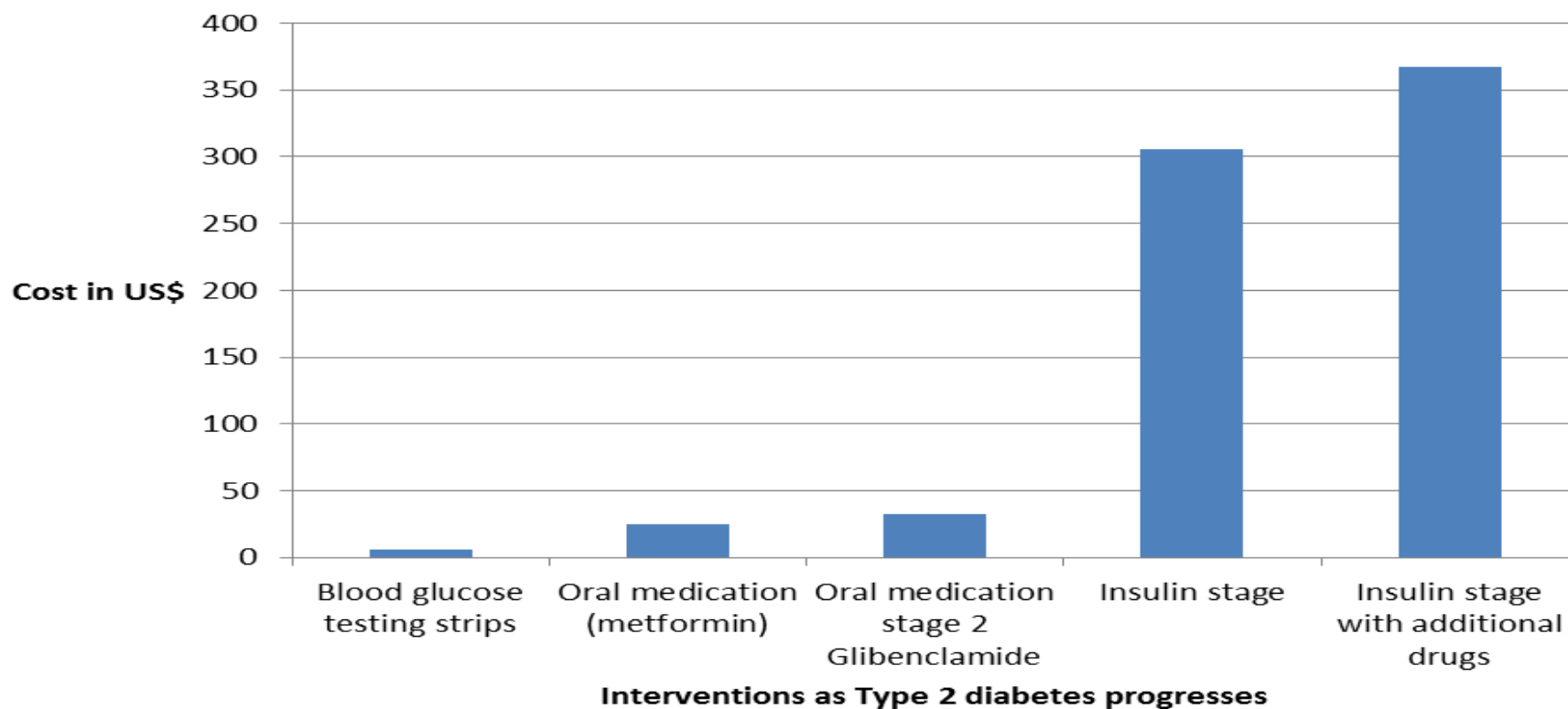
**Alcohol**

**Physical inactivity**: 43.9% inactivity in Tonga (STEPS)

# Treating NCD is Costly



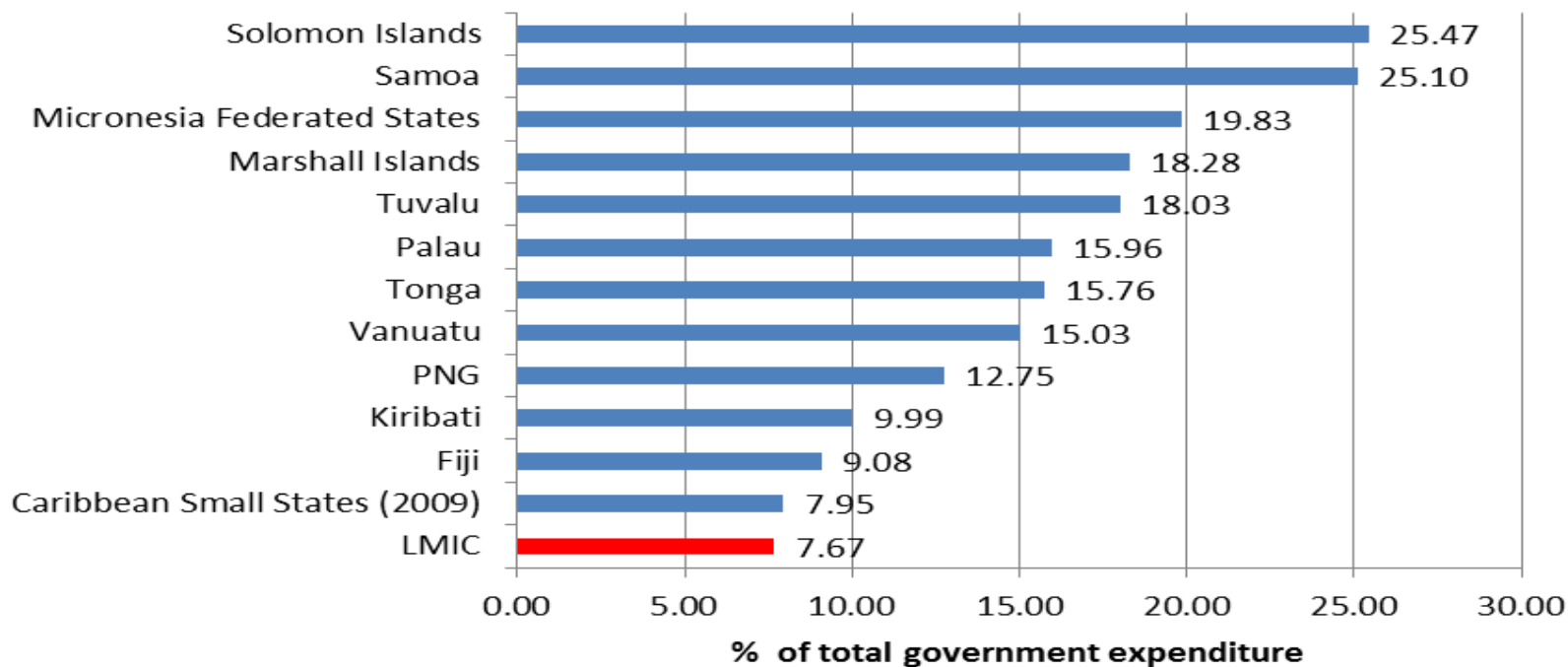
## Average pharmaceutical costs for one diabetes patient



# Government expenditure on health (including external financing) already major part of government expenditure

Source: World Development Indicators (2014)

## Public health expenditure as % total government expenditure in 2011





# NCDs in Small Island Developing Countries

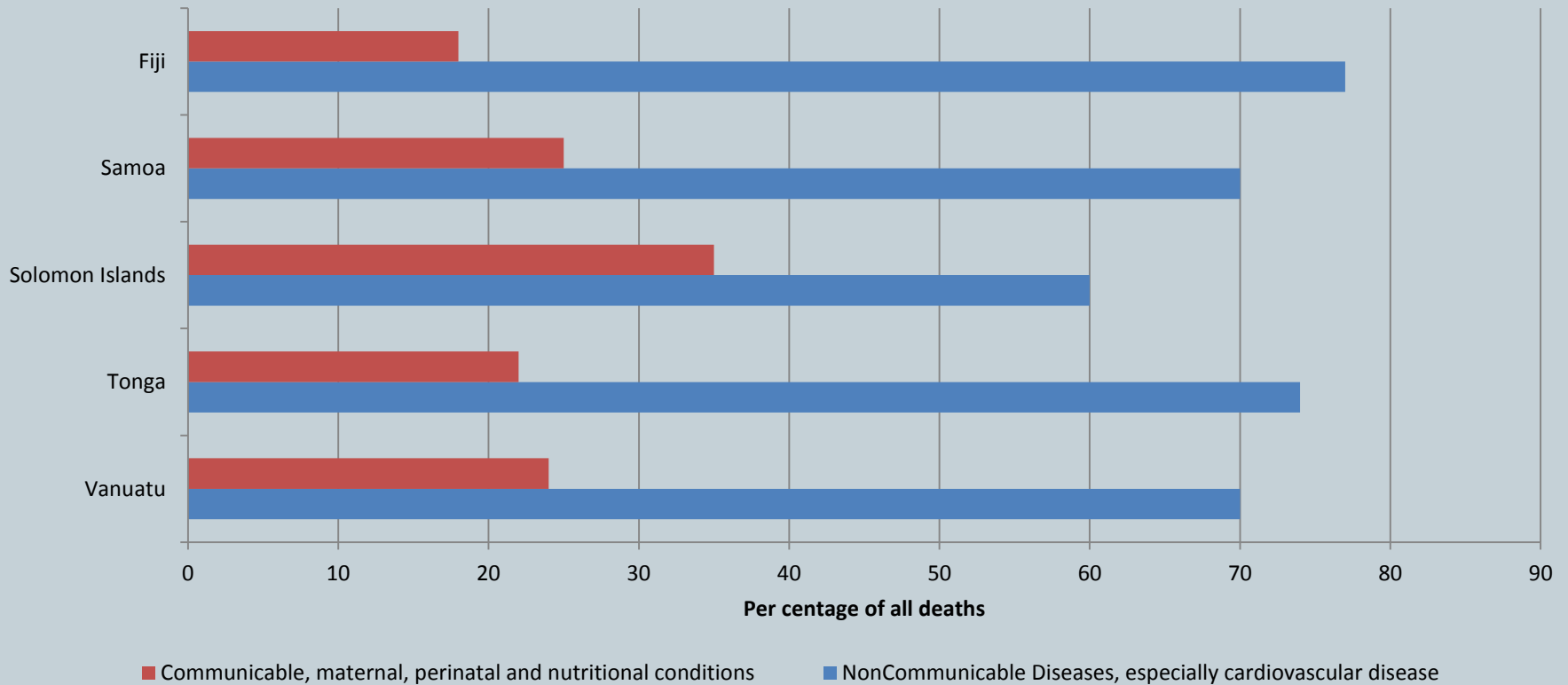


## THE PACIFIC ISLAND STATES

# NCDs now the leading cause of death (disability important too: eg stroke, diabetes related blindness)



## Importance of communicable, MNCH, and NonCommunicable diseases

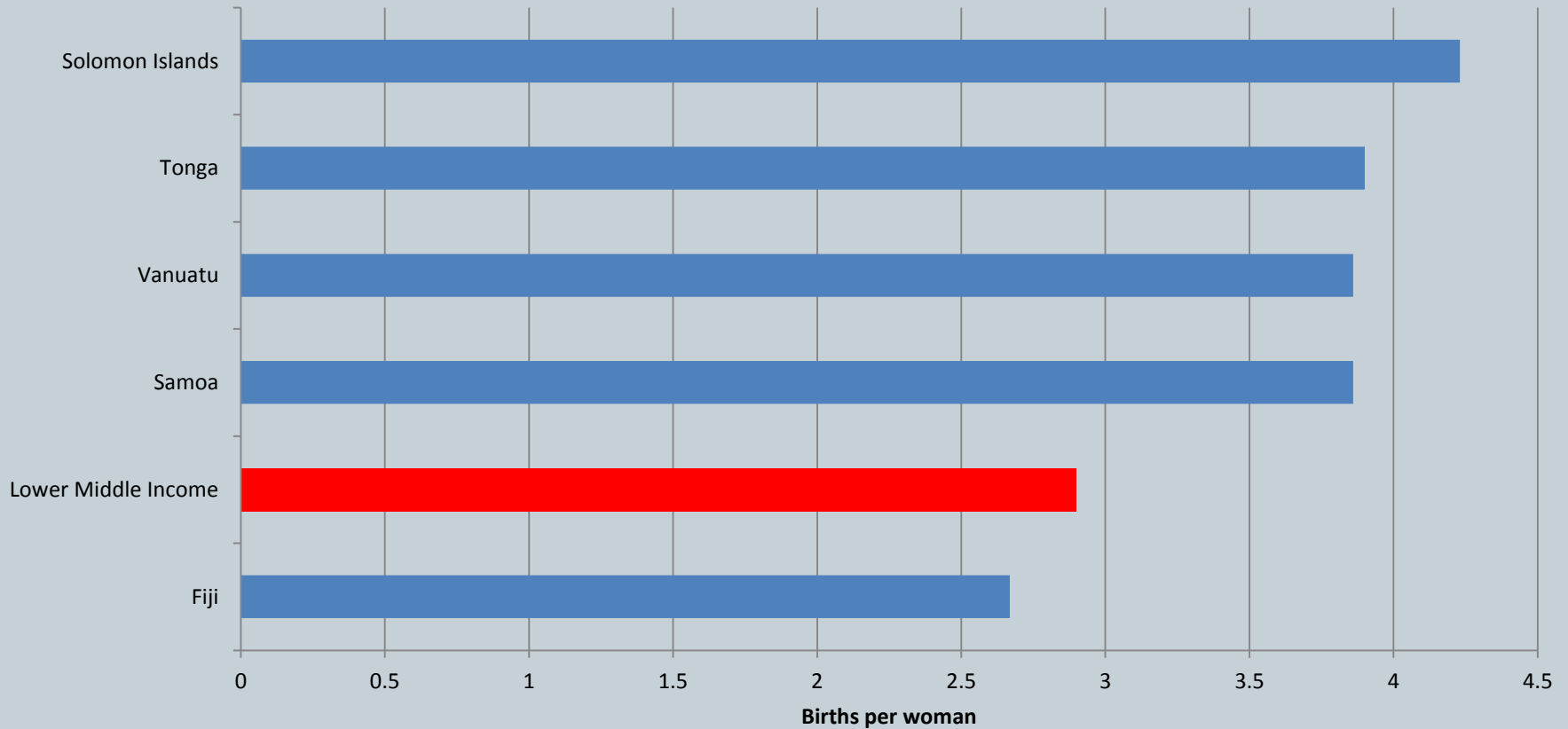


# “Double burden” eg fast population growth increases the need for expenditure on maternal and child health care

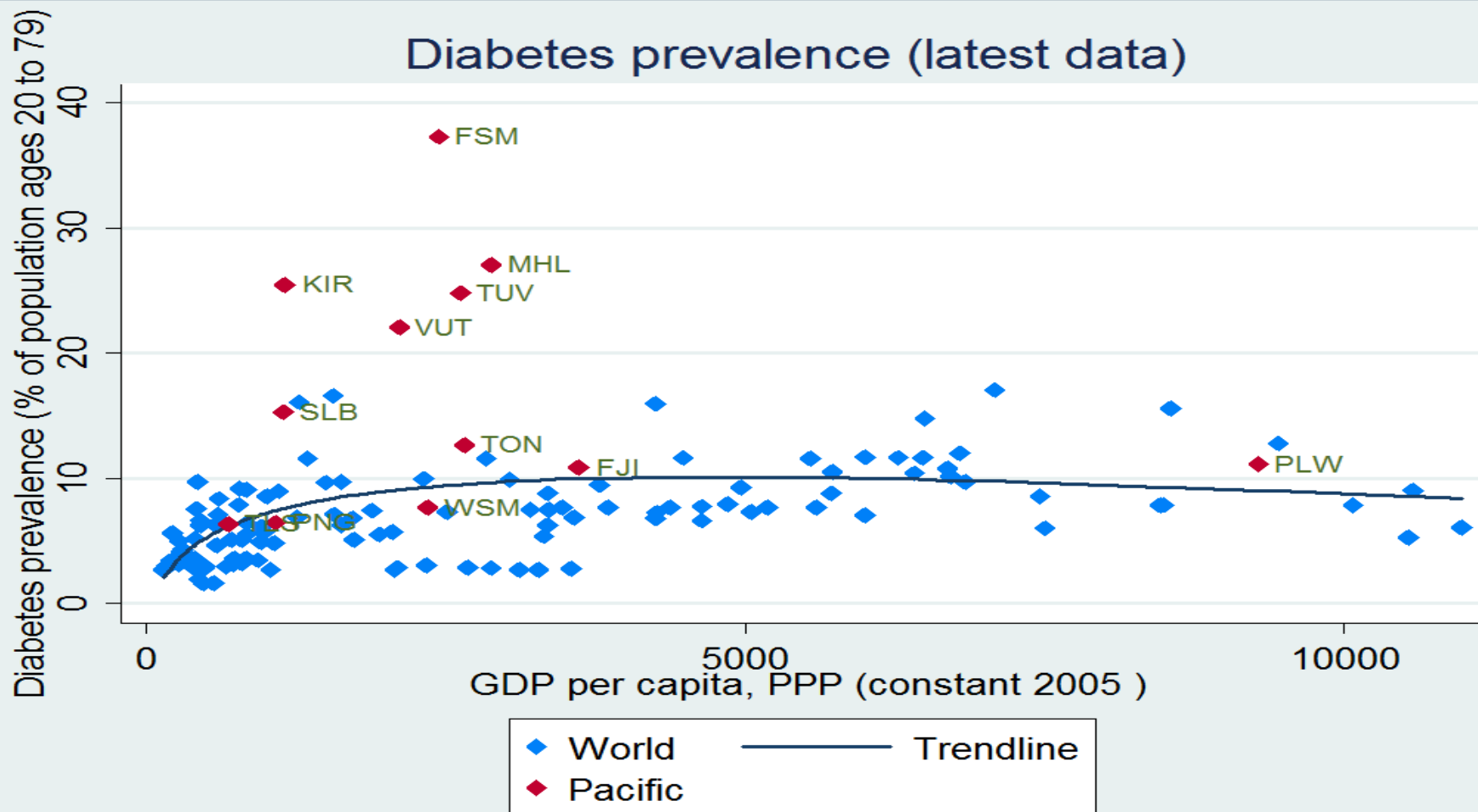
Source: World Development Indicators 2013



## Total Fertility Rate, 2010

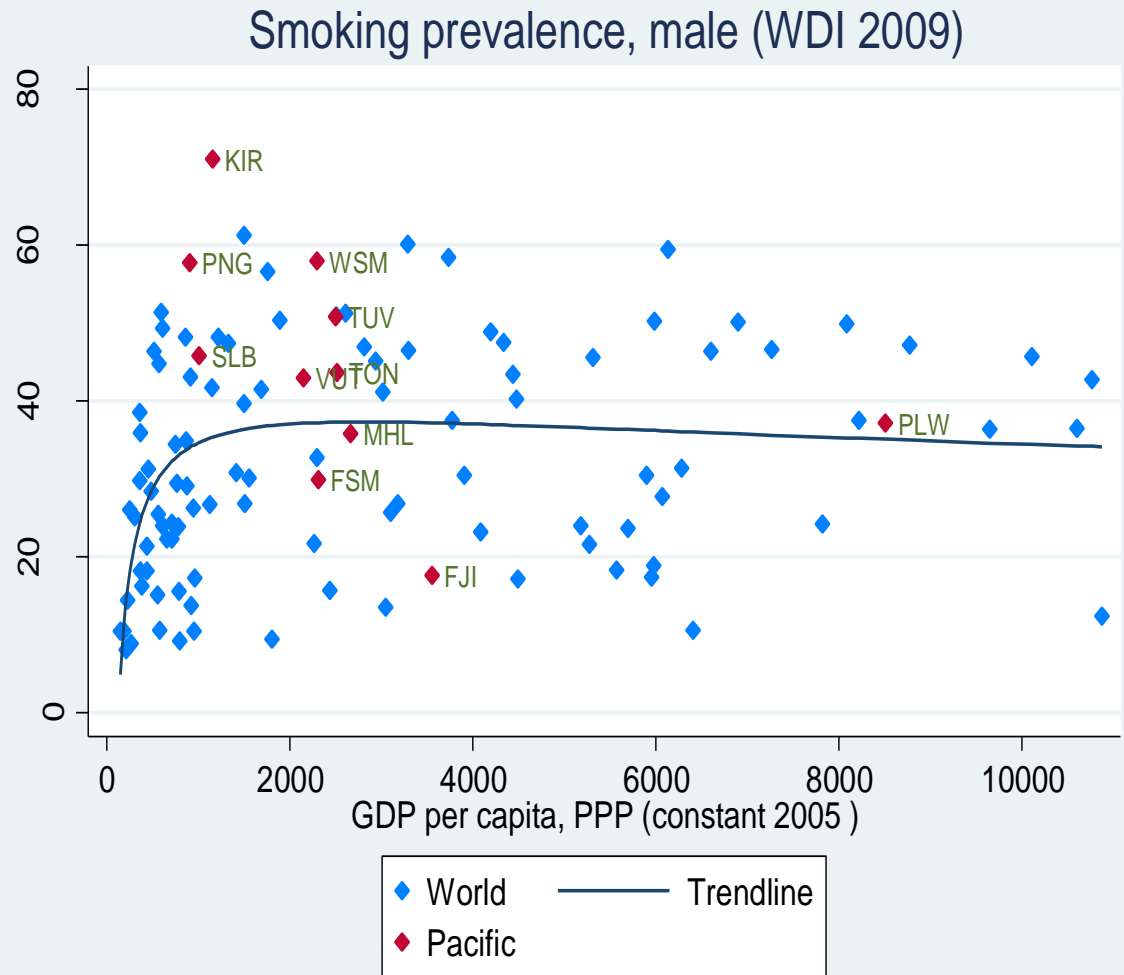


# Diabetes a particularly severe problem



Source: WDI, 2014

# High Smoking Rate in Pacific



## NCDs put large – even unsustainable – pressures on national budgets



- One diabetic patient in Vanuatu = 76.4 other citizens allocation.
- Only 1.31% of the total population in Vanuatu treated with insulin before the country's total drug budget allocation is used up.
- Dialysis in Samoa cost \$ 38,686 per patient per year in 2010/11, more than 12 times GNI per capita. Around two thirds of the patients had then died within two years

## BUT ....the case for saying PICs are doing *relatively* well already

Source: World Health Statistics 2013



| Country                                       | Government expenditure on health per person per year (\$US 2010) | Government expenditure on health per person per year (\$ PPP) | Government expenditure on health per person in a month (\$US) |
|---|--|---|---|
| Samoa   | 179  | 241   | 15  |
| Kiribati                                      | 157  | 213   | 13  |
| Tonga   | 140  | 245   | 11  |
| Vanuatu                                       | 135  | 207   | 11  |
| Fiji  | 109  | 136   | 9   |
| Solomon Islands                               | 88   | 187   | 7   |
| <b>Lower Middle Income Countries globally</b> | <b>27</b>  | <b>55</b>   | <b>2</b>  |

# Bank Support for an NCD Roadmap for the Pacific



- Political commitment: Forum leaders have declared NCDs ‘a crisis’
- Concern from both Ministries of Health and Ministries of Finance
- Opportunity to address joint meeting of Ministries of Finance and Ministries of Health (Honiara, July 2014) and Pacific Leaders meeting (July 2014, Palau)
- ‘Social determinants of health’ means a multi-sectoral approach is required - partnerships



# Scope of the Roadmap



- Government multi-sectoral actions from an economic perspective.
  - Special focus on Prime Minister's Department (ie accountable); Finance and Economic Ministries; Health Ministries.
  - 12 other Ministries: Attorney Generals; Agriculture; Communications; Customs and Excise; Education; Labour and Industry; Public Service Commission; Trade; Urban Planning/ Town Councils; Sport, plus National Statistics; Police.
- Other stakeholders: development partners (direct and indirect effects); civil society; regional

# Key messages in the Roadmap



- NCDs are already causing a health crisis in the Pacific, with most of the trends and risk factors pointing to a substantial worsening of the situation unless action is taken now.
- Several NCD related programs are already financially unaffordable / unsustainable: OVT 15% total MOH budget = 0.1% population
- Growing NCD burdens, combined with modest economic growth, will inevitably further squeeze Ministry of Health *and* national development budgets unless urgent action is taken now.

# Key messages



- Fortunately, many NCDs are often preventable, or their health and financial burdens can at least be postponed.
- Four key actions all countries in the Pacific can take based on need, and ‘best buys’:
  - tobacco control;
  - reduce unhealthy food and drink ;
  - improve efficiency of existing health dollar (including scale up PEN);
  - strengthen evidence base to ensure resources are used well
- Menu of over 30 other multi-sectoral interventions each country can then also choose.

# Tobacco



- Key driver of the NCD crisis: kills 1/2 -2/3 users. Causes or worsens all NCDs.
- Raise excise on tobacco to 70% of retail price.
  - Reduces use AND raises revenue
  - Benefits the poor the most
  - Cook Islands Minister: quit smoking is equivalent to a wage increase
- Implement Tobacco control as well
  - Advertising
  - Single stick sales
  - Local production
  - Workplace
- Implement existing laws: a litmus test of seriousness for development partners? Tobacco free Pacific by 2025?

# Food and drink



- Overweight / obesity in PICS now some of highest in world
- Reducing salt intake reduces high blood pressure
- Risk of sugary drinks and diabetes
- Alcohol: traffic accidents and domestic violence
- Availability of other processed/junk food
- Taxes?
- Marketing (especially to children) and labelling
- Alternative fresh foods

# Improved efficiency



- Scale up Package of Essential NCD (PEN) interventions as part of broader health sector reform
- Wide variation in drug prices (10 fold difference in price of simvastatin Nauru > Cook Is and Kiribati)
- Take tough decisions: is dialysis effective, equitable, affordable ? OVT 15% for 0.1% population

# Improve the Evidence Base for better decision making



- Cost of treating key NCDs? Who does this well, and how in the Pacific?
- What is going to be the cost of scaling up PEN? Recurrent costs? \$NZ 900,000 - \$NZ 4 million range
- What is the most cost-effective way of strengthening health promotion and awareness? Is it through a Health Promotion Foundation?
- Reduced productivity and cost to industry?

# Country roadmap: priority 1 tobacco control.



| Priority area   | 2014   | 2015  | 2016  | 2017                            |
|---|--|---|---|---------------------------------|
| Raise excise duty to 70% of retail price                        | Public awareness campaign launched and tested                              | Raise excise to 45% of retail price and monitor | Raise excise to 55% of retail price and monitor | Raise excise to 70% and monitor |
| Enforce existing regulation against sale of single sticks       | Public awareness campaign launched and tested.<br>Baseline study conducted | Reduction of 25% such sales                     | Reduction of 70% such sales                     | Reduction of 95% such sales     |
| Other country specific priorities eg advertising, quitlines etc |  |   |   |                                 |



# 2013 FEMM Action Plan (Nuku'alofa, Tonga)



“43. Given the high priority accorded to addressing NCDs in the region by Leaders, Ministers **agreed** to include NCDs as a standing agenda for future FEMMs and **requested** the Secretariat of the Pacific Community, on behalf of the Quintilateral Partners in Health, to provide updates on the development of the NCD roadmap and ensure close engagement of Forum Members.

44. Ministers **requested** Secretariat of the Pacific Community, on behalf of the Quintilateral Partners in Health, to present the finalised NCD roadmap to Economic Ministers in 2014 outlining the specific role and contribution of Economic Ministers in strengthening NCD prevention and control in the Pacific region.

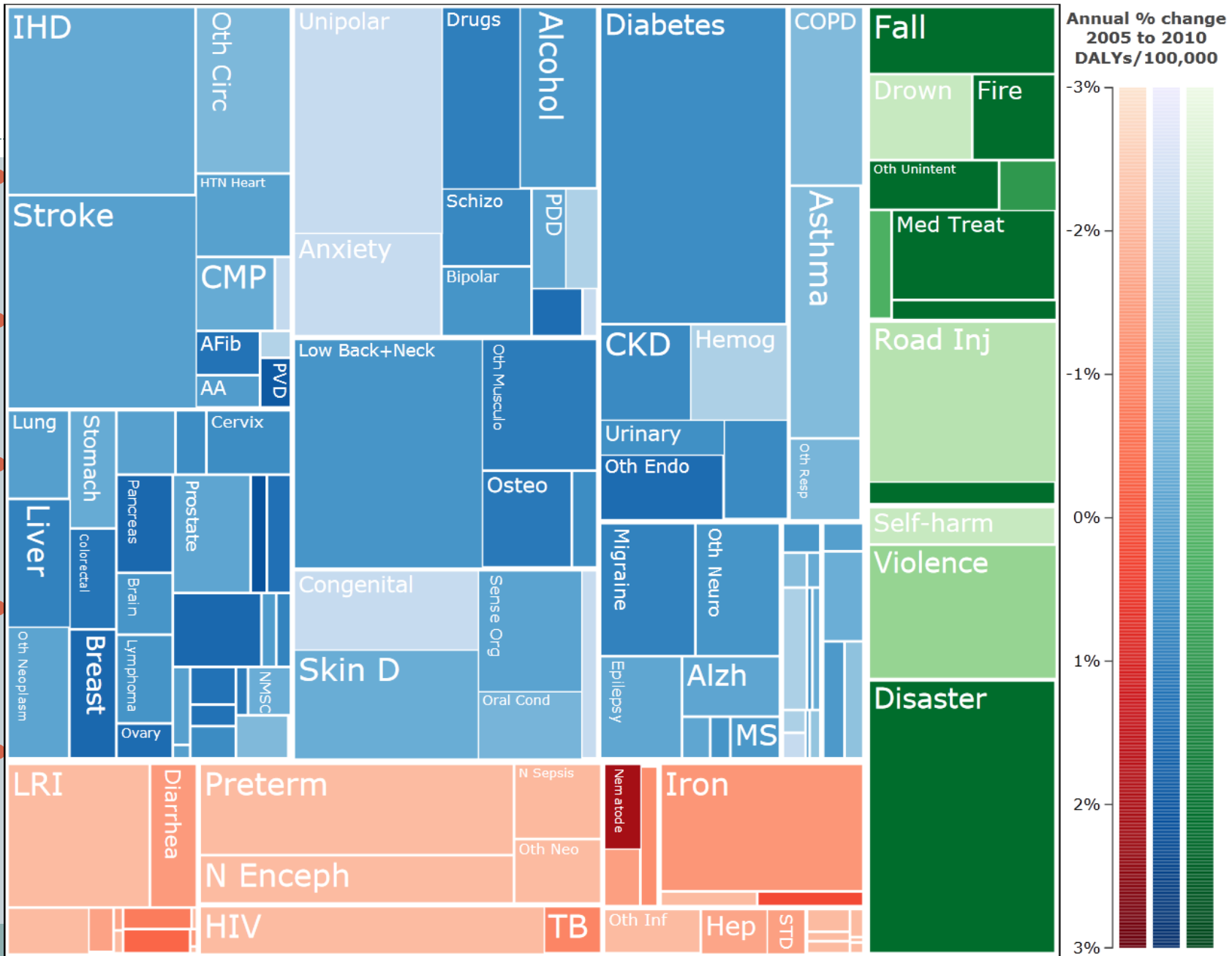
45. Ministers **directed** that the Forum Secretariat and Secretariat of the Pacific Community explore options for a joint meeting of Economic and Health Ministers to promote greater collaboration to tackle the epidemic rate of NCDs in the region”

# NCDs in Small Island Developing Countries



## THE CARIBBEAN

Saint Lucia, DALYs  
Both sexes, All ages, 2010



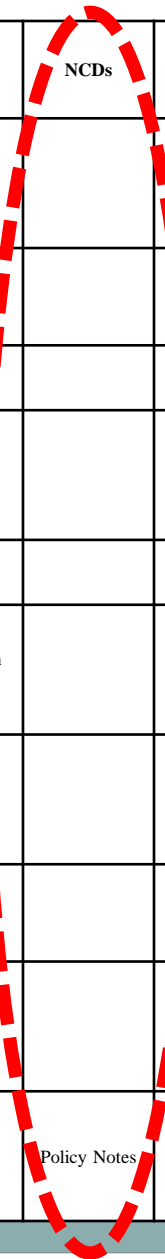
# Why action is needed to address NCDs in the Caribbean



- **Eroding the countries' workforce and productivity and increasing vulnerabilities of the Caribbean population.**
- **Account for 75 to 85% of total deaths.**
- **Expenditure exerting a heavy burden on limited resources for both governments and households.**
- **The Caribbean lacks**
  - **planning capacity to develop and implement a strategy.**
  - **skilled workforce to meet ↑ demand for costlier & more complex NCD related health services.**

# Role for the Bank in Addressing the Gap

|                | Financing                | Health System   | Information Systems/M&E              | HIV/AIDS   | Human Resources                         | Nutrition                      | NCDs         | Public Health                       |
|----------------|--------------------------|---|--------------------------------------|--|---|--------------------------------|--------------|-------------------------------------|
| Abt Associates |                          | Workshop on Integrated Health Systems ✓                 |                                      | Service Provision Assessment Surveys ✓               | HRH Assessments ✓                       |                                |              |                                     |
| CDC            |                          |   | Software hardware, training ✓        |  |   |                                |              |                                     |
| CHART          |                          |   | Country-level support ✓              |  |   |                                |              |                                     |
| Global Fund    |                          |   |                                      | BZ, DR, GY, HT, JM, PANAMA, ST, SUR ✓                |   |                                |              |                                     |
| HRSA           |                          |   |                                      |  | HRH Assessments ✓                       |                                |              |                                     |
| IADB           | DR, JM T&T SP Projects ✓ | Suriname Primary Health Care and Networks ✓             |                                      |  |   | Belize Mesosamerican Project ✓ |              | Haiti (cholera, safety) ✓           |
| PAHO           |                          | Integration of Health Services, Hospital Safety Index ✓ | Health Metrics Network (HN) ✓        | Evaluation of health systems, approach to HIV/AIDS ✓ | HRH, Assessments, Monitoring Handbook ✓ |                                |              | Essential Public Health Functions ✓ |
| PEPFAR         |                          |   |                                      | Prevention, Care and Support ✓                       |   |                                |              |                                     |
| USAID/ MEASURE |                          |   | M&E Evaluations in Dom, G, KN, SVG ✓ |  |   |                                |              |                                     |
| World Bank     | RBF (Dom, HT, STL) ✓     |   | Workshop on support Harmonization ✓  | BB, KN, SVG, ✓                                       | Regional approach – Nursing Workforce ✓ |                                | Policy Notes |                                     |



# The Bad News



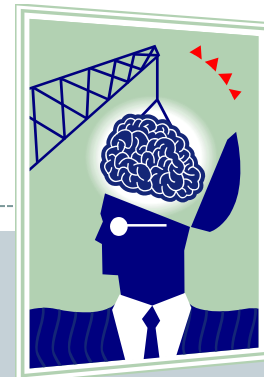
**Overweight/Obesity ↑. 38.4% males, 65.3% females to be obese by 2015.**

**Physical Inactivity levels ↑ due to urbanization and sedentary lifestyles, 32.2% males, 49% females in SKN.**

**Smoking responsible for at least 10% of all deaths in the Caribbean.**

**Excessive alcohol consumption common across the Caribbean and ↑ in poorer households (per capita consumption of alcohol of 11.7 liters in STL compared to CA + CAR avg. of 4.5 liters)**

# Bank Support - Knowledge



## NCDs

- OECS and Jamaica **BB**
- School Health **HIV TF**

## Human Resources for Health (HRH)

- CARICOM Nurse Migration **HRH TF**
- CARICOM Legal Instruments **HRH TF**
- CARICOM bilateral policies **HRH TF**
- CARICOM health workforce skills **HRH TF**
- Performance Management Policies in Jamaica **SFLAC TF**

## Results Based Financing (RBF)

- Dominica **HRITF**
- Saint Lucia **HRITF**
- CARPHA **HRITF**
- Belize (OECS link) **HRITF**

# Bank Support - Convening



**NCDs: Caribbean Consultation  
Workshop** **BB**

**Nutrition: Protecting Nutrition in Disaster Situations** **S2S TF**

**HIV: Caribbean HIV Knowledge Forum** **UNAIDS TF**

**HRH: Chile S2S TA to Dominica for HRH Health Information  
Systems module** **HRH TF**

**Health Information System (HIS): OECS Regional Health Data  
Dictionary** **IDF**

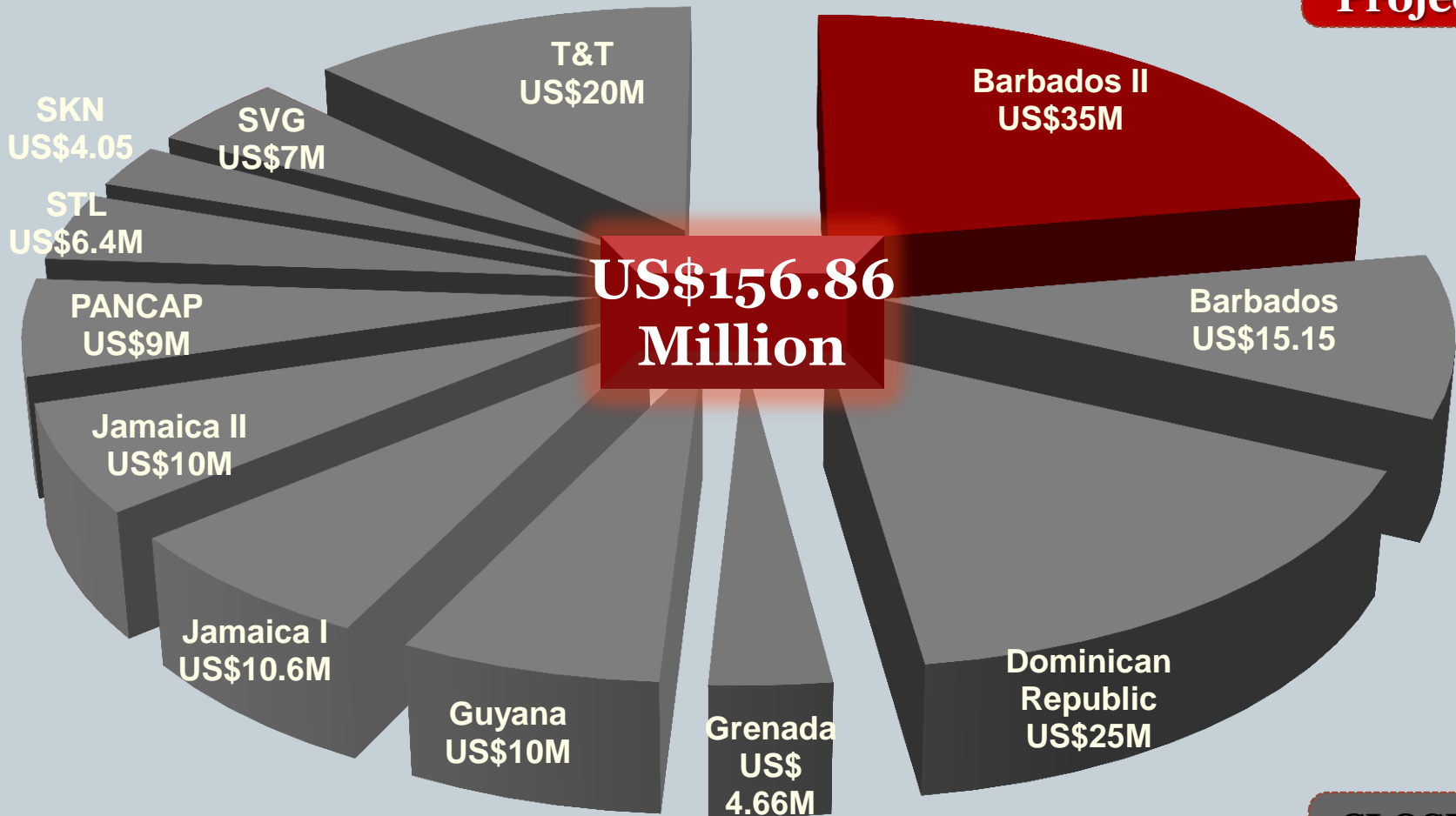
**RBF: Dominica and Saint Lucia S2S Exchange Visits to Argentina  
and Dominican Republic and Belize (virtually)** **HRITF**



# Financing (HIV/AIDS Portfolio)



**ACTIVE  
Project**



**CLOSED  
Project**

# Future Directions



- **HIV/AIDS → NCDs → Health Systems Strengthening and Universal Health Coverage**
- **Small Projects → Regional Approach**
- **Changing the ways to do business:**
  - ➔ **Multisectoral Approach**
  - ➔ **Leveraging partnerships and \$\$\$**

# The Bank's Comparative Advantages



- **Bringing in the global knowledge on NCDs and Health Financing**
- **Working at the regional or sub-regional levels**
- **Working with different sectors, particularly Ministries of Finance**



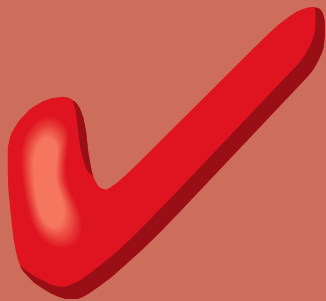
# Future Portfolio

## KNOWLEDGE

### NCD:

Learning from  
Jamaica's  
approach to  
costing an NCD  
Strategy

HRH Planning and  
Management for  
Combatting NCDs



## CONVENING

### RBF:

S2S Exchanges to  
Pilot RBF to  
address NCDs



## FINANCING

### Regional Operation to support NCDs

- strategic planning
- effective financing through RBF
- strengthening capacity (HRH)

# Questions for Economic Advisers about the Way Forward?



- If your country could only do 3 things to respond to the NCD Crisis, what would those 3 things be?
- You would have seen many well designed strategies in health and other sectors that are not properly resourced or implemented very well. What can we all learn from this?
- What have we missed?