Partnerships Against NCDs: The Head, Heart and Pocket Approach

Dr. C. James Hospedales Former Executive Director, CARPHA Chair, the Defeat-NCD Partnership Co-chair, Expert Panel on Climate and Health in the Caribbean

13th Caribbean Conference on National Health Financing Anguilla, November 6-7, 2019

Outline

- Introduction and context Caribbean Cooperation in Health
- Caribbean journey with NCDs
- Political economy of NCDs
- Defeat-NCD Partnership
- Concluding remarks
- Q&A

Introduction

- Congratulations on 13th Caribbean Conference on health financing!
- Progress in health and development in Anguilla and Caribbean
- Context of unprecedented change social, political, economic, technology, Artificial Intelligence, environment degradation, de-speciation, worsening inequality, <u>Climate Change overarching threat to planetary health</u>
- Opportunities in Partnership for NCDs speaking to head, heart and pocket
- The "Political Economy of NCDs" promises not matched by action

Caribbean Cooperation in Health





The 5 priority areas to be addressed in CCH IV:

- Health Systems for Universal Health Coverage
 - Better services for health promotion, disease prevention and treatment to a more off the population at affordable costs so that no family is impoverished as a result
- Safe, resilient, healthy environments to mitigate climate change
- Health and well-being of Caribbean people throughout the life course
- Data and evidence for decision-making and accountability
- Partnership and resource mobilization for health



CARIBBEAN COOPERATION IN HEALTH (CCH)

Healthy Productive People in Healthy Spaces





CONTEXT: Caribbean Public Health Past and Future

- Brief Look back at CCH
 - 40's 70's the "Frank Stockton" report 1942; tackling gastroenteritis and malnutrition (SPACGEM); Alma Ater on PHC '79
 - 80's Caribbean Cooperation in Health (CCH-I), elimination of indigenous measles, structural adjustment policies
 - 90's CCH-II Massive scale up in response to HIV/AIDS, hospital building
 - OO's CCH-III Elevating NCDs to global attention, global financial crisis '08, hospitals vs PHC
 - 10's CCH-IV the **birth of CARPHA** an integrated public health agency, Universal Health Coverage – PHC 2.0, Astana Declaration 2018
 - 20's ?

Leading causes of death as percentage of all deaths, 2000-2016

Speaking to speak to head, heart and pocket campaign leads to investment in and decrease of HIV/AIDS







Rev Panam Salud Publica. 2011 Oct;30(4):393-400.

Raising the priority of chronic noncommunicable diseases in the Caribbean.

Hospedales CJ¹, Samuels TA, Cummings R, Gollop G, Greene E.

- 1. Lessons learned:
 - importance of political process, packaging evidence to 'speak to head, heart and pocket', champions, civil society, accountability
- 2. Global legacy explored...



institutional expression of Caribbean Cooperation in Health¹

Feedback 🖵

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Partnerships and Alliances







CONTEXT: Challenges and opportunities

- Small size -> Regional approach to common challenges
- Climate change as an overarching threat for SIDS; links to NCDs; Expert Panel CC&H
- Noncommunicable diseases (NCDs), child obesity, economic dimensions of NCDs; Violence and Injuries; Mental health and substance abuse, decriminalisation of marijuana, opiate crisis in N America
- Policy and Financing of health services; the Political Economy of health; HR retention
- Demographic ageing and increase of dementia, imperative of healthy ageing
- Emerging /re-emerging diseases, mosquito borne iral diseases, AMR, vaccine hesitancy
- Environmental vector borne diseases, pollution and environmental degradation, micro plastics, Sargassum blooms, sea levels rising
- Social determinants the conditions under which people live, learn, play and pray; political shifts, inequality, gender
- ICT revolution Digital Health, participatory health, consumer expectations
- Opportunity for partnership unprecedented, but capacity limited

Caribbean Journey with NCDs

Proportional mortality By age group CARPHA Member States Circa 2012

?related to climate change





Accountability perspectives

- POS Summit Declaration on NCDs 2007 in Trinidad; Legacy globally in SDGs, through CHOGM, Summit of the Americas, UNHLM 2011, 2014, 2018
 - **15 points; 27 commitments**, including M&E; naming CARPHA, University West Indies, PAHO/WHO and CARICOM as the joint secretariat; *no new money...*
- Importance of 'compliance catalysts' in Declarations re subsequent implementation: <u>Accountability architecture</u>, Civil society, insertion to other High-level Meetings, Funding, Naming implementation institutions, Champions... (G7/G20 Research Unit)
- Evaluation 2015/16 led by UWI GACDRC NOT ON TRACK FOR CCH or SDG targets
 - **Mixed scorecard**; bigger countries and those with regional support tended to do better; attitude and investment in prevention not there yet, especially food and nutrition security

POS NCD Monitoring Grid

Annual monitoring of 27 Commitments

Presentation to Council of Ministers of health, and others

	NCD Progress Indicator	Α	Α	в	В	в	в	в	С	D	G	G	н	1	м	S	s	5	5	т	
		N G	N T	A H	A R	EL	E R	v	A Y	о м	R E	U Y	A	A M	O N	K N	T L	V G	U R	R T	L
		U				ITM				m					IN .	N		U	n		L
S CC	National NCD policy, strategy or action plan	+	+	<u> </u>	+	+	+	+	+	+	+	+		+	+/-		+/-	.	+	+	
	integrates NCDs and risk factors				T	.			1						+/-		+/-			1	
S	NCD plan/ programmes explicit re gender	+	+		+	+	+	+	-	+	+	+		+	+		+	+	+/-	+	ľ
SCC	Funding for NCD and risk factor programs	+	+		+	-	+	+	+	+	+	+		+	+		+	+	+	_	ſ
S	Earmarked taxes/revenue for NCDs		+		-	_	_	_	-	_	_	_		+	_		_	_	_	_	ľ
ds16	National tax on sugar sweetened beverages	+/-	_		+	-	_	-		+		-		_			+	-	-	-	I
ds16	National tax on high fat foods	_	_		-	+/-	_	_		_		-		_			+	_	-	-	Ī
lds16	National tax on high salty foods	-	-		-	+/-	-	-		-		-		-			+	+	-	-	I
C	Price subsidies for healthy foods	-	+		-	-	_	_		_		+/-		_			+	-	-	-	I
'S CC	NCD unit or equivalent in MOH	+	+		+	+/-	+	+	-	+	+	+		+	+		+	+/-	+	+	Ī
S	Dedicated NCD focal pt >50% time on NCDs	+	+		+	_	+	+	+/-	-	+	+		+	-		+/-	+	+	+	Ī
SCC	Multisector NCD commission or equivalent	+	+/-		+	+	+	+	-	+	+	+/-		+/-	-		+	-	+/-	+/-	ľ
s	NNCDC Cabinet submission in last 24	+	-		+	-	+	-	-	-	+	+/-		-	-		-	-	-	+	I
S	Inter-Minister Task Force/equiv: "all of govt"	-	-		+	-	_	+		+	+/-	-		+/-	-		-	+	-	+/-	
S	IMTF Cabinet submission in last 24 mnths	-	-		+	-	-	-	-	-	+/-	-		-	-		-	+	-	+/-	ľ
	• •			1	ΓOB,	ACC	0														
PS FCTC	National anti-tobacco TV/radio campaign in last 24 mnths	-	+		+	-	+	+	+	+	-	+/-		+	-		-	+	-	+/-	
S CTC	Total taxes in the retail price of most widely sold brand of cigarettes >50% sale price	+	-		-	-	-	-	+	+		+/-		-	-		-	-	+	-	I
СТС	All public spaces 100% smoke free by law	_	_		+	+/-	+	+	+/-	+/-	+	-		+	-		+/-	_	+	+	I
CTC	Graphic warnings on tobacco packages	_	_		+/-	+/-	_	_	_	+/-	-	-		+	-		_	_	+	-	ľ
CTC	Advertising, promotion & sponsorship bans	-	_		+/-	-	+	+/-	+	+/-	-	+/-		+/-	-		+/-	_	+	+	I
					ALC	OHC)L														
CC	Written national alcohol policy/action plan	-	-			+/-	+	-		+/-		+/-		+			+/-	+/-	-	+/-	Ι
C	Legal blood alcohol conc (BAC) for driving	-	-			+	+	-		-		+		+			+	-	+	+	
00	Sobriety checkpoints/random breath testing	-	-			+	+	-		-		+		+			-	-	+	+	
C	National anti-alcohol TV/radio campaign in last 24 mnths	-	-			-	+	-		+/-		+/-		+			-	-	-	+/-	I
C	Restrictions on sales (hours, days)	+/-	+			+	+	-		+/-		+/-		+			+	-	+	-	
				N	IUTF	RITIC	DN														
SCC		-	_		+/-	-	-	-	-	+/-		-		+	-		-	+	-	-	
'S CC		-	-		-	-	+/-	-	-	+/-		-		+	-		-	-	-	-	l
	urated fats & virtually eliminate trans fats	1		-	,		,					1			,			1			$\frac{1}{2}$
s	Implement policies to increase fruits & veg	+/-	-	<u> </u>	+/-	+/-	+/-	-	-	-	+	+/-		+	+/-		+	+/-	-	-	
OHA	Implement front-of package labeling for easy ID of unhealty foods	-	-		-	-	-	-	-	+/-		+/-		-	-		+/-	-	-	-	
S Idis16	MOH sits in trade negotiations re food security & health goals	-	-			+/-	-	-	+/-		+	+/-		-	-		+/-	+/-		+/-	
C Ids16	Implement WHO recommendations on marketing of foods & beverages to children	-	-		-	-	-	-	-	+/-	-	-		-	-		+/-	-	-	-	
S AHO	School feeding programs in line with national food-based dietary guidelines	+/-	+		+	+	+	-	+	+/-	+	+/-		+	+		+/-	+/-	-	+/-	
SCC	Full implementation of International Code of	+/-	-			+/-	-	-	-	-		+/-		-			+/-	-	-	+	ł
	Marketing of Breast-milk Substitutes				1																

Bull World Health Organ. 2014 Apr 1; 92(4): 270–276B. Published online 2014 Feb 19. doi: <u>10.2471/BLT.13.126128</u> PMCID: PMC3967573 PMID: <u>24700994</u> Language: <u>English | French | Spanish | Arabic | Chinese | Russian</u>

Monitoring compliance with high-level commitments in health: the case of the CARICOM Summit on Chronic NCDs

T Alafia Samuels, ^a John Kirton,^b and Jenilee Guebert^b

...Good for the purpose; Issues - Definitions, Validation;

....Identified gaps in supportive regional public goods / services

(stimulated 6-Point policy package on healthier food environments)



Third UN High-level Meeting on Non-communicable Diseases

27 September 2018, New York







Diabetes Care Cascade – 5 CARPHA Members combined



*All values represent a % of the total adult population with diabetes

Ongoing studies with 13 CMS, CARPHA, Harvard on unmet diagnostic and treatment care needs

Cancer burden in the Caribbean

Cancer is the second leading cause of all deaths in the Caribbean

Incidence projected to increase by 58%

Mortality projected to increase by 67%



IARC Globocan, 2012

HARMFUL USE OF ALCOHOL



LACK OF PHYSICAL ACTIVITY



LIFE IN THE FAT LANE STARTS IN CHILDHOOD



11 years 190lbs

Patrick Martin's Collection

Food and Nutrition

- 6-Point policy package (6-PPP) for healthier food environments. Meeting of Consortium of CARICOM Social and Economic sector institutions, June 18-19, 2019
 - Update the Roadmap for 6-PPP, incl. research and resource needs
 - Strengthen the alliance to accelerate action in MS
 - Feeds into joint COTED/COHSOD in late 2019
- FNS Surveillance system indicators developed; First Annual FNS Surv Report end-2019
- Dietary salt reduction initiative CARICOM/Japan grant; Stakeholders Meeting, Jamaica, June 2019



Economic dimensions of NCDs

- Fiscal space?
- Who bears the costs?
- Opportunities for investment?

Economic Impact of NCDs T&T 2016 Cost of Cancer, Hypertension and Diabetes (TT\$ Millions)



Economic Impact of NCDs

- Among Working Age and Senior Persons—
 - affects ability to participate in work, social and community activities
 - affects family life inc. need for caregiving responsibilities
 - Often considered a burden on other family members
- Among Government and Community Organisations:--
 - Requires setting aside extra resources/programs/facilities to manage and care for persons affected by NCDs
 - Household poverty: Out-of-pocket payments for NCD treatment and care trap poor households in cycles of catastrophic expenditure and impoverishment, particularly in LMICs that lack universal health coverage

NCDs and Sustainability of Social Security: Need for Prevention Partnerships

Dr. C. James Hospedales

Executive Director

Caribbean Public Health Agency (CARPHA)

29th Meeting of the CARICOM Heads of Social Security St. Kitts and Nevis June 6-8, 2018



Political economy of NCDs

C. James Hospedales Hcc conference, BARBADOS Sept 17-18, 2019

> Acknowledgements: Prof Michael Reich, Harvard Prof John Kirton, Toronto Prof Karl Theodore, UWI



THE POLITICAL ECONOMY OF NCDs : A WHOLE OF SOCIETY APPROACH

29 JAN -3 FEB 2019 | BANGKOK, THAILAND



First major global health symposium to include Political Economy (PE) in its title and frame for discussion.

... organizers called this "an unconventional outlook."

This commentary argues that political economy should become viewed as a conventional, indeed, an essential outlook for NCDs, and more broadly for global health.

Political Economy of NCDs



Discussing launching of CARICOM Moves with **Prime Minister Harris** of St Kitts & Nevis and Christopher Tufton, Minister of Health of Jamaica, June 2019

Scientific Evidence about NCDs is not enough to improve health;

Political Economy Analysis and Strategies are also needed to make progress...

Need to package evidence to "speak to the Head, the Heart and the Pocket"

> If you talk to a man in a language he understands, that goes to his head. If you talk to him in his language, that goes to his heart.

> > **NELSON MANDELA**




Using Political Economy to Analyse NCDs

- Three themes
- One key actor for each theme

3. Governance challenges

Government Agencies: Role in changing institutions and actions for NCDs

1. Determinants of NCDs

Commercial Enterprises: as drivers of the epidemic

2. NCDs in Social Systems

Patient Organisations: Role in creating solutions

Theme 1. Political Economy of Changing the Determinants of NCDs





A magical policy solution, "Two birds with one stone": Increased flows of new revenues for government, **and** reduced disease burden and health costs

But that is the technical/economic aspect of the policy solution; overlooks the PE of introducing 'sin taxes'

Requires political economy analysis and strategies – because of huge commercial interests that benefit from production, sale, consumption

Introducing 'sin taxes' *inevitably* triggers a political struggle with commercial organisations, which have greater economic and political resources that under-resourced public health advocates

How and when can public health win, despite powerful commercial forces?

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What does this look like in practice?

Successful passage of soda tax in Mexico. Advocates used PE analysis as one factor to decide on strategies to promote the tax in Mexican society, and push the tax through Congress *(Erin James et al, 2019)*



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How do industry interests overpower public health?

The Coca Cola Company created a NGO (a BINGO) in China to shape scientific research and public policy for 15 years. (Making China safe for Coke: Susan Greenhalgh 2019)

A complex web of institutional, financial and personal linkages; group operated within the China CDC, shaping government policy on obesity in line with corporate policy, *"that it is activity, not diet, that matters"*





Theme 2: Political Economy of NCDs in social systems

Changing a health system's orientation often requires political struggle – evidence is *necessary but not sufficient and needs* packaging.

One key force comes from people directly harmed – people living with NCDs – but not easy to take personal troubles public

Lessons from Caribbean and world experience of HIV/AIDS – critical role of affected people in organising social movements

Similar lessons learned from environmental causes, pollution, civil rights, maternal and child health, TB...

The world needs mobilisation of people living with NCDs in order to change the PE of NCDs and change resistant government and corporate policies...





Social mobilisation 2,500 years ago

- Case of Nehemiah re-building the walls of Jerusalem....
- faced situation of poverty beyond belief... 'there was a great outcry of the people and of their wives ...'
- wealthier Jews had taken advantage of those less fortunate and reduced many to slavery...
- "Then I was very angry when I had heard their outcry...
- I thought it over ... and contended ... with the nobles and the rulers ...
- Therefore, I held a great assembly against them"



Social mobilisation for NCDs

• Where is the "great assembly" of people with NCDs?

• How can we do this next year - digitally?

The Defeat-NCD Partnership

ZEANA MASOUD SAID Zeana has type 1 diabetes and hypertension. She lives with her family in Dar es Salaam, Tanzania

CKK KK

Significant barriers exist to accessing essential medicines and technologies for NCDs in LMICs^{1–3}



Weak supply chains

Inadequate health systems

Weak, Overburdened regulatory structures Conflicting national essential medicine lists Insufficient financing



Defeat-NCD Partnership

- A Public-Private-People Partnership (PPPP) to address NCDs in the Low- and Middle-income countries of the world
- #UHC4NCDS in LMICS
- Mission: to enable low-resource countries to scale-up sustained action against NCDs so that they can "ensure healthy lives and promote well-being for all at all ages" (achieve target 3.4 to "reduce, by one-third, premature mortality from NCDs by 2030".

Launch of the Defeat-NCD Partnership, UN HQ, Sept 24, 2018





Defeat-NCD CEO meeting leaders in NY



Defeat-NCD Partnership Caribbean concept

- "Caribbean economies are struggling because our people are not healthy enough, mostly because of NCDs." Prof Karl Theodore
- The Caribbean has a huge NCD burden, but it also has a promising Ecosystem of member states, Regional Institutions, CARPHA, HCC, UWI, CAIC, CARICOM, OECS, CDB, ECCB, PAHO/WHO and other IDPs. Build on success!
- Low investment in high ROI public health measures (Public goods), Finance and business sector relatively untapped, yet they suffer impact. ?fear of COI ?skills lacking
- Small size (median population 100,000), mostly middle-income, "low-resource" countries, little economy of scale.. regional approach more cost-effective



Key risks/assumptions/pre-requisites to Defeat-NCDs in the Caribbean

- No one knows what is/are NCDs!!
 - Need sustained, regionwide IEC campaign on NCDs and wellness delivered through partnership *Get the Message 2.0*? A *Caribbean Moves* campaign?
- The venture/work is way under-capitalised though requirements modest
 - Need innovative resourcing partnerships engaging finance and business community using political economy lenses
- There is no real forum/fora for all-of-society to wrestle with problem
 - Need a 'big tent' or ship to accommodate the many interests with measures to manage conflict of interest
- We don't have the partnering capacity
 - Need sensitisation and training programs, tool kits, etc to develop partnership and negotiations skills, partnership brokers in and out of health, for working with private sector and civil society, experiential training,

Defeat-NCD Caribbean

Public Health Agency

- Goal: Decrease premature deaths from NCDs by 1/3 by 2030, reduce the upward cost spiral... by increasing investment from and partnership with the finance and business sector both nationally and regionally around shared value propositions
- Purpose: Build national capacity and supportive regional capacity in CARICOM, CARPHA, other Regional institutions, OECS Commission to scope, plan, and implement an inclusive, all of society response – public, private and civil society
- Consider joining global and regional brands, e.g., "The Caribbean Moves to Defeat NCDs
- Partner with Tourism, CSME, finance, banking, Social security, Insurance, Credit unions, agriculture, transport, leverage climate & health investments
- Be part of a global network of academic institutions researching and training in the 'All-ofsociety' response to NCDs

CARPHA Preventing disease, promoting and protecting health

Defeat-NCD Caribbean: The Caribbean Moves to Defeat NCDs

- A Public Private People Partnership to scale-up joint action and funding to reduce the impact of the NCD epidemic
- Co-benefits to economy and climate resilience
- Taking a digital health approach and engaging people of all ages





Defeat-NCD Caribbean will be a 'big tent' or 'big ship'

Insert picture of big tent /ship with major actors carpha uwi hcc paho

Dncd Caribbean

- Build capacity in multi sector partnership at country and regional level, around national and regional plan(s) of action developed in participatory manner
- Promote partnerships to develop new delivery models for community /family care leveraging digital health
- Research M&E e.g, prices trends for drugs devices and diagnostics, scope for intervention in populations covered by social security, insurance companies
- Knowledge exchange application commercialisation
 - Fora for public private civil society
 - Sustained region wide IEC campaign on NCDs and wellness
- Specific investment partnerships catalysed/fostered with finance and business communities to create supportive environment financial 'incentives and nudges' for healthier behaviour

Partnerships and Alliances 2016-19







Partnerships and Alliances – over the next 5-7 years?

Caribbean Social Security organisations and related

Caribbean Hotel and Tourism Association and CTO for workplace wellness

National Health Insurance systems

Insurance companies on data sharing for public health

Credit Unions on special provisions for people with hypertension and diabetes

Finance Ministries on taxes for reducing consumption of

With Economic Council of Haiti to address NCDs/MNTs

Caribbean Chambers of Commerce to sensitise and build capacity in workplace wellness

Mobile phone companies Digicel and Bmobile

With high-net worth individuals in Caribbean

Caribbean Moves to Defeat-NCDs.. with finance, transportation, agriculture, tourism sectors

Concept for Dialogue on Economic Dimensions of NCDs in the Caribbean (mid-2020) CARICOM-TEI, CDB, WDF, PAHO, UWI

 Purpose: Engage key stakeholders from finance, health, social security and relevant public and private sectors to improve Caribbean prospects of reaching development goals by investing in NCD prevention

• Objectives:

- Discourse with policy and decision makers on the need for urgent, concerted action on NCDs and Wellness to achieve Caribbean goals and SDGs
- To discuss the fiscal space, investment needs and financing mechanisms for NCD prevention and control programmes at national level.
- To discuss the practicality of using the tax system to reduce harmful exposure/risk factors and generate revenue from alcohol, tobacco, sugar sweetened beverages.
- To discuss approach for engagement of Ministers of Finance



Research Topics/Papers proposed:

- Improving Caribbean development prospects by attention to NCDs; the journey at National level and co-benefits to economy and environment
- The imperative of investing in Healthy Ageing and Workplace Wellness for sustainability of Social Security in the Region
- Finding the fiscal space to pay for NCD prevention and health promotion: the challenge at national level
- Improving profitability of insurance companies through NCD Prevention and Control among insured persons and their families
- The 'Sweetspot' between increasing revenue and decreasing risks from tobacco, alcohol, products with high salt/fat content
- Improving financial performance of insurance companies by attention to NCDs and wellness

Concluding comments

- Progress on many fronts in public health, food and water, PHC services, measles elimination
- Face unprecedented health and environment threats as SIDS, particularly climate change and NCDs, deep social determinants
- NCDs as a cancer in the economy undermining productivity and profit, quality and competitiveness (+Mental health, substance abuse, violence and injuries)
- There are solutions in improved access to quality services and healthy public policies/ health in all policies, leveraging digital health
- Requires working together in unprecedented way public, private and civil society, academia
- Defeat NCD Partnership Caribbean aims to address NCDs by increasing investment /collaboration on high ROI PH interventions espec those w co-benefits to other sectors – finance and economy sector, transport, agriculture, tourism – building capacity
- Partnership approach combining public good, business and environmental interests and using a
 political economy approach and speaking to head, heart and pocket



Involving young peoples, Louca helping me to shop in the hardware







Involving young people: Louca helping me to shop in the hardware

CARICOM MOVES EVENT UN HQ Sept 24th, 2018

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CARICOM

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Glimpses of the Future

A BRIEFING FROM THE PRECIS CARIBBEAN CLIMATE CHANGE PROJECT



Down sizing the Climate Science:

Hotter, drier times, more monster storms, extreme rain events. Profound social, economic and environmental implications (ICCCC 2017)

...but health professionals sleepwalking



• Annual warming by the 2080s of between 1° and 5°C depending on the region

- Greater warming in the northwest
 Caribbean territories (Jamaica, Cuba, Hispaniola, Belize) than in the eastern
 Caribbean island chain, especially summer.
 * Coral bleaching events (food security)
 Changes in average rainfall are:
- A drier main Caribbean basin in the annual total by the 2080s, except for W Cuba, south Bahamas, Costa Rica and Panamá
 Pronounced north-south gradient in rainfall
- Change during the Caribbean dry season (January to April).



Mental Health

- Demographic shift with aging population: higher incidence of Dementia
- Increasing incidence of self harm and suicides
- Harmful use of alcohol, depression/anxiety linked to NCDs
- Decriminalization of marijuana
- Need for research to improve programmes



Population Pyramids for the Caribbean



Source: United Nations Population Division, 2000 Revision

Life course in social security



Source: Inter-American Social Protection Observatory

POOR DIETARY PRACTICES



Partnerships and Alliances





