



Global Health Diplomacy Program

2007 Port of Spain Summit Compliance: Plans for Screening and Management

Aislin Flynn, August 16, 2015

This report assesses compliance with the commitment below from the 2007 Port of Spain Declaration based on actions taken by the Caribbean countries between 15 September 2007 and 15 September 2008.

Commitment

2007-10: That our Ministries of Health, in collaboration with other sectors, will establish by mid-2008 comprehensive plans for screening and managing chronic diseases and risk factors so that by 2012, 80% of people with NCDs would receive quality care and have access to preventative education based on regional guidelines.

Compliance

Member	No compliance	Partial compliance	Full compliance
Anguilla	-1		
Antigua and Barbuda			+1
Bahamas	-1		
Barbados			+1
Belize		0	
Bermuda	-1		
British Virgin Islands	-1		
Cayman Islands	-1		
Dominica			+1
Grenada			+1
Guyana		0	
Haiti	-1		
Jamaica	-1		
Montserrat		0	
Saint Kitts and Nevis	-1		
Saint Lucia	-1		
Saint Vincent and the Grenadines	-1		
Suriname	-1		
Trinidad and Tobago	-1		
Turks and Caicos	-1		
Average		-0.45	

Background

On 15 September 2007, the heads of government of the Caribbean Community (CARICOM) attended a summit at Port of Spain, Trinidad and Tobago, focusing on the theme of “Uniting to stop the epidemic of chronic NCDs.” Recognizing that the Caribbean region is one of the worst affected regions by non-communicable diseases (NCDs) in the Americas, the leaders took on the challenge of preventing and controlling the NCDs of heart disease, stroke, diabetes, hypertension, obesity and cancer by addressing the causal risk factors: lack of physical activity, tobacco use, alcohol abuse and unhealthy diets.¹

The main health problems of the Caribbean region are reflected in the Caribbean Cooperation in Health Initiative (CCH), which consists of priorities set by CARICOM’s strategic framework for cooperation in health. Phase III covers the period from 2007 to 2015.² Its central priorities are communicable disease, non-communicable disease, health systems strengthening, environmental health, food and nutrition, mental health, family and child health, and human resource development.³

The summit stressed regional action fuelled by the spirit of the Nassau Declaration (2001), that “the health of the Region is the wealth of the Region.”⁴ Along those lines, the solutions emphasized were research and data collection, integrating lifestyle management into the formal education system, the empowerment of individuals to secure consumer behaviour change, pursuance of trade regulations such as appropriate labelling and the banning of trans fats.⁵

Commitment 2007-10 focuses on the need for comprehensive plans to screen and manage chronic diseases and risk factors. This commitment was given importance due to the articulated need for, “government policies to effect behaviour change; social policies to provide enabling environment and secondary strategies such as the provision of screening programmes and health services with resources to apply the established cost-effective interventions.”⁶

Commitment Features

This commitment includes a number of actionable items:

1. CARICOM leaders committed their health ministers to work in collaboration with other sectors to establish the plans.
2. The plans must be developed by mid 2008.

1 COMMUNIQUE ISSUED AT THE CONCLUSION OF THE REGIONAL SUMMIT OF HEADS OF GOVERNMENT OF THE CARIBBEAN COMMUNITY (CARICOM) ON CHRONIC NON-COMMUNICABLE DISEASES (NCDs), 15 September 2007, Caribbean Community Secretariat. Date accessed: 6 August 2015.

http://www.caricom.org/jsp/communications/communiques/chronic_non_communicable_diseases.jsp

² Health in the Americas 2012 Edition, PAHO. Date accessed: 30 September 2015.

http://www.paho.org/saludenlasamericas/index.php?option=com_content&view=article&id=9&Itemid=14&lang=en

³ Caribbean Cooperation in Health Phase III (CCHIII) Summary, CARICOM. Date accessed: 30 September 2015.

http://www.caricom.org/jsp/community_organs/health/cch_iii_summary.pdf

⁴ Communique issued at the conclusion of the regional summit of heads of government of the Caribbean Community (CARICOM) on chronic non-communicable diseases (NCDs), 15 September 2007, Port-of-spain, Trinidad and Tobago (Port of Spain). 15 September 2007. Access date: 1 July 2015.

http://www.caricom.org/jsp/communications/communiques/chronic_non_communicable_diseases.jsp#DECLARATION

⁵ Communique issued at the conclusion of the regional summit of heads of government of the Caribbean Community (CARICOM) on chronic non-communicable diseases (NCDs), 15 September 2007, Port-of-spain, Trinidad and Tobago (Port of Spain). 15 September 2007. Access date: 1 July 2015.

http://www.caricom.org/jsp/communications/communiques/chronic_non_communicable_diseases.jsp#DECLARATION

⁶ Communique issued at the conclusion of the regional summit of heads of government of the Caribbean Community (CARICOM) on chronic non-communicable diseases (NCDs), 15 September 2007, Port-of-spain, Trinidad and Tobago (Port of Spain). 15 September 2007. Access date: 1 July 2015.

http://www.caricom.org/jsp/communications/communiques/chronic_non_communicable_diseases.jsp#DECLARATION

3. The plans must be comprehensive.
4. The plans must include strategies for both screening and managing chronic diseases and risk factors.
5. The strategies must have the overall goal so that by 2012 80% of people with NCDs would receive quality care and have access to preventive education based on regional guidelines.

For the purposes of this assessment, “comprehensive plans” refers to explicit publications by or in conjunction with the ministry of health that include all aspects of screening and managing chronic diseases and risk factors.

Scoring Rubric

Score	Description
-1	No plans for screening and managing chronic diseases and risk factors were developed before mid 2008.
0	Plans for chronic diseases were published, but were published after mid 2008, were not comprehensive OR the ministry of health did not work in collaboration with other sectors.
+1	Comprehensive plans for screening and managing chronic diseases and risk factors were developed before mid 2008 by the ministry of health in collaboration with other sectors.

Anguilla: -1

No Ministry of Health plans for screening and managing chronic diseases and risk factors can be found for the compliance period. Therefore, Anguilla scores -1.

Antigua and Barbuda: +1

The Ministry of Health of Antigua and Barbuda released the National Business Plan for Health for 2008–2010 in July 2007. The plan has a specific section on NCDs and outlines a mission “to promote and improve the prevention and management of CNCD through the implementation of strategic programming.”⁷ Divided into sub-priorities outlining the four main NCDs, the plan outlines the relevant programs for each priority. This includes an integrated NCD management program, disease surveillance program, and cancer prevention and control program.⁸

For having developed a comprehensive plan by mid 2008, Antigua and Barbuda received a score of +1.

Bahamas: -1

No Ministry of Health plans for screening and managing chronic diseases and risk factors can be found for the compliance period. Therefore, the Bahamas scores -1.

Barbados: +1

In 2003, Barbados’s Ministry of Health released the Strategic Plan for Health to span 2002–12. The plan contained specifics on plans to improve screening in the sections on various risk factors, and included a section on chronic diseases.⁹ This section included many plans to reduce the incidence and prevalence of chronic diseases through clinical policies for the management of the four main NCDs

⁷ National Business Plan for Health, Ministry of Health Antigua and Barbuda (St. John’s). July 2007. Access Date: 25 July 2015. <http://www.mindbank.info/item/2223>

⁸ National Business Plan for Health, Ministry of Health Antigua and Barbuda (St. John’s). July 2007. Access Date: 25 July 2015. <http://www.mindbank.info/item/2223>

⁹ Barbados Strategic Plan for Health 2002-2012, Government of Barbados (Bridgetown). June 2003. Access Date: 25 July 2015. <http://apps.who.int/medicinedocs/documents/s18831en/s18831en.pdf>

in all public and private healthcare facilities established and implemented, various education programs, and policy frameworks for the operation of clinics.¹⁰

For this comprehensive plan, Barbados received a score of +1.

Belize: 0

Belize's Ministry of Health released no specific plans for screening and managing chronic diseases and risk factors, but its national health policy released in 2007 outlined the purpose of the Epidemiology Unit as the unit in charge of surveillance, outbreak investigation and control of communicable and non-communicable diseases. No specific plans apart from status reports on morbidity and mortality were delineated.¹¹

For releasing some plans regarding the management of NCDs, Belize received a score of 0.

Bermuda: -1

Bermuda's Ministry of Health issued no specific plans regarding screening or management of NCDs. In its 2008 National Health Promotion Strategy there are few references to NCDs, and no concrete plans.

For this reason, Bermuda receives a score of -1.

British Virgin Islands: -1

The Ministry of Health of the British Virgin Islands published no plans for screening and managing chronic diseases and risk factors. Therefore, the British Virgin Islands received a score of -1.

Cayman Islands: -1

The Ministry of Health of the Cayman Islands published no plans for screening and managing chronic diseases and risk factors. Therefore, the Cayman Islands received a score of -1.

Dominica: +1

Dominica's Ministry of Health released a national health plan that included a section on NCDs. It outlines plans for using planning and information systems, risk prevention and control, screening, and quality of care.¹² It gives a comprehensive account of the policy goals and programs to be put in place for each of those areas. For example, under screening, the plan includes strengthening existing screening programs for breast, prostate and cervical cancer.¹³

For its comprehensive focus on the screening and management of chronic diseases and risk factors, Dominica received a score of +1.

Grenada: +1

Grenada's Ministry of Health did not release a specific plan to target NCDs but did deal with the subject in its National Strategic Plan for Health for 2007-11. The plan is comprehensive and breaks the issues into groups based on the four main NCDs and providing objectives and strategies for

¹⁰ Barbados Strategic Plan for Health 2002-2012, Government of Barbados (Bridgetown). June 2003. Access Date: 25 July, 2015. <http://apps.who.int/medicinedocs/documents/s18831en/s18831en.pdf>

¹¹ Health Agenda 2007-2011, Ministry of Health of Belize (Belmopan). 2007. Access Date: 25 July 2015. <http://www.mindbank.info/item/484>

¹² Good Health: The Best Social Investment, Ministry of Health Dominica (Roseau). July 2002. Access date: 25 July 2015. <http://www.mindbank.info/item/2231>

¹³ Good Health: The Best Social Investment, Ministry of Health Dominica (Roseau). July 2002. Access date: 25 July 2015. <http://www.mindbank.info/item/2231>

each.¹⁴ For example, cancer is established as a leading cause of morbidity and mortality, with the objective to promote healthy lifestyles and improve screening services. The strategies include establishing screening programs, enhancing health education programs and developing health promotion programs.¹⁵

For these comprehensive plans for screening and managing chronic diseases and risk factors, Grenada received a score of +1.

Guyana: 0

Guyana did not release concrete plans targeting the screening and management of chronic diseases and risk factors during the compliance period. Its National Strategic Plan for Health did, however, include a section on chronic NCDs that expressed an intent to develop such a program.¹⁶ It commits to develop “nationally led efforts to inform individuals about how they can reduce the risks of these chronic diseases, and to promote environmental change through actions in other sectors: taxation of harmful products, promotion of physical activity in schools and communities, policies and regulations about smoking and alcohol.” It also commits to “encourage public and private service providers to strengthen integrated primary care, encourage early reporting of chronic diseases, and offer more effective treatment and management.”¹⁷

For planning to produce plans for screening and managing chronic diseases and risk factors during the compliance period, Guyana scores 0.

Haiti: -1

Haiti’s Ministry of Health did not produce any plans for screening and managing chronic diseases and risk factors. Therefore, Haiti received a score of -1.

Jamaica: -1

Jamaica’s Ministry of Health did not produce any plans for screening and managing chronic diseases and risk factors. Therefore, Jamaica received a score of -1.

Montserrat: 0

The government of Montserrat released a national health policy in 2008 that, while not focused on plans for screening and managing chronic diseases and risk factors, provided a few plans to tackle those issues. For example, it planned to continue ongoing NCD education and develop standardized guidelines for the treatment and management of NCDs.¹⁸

For publishing partial plans for screening and managing chronic diseases and risk factors, Montserrat received a score of 0.

Saint Kitts and Nevis: -1

The Ministry of Health of Saint Kitts and Nevis did not produce any plans for screening and managing chronic diseases and risk factors. Therefore, Saint Kitts and Nevis received a score of -1.

¹⁴ National Strategic Plan for Health, Ministry of Health Grenada (St. George’s). December 2006. Access date: 25 July 2015. <http://www.mindbank.info/item/2246>

¹⁵ National Strategic Plan for Health, Ministry of Health Grenada (St. George’s). December 2006. Access date: 25 July 2015. <http://www.mindbank.info/item/2246>

¹⁶ National Health Sector Strategy, Ministry of Health Guyana (Georgetown). April 2008. Access date: 25 July 2015.

¹⁷ National Health Sector Strategy, Ministry of Health Guyana (Georgetown). April 2008. Access date: 25 July 2015.

¹⁸ Ministry of Health and Community Services Business Plan 2008. Montserrat. Access date: 25 July, 2015.

<http://moh.gov.ms/wp-content/uploads/2008/11/ministry-of-health-and-community-services-business-plan-2008.pdf>

Saint Lucia: -1

Saint Lucia's Ministry of Health did not produce any plans for screening and managing chronic diseases and risk factors. Therefore, Saint Lucia received a score of -1.

Saint Vincent and the Grenadines: -1

Although the Ministry of Health of Saint Vincent and the Grenadines published a strategic plan for health in 2007, it only mentioned NCDs, with no plans for the future.¹⁹ Therefore, Saint Vincent and the Grenadines received a score of -1.

Suriname: -1

Suriname's Ministry of Health did not produce any plans for screening and managing chronic diseases and risk factors. Therefore, Suriname received a score of -1.

Trinidad and Tobago: -1

Trinidad and Tobago's Ministry of Health did not produce any plans for screening and managing chronic diseases and risk factors. Therefore, Trinidad and Tobago received a score of -1.

Turks and Caicos: -1

The Ministry of Health of Turks and Caicos did not produce any plans for screening and managing chronic diseases and risk factors. Therefore, Turks and Caicos scores -1.

¹⁹ Strategic Plan for Health 2007-2012. 2007. Access date: 25 July. <http://www.mindbank.info/item/2352>