

VI Fórum de Monitoramento do Plano de Ações Estratégicas para o Enfrentamento das DCNTs

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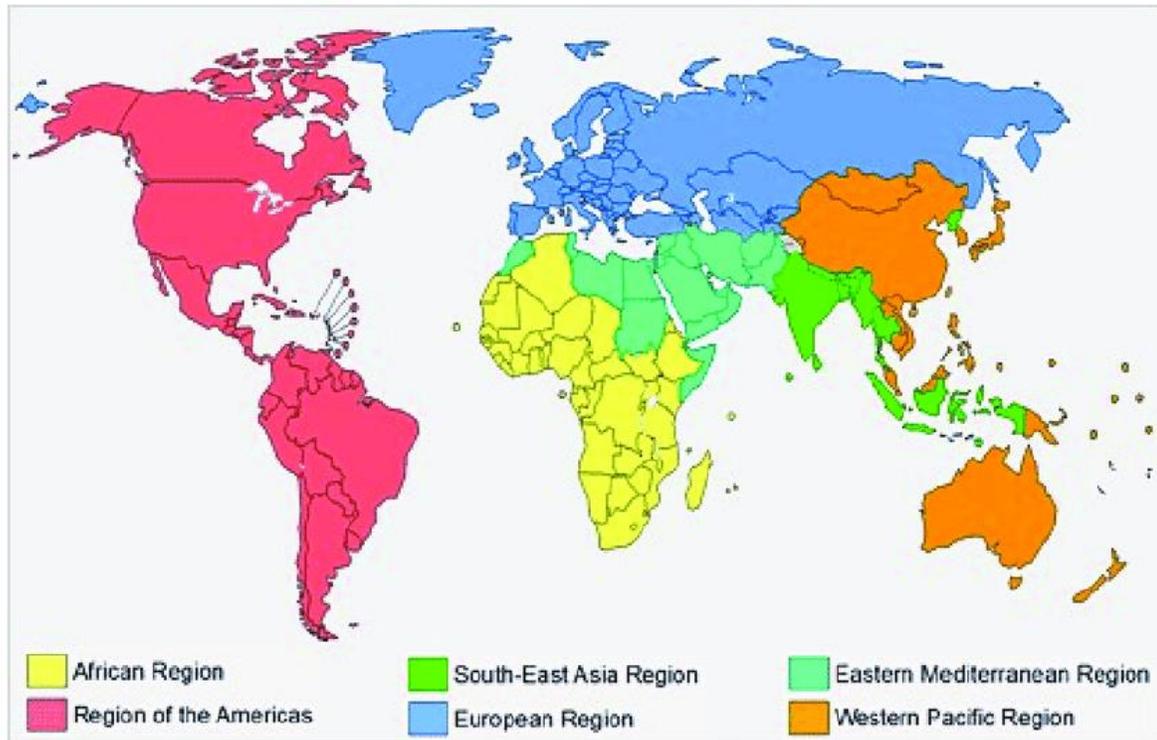


Quem Somos?



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ESTADOS-MEMBROS DA OPAS/OMS



- | | |
|-------------------|-------------------------|
| Antigua e Barbuda | Guatemala |
| Argentina | Haiti |
| Bahamas | Honduras |
| Barbados | Jamaica |
| Belize | México |
| Bolivia | Nicarágua |
| Brasil | Panamá |
| Canadá | Paraguai |
| Chile | Peru |
| Colômbia | República Dominicana |
| Costa Rica | S. Cristóvão e Névis |
| Cuba | Santa Lúcia |
| Dominica | S. Vicente e Granadinas |
| Equador | Suriname |
| El Salvador | Trindade e Tobago |
| EUA | Uruguai |
| Granada | Venezuela |
| Guiana | |

Países Participantes
 França
 Reino Unido
 Reino dos Países Baixos

Membros Associados
 Porto Rico
 Aruba
 São Martin
 Curaçao

Países Observadores
 Espanha
 Portugal

⬮ Escritório Regional
● Escritórios de País



Organização Pan-Americana da Saúde



Organização Mundial da Saúde
 Escritório Regional para as Américas

Funções Chaves da OPAS/OMS

					
Proporcionar	Moldar	Estabelecer	Articular	Dar	Monitorar
Liderança Em temas essências à saúde e estabelecer Parcerias onde ações conjuntas são necessárias	Agenda de Pesquisa e estimular a geração, divulgação e aplicação de conhecimentos	Normas e Padrões e promover e monitorar sua implementação	Opções de Políticas baseadas na ética e na evidência	Apoio técnico catalisar mudanças, e construir ou fortalecer capacidade institucional sustentável	Situação de Saúde e avaliar as tendências em saúde



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Por quê Priorizar as DCNTs?



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DCNTs à Nível Global

Key Facts

NCDs are responsible for

71%
of all deaths worldwide
(41 million people)



**Mais de 40%
dessas mortes
foram em pessoas
com menos de 70
anos de idade**

Every **2 seconds**
someone aged 30 to 70 years
dies prematurely from **NCDs**



**Poorer people are
disproportionately
affected by NCDs and
mental health conditions**

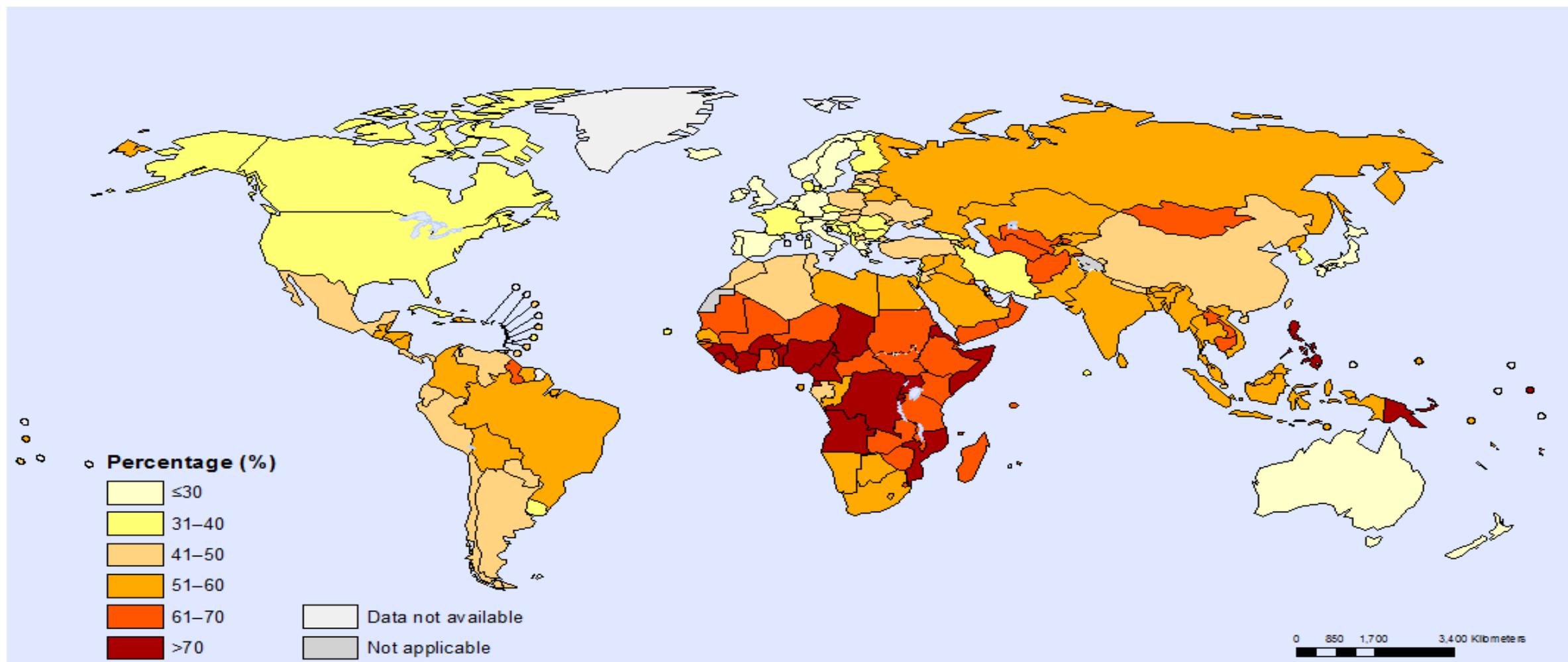


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Percentage of deaths due to noncommunicable diseases occurring under age of 70 Male, 2015



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization
Map Production: Information Evidence and Research (IER)
World Health Organization



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DCNTs na Região das Américas

THE BURDEN OF NCDs IN THE AMERICAS

Noncommunicable diseases (NCDs) are responsible for eight out of ten deaths (80%) each year in the Americas. NCDs are expected to increase in the upcoming decades as a consequence of population growth and aging, urbanization, and exposure to NCD risk factors.

5.2 MILLION
DEATHS
IN THE AMERICAS

NCD MORTALITY

6.5 MILLION
TOTAL DEATHS

5.2 MILLION NCD DEATHS

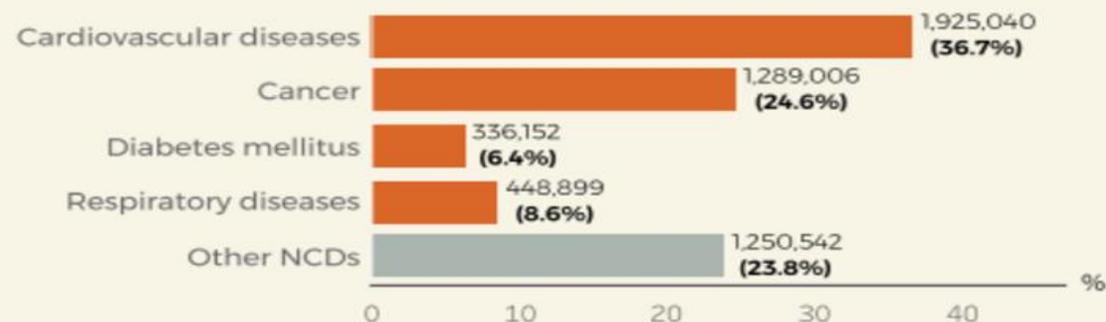
80% NCD DEATHS



8 OUT OF **10** PEOPLE DIE FROM NCDs

THE
LEADING
CAUSES
OF NCD
MORTALITY
ARE:

Total NCD deaths - all ages



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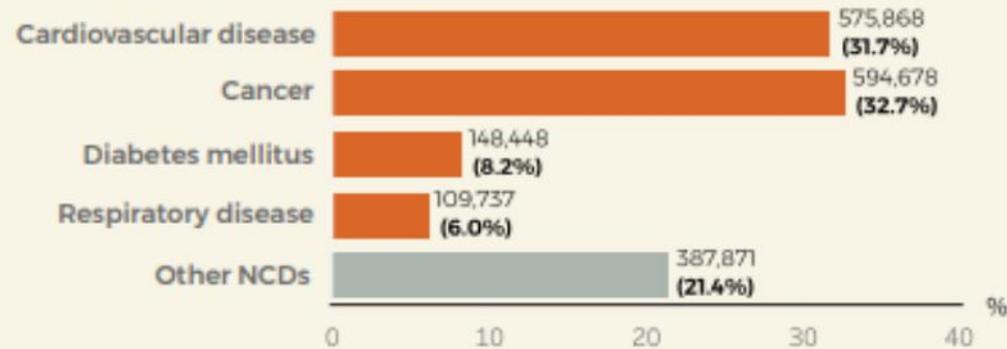


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PREMATURE DEATHS

35% OF ALL NCD DEATHS OCCUR IN PEOPLE 30-70 YEARS OF AGE

Premature deaths - 30 to 70 years of age



TARGET

25%
relative reduction
in NCD premature
mortality



by 2025

~ 1,5 milhões de óbitos prematuros



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WHO Global NCD Action Plan

A road map with policy options to be implemented from 2013 to 2020 focusing on **5** modifiable risk behaviors that are linked to **5** preventable noncommunicable diseases.

RISK FACTORS



Tobacco use



Unhealthy diet



Physical inactivity



Harmful use of alcohol

Poluição do Ar

DISEASES



Chronic respiratory diseases



Cardiovascular diseases

Cancers

Diabetes

Chronic respiratory diseases

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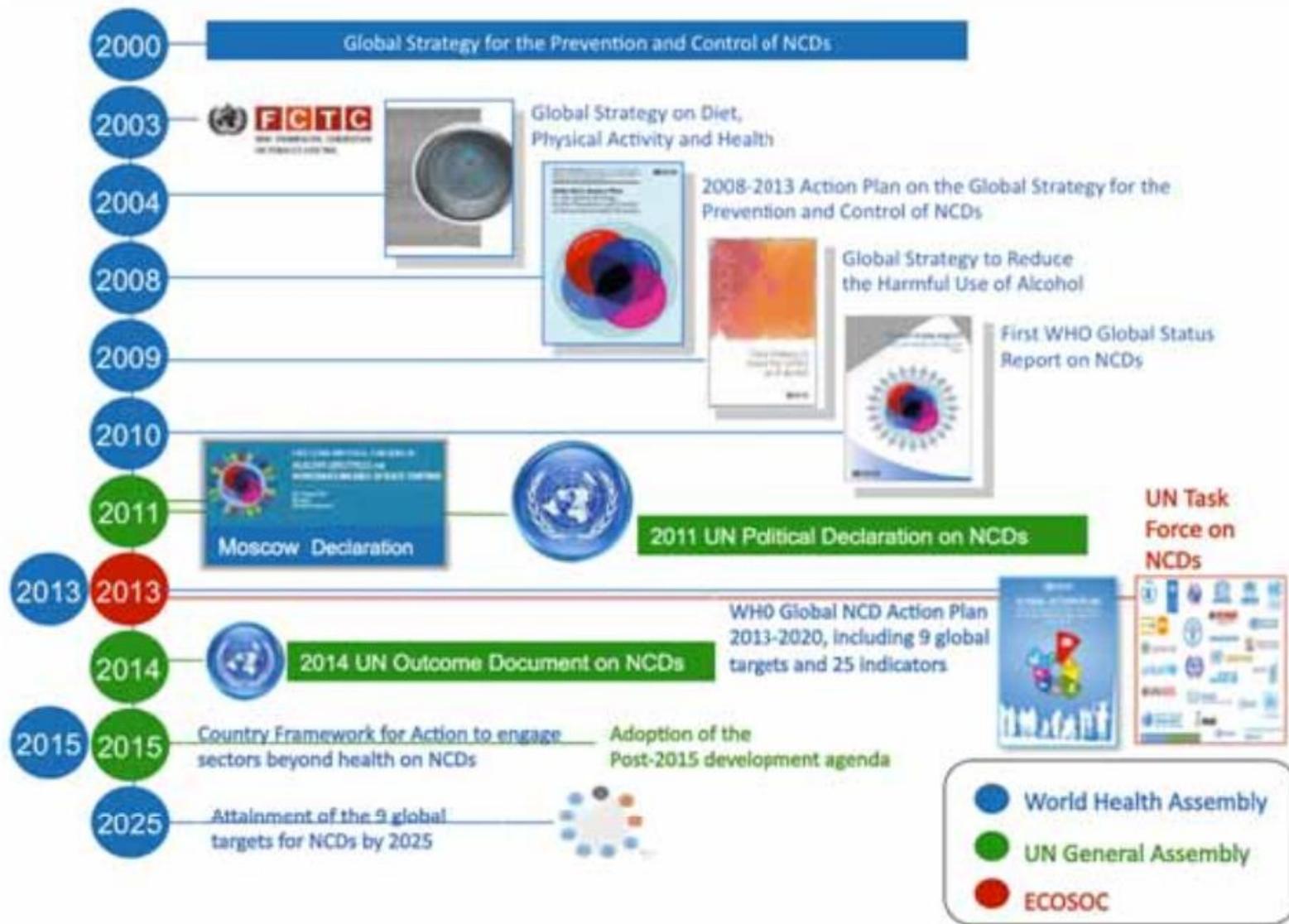


Quais Compromissos Internacionais sobre DCNTs?



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Marcos Globais na Prevenção e Controle das DCNTs



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Inclusão das doenças crônicas não transmissíveis na Agenda 2030 e os principais compromisso dos países

3.4 - Até 2030, reduzir em um terço a mortalidade prematura por doenças não transmissíveis via prevenção e tratamento, e promover a saúde mental e o bem-estar;





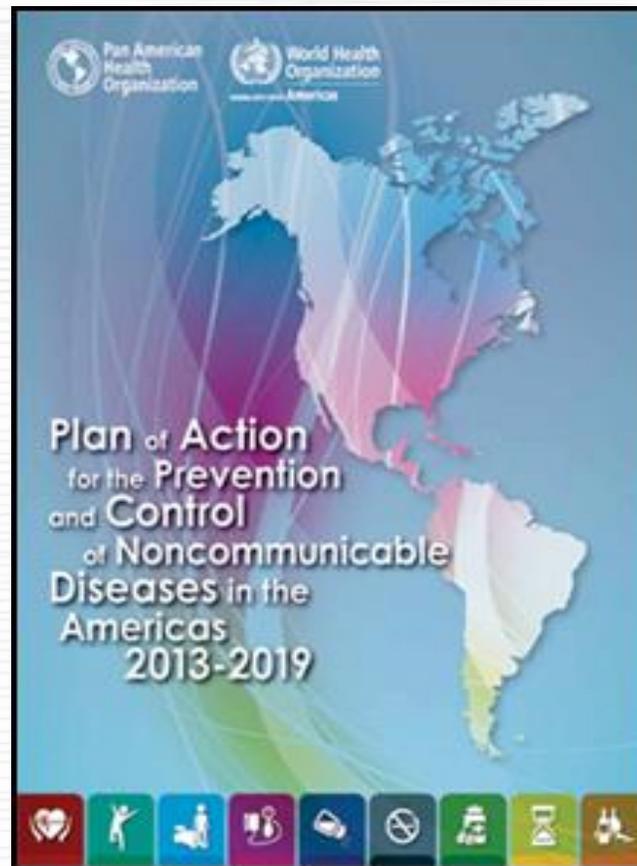
GLOBAL ACTION PLAN

FOR THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES

2013-2020



Plano de Ação Global da OMS (2013-2020)



Plano de Ação da OPAS (2013-2019)

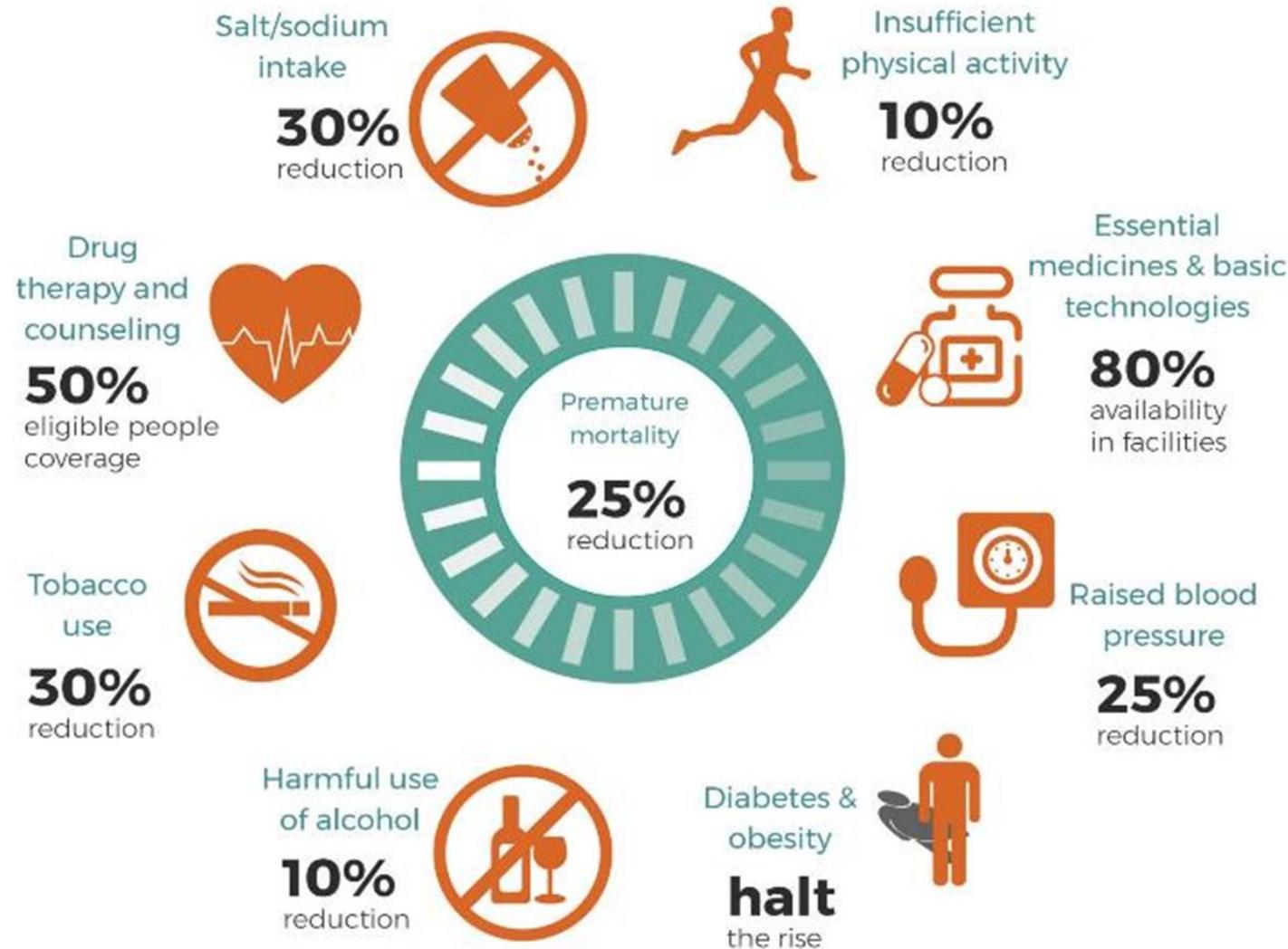


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Metas globais para redução das mortes prematuras por DCNTs



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Linhas de Ação Estratégicas



Políticas e Parcerias Multisetoriais

- Construir e promover alianças multisetoriais com relevantes setores do governo e da sociedade



Fatores de Riscos e de Proteção das DCNTs

- Reduzir a prevalências dos principais fatores de riscos e fortalecer os fatores protetivos, principalmente nas crianças e adolescentes



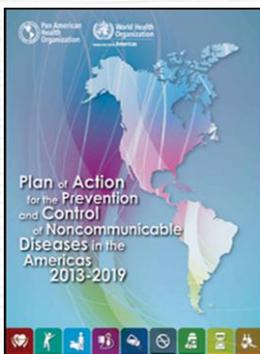
Resposta do Sistema de Saúde para as DCNTs

- Melhorar a cobertura, acesso equitativa e de qualidades das 4 principais DCNTs (CVD, diabetes, Câncer, Doenças respiratórias) e outras de prioridades nacional



Vigilância e Pesquisa das DCNTs

- Fortalecer a capacidade do Brasil em monitorar e pesquisar DCNTs, seus fatores de riscos e seus determinantes da saúde para informar políticas baseadas em evidencias, pesquisar e programas acadêmicos.



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A OMS possui um portfólio de ações custo-efetivas para a prevenção e redução dos fatores de riscos e controle das Doenças Crônicas, os chamados *Best-Buys*.



Tobacco use



Harmful use of alcohol



Unhealthy eating



Physical inactivity

NCD BEST BUYS



EVIDENCE - BASED COST- EFFECTIVE PUBLIC HEALTH INTERVENTIONS TO PREVENT AND CONTROL NCDs



Prevention and control of noncommunicable diseases (NCDs) requires policy and health service interventions to address the four main diseases and their underlying risk factors. This is a summary of the WHO cost-effective interventions, which provides a menu of evidence-based options to guide policy decisions.¹



REDUCE TOBACCO USE

- Increase excise **taxes and prices** on tobacco products
- Implement **plain packaging** and/or large graphic health warnings on tobacco packages
- **Ban tobacco advertising, promotion and sponsorship**
- **Ban smoking** in all indoor workplaces, public places, and on public transport
- **Warn about the harms** of smoking/tobacco use and second hand smoke through mass media campaigns
- Provide tobacco **cessation programs**



REDUCE HARMFUL USE OF ALCOHOL

- Increase excise **taxes** on alcoholic beverages
- **Ban or restrict alcohol advertising.**
- **Restrict the physical availability** of retailed alcohol
- Enact and enforce **drink-driving laws** and blood alcohol concentration limits
- Provide **psychosocial intervention** for persons with hazardous and harmful alcohol use



PROMOTE HEALTHY DIET

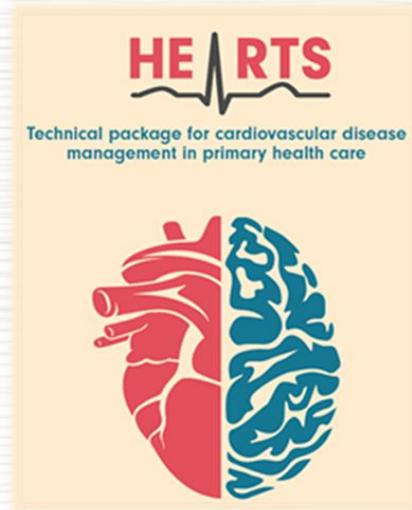
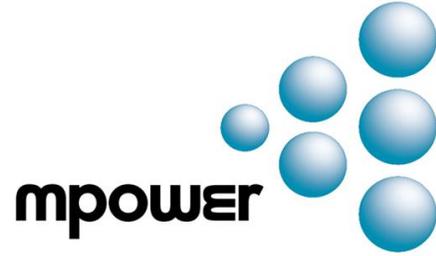
- **Reduce salt intake** by:
 - product reformulation and setting targets for the amount of salt in foods and meals
 - providing lower sodium options in public institutions
 - promoting behavior change through mass media campaigns
 - implementing front-of-pack labeling
- **Ban trans-fats** in the food chain
- Raise **taxes on sugar-sweetened beverages** to reduce sugar consumption



PROMOTE PHYSICAL ACTIVITY

- **Promote physical activity** with mass media campaigns and other community based education, motivational and environmental programs
- Provide **physical activity counselling** and referral as part of routine primary health care

Pacotes Técnicos para Prevenção dos Fatores de Riscos e Controles das DCNTs



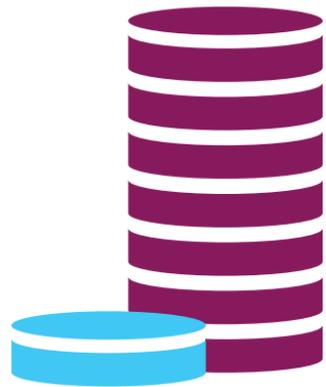
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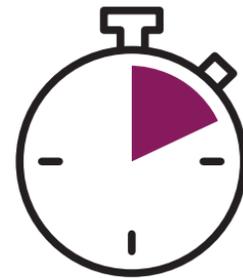
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O que os países de baixa e media renda ganharíamos se implementarem as intervenções *Best Buys*?



US\$ 1 US\$ 7

Every **US\$ 1** invested in the WHO Best Buys will yield a return of at least **US\$ 7** by 2030



15%

A **15% reduction** in premature mortality could be achieved by 2030 by implementing the WHO Best Buys

Obrigada



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