



Communication for Social Impact on CHILDHOOD OBESITY PREVENTION

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CARICOM

NOVEMBER 17TH 2022

PRESENTATION OUTLINE

Brief Epidemiology of NCDs

Elements of the theory of change

Stages of Behavior Change- Trans-
theoretical Model (Prochaska)

The Caribbean Moves Campaign



NCDs are leading causes of death worldwide

3/4  Almost 3/4 of all deaths in the world are from an NCD



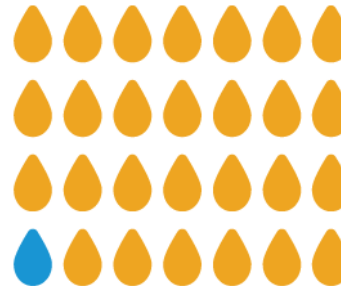
Cardiovascular diseases cause 1 in 3 deaths



Cancers cause 1 in 6 deaths



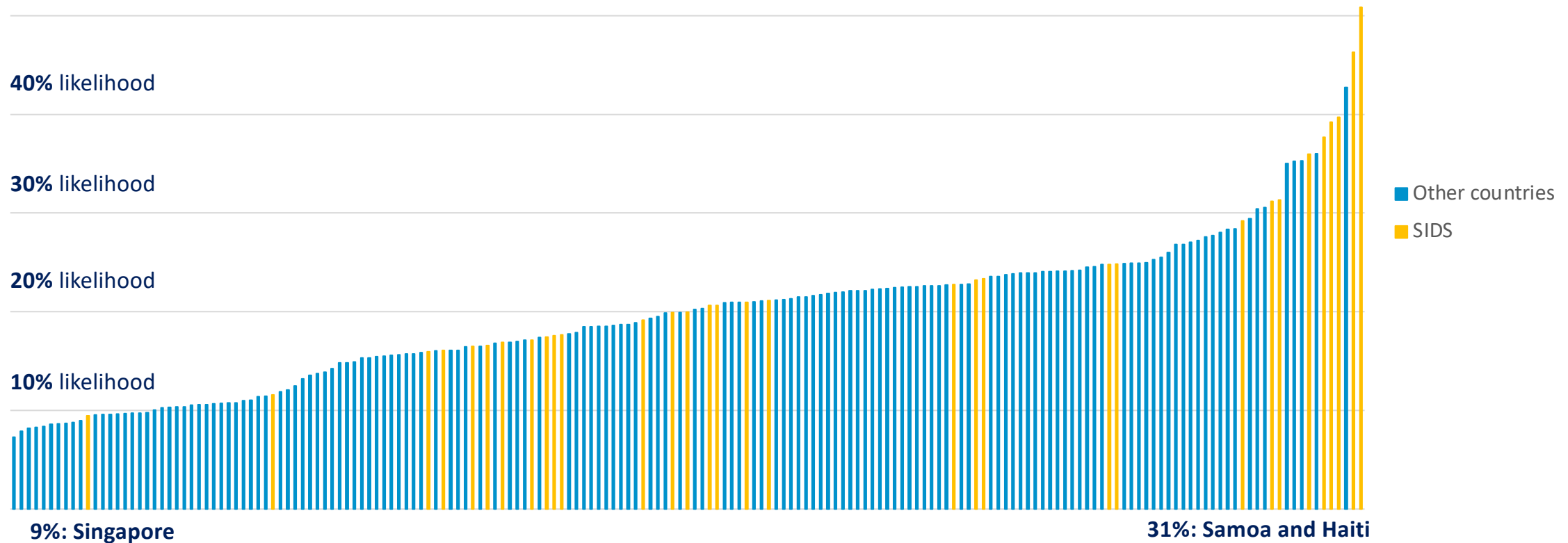
Chronic respiratory diseases cause 1 in 13 deaths



Diabetes causes 1 in 28 deaths

Source: WHO global health estimates 2019 (2020)

SIDS are overrepresented among countries with the highest likelihood of dying prematurely from NCDs

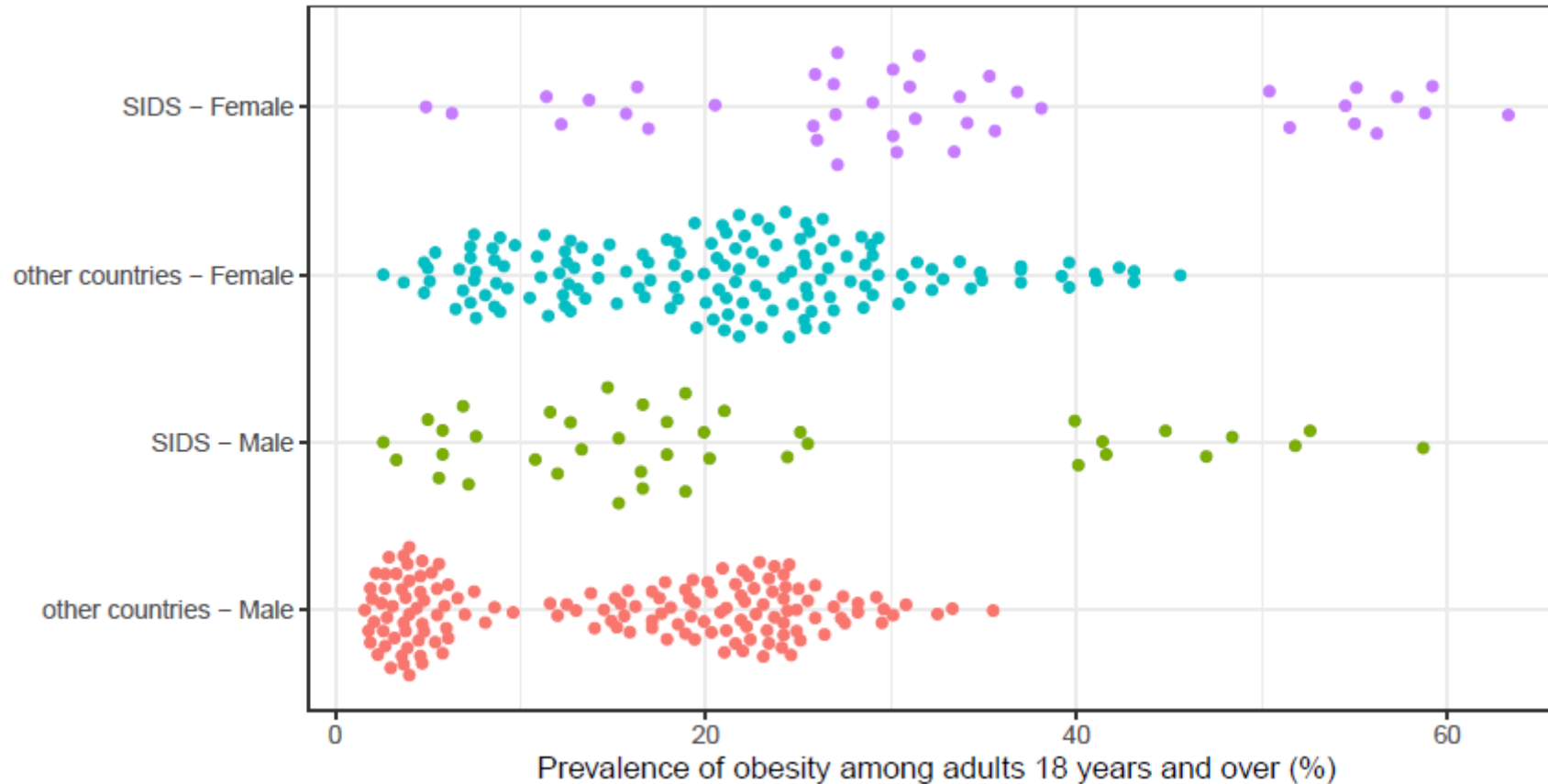




The Caribbean has the highest mortality and obesity rates in the Americas (ii)

- ❑ Non-communicable diseases (NCDs) account for 3 out of 4 deaths in the Caribbean
- ❑ 40% of NCD deaths occurring between the ages of 30 and 69 years old, the most productive years iii.
- ❑ NCDs are not only a major health issue, but they also represent a significant economic and development challenge.
- ❑ In Jamaica, the direct and indirect cost of cardiovascular disease and diabetes alone are projected to cost JA \$77.1 billion between 2017 – 2032 iv

The highest obesity rates worldwide are found in SIDS



The 10 countries with the highest obesity prevalence worldwide are SIDS – all exceeding 45% (both sexes combined)

Childhood levels of overweight or obesity in CARICOM countries (Percentage)

Country	Age group		
	5–9 years	10–19 years	5–19 years
Antigua and Barbuda	29.6	25.3	26.7
Bahamas, The	39.5	34	35.8
Barbados	30.6	26.1	27.6
Belize	31.4	27	28.5
Dominica	35.7	31.1	32.6
Grenada	29.2	24.9	26.4
Guyana	27.5	23.7	24.9
Haiti	30.7	25.9	27.6
Jamaica	33	28.3	29.8
Saint Kitts and Nevis	30.8	26.5	27.9
Saint Lucia	26.1	22.3	23.4
Saint Vincent and the Grenadines	31.9	27.5	28.9
Suriname	34.4	29.6	31.1
Trinidad and Tobago	27.6	23.3	24.9

Source: Healthy Caribbean Coalition, Childhood Obesity Factsheets (December 2019; based on WHO 2016 estimates)



Scenario

There is a High incidence of Childhood Obesity in Dominica.- 36% of children ages 5-9 are obese and diabetes is in the top three causes of premature death

At a Planning Meeting, the Cabinet discussed the problem and realized that they needed to do something about it urgently.

Cabinet passed a policy mandating PE as a time tabled subject for children ages 5-18

After six months, the Government recognized the children were getting fatter despite having PE for forty five minutes each week

What do you think was not taken into account?

What would you tell the Government to do differently?



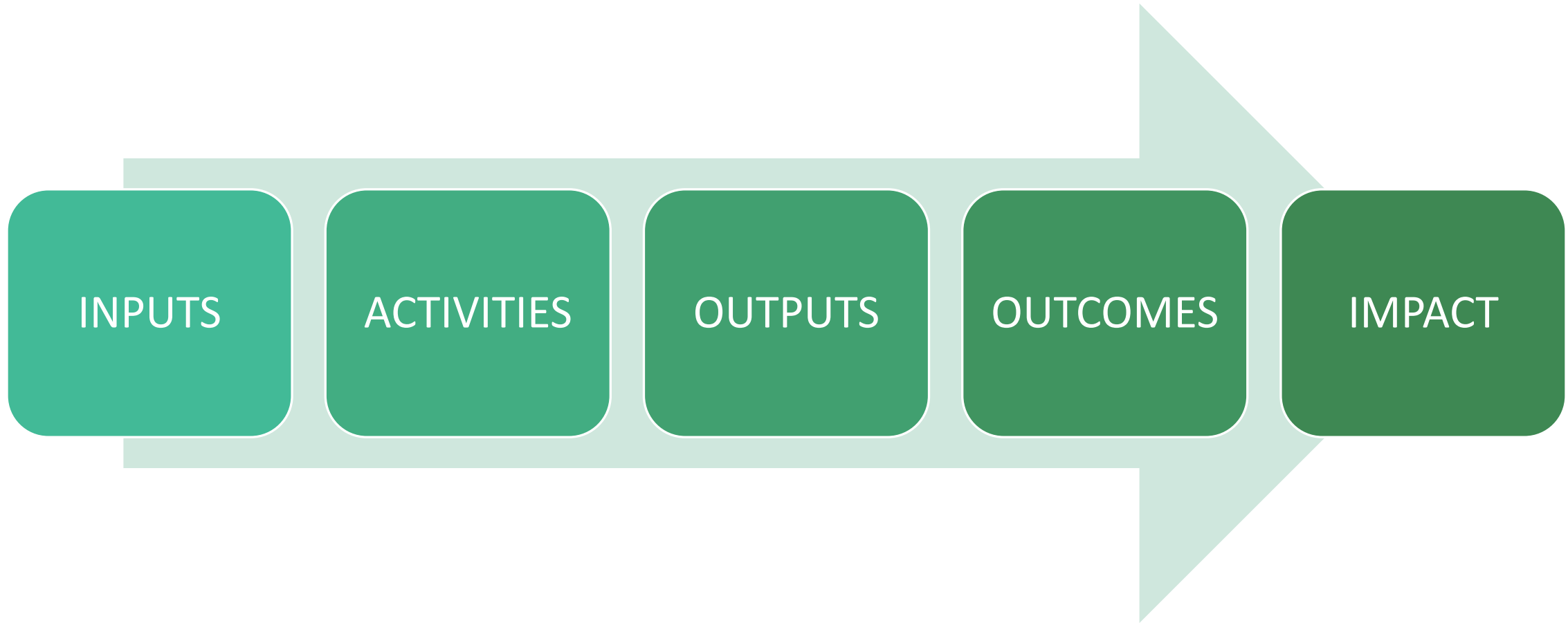
What is the theory of change?

It is results oriented- Begin with the end in mind and work backwards- what are the steps I must take to achieve the desired results?

Theories of Change are developed after a situation analysis, in a participatory processes of backward mapping from the desired impact to what is needed to get started

Theory of change models have five main components: **inputs, activities, outputs, outcomes, and impacts.**

Main elements of theory of change



ELEMENTS OF THE THEORY OF CHANGE

ELEMENT OF THE THEORY OF CHANGE	DESCRIPTION	EXAMPLE
Inputs	The resources needed to implement project activities, based on Formative research	Human and financial resources, monies for T shirts, posters, flyers, policies eg. making walk ways a necessity in communities,
Activities	The tasks that will lead to the outputs	Train staff, procure materials and equipment, develop policies and guidelines, Develop communication materials, deliver campaign at interpersonal, organizational, community and mass media levels
Outputs	Products, services, # of persons trained- increased capacity,	Materials procured, developed policies for school canteen, and urban planning with safe spaces for exercise, PE time tabled in all schools, GP trained to provide wellness checks for catchment area, campaign ads bombard people everywhere!!
Outcomes	Behavioral changes, both intended and unintended, positive and negative	Increased PA -individual, organizational, school and community levels, wellness checks, healthier eating habits
Impact	Long-term, widespread improvement in society	Reduced incidence of NCDs, Reduced mortality rates due to NCDs



Health Education, Promotion, BCC

“A process aimed at encouraging people **to want to be healthy, to know how to stay healthy**, to do what they can individually and collectively to maintain health and to seek help when needed”

Health Promotion should not aim to coerce but to motivate and facilitate informed choice for changed behaviour

How can you motivate?

BUT WE KNOW THAT KNOWLEDGE ALONE DOES NOT ALWAYS EQUATE TO BEHAVIOR CHANGE!!

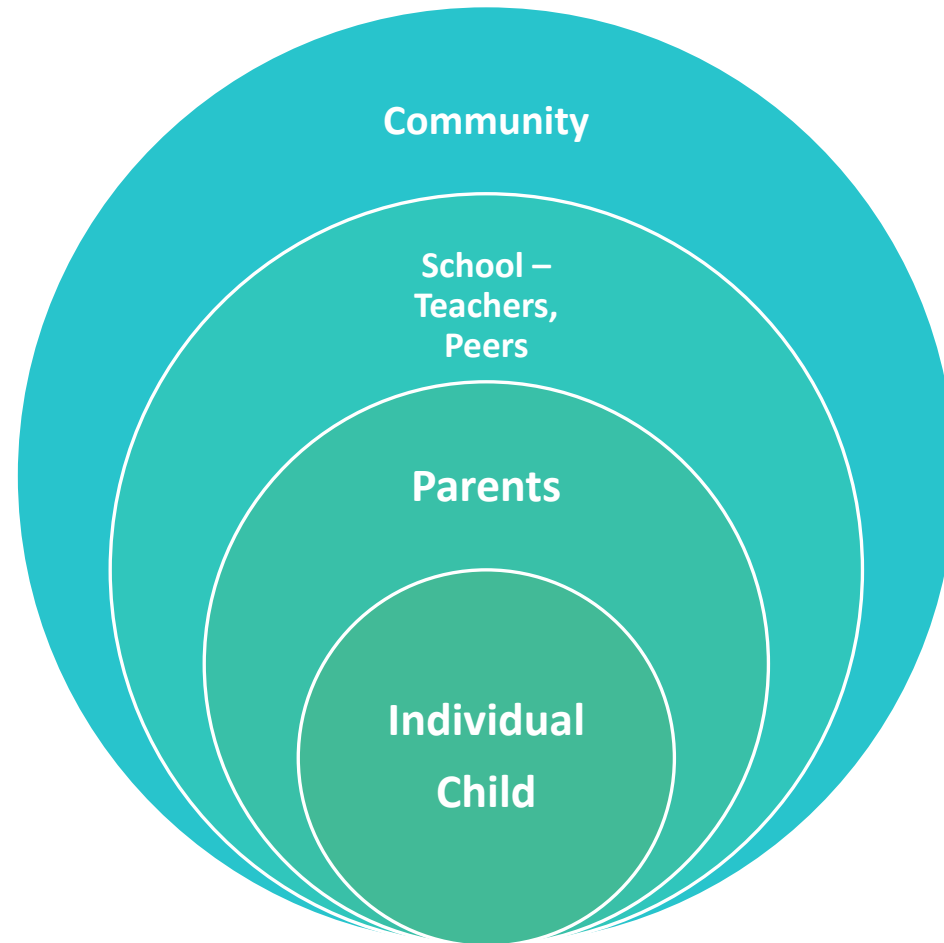
Behavior Change Communication uses a systematic method of **formative research, behavioral analysis, , communication planning, implementation, monitoring and evaluation**

Target audience segmentation, message development, message pre-testing, mass media, community mobilization and interpersonal communication to reach the behavior change objective

THE INDIVIDUAL AND THEIR SUPPORT NETWORK

1. The 6th report on the World Health Situation states that “health has to be attained and cannot be imposed”
2. This requires a state of readiness to commit to being healthy on the part of Individuals supported by their providers
3. An individual spends on average 45 minutes with their family physician or GP- after that, they are off the radar
4. An equal partnership is critical to achieve health goals client or patient and the provider
5. The environment in which we live, work and play is also critical to supporting us in achieving our goals
6. Behaviors are influenced by the culture, societal norms, policies that government may have in place- these must all work together in harmony
7. Policies at work places, schools, within communities, Government can all work to support health or to undermine it

The Ecological Model



FORMATIVE RESEARCH:

Formative research is the critical step in designing a social marketing campaign.

The steps include:

- environment scanning (or situation analysis),
- exploratory research,
- concept testing, and pretesting.- simple messages- cues to action

Formative research is used to refine and settle on a theory-based campaign approach.

Segment population into target groups, discover core values,

Link messages to core values- Corn flakes and super heroes, New cars with sexy ladies, Stop smoking & beauty,

Primary Target Population- Children- values- superheroes Message- eat healthy and exercise

Secondary Target population- Parents and teachers (Influencers)- different message- Ensure you purchase fresh fruit and vegetables for your children

Behavior Change Communication-IPC

☐ Pre- contemplation (unaware)

☐ Contemplation

☐ Preparation

☐ Action or trial

☐ Maintenance

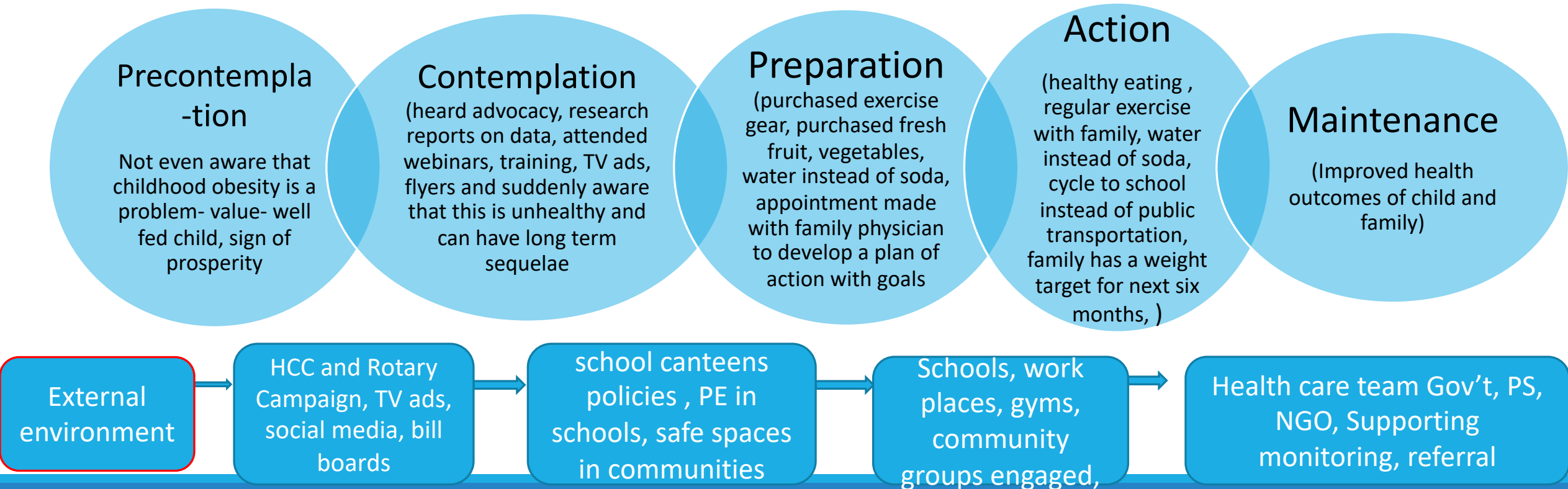
☐ Make the person aware through interpersonal, community or mass media communication

☐ Allow persons to reflect on their own values and vulnerability (best to appeal to their core values- looks for women who smoked)

☐ More information, skills building, training programmes, interpersonal communication with health provider, peer educator etc needed at this point- behavior change goals defined at this stage- accountability- peers, family, provider

☐ Social support important,

Prochaska's Stages of Behaviour change





CARIBBEAN MOVES CAMPAIGN

Caribbean Wellness Revolution

Goals: Each country will set three year medium term targets that will ultimately feed into the 2030 goal of reducing NCDs by 30%

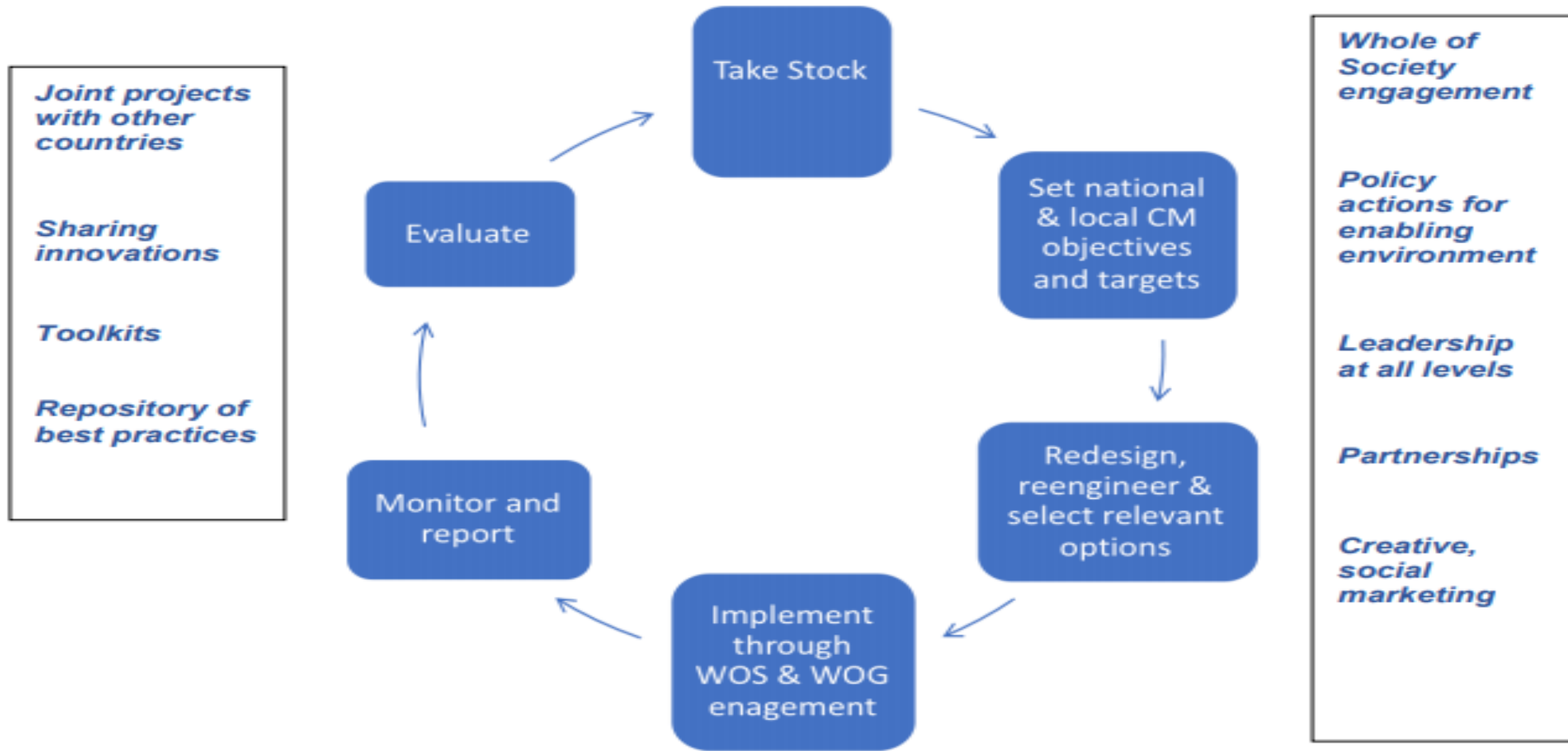
Objective: To create a culture of regular physical activity, healthy eating, with fun supportive programs in the communities, schools and work places where people live work and play supported by a health system that promotes annual wellness checks

Note: The intervention aims to change those **modifiable risk factors** for NCDs- diet, exercise, and poor health seeking behaviors- late detection of risk or disease. To **create an enabling environment for sustained behavior change** – policy development, social mobilization, and multi stakeholder involvement

Guiding Principles

- ☐ Engagement and empowerment of individuals, families and communities at all stages
- ☐ Promoting leadership at all levels, local and organizational, and across sectors
- ☐ Equity for all in opportunities for physical activity and healthy diets and across the life course
- ☐ Promoting and facilitating physical activity and healthy diets as within routine of daily living
- ☐ Decentralization of health promotion efforts
- ☐ Maximizing the use of new communication techniques to motivate and engage all ages, in particular the youth
- ☐ Partnerships for sustainability

FRAMEWORK FOR CARIBBEAN MOVES



Elements of TOC	Result 1	Result 2	Result 3
by Dec 31st 2025	Decrease the # persons with insufficient physical activity by 5%	Reduce the prevalence of obesity in children, adults by 5%	Increase the age standardized prevalence of children that consume 5 servings of fruit and vegetables a day by 100%
5. Impact	Increase in the number of target pop that are physically fit	?	?
4. Outcome	# of children, parents, etc who exercise 3-4 times per week, raised public awareness, PPP	?	?
3. Output	# providers and Peer educators trained, # materials disseminated, # of facilities with wellness agendas, # of schools with PE	?	?
2. Activities	Train providers, PE instructors, gym operators, teachers, PTAs, children, develop slogans, test materials branding, campaign-MM, CM, IPC, Peers	Advocate for policies to support PA in community, schools, work places.	Train canteen operators, parents, FOPL, M&E regulation, health tax-
1. Input	Partnerships with MOH, PPP, MOE, Data from community health centres, schools. Resource allocation based on proposals/needs	Gather data, baseline assessments, Mobilize Resources to address gaps	Policy development- fresh fruit in school canteens, reduce price of fruit and veg, tax SSB, unhealthy foods

The Ottawa and Caribbean Charters of Health Promotion

- 1) Build Public Health Policy
- 2) Create Supportive Environment
- 3) Strengthen Community Action
- 4) Develop Personal skills
- 5) Reorient Health Services
- 6) Build Alliances especially with the media, NGOs, Rotary, Lions, Community Groups



“Building Healthier Lives Together” Thank You!



Resource Documents

i Estimated deaths based on registered deaths by National Vital Statistic System Regional Mortality Information System, Pan American Health Organisation/World Health Organisation.

ii Global status report on noncommunicable diseases 2020. World Health Organization.

iii Ibid

iv PAHO/WHO, Ministry of Health, Jamaica, United Nations Development Programme, and RTI International: Investment Case for the Prevention and Control of NCDs in Jamaica. Executive Summary 2017.

v World Health Organization & United Nations Development Programme. (2017) . The investment case for non-communicable disease prevention and control in Barbados. World Health Organization. <http://www.who.int/iris/handle/10665/259689>.

Resource Documents

vi Declaration of Port-Of-Spain: Uniting to Stop the Epidemic of Chronic NCDs. Retrieved: from website: <https://caricom.org/media-center/communications/statements-from-caricom-meetings/declaration-of-port-of-spain-uniting-to-stop-the-epidemic-of-chronic-ncds>

vii The Evaluation of the 2007 CARICOM Heads of Government Port of Spain NCD Summit Declaration, The Investigators' Detailed Report, October 2017. Retrieved from website: <http://onecaribbeanhealth.org/wp-content/uploads/2018/01/POSDEVAL>

viii WHO | Noncommunicable Diseases Progress Monitor 2017. Retrieved from website: www.who.int/nmh/publications/ncd-progress-monitor-2017/en/

ix Declaration of Port-Of-Spain: Uniting to Stop the Epidemic of Chronic NCDs. Retrieved: from website: <https://caricom.org/media-center/communications/statements-from-caricom-meetings/declaration-of-port-of-spain-uniting-to-stop-the-epidemic-of-chronic-ncds>

x Fact Sheet on physical activity and the built environment, www.onecaribbeanhealth.org

xi Caribbean Moves Concept paper- Building Healthier lives together