

Economic Commission for Latin America and the Caribbean

**ECLAC SUBREGIONAL HEADQUARTERS
FOR THE CARIBBEAN**



**Report of the expert group meeting
on addressing non-communicable
diseases in the Caribbean
in fulfilment of the
Sustainable Development Goals
and the SAMOA Pathway**



UNITED NATIONS

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Economic Commission for Latin America and the Caribbean
Subregional Headquarters for the Caribbean

Expert group meeting on addressing
non-communicable diseases in the Caribbean
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and the SAMOA Pathway

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**REPORT OF THE EXPERT GROUP MEETING ON
ADDRESSING NON-COMMUNICABLE DISEASES IN THE CARIBBEAN
IN FULFILMENT OF THE SUSTAINABLE DEVELOPMENT GOALS
AND THE SAMOA PATHWAY**

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CONTENTS

A. MAIN CONCLUSIONS AND RECOMMENDATIONS	2
B. ATTENDANCE AND ORGANIZATION OF WORK.....	3
1. Place and date of the meeting.....	3
2. Attendance.....	3
3. Agenda	3
4. Documentation.....	3
C. SUMMARY OF PROCEEDINGS.....	3
1. Opening of the meeting	3
2. Presentation: Addressing the adverse impacts of non-communicable diseases on the sustainable development of Caribbean countries	5
3. Panel: Perspectives on progress in the prevention and control of non-communicable diseases in the Caribbean	6
4. Discussion	7
5. Conclusions	8
Annex I List of participants.....	9
Annex II Programme	11

A. MAIN CONCLUSIONS AND RECOMMENDATIONS

1. The ECLAC study on “Addressing the adverse impacts of non-communicable diseases on the sustainable development of Caribbean countries” is the organization’s first attempt to stimulate a debate on a renewed focus on non-communicable diseases (NCDs) as a health challenge with major implications for sustainable development.
2. With one-third of the time period for achieving the Sustainable Development Goals (SDGs) already reached, it was timely to assess the level of progress in achieving SDG 3.4 that seeks to reduce premature mortality from NCDs by one-third by the year 2030. This target is synonymous with the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020 target of attaining a 25 per cent relative reduction in the risk of premature mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases by 2025, which also aligns well with the SAMOA Pathway’s call for 10-year targets and strategies to reverse the spread and severity of NCDs for the period 2015 to 2025.
3. The COVID-19 pandemic highlights the need for the Caribbean subregion to refocus attention on addressing NCDs in order to ensure that the burden of these diseases does not reverse the gains made to overall sustainable development. The pandemic has increased the risk of unhealthy behaviours such as a rise in the prevalence of alcohol consumption and unhealthy diets, as well as restrictions to physical activity because of lockdown measures. While these unhealthy behaviours may not have immediate implications, there may be an actual increase in the prevalence of NCDs associated with these risk factors in some years to come.
4. The noticeable correlation of heightened COVID-19 risk and NCDs calls for a renewed focus on NCDs in the Caribbean when contextualized in an environment of a rapidly ageing population and a rising prevalence of childhood obesity. These factors have direct impacts on healthcare delivery and cost, as well as implications for the economic productivity of current and future populations.
5. Even though the COVID-19 pandemic has become the public health priority of the current time for governments, it is important to keep the issue of NCDs on the health agenda. Member States should develop strategies to better protect those populations at a greater risk from the virus due to their NCD conditions. This should include policies for equitable allocation of future vaccines and protocols to manage interruptions in normal medical product supply.
6. Access to continuing health services and essential medicines for persons with NCDs during the COVID-19 pandemic or any other health emergency is crucial. The pandemic has created an additional burden on the health system as human and financial resources have been reallocated to treating sick persons with the virus. There has also been a decrease or halt in economic activity, as countries implemented lockdown and stay at home measures to prevent the spread of the virus, which would have affected the ability of some persons to buy necessary medications. Government programmes that provide citizens with free access to medication and health services have proved to be quite beneficial for NCD patients as they have helped to ease the burden caused by the pandemic.
7. Member States are urged to start exploring new strategies for maintaining health care through digital health or telemedicine initiatives in order to adapt and build forward better from the COVID-19 pandemic. Stronger regional collaboration should also be encouraged to position member States to better able to track their progress in achieving the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020 and SDG targets.

B. ATTENDANCE AND ORGANIZATION OF WORK

1. Place and date of the meeting

8. The expert group meeting on addressing non-communicable diseases in the Caribbean in fulfilment of the Sustainable Development Goals and the SAMOA Pathway was held on Monday 30 November 2020.

2. Attendance¹

9. The expert group meeting was attended by several Caribbean policymakers and health practitioners from the member States of Antigua and Barbuda, Dominica, Guyana, Saint Lucia, and Saint Vincent and the Grenadines. International and regional development partners and experts from the Caribbean Public Health Agency (CARPHA), Pan American Health Organization (PAHO/WHO), The University of the West Indies (UWI) were also represented, as well as representative from the non-governmental organizations - Healthy Caribbean Coalition (HCC) and The Trinidad and Tobago Non-Communicable Diseases Alliance (TTNCDA).

3. Agenda

1. Opening of the meeting
2. Presentation: Addressing the adverse impacts of non-communicable diseases on the sustainable development of Caribbean countries
3. Panel: Perspectives on progress in the prevention and control of non-communicable diseases in the Caribbean
4. Discussion
5. Conclusions

4. Documentation

10. The draft study entitled: “Addressing the adverse impacts of non-communicable diseases on the sustainable development of Caribbean countries”, prepared by ECLAC subregional headquarters for the Caribbean, served as the background document for the meeting.

C. SUMMARY OF PROCEEDINGS

1. Opening of the meeting

11. The Director of the ECLAC subregional headquarters for the Caribbean welcomed all participants to the virtual expert group meeting to discuss the progress made in addressing the challenges that NCDs pose to sustainable development in the Caribbean subregion. She highlighted the overarching global framework for sustainable development – the 2030 Agenda, which represents a plan of action for people, planet and prosperity to strengthen peace and build partnerships. The “people component” of the 2030 Agenda, speaks to the commitment by world leaders to “end poverty and hunger, in all their forms and dimensions, and to ensure that all human beings can fulfil their potential in dignity and equality in a healthy

¹ See annex I for a full list of participants.

environment.” A healthy environment starts with the health and wellbeing of individuals and NCDs constitute a huge global burden of disease which accounts for about 63 per cent of deaths. She noted that in the Caribbean, this rate was above 80 per cent in 2016 for Antigua and Barbuda, Barbados, Grenada, Jamaica, Saint Lucia, Saint Vincent and the Grenadines, and Trinidad and Tobago.

12. She stated that the burden of NCDs goes beyond premature death, as they significantly contribute to morbidity and the corresponding management of chronic health conditions. The noticeable direct economic impacts of NCDs are the high healthcare cost and the burden on health services in small economies, however there are greater indirect costs that include lost productivity (due to morbidity) and the loss to the economy from premature deaths caused by these NCDs. When the economic burden of NCDs is comprehensively assessed, an economic case for taking tangible actions to prevent and control these mostly preventable diseases is apparent.

13. The Director commended the Caribbean Heads of Government on the establishment of the Caribbean Commission on Health and Development (CCHD) in 2003, whose work later contributed to the 2007 Declaration of Port of Spain: Uniting to Stop the Epidemics of Chronic NCDs. This landmark declaration signalled to the world the determination of the Caribbean to address NCDs and contributed to global platforms convened to fight NCDs at the United Nations General Assembly. Since then, from the Global Action Plan on the Prevention and Control of Non-communicable Diseases 2013-2020, that is very specific to this cause, to the SIDS Accelerated Modalities of Action (SAMOA) Pathway and the Sustainable Development Goals (SDGs), that more generally address sustainable development, the burden and threat of NCDs to sustainable development have always been highlighted and the need to address this challenge has been equally underscored.

14. While there has been progress in combating NCDs globally and regionally, the Director felt that the COVID-19 pandemic could potentially lead to a reversal in progress. As emphasized by PAHO/WHO, people with pre-existing medical conditions that include most NCDs are at higher risk of severe illness and death from COVID-19 infection. Furthermore, diabetes, cardiac disease, and lung disease were the most common comorbidity reported by persons with COVID-19 infection in Latin America and the Caribbean. Also, death was reported in 61 per cent of individuals with at least one comorbidity. The noticeable correlation of heightened COVID-19 risk with NCDs calls for a renewed focus on NCDs in the Caribbean when contextualized in an environment of a rapidly ageing population and a rising prevalence of childhood obesity. These factors have direct impacts on healthcare delivery and cost, as well as implications for the economic productivity of current and future populations.

15. The Director ended her remarks by urging stakeholders to continue engaging in discussions on NCDs and their impacts on sustainable development. She expressed her hope that policies, programmes, actions, and funds will be devoted to addressing NCDs now so that the Caribbean subregion can achieve greater cost savings in the future that will result in societies being healthier and wealthier. With one-third of the time period for achieving the SDG targets already reached, it was timely to assess the level of progress in achieving SDG 3.4 that seeks to reduce premature mortality from NCDs by one-third by the year 2030. This target was synonymous with the Global Action Plan’s target of attaining a 25 per cent relative reduction in the risk of premature mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases by 2025 – which also aligns well with the SAMOA Pathway’s call for 10-year targets and strategies to reverse the spread and severity of NCDs for the period 2015 to 2025.

2. Presentation: Addressing the adverse impacts of non-communicable diseases on the sustainable development of Caribbean countries

16. The Coordinator, Statistics and Social Development Unit (SSDU), ECLAC subregional headquarters for the Caribbean, presented the findings of the ECLAC study entitled “Addressing the adverse impacts of non-communicable diseases on the sustainable development of Caribbean countries”. The study reviews the NCD profile of Caribbean member States and highlights trends in the prevalence of risk factors for NCDs in these countries. It emphasizes the disease and economic burdens of NCDs on Caribbean households and economies and assesses the respective roles of national policies, regional declarations, and global agendas and action plans in preventing or controlling NCDs and their risk factors in Caribbean countries. The study further emphasizes the correlation between NCDs and COVID-19, underscoring the importance of tackling NCDs to prevent avoidable mortality, excess morbidity, and productivity losses.

17. He provided an overview of the burden of NCDs from both a global and regional perspective. Globally, NCDs contribute significantly to premature death, representing six out of the top ten leading causes of death with ischaemic heart disease, stroke, and chronic obstructive pulmonary disease being the top three leading causes of deaths. More importantly, countries in the low-and middle-income categories make up 86 per cent of all NCD premature deaths. This scenario has created an economic burden of high costs associated with healthcare for treatment and management of chronic illnesses and a loss in productivity due to excess morbidity and premature death. In fact, productivity loss from four major NCDs (cardiovascular diseases, cancer, chronic respiratory disease, and diabetes) and mental disorders has been estimated to be US\$ 47 trillion.

18. In the Caribbean subregion, NCDs account for between 57 per cent (Haiti) and 83 per cent (Barbados) of all deaths, with very high prevalence of NCD risk factors that include the consumption of alcohol, the use of tobacco, physical inactivity, and obesity. In terms of the economic burden that NCDs present in the subregion, diabetes and hypertension have been estimated to cost between 1 and 8 per cent of GDP in Caribbean countries. There is also an increasing rate of childhood obesity which is currently estimated at one out of three children having unhealthy weight, which could lead to future health problems related to NCDs as well as future productivity loss. In countries like Anguilla, more than half of annual cost of domestic healthcare was allocated to NCDs while in Trinidad and Tobago, NCDs accounted for 53 per cent of hospitalizations during 2010 to 2015. These factors cause great strain on the health sectors of small Caribbean economies when more than half of the health infrastructure and the domestic resources devoted to healthcare financing have to be allocated to NCDs. The recent COVID-19 pandemic which is an additional burden on the health sector has also proved that NCDs result in more severe illness from and higher likelihood of death from COVID-19 infection, with an average of 61 per cent of deaths from the virus being linked to at least one NCD comorbidity in Latin American and Caribbean.

19. Data on the disease burden of NCDs showed that a quarter of all disability adjusted life years (DALYs) within the age group 25–49 years were due to NCDs, while for the age group 50–74 years, DALYs from NCDs made up about 45 per cent. As these age groups make up the most economically active persons in most countries, it will ultimately contribute to productivity loss. Furthermore, evidence revealed that the economic burden due to indirect costs related to mortality as well as productivity loss due to morbidity associated with diabetes, ranged from 39 per cent in the Bahamas to as high as 73 per cent in Trinidad and Tobago. Another study presented the share of the indirect cost of hypertension among the elderly to be 47 per cent with the cost of caregivers accounting for the largest share (35 per cent) of overall cost.

20. The importance of the impact of NCDs on productivity and the economies in the subregion has long been one of the priorities of Caribbean Heads of Government dating back to 2003 with the Nassau Declaration: “The health of the Region is the wealth of the Region” and the establishment of the Caribbean

Commission on Health and Development (CCHD). A few years later, the 2007 Declaration of Port of Spain: Uniting to Stop the Epidemics of Chronic NCDs was made by Caribbean Heads of Governments. The Caribbean has also been strongly represented in a number of United Nations High-level Meetings on NCDs, including the two major sustainable development platforms being the SAMOA Pathway (2014) and the 2030 Agenda with its associated SDGs (2015). The SAMOA Pathway recognizes health as a precondition for and an outcome and indicator of the economic, social, and environmental dimensions of sustainable development and the 2030 Agenda prioritizes the welfare and the wellbeing of every individual, who should have the right to exercise and attain their optimal capabilities to attain their maximum productivity. For this to happen, there needs to be a healthy environment for people and economies to thrive. More specifically, SDG 3.4 speaks to reducing premature mortality from non-communicable diseases through prevention and treatment and promoting mental health and well-being. There is also the WHO/PAHO Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020, which is the overarching framework with 6 objectives and 9 indicators to monitor countries' progress in addressing NCDs.

21. The Coordinator underscored that the COVID-19 pandemic highlights the need for the Caribbean subregion to refocus attention on addressing NCDs in order to ensure that burden of these diseases does not reverse the gains made to overall sustainable development. He provided an overview of Caribbean countries' status on meeting the internationally agreed target on the reduction of mortality from NCDs based on WHO data on the probability of premature death due to NCDs, corresponding to Global Action Plan indicator 1, which speaks to 25 per cent relative reduction in risk of premature mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases and SDG 3.4.1 on the mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease.

22. At the subregional level, there has not been any noticeable progress in reducing premature mortality from NCDs and the prevalence of physical inactivity, tobacco use, raised blood pressure, obesity and diabetes between 2010 and 2016. For most countries, the rates remained the same or marginally increased in 2016 compared to 2010. The analysis of data also showed that if the Bahamas, Saint Vincent and the Grenadines, Suriname, and Trinidad and Tobago continue their current trend, they will be well-positioned to achieve the SDG and the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020 targets, while the significant strides made by Barbados and Grenada may actually help them to surpass the SDG and the Global Action Plan 2013-2020 targets. At the same time, for every country in the analysis, more would need to be done for them to achieve the longer-term objective of reaching 9.3 per cent mortality rate for NCDs. It was also noted that as the population is ageing more rapidly, and childhood obesity remains high, the Caribbean faces a future of higher prevalence of NCDs, resulting in greater health care costs and a pronounced loss in productivity.

3. Panel: Perspectives on progress in the prevention and control of non-communicable diseases in the Caribbean

23. The Executive Director, CARPHA, Trinidad and Tobago, gave a presentation on addressing non-communicable diseases in the Caribbean in COVID-19 times and beyond. Based on available data, Caribbean countries accounted for the highest rates of NCD mortality in the Americas, which was no longer characteristic of the older populations. Childhood obesity has also been an emerging issue which would require urgent legislative action. The Executive Director informed the participants that within the situation of COVID-19, the Caribbean account for about a quarter of positive cases and related deaths in the Latin America and Caribbean Region. As of 22 November, the CARPHA laboratory received almost 33,000 samples from 17 member States with a positivity rate of 13.6 per cent, which is representative of tests from specific cohorts of persons travelling into the country and are being monitored in quarantine or those persons who are in health facilities. She noted that the positivity rate would be much higher if the rest of the general population was being tested.

24. The issue of NCDs has heavily influenced CARPHA's COVID-19 response, especially in determining the more vulnerable groups for distribution of personal protective equipment (PPE) and medicine supplies and equipment. CARPHA, along with PAHO and the European Union, have been instrumental in the COVAX facility that would provide access to COVID-19 vaccines to countries. To date, down payments for vaccines have been made for nine Caribbean countries. CARPHA has also been providing guidance on the virus through situation reports as well as protocols for protecting persons living with NCDs during the pandemic and a regional protocol for food security. CARPHA's Caribbean medicine regulatory system in collaboration with PAHO, reviews new medicines coming into the subregion while the Medicine Quality Control and Surveillance Department tests market drugs for quality. This system has been very instrumental during the COVID-19 pandemic for the registration of two polymerase chain reaction (PCR) tests and will also take place when vaccines arrive in the subregion.

25. The Board Member, Healthy Caribbean Coalition, Barbados, in her presentation provided an analysis of the progress of prevention and control of NCDs in the Caribbean, from the perspective of civil society. She informed participants that the Healthy Caribbean Coalition (HCC) is the only NCD Caribbean-wide alliance with over 100 civil society organizations, which was formed in 2008, after the historic 2007 CARICOM Heads of Government Summit on NCDs. Some of the key initiatives that have been implemented throughout the Caribbean, in partnership with public and private stakeholders, range from sensitization programmes such as the Annual Caribbean Alcohol Reduction Day (CARD) and advocacy efforts to support childhood obesity prevention policies. There has also been the promotion of workplace wellness programmes and capacity building for National NCD Commissions as well as people living with NCDs to advocate for improved NCD prevention and control.

26. The Board Member recommended that for the subregion to effectively address NCDs, it must be regarded as a development issue that is linked to human rights and equity. Additionally, greater political priority on NCDs would encourage more national and regional institutional collaboration both within and outside of the realm of health. Capacity building for NGOs and persons living with NCDs would also help to champion the cause at policy level. She informed the participants of a new transformative NCD agenda to be launched on 10 December 2020, for galvanizing accelerated and innovative actions for NCD prevention and control strategies, based on human rights, equity, and human security principles, and with a greater focus on integrated action across themes, sectors, and disciplines.

4. Discussion

27. Even though the COVID-19 pandemic has become the public health priority of the current time for governments, it is important to keep the issue of NCDs on the health agenda. A recent PAHO study on populations with increased risk for severe illness from COVID-19 estimated that around 29 per cent of the population in the Caribbean fell into this category, with the majority of persons having underlying medical conditions such as diabetes and hypertension. This analysis was included in the recommendations from the PAHO Technical Advisory Group for Vaccines and Immunization, with the aim of developing strategies to better protect those populations at greater risk from the virus due to their NCD conditions. This type of information would also be important to plan for allocation of future vaccines and to manage interruptions in normal medical product supply.

28. Access to continuing health services and essential medicines for persons with NCDs during the COVID-19 pandemic or any other health emergency was seen to be of paramount importance. The pandemic created an additional burden on the health system as resources (human and financial) would have been reallocated to treating sick persons with the virus. There has also been the decrease or halt in economic activity, as countries implemented lockdown and stay at home measures to prevent the spread of the virus, which would have affected the ability of persons to buy necessary medications. Government initiatives such as the Medical Benefits Scheme in Antigua and Barbuda; the National Health Fund (NHF) in Jamaica and

the Chronic Disease Assistance Programme (CDAP) in Trinidad and Tobago that provide citizens with free access to medication and health services proved to be quite useful. In fact, a past study done by Caribbean Epidemiology Centre (CAREC) found that these initiatives positively contributed to a reduction in cardiovascular mortality in the countries where they were set up. Additionally, based on a recent survey that was conducted by the Trinidad and Tobago NCD Alliance, most respondents did not have any problems accessing their medications through the CDAP during the present COVID-19 pandemic.

29. The COVID-19 pandemic has also increased the risk of unhealthy behaviours as there has been a rise in the prevalence of alcohol consumption and unhealthy diets, as well as restrictions to physical activity because of lockdown measures. It was noted that while these unhealthy behaviours may not have immediate implications, there may be an actual increase in the prevalence of NCDs associated with these risk factors in some years to come.

30. Participants recommended that member States should start exploring new strategies for maintaining health care through digital health or telemedicine initiatives in order to adapt and build forward better from the COVID-19 pandemic.

31. Policies and programmes for the reduction of NCDs should be aligned to countries' National Development Plans so that they would be better able to track their progress of achievement of the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020 and SDG targets. According to a study done by The George Alleyne Chronic Disease Research Centre of the University of the West Indies, data on premature mortality from NCDs in 31 countries in the Americas showed that the prevalence rate was 22 per cent in the Caribbean compared to 20.6 per cent in Central and South America. The subregion needs to act now if it is to achieve the Global Action Plan and SDG targets. However, as most countries are considered middle to high income, funding and support mechanisms that accompany these development targets are limited. Stronger regional collaboration to address the issue of NCDs is therefore encouraged.

32. The SAMOA Pathway was elaborated for the benefit of the participants. It is an international framework that was developed as the outcome of the Third International Conference on Small Island Developing States, that was held in 2014 in Samoa. The Conference, with the overarching theme "The sustainable development of Small Island Developing States through genuine and durable partnerships", played a significant role in identifying SIDS priorities that needed to be considered in the formulation of the 2030 Agenda. The midterm review of the SAMOA Pathway was done in 2018 which culminated in the San Pedro Declaration that reaffirmed that SIDS remain a special case for sustainable development, in view of their unique vulnerabilities and that they remain constrained in meeting their goals in all dimensions of sustainable development (economic, social and environmental).

5. Conclusions

33. The Coordinator, Statistics and Social Development Unit (SSDU), ECLAC subregional headquarters for the Caribbean, thanked all participants for their feedback on the study, which will be incorporated in the finalization. He encouraged regional collaboration with ECLAC, PAHO, CARPHA, the HCC and other civil society organizations to facilitate more evidence-based policies and programmes on NCDs. The Coordinator offered ECLAC's technical assistance to member States should they be interested in more detailed country analysis in this area. The Director of ECLAC subregional headquarters for the Caribbean thanked panelists for their very informative presentations and the participants for their contributions.

Annex I**LIST OF PARTICIPANTS****A. Member States****ANTIGUA AND BARBUDA**

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- Janice Gaspard, Senior Technical Officer-Planning and Coordination, email: gasparja@carpha.org

Pan American Health Organization (PAHO/WHO)

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C. Non-governmental organizations

Healthy Caribbean Coalition (HCC), Barbados

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The Trinidad and Tobago Non-Communicable Diseases Alliance (TTNCDA)

- Dr. Karen Sealey, Founder and HCC Board Member, email: kannesealey@gmail.com

D. Academic institutions

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Annex II

PROGRAMME

- 09.30 – 9.40 a.m. **Opening of the meeting**
- Welcome remarks
 Diane Quarless, Director, ECLAC subregional headquarters for the Caribbean
- 9:40 – 10:15 a.m. **Presentation: Addressing the adverse impacts of non-communicable diseases on the sustainable development of Caribbean countries**
- Abdullahi Abdulkadri, Coordinator, Statistics and Social Development Unit,
 ECLAC subregional headquarters for the Caribbean
- 10.15 – 11.15 a.m. **Panel: Perspectives on progress in the prevention and control of NCDs in the Caribbean**
- Dr. Joy St. John, Executive Director, CARPHA, Trinidad and Tobago
- Dr. Karen Sealey, Board Member, Healthy Caribbean Coalition, and Founder,
 Trinidad and Tobago, NCD Alliance
- 11:15 – 11.55 a.m. **Discussion**
- 11:55 a.m. – 12.00 p.m. **Conclusions**
- Abdullahi Abdulkadri, Coordinator, Statistics and Social Development Unit,
 ECLAC subregional headquarters for the Caribbean



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