Healthy Lifestyles and NCDs Annual Report 2014-15

Context

Program structure

Healthy Lifestyle and NCDs program calls on reducing the burden of NCDs through targeting specific population as medical students and people at risk to showing concerns to the government’s locally, nationally and internationally and joining relative multidisciplinary advocacy efforts. Promoting for healthy lifestyle and raising awareness about the risk factors are the crucial milestones in the program.

SCOPH Director: Skander Essafi
Liaison Officer on Public Health: Arthur Mello
Program Team Members:
  Program Coordinator Healthy Lifestyle and NCDs: Omneya Mahmoud [IFMSA-Egypt]
  Members: Hana Lucev [CroMSIC-Croatia] & Rhea Saksena [Medsin UK]

On the international level, IFMSA strongly works on advocacy. A policy statement advocating for our need to tackle, prevent and control the global burden of NCDs was adopted in AM14 (link HERE). Moreover, since the term 2013-2014, not a single gathering in IFMSA -GAs and RMs- missed a talk about NCDs and how can medical students advocate for healthy lifestyle through talks, sessions with externals and SWGs bringing different aspects about the burden of NCDs globally and regionally.

Taking in consideration the vast impact of NCDs all over the globe regardless the socioeconomic status of countries, different NMOs contributed together in transnational projects in the area of the program. They were mainly tackling cancer and advocating for healthy diets. Considering the national level, it was realized that it has a very strong impact too. More than 80 NMOs are working nationally in the field of NCDs and Healthy Lifestyle, through celebrating world days, raising awareness about different risk factors leading to NCDs increased burden and educating medical students about NCDs in structure and risks.

Last but not least, local level contribution gives great examples of combating NCDs through awareness campaigns to different target risk groups and small scale surveys assessing public awareness to the issue.

Institutional arrangements

In fact there are lots of official collaborations happening in the area of the program. Lots of official links were done with NCD Alliance . In addition to that, IFMSA is involved in the WHO global coordination for NCD mechanisms. As a result, there are lots of upcoming opportunities and areas of action. On NMOs level, it was not clear whether there are official collaborations, but it was obvious that initial links are being done nationally to engage multidisciplinary work towards the program areas. For example: In CIMSA-ISMKI, Dehydration (Diabetes and Hypertension) activity was established where the Radio Republic Indonesia contributed to the activity impact though talk shows.
Description of program area(s)

The program mainly focuses on NCDs: Diabetes, Cancers, Cardiovascular Diseases and Respiratory Diseases, and the major risk factors that leads to them which are: Unhealthy Diets, Physical Inactivity, Tobacco Use and Excessive Alcohol Use.

In the term 2014-2015, the on the top activity for most NMOs that represented activities relevant to the program was the World Diabetes Day national celebration. Needless to say the reason to that, but different approaches were taken: In the EMR region most activities towards the World Diabetes Day were awareness campaigns to diabetic people to raise awareness to the management of diabetes. However, it is been noticed that the approach in Europe was towards preventing diabetes through decreasing the risk to it. The least NCD tackled through NMOs was the respiratory diseases, although some anti smoking campaigns were established. On the other hand in the Americas region the respiratory disease was the most region tackling this aspect through spreading awareness about specific types of cancers and implementing activities like marathons advocating for cancer awareness. In general, most NMOs obviously prefer raising awareness generally about healthy lifestyle where they advocate for better physical activity, eating behavior and tobacco control. Screening comes as a weak tackled aspect in most NMOs and excessive use of alcohol was only tackled by 2 NMOs surprisingly.

On the international level, adopting the policy statement-mentioned in the context- reflects strong willingness to combat NCDs. Also covering NCDs and Healthy Lifestyle in sessions in GAs and RMs as a global, regional and national problem is another aspect.

Targeting criteria

Medical students are engaged in the project by two ways: Passively through capacity building processes like workshops, webinars, sessions by externals, etc and actively through their participation in the different areas that the program allows; From establishing peer education training nationally and locally to contributing in decision making processes nationally like BVMD Germany who shared in political decisions by their voice of advocacy to improve Medical School canteens.

Approach

Questions that need to be answered

- How is IFMSA already involved in the program area?
- How are NMO involved in the program area? -Whether by participating in TNPs, National or Local Projects calling on areas relevant to the program-
- What areas are covered more than the others? -The diseases themselves or their risk factors, each disease individually or some diseases together, etc-
- Are activities relevance to the program regional based or sporadic?
- How are medical students engaged in the program?
- Are general populations targeted or only high risk groups? And how they are targeted?
- What are the different indicators being accessed in the program?
- How is the impact measured per activity?
- How can we engage NMOs to get enrolled in the program?
- How can the program team together with the PSDD and SCOPH-D promote for the program in the future?
- How can the program team together with the PSDD and SCOPH-D support existing efforts of NMOs that are relevant to the area of the program?
Methods that were applied

Methods of data collection for activities relating to the program started by reviewing NMO reports for MM15 and AM14. Furthermore, lots of data were collected from Applications of NMOs applying for projects fair competition for MM15 and AM14, MSIs and Policy Statements on IFMSA website. Inputs from SCOPH D as well as LPH were requested. A database was therefore built where analysis started after its completion. Analysis was qualitatively made about IFMSA global action and NMOs advocacy efforts in different areas that the program serves.

List of other surveys conducted recently in the project area and/or on target population

Nothing on the international was done but some national efforts were established:
- In TaMSA-Tatarstan a social research work based helped identifying the areas of work in behavioral changes relating to unhealthy lifestyles.

Analysis

Main goal and expected impact

As was mentioned before in the context, the program mainly focuses on NCDs: Diabetes, Cancers, Cardiovascular Diseases and Respiratory Diseases, and the major risk factors that leads to them which are: Unhealthy Diets, Physical Inactivity, Tobacco Use and Excessive Alcohol Use. So here is the current situation for the goals and impact:

IFMSA Level:
- Adoption of Policy Statement on NCDs in AM14
- Empowerment of medical students worldwide to recognize NCDs as a group of diseases and how they as future physicians should advocate for their prevention through sessions, SWGs and discussions in international GAs and RMs since the term 2013-2014.
- Joining official collaborations with NCD Alliance
- Organizing WHO Webinars relevant to the program area
- IFMSA involvement in the WHO global coordination for NCD mechanisms
- Providing toolkits to members explaining more about NCDs, their WHO world days and how to contribute by making a change nationally and locally.
- Advocating for the world days recognized by the WHO as the World Diabetes Day, the World Cancer Day, World No Tobacco Day and World Heart Day through social media and through encouraging NMOs to contribute to the celebration nationally.

The goal of creating a system for medical students’ education in IFMSA about NCDs as a public health issue is already on solid basis and is getting stronger by the willingness and interest of members.

NMOs Level:

Actually all goals of the program were tackled but NMO based and too on different preferences for NMOs.
- Out of 84 NMOs that reported activities related to the program, 80 celebrated the World Diabetes Day showing concerns that it’s the on top NCD of concern.
- Medical Students as target groups were not tackled as a top priority.
- NMOs prefer to work on the Public as a target group since most activities aim at prevention.
Advocacy efforts resemble awareness campaigns mostly; Screening does not take a top priority level.

Excessive alcohol consumption is not well tackled, oppositely physical inactivity as a risk factor is tackled strongly through different methodology levels.

Two TNPs are currently ongoing, but due to different reasons, not many NMOs joined in though it was noticed that lots of NMOs national efforts fits in the TNPs goals and objectives.

The Americas region works mostly on obesity whereas the EMR works mainly on diabetes and Europe focuses on healthy lifestyles in general.

Outcomes

Since the data provided from the files collected -as mentioned before- are not helping with quantitative analysis of the outcomes so this section will be based mainly on qualitative approaches and few quantitative if applicable.

Areas Covered by NMOs:

1. Diabetes
2. Cardiovascular Diseases
3. Cancers
4. Respiratory Diseases
5. Unhealthy Diet
6. Physical Inactivity
7. Tobacco Use
8. Excessive Alcohol
Different Methodologies Taken:

- Celebration of World Days in the form of marathons advocating for the cause or conferences were mainly medical students are the target in order to educate them.
- Workshops implementation on the national level through peer education methods
- Screening criteria for the public
- Preventive health message delivery approaches in awareness campaigns

Different Indicators per Activity:

- More than 90% of NMOs measured the number of audience or people approached as their indicators
- Very few NMOs relied on post questionnaires and polls to assess the success of their activity

Outcome Noticed:

- Regional Wise:
  - The Americas pay more attention to obesity and its consequences.
  - The EMR implements the most activities on Diabetes.
  - Europe main approach is advocacy for healthy lifestyle
  - Nothing specifically noticed in the Asia-Pacific and Africa regions.

- Outcome:
  - Generally:
    - No tangible outcome can be concluded from all the data collected which raises concerns about the result impact report of NMOs
  - Some examples:
    - IFMSA Panama implemented a total of 22 lectures raising awareness about NCDs in cooperation with lots of institutes nationally.
    - IFMSA Grenada implemented a fitness day where medical check up was made to the public with referral to high risk groups to healthcare settings.
    - HELMSIC Greece targeted medical students only aiming at peer education about different NCDs and their risk factors through 3 different projects in the NO
    - IFMSA Egypt covered a number of 4600 students nationally raising awareness about healthy diets for school students
    - SQU MSG Oman established a project to reduce the number of smokers in med schools by their referral to smoking cessation centers.

What we can conclude from the outcome is that many NMOs are spending time and efforts to combat NCDs and promote for healthy lifestyle to medical students and general populations. However, their advocacy tools lack methodologies based on previous statistical analysis and their outcome is immeasurable so we cannot assume whether it was successful or not.
Summary

This report provides the start line or the point of reference explaining where we stand when talking about actions combating NCDs and promoting for healthy lifestyle whether globally on the level of IFMSA, nationally on the level of NMOs and the interlink between them.

Healthy Lifestyle and NCDs program calls on reducing the burden of NCDs through targeting specific population as medical students and people at risk to showing concerns to the government’s locally, nationally and internationally and joining relative multidisciplinary advocacy efforts as well as decision making actions. Promoting for healthy lifestyle and raising awareness about the risk factors are the crucial milestones in the program.

Globally, creating a system for medical student’s education in IFMSA about NCDs as a public health issue is already on solid basis and is getting stronger by the willingness and interest of members. Since the term 2014-2015 not a single GA or RM overlooked a talk about NCDs. Through sessions with externals, discussions from SCOPH D and RA and SWGs, members got alerted about the increasing burden of NCDs and their crucial duty to combat this threat as future healthcare providers. Lots of toolkits and manuals are being shared with the NMOs to explain more about NCDs and the different methodologies advocating for them. Additionally world days recognized by the WHO are never missed; Through social media and servers, IFMSA announces its support and encourages its members to participate to the World Diabetes Day, World No Tobacco Day, World Heart day and the World Cancer Day. One other side of the global actions is IFMSA’s official collaborations with the WHO in the global coordination of NCD mechanism and also its official work with NCD Alliance.

At NMOs level, we can find concrete efforts and time spent tackling NCDs and promoting for healthy lifestyle for more than 80 NMOs. Summing up NMOs reports, some regional preferences were spotted. Europe region prefers working on decision making and policy changes but the EMR’s main goal is population outreach and campaigning. Then considering the different areas that the program provides, it was noticed that the Americas work more on tackling and raising awareness about obesity and cancer problems, whereas Europe promotes for healthier lifestyles in general and the EMR works more on preventive and management approaches for the Diabetes outgrowing burden in the area. Although we can sense some differences, there are vast common work done as the celebration of world days and the reliance upon peer education to educate medical students about the structure of NCDs and their risk factors. On the other hand, it was concluded too that most NMOs spend lots of efforts without measuring their impact in a quantitative way or assessing the burden in the first place. Actually, BVMD Germany gives a great example for NMOs to work on quantitative methods for coming up with tangible outcomes.

What we conclude from this report is that Healthy Lifestyle and NCDs is a very comprehensive program with solid basis -yet still immeasurable- . Through developing the upcoming NMOs reporting system and empowering them with the skills to do that, we will be able to measure the end term impact semi quantitatively. Additionally, getting more NMOs engaged in the program is a secondary goal to be considered through unchaining their knowledge about NCDs burden globally and how they can contribute in making a change.