

Public Health Surveillance of chronic diseases in the Region of Americas - advances and challenges

Chronic diseases have not received the priority attention in public health policies and programs commensurate with their disease burden in the Regions of the Americas.

Every country, regardless of the level of resources can make significant improvements in chronic disease prevention and control, as there are clear evidence and cost-effective interventions available to prevent premature deaths, or incapacity. The major causes of chronic diseases are known, so timely and accurate information on determinants as “causes of the causes”, risk factors(RF), chronic disease occurrence, distribution, trends, is essential for policy-making, program planning, and evaluation.

Throughout the Region of the Americas there are inadequacies and varying capacities for chronic disease surveillance. Based on PAHO-WHO data bases 29 countries in the region report regularly mortality data, but 6 have problems in reporting specific mortality data. 35 countries report data on one risk factor, most frequent one is tobacco prevalence. There are countries like Chile, Brazil, Cuba, Colombia, Argentina, Mexico, who have performed one or more RF studies in their population. The need for risk factor data is growing particularly in the Caribbean. In the last year, 10 countries have been trained for conducting national RF studies in the adult population. Out of them 2 have finished, 6 are in course and others are in preparatory phase.

The information on RF among adolescents is scarce. Some countries have used international instruments like School Tobacco survey or Global School Health survey for their studies.

There are countries that have well established elements of NCD and RF surveillance like Brazil, Chile and Aruba, and have been using information for their national health plans or policy and program decisions.

In 2006 all member states of the Region endorsed a Regional strategy for integrated approach to prevention and control of chronic non communicable diseases including Diet and Physical Activity.

The Regional Strategy aims to prevent and reduce the burden of chronic diseases and related risk factors in the Americas.

The strategy Line of action on Surveillance aims to strengthen countries capacity for better surveillance of chronic diseases, their consequences,

their risk factors, and the impact of public health interventions.

Countries required support for incorporating chronic disease surveillance into the public health information system and use surveillance information for program development and policy formulation. The Strategy framework encourages integration among the multiple data sources in order to access the complete range of information to determine the status of chronic diseases. Information will be analyzed, synthesized, and disseminated at the country, sub regional, and regional levels.

Improvements are needed with the current mechanisms for systematic data collection and analysis and for tracking the trends of chronic diseases and their risk factors at the national and sub regional levels. In addition, information on new and emerging knowledge for effective interventions for non communicable disease prevention and control need to be gathered and disseminated.

To meet the differing needs of each country, the Line of action on Surveillance focuses on strengthening the following capacities in the countries: ongoing systematic collection of reliable, comparable, and quality data; timely and advanced analysis; dissemination and use of analysis results for national policy and program planning and evaluation; technical competency of the surveillance work force; and novel thinking and innovation.

An established surveillance system will facilitate monitoring the progress in prevention and control of chronic non communicable diseases in the Region.

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