Staying healthy for success
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The 3FOUR50 message

• 3 risk factors cause four chronic diseases (cardiovascular disease, type 2 diabetes, many cancers and chronic lung disease) that cause over 50% of deaths worldwide.

• The risk factors are:
  - Tobacco use
  - Lack of physical activity
  - Unhealthy diet
Global burden of disease

1990
- Communicable diseases: 10.7%
- Chronic disease: 41.9%
- Injuries: 47.4%

2020
- Communicable diseases: 13.7%
- Chronic disease: 68.7%
- Injuries: 17.7%

Source: Harvard School of Public Health
Global deaths by cause (2005)

Selected disease mortality (millions), all ages

- Malaria: 0.9
- TB: 1.6
- HIV/AIDS: 2.6
- Diabetes: 1.1
- Chronic respiratory: 4.1
- Cancer: 7.6
- CVD: 17.5
- TOTAL: 35.4

Globally, about **1.3 billion** people smoke

- 84% of smokers live in developing/transition economies.

Regional and gender variations

- Men: 35% in developed countries and 50% in developing countries smoke.
- Women: 22% in developed countries and 9% in developing countries smoke.

**5 million** people die prematurely from tobacco use each year

- By 2020, this figure could increase to **10 million**.

Source: *The Tobacco Atlas* and WHO.
Benefits of a healthy diet

Five servings of fruit and vegetables each day reduces the risk of:

- Cardiovascular disease by 28%*
- Type 2 diabetes by 24%**
- Some gastrointestinal cancers by 20%***

Sources:
* H.-C. Hung 2005 (J Nat Cancer Ins)
** F.B. Hu 2001 (New Eng J Med)
*** WHO 2003
Physical activity recommendations

- Adults (18–65) should undertake moderate-intensity physical activity (e.g. brisk walking) for a **minimum** of 30 minutes on **five days each week** or vigorous-intensity activity (e.g. jogging) for a **minimum** of 20 minutes on three days each week, or a combination.

- Lower goals may be necessary for older people who have physical impairments or functional limitations, and older adults should also do balance exercises.

- Children should do **at least an hour of physical activity every day**.
The impact of physical activity

Physical activity reduces the risk of:

• breast cancer by approximately 20–40% among those who do vigorous physical activity for 30–60 minutes on 5 days each week;
• colon cancer: the most active people are at 30% than the least fit;
• stroke by 25–30% among active individuals;
• coronary heart disease: physically inactive people can have as much as twice the risk;
• diabetes by 30–50%;
• plus benefits for musculoskeletal and mental health.
Obesity’s impact on health

- Obesity and type 2 diabetes
  - Study of 84,941 nurses with 16-year follow up
  - Clear that the risk of developing type 2 diabetes increases dramatically, relative to BMI
• **Smoking-cessation** among disadvantaged pregnant women in Cape Town, S. Africa
  • Midwives gave help and advice to pregnant women, around half of whom smoked and half of whom drank during pregnancy
  • The quit rate was 15x higher than in the non-intervention group.
• Football and peace-building in N. Uganda
  • 400 boys and girls took part in a season of football in an area where up to 1/3 of boys and 1/6 of girls had been abducted during the conflict
  • Before or after each game there were peace-building/conflict resolution activities (poetry, debate etc.) and health awareness and monitoring
Caribbean Wellness Day – a regional effort to raise awareness about health and wellbeing, and make a year-round difference, e.g.:

- Granada: ‘biggest loser’ weight-loss competition for employees
- Bermuda theme of ‘Love your body: portions count!’
- Barbados launched ‘Task Force on Physical Activity’
It’s not rocket science
SO:
why don’t we “do the right thing”?
Negative consequences are distant
There is confusion and mixed messages

Diet
- Low fat
- Balance
- Low carb
- High protein
- Physical activity
- Cut fat
- Moderation
- Light
- Balance
- Fat is fine
- Sugar free
Health ‘nanny’ messages are problematic
C3 Collaborating for Health is a policy and advocacy organisation: www.c3health.org

C3 believes that only by working together can we make it easier to be healthy.

C3 works with many different people and organisations to promote 3 behaviour changes: stopping smoking, eating a better diet and increasing physical activity.
Who do we work with?

- To find solutions to the problem of making it easier to be healthy, C3 brings together experts from many disciplines from around the world, including:
  - Health professionals (including nurses), government, urban planners, food companies, employers, schools, consumer organisations, academics, nutritionists, non-governmental organisations...

- C3 works globally – 80 per cent of deaths from chronic diseases occur in developing countries.
Healthcare settings as workplaces

- Hospitals and healthcare centres are major employers
- There are opportunities to make it easier for staff to make healthy choices – and to take a health lead themselves.
Key indicators include...

- Number of smokers in the workforce
- Numbers of smokers who quit each year
- Average BMI (measure of obesity) of the workforce
- Change in BMI of employees
- Number of employees who daily eat five portions of fruit and vegetables
- Number of employees who take 30 minutes of exercise five days a week
The benefits are very clear

• For employers:
  • Sickness absence costs UK businesses nearly £14 billion a year
  • The healthiest 25% of the workforce is naturally 18% more productive at work than the least healthy 25%

• For the government:
  • Improved workplace health could save the government over £60 billion

Sources: Vielife, ‘Health and Performance Research Study’ (2005) and Bupa
Why nurses?

If the millions of nurses in a thousand different places articulate the same ideas and convictions.....
and come together as one force
they could act as a powerhouse for change.

Dr Haefden Mahler, WHO Director General (1985)
Global Nursing Initiative

- Origins: meeting in Durban, South Africa in 2007, with DENOSA, ICN and others. In one hospital, following this initial meeting:
  - 72 nurses together lost a total of 360 kg over three years
  - 5 nurses stopped smoking completely
  - 17 nurses have gone off tablets, decreasing care costs
- Now, C3 and other partners are working together to explore a range of nurse-led options and interventions in chronic disease in six countries.
- Contact pat.hughes@c3health.org for more info.
A further initiative

- Early Origins of Health (EOH)
  - C3 is coordinating a multi-sector partnership that will lead to a blueprint for change enabling midwives to work with women to have a healthy pregnancy and for their children to have a healthy start in life
  - EOH is a great opportunity to link chronic disease and child health
Using new technologies: Web 2.0

- **3** risk factors; **four** chronic diseases; over **50%** of deaths in the world:
  
  www.3four50.com

- An opportunity for people from different target audiences to connect and collaborate to create a healthier future.

- Online network (400+ people), discussions, photos, video footage from events, ‘showcases’ of interesting projects, twitter feed of news, a competition...

- C3’s own website also includes news stories, documents and other information
The UN High-level Meeting

• September 2011: The UN is holding a High-level Meeting on NCDs – only the second that it has ever held on a health issue (HIV/AIDS in 2001)
  • Lobby now for your head of state/government to attend this ‘once-in-a-generation opportunity’
  • Work to ensure that nurses’ priorities on preventing/managing NCDs are included in the Outcomes Document
  • More information on www.c3health.org/un-summit-2011/ and www.ncdalliance.org
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www.twitter.com/c3health