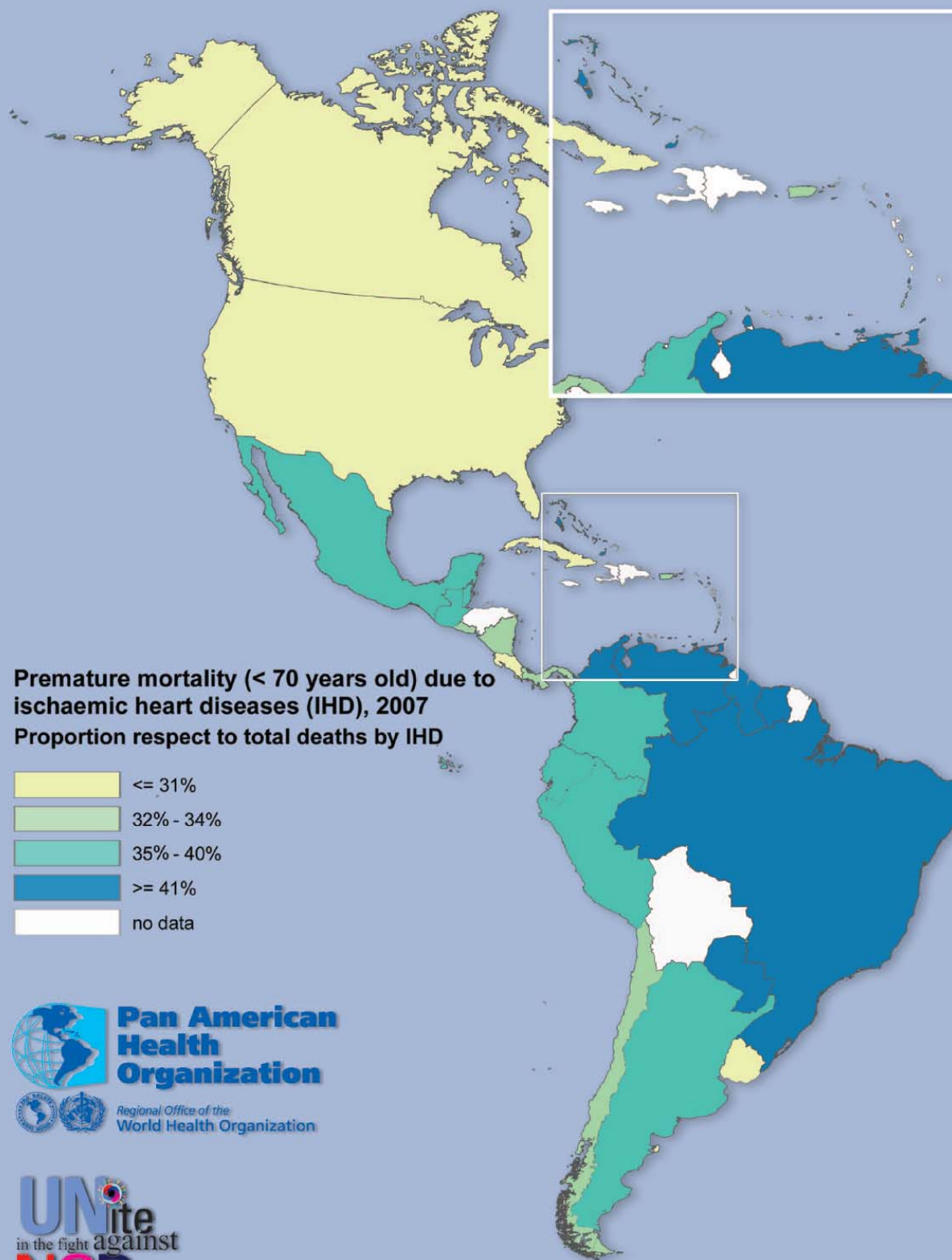


Non Communicable Diseases in the Americas

Basic Indicators 2011



preface

The Americas have been hit early and hard by the global noncommunicable diseases (NCD) epidemic. Despite the tremendous economic, social, and ethnic diversity of the Americas, no country or community has escaped unaffected.

Today, NCDs are the leading causes of death and disability, accounting for 75% of all deaths throughout the Region of the Americas. In the coming decades, these numbers are expected to continue to climb significantly. By 2030, a 42.4% increase in NCDs has been projected for the Region if current trends continue.

The NCD epidemic in the Americas has been triggered by fast paced demographic, economic, and societal changes that have driven NCD risk factors to reach unprecedented levels.

Although an increase in NCDs is expected in countries with growing numbers of elderly, the current pace and scale of the NCD epidemic cannot be attributed solely to ageing. Significant changes in lifestyle are now major determinants of risk and disease at all ages. Industrialization and urbanization are both primary drivers of risk, as is the globalization of products and consumption patterns. The consumption of cigarettes, alcohol, and industrialized foods high in fat, salt, and sugar, coupled with urban environments that fail to promote health and physical activity, are putting far too many lives at risk.

Socioeconomic and gender differences determine exposure to risks, access to timely treatment and care, and lack of financial resources, placing marginalized populations at a particularly significant disadvantage. The differences in disease and survival rates between countries and within countries are striking. Too many deaths from NCDs occur among people under the age of 70.

The importance of knowing and monitoring mortality trends as well as risk factors in relation to related regional and national policies and programs have become a priority that can no longer be overlooked.

Over the last decade, various countries in the Region have dedicated substantial resources to measure risk factor levels in their respective populations, to assess the influence of specific NCDs and risk factors on mortality, and to introduce policies and programs related to their control.

The Regional Strategy and Action Plan on an Integrated Approach to the Prevention and Control of Chronic Diseases has stressed the importance of NCD surveillance by dedicating a line of action to the subject. It offers a standardized approach to risk factor surveillance and a selection of indicators for monitoring the situation of NCDs in the Region.

This publication is another contribution of the Pan American Health Organization to raising awareness and encouraging effective action to reverse current trends. The assessment presented here, based on data compiled from both national and international sources, is the most complete to date of the Region's health situation: it highlights the burden of premature deaths already occurring and its unequal distribution throughout the Americas, the effect of NCDs on national life expectancy, the prevalence of risk factors among youth and adults, and the countries' capacity to respond through targeted programs and policies.

Through this effort, our overall objective is to provide an overriding case to countries and subregions for the need to continuously monitor the health situation on NCDs. Countries and subregions will be able to use this data to make informed decisions and to chart policies and interventions to combat risk factors, develop or improve national policies and programs, and, through these changes, vastly improve the quality of life for millions of people in our Region.



Dr. Mirta Roses Periago
Director

demographics and socioeconomic indicators

	1	2	3T	3M	3F	4T	4M	4F	5A	5B
	Total Population	Average Annual Deaths	Life expectancy at birth			Adult Literacy Rate			Gross National Income US\$ per capita	
	(Thousands)	(thousands)	Total	Years Male	Female	Total	Male	Female	Current US\$ Atlas Method	International \$ PPP adjusted
The Americas										
North America										
Canada	34349.6	262.8	81.1	78.7	83.4	...	...	...	41980.0	37280.0
Puerto Rico	3745.5	29.1	79.2	75.2	83.1	90.5	89.9	91.0	...	...
United States of America	313085.4	2621.7	78.6	76.0	81.2	...	...	...	46360.0	45640.0
Virgin Islands (US)	109.7	0.8	79.3	76.3	82.6	...	...	...	...	...
Latin America and the Caribbean										
Latin America										
Mexico	114793.3	549.4	77.0	74.6	79.4	93.4	94.9	92.1	8960.0	14020.0
Central America with Dominican Republic (SICA)										
Costa Rica	4726.6	20.4	79.4	77.0	81.9	96.1	95.9	96.3	6260.0	10930.0
Dominican Republic	10056.2	60.1	73.5	70.9	76.3	88.2	88.2	88.3	4550.0	8110.0
El Salvador	6227.5	41.0	72.3	67.4	76.9	84.1	86.8	81.8	3370.0	6420.0
Guatemala	14757.3	80.5	71.3	67.7	74.8	74.5	80.0	69.5	2650.0	4570.0
Honduras	7754.7	37.5	73.3	71.0	75.6	83.6	83.7	83.5	1800.0	3710.0
Nicaragua	5869.9	27.5	74.1	71.1	77.2	78.0	78.1	77.9	1000.0	2540.0
Panama	3571.2	18.1	76.2	73.7	78.9	93.6	94.2	93.0	6570.0	12180.0
Andean Region (CAN)										
Bolivia	10088.1	72.9	66.8	64.5	69.1	90.7	95.0	86.8	1630.0	4250.0
Colombia	46927.1	260.6	73.8	70.2	77.5	93.2	93.1	93.4	4990.0	8600.0
Ecuador	14666.1	74.5	75.7	72.8	78.7	84.2	87.1	81.5	3970.0	8100.0
Peru	29399.8	161.4	74.1	71.5	76.7	89.6	94.9	84.6	4200.0	8120.0
Venezuela	29436.9	153.1	74.5	71.6	77.5	95.2	95.4	94.9	10090.0	12220.0
Southern Cone (MERCOSUR)										
Argentina	40764.6	315.6	76.0	72.2	79.7	97.7	97.7	97.7	7550.0	14090.0
Brazil	196655.0	1261.1	73.7	70.3	77.1	90.0	89.8	90.2	8070.0	10160.0
Chile	17269.5	98.2	79.2	76.1	82.2	98.6	98.6	98.5	9470.0	13420.0
Paraguay	6568.3	36.1	72.6	70.6	74.7	94.6	95.7	93.5	2250.0	4430.0
Uruguay	3380.0	31.3	77.1	73.5	80.5	98.3	97.6	98.6	9010.0	12900.0
Caribbean Community (CARICOM)										
Anguilla	15.1	0.1	80.9	78.3	83.5	...	...	...	...	...
Antigua & Barbuda	87.9	0.5	75.5	73.5	77.6	99.0	98.4	99.4	12130.0	17670.0
Bahamas	347.2	1.9	75.7	72.5	78.6	...	...	...	...	...
Barbados	286.7	2.4	74.3	72.1	76.6	...	...	...	...	...
Belize	317.9	1.2	76.1	74.7	77.6	...	...	...	3740.0	5990.0
Bermuda	68.7	0.5	80.7	77.5	84.0	...	...	...	...	...
Cayman Islands	51.4	0.3	80.7	78.0	83.4	98.9	98.7	99.0	...	...
Dominica	73.0	0.6	76.0	73.0	79.1	...	...	...	4900.0	8460.0
Grenada	108.4	0.9	73.0	70.5	75.8	...	...	...	5580.0	7710.0
Guyana	756.0	4.4	70.0	66.9	73.1	...	...	...	2660.0	3270.0
Haiti	10123.8	90.0	62.2	60.9	63.5	48.7	53.4	44.6	...	...
Jamaica	2751.3	19.9	73.2	70.7	75.8	86.4	81.2	91.1	4590.0	7230.0
Montserrat	5.1	0.0	73.2	75.0	71.2	...	...	...	...	...
Saint Kitts & Nevis	50.3	0.4	74.6	72.3	77.0	...	...	...	10150.0	13640.0
Saint Lucia	161.6	1.1	76.8	74.2	79.7	...	...	...	5190.0	8860.0
Saint Vincent and the Grenadines	103.9	0.7	74.2	72.3	76.1	...	...	...	5130.0	8830.0
Suriname	529.4	3.8	70.7	67.5	74.0	94.6	95.5	93.8	4760.0	6730.0
Trinidad & Tobago	1346.4	11.0	70.2	66.7	73.6	98.7	99.2	98.3	16700.0	24970.0
Turks & Caicos Islands	44.8	0.1	79.1	76.4	82.0	...	...	...	...	...
Virgin Islands (UK)	25.4	0.1	77.6	76.3	79.0	...	...	...	...	...
Other										
Aruba	106.1	0.8	75.7	72.7	78.8	98.2	98.2	98.1	...	...
Cuba	11253.7	83.9	79.2	77.2	81.2	99.8	99.8	99.8	5550.0	...
French Guinea	237.1	0.9	76.5	73.2	80.4	...	...	...	...	...
Guadeloupe	463.1	3.3	79.8	76.0	83.4	...	...	...	...	...
Martinique	407.1	3.2	80.5	77.2	83.6	...	...	...	...	...
Netherlands Antilles	230.3	1.5	77.0	74.7	79.5	96.4	96.4	96.4	...	...

premature mortality indicators

	6T	6M	6F	7T	7M	7F	8	9T	9M	9F	10T	10M	10F	11
	Ischaemic Heart Disease (I20-25)							Cerebrovascular Disease (I60-69)						
	Mortality Rate under the age of 70 per 100,000 population			Years of life lost (YLL) per 10,000 population			Effect on life expectancy (Total)	Mortality Rate under the age of 70 per 100,000 population			Years of Life Lost (YLL) per 10,000 population			Effect on life expectancy (Total)
	Total	Male	Female	Total	Male	Female		Total	Male	Female	Total	Male	Female	
The Americas														
North America	28.4	42.6	15.1					9.1	9.9	8.3				
Canada	20.2	31.8	9.0	20.6	32.8	8.5	2.5	3.3	3.6	3.0	5.6	6.4	4.8	0.9
Puerto Rico	25.2	38.6	13.9	26.7	43.0	12.5	2.1	5.3	7.1	3.8	12.1	16.4	8.1	0.9
United States of America	29.4	43.9	15.8	32.8	49.8	16.5	2.9	5.0	5.6	4.5	10.0	11.1	9.0	0.9
Virgin Islands (US)	29.4	46.6	13.6	29.3	48.5	12.1	5.3	9.4	8.6	10.1	16.8	22.6	11.6	0.9
Latin America and the Caribbean														
Latin America														
Mexico	25.0	35.0	15.5	28.2	41.5	15.6	2.1	10.7	11.7	9.7	15.7	17.8	13.8	1.0
Central America with Dominican Republic (SICA)	19.7	25.3	14.6					6.5	7.7	5.4				
Costa Rica	20.9	29.2	12.7	19.4	28.8	9.9	2.7	5.7	5.8	5.6	8.3	7.8	8.9	1.1
Dominican Republic	...	...	...	...	...	...	...	...	...	...	...	...	...	...
El Salvador	25.6	33.9	19.0	33.7	43.9	25.8	1.5	4.3	4.6	4.1	13.0	14.4	11.8	0.6
Guatemala	16.2	19.8	13.0	23.5	29.8	18.0	0.8	3.5	4.1	2.8	15.5	16.5	14.5	0.5
Honduras	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nicaragua	35.8	41.5	30.4	41.5	52.6	30.9	2.7	10.6	11.9	9.3	24.2	27.1	21.6	1.4
Panama	24.4	35.2	13.7	25.9	40.9	11.0	1.8	14.4	19.4	9.4	17.3	22.3	12.4	1.6
Andean Region (CAN)	32.3	45.5	20.1					15.6	17.2	14.1				
Bolivia	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Colombia	38.2	53.2	25.0	39.9	57.1	24.4	2.4	17.8	18.6	17.1	25.5	27.1	23.9	1.2
Ecuador	14.6	21.0	8.4	21.2	30.1	12.5	0.9	11.3	13.0	9.5	26.5	30.6	22.5	1.0
Peru	14.4	21.5	7.5	20.2	30.4	10.2	0.8	11.8	14.1	9.5	29.0	35.1	22.9	0.8
Venezuela	49.6	69.5	30.4	54.4	77.4	31.9	2.9	18.0	20.1	15.9	24.1	26.7	21.6	1.4
Southern Cone (MERCOSUR)	32.5	45.6	20.7					16.8	19.0	14.9				
Argentina	17.7	28.6	7.9	19.3	31.1	8.1	0.8	16.8	21.9	12.2	21.2	26.3	16.3	0.9
Brazil	37.5	51.7	24.9	44.1	61.6	27.9	1.6	31.6	36.1	27.6	39.6	43.2	36.3	1.8
Chile	17.8	27.2	9.1	17.7	27.9	7.9	1.4	13.7	16.8	11.0	15.6	17.9	13.4	1.4
Paraguay	34.1	44.0	23.9	40.9	52.9	28.4	1.5	35.6	34.6	36.6	45.6	43.2	48.0	1.8
Uruguay	19.1	85.9	39.34	...	...	...	...	17.8	22.3	14.1	...	...	...	...
Caribbean Community (CARICOM)	33.0	46.3	23.9					10.7	12.1	9.4				
Anguilla	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Antigua & Barbuda	14.2	24.8	5.4	...	...	...	...	11.9	20.7	4.4	...	...	...	...
Bahamas	20.0	28.2	12.7	21.0	30.1	12.7	1.4	11.0	11.0	10.9	26.4	35.3	18.1	1.4
Barbados	23.1	30.0	17.4	...	...	...	...	18.9	27.7	11.7	...	...	...	...
Belize	21.7	28.6	15.0	22.5	27.2	17.8	1.1	6.4	5.8	7.1	16.5	19.2	13.7	1.0
Bermuda	25.9	33.1	18.5	...	...	...	...	7.8	14.2	2.1	...	...	...	...
Cayman Islands	9.8	17.0	3.2	...	...	...	...	4.1	8.3	0	...	...	...	...
Dominica	18.6	25.5	12.0	...	...	...	...	6.5	3.4	9.7	...	...	...	...
Grenada	23.9	27.5	20.8	33.0	41.3	25.4	0.9	9.0	16.7	2.5	25.0	35.4	15.7	1.1
Guyana	57.8	71.6	41.5	...	...	...	...	45.1	50.6	38.95	...	...	...	...
Haiti	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Jamaica	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Montserrat	0	0	0	...	...	...	...	0	0	0	...	...	...	...
Saint Kitts & Nevis	24.5	43.2	5.7	...	...	...	...	17.0	34.8	0.0	...	...	...	...
Saint Lucia	12.0	21.6	3.4	...	...	...	...	32.8	34.0	32.2	...	...	...	...
Saint Vincent and the Grenadines	44.9	47.7	42.1	82.1	72.4	91.8	2.6	9.7	9.1	10.0	59.4	56.1	62.7	2.0
Suriname	39.0	53.8	25.5	47.4	62.5	32.6	1.5	8.8	8.0	9.6	45.8	51.6	40.4	2.5
Trinidad & Tobago	53.6	77.5	33.1	55.0	84.6	28.6	2.1	13.6	16.1	11.6	29.1	32.7	26.1	1.2
Turks & Caicos Islands	0	0	0	...	...	...	...	0	0	0	...	...	...	...
Virgin Islands (UK)	13.7	26.0	0	...	...	...	...	0	0	0	...	...	...	...
Other														
Aruba	16.6	23.3	10.7	18.8	28.8	9.8	1.0	1.7	1.9	1.6	2.8	1.8	3.7	1.3
Cuba	35.1	46.7	24.0	35.5	49.9	21.5	2.8	17.0	20.1	14.1	19.0	22.4	15.6	1.4
French Guinea	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Guadeloupe	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Martinique	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Netherlands Antilles	...	...	...	...	...	...	...	...	...	...	...	...	...	...

analysis

Prevalence of tobacco consumption, diabetes, and hypertension in the Americas in relation to World Bank GDP grouping and related policy or programs.

	Prevalence of tobacco	FCTC (tax)	Prevalence of DB	Program of DB or CVD	Prevalence of HA	Program of CVD & HA
Lower middle income group						
Belize	10.5	no	13.1	no	28.7	no
Bolivia	...	no	...	yes	...	yes
El Salvador	13.3	yes	7.6	no	20.1	no
Nicaragua	20.4	yes	9.8	no	28.9	no
Guatemala	13.5	yes	8.2	no	13.6	no
Guyana	...	yes	...	no	...	no
Honduras	16.4	no	5.4	no	23	no
Paraguay	15.3	no	3.5	yes	30.9	no
Upper Middle income group						
Argentina	30.5	no	3.6	yes	34.8	yes
Brazil	16.7	yes	5.8	yes	24.4	yes
Chile	40.6	no	11.5	yes	33.2	yes
Colombia	12.8	...	2.6	.....	22.8	.....
Ecuador	11.3	yes	...	no	28.1	no
Grenada	...	...	...	.....	.....	.....
Jamaica	14.5	yes	7.6	no	25.2	no
Panama	9.4	yes	5.4	yes	22	yes
Peru	18.4	yes	.....	no	22.8	.....
St Kitts and Nevis	8.67	yes	7.6	no	35	no
Surinam	27	no	19.5	no	33	no
Costa Rica	14.2	yes	7.3	no	25.6	no
Cuba	...	yes	.....	yes	28.8	yes
Dominica	10.2	.....	17.7	no	32.1	yes
Dominican Republic	...	yes	5.5	no	16.8	no
Mexico	15.3	yes	.....	yes	30.8	yes
Uruguay	32.7	yes	5.5	...	30.4	no
Venezuela	18	yes	.....	yes	31.2	yes
High Income group						
Bahamas	43	.....	9.6	.....	37.5	...
Barbados	8.4	yes	11.7	yes	29.1	yes
Bermuda	14.8	...	12.7	.....	25.3	.....
Canada	20	yes	7.2	yes	16.9	yes
Puerto Rico	10.6	...	12.9	.....	34	...
Trinidad & Tobago	...	yes	.....	no	.....	no
United States	17.3	yes	8.3	yes	30.3	yes
US Virgini Islands	6.4	...	8	.....	...	.....

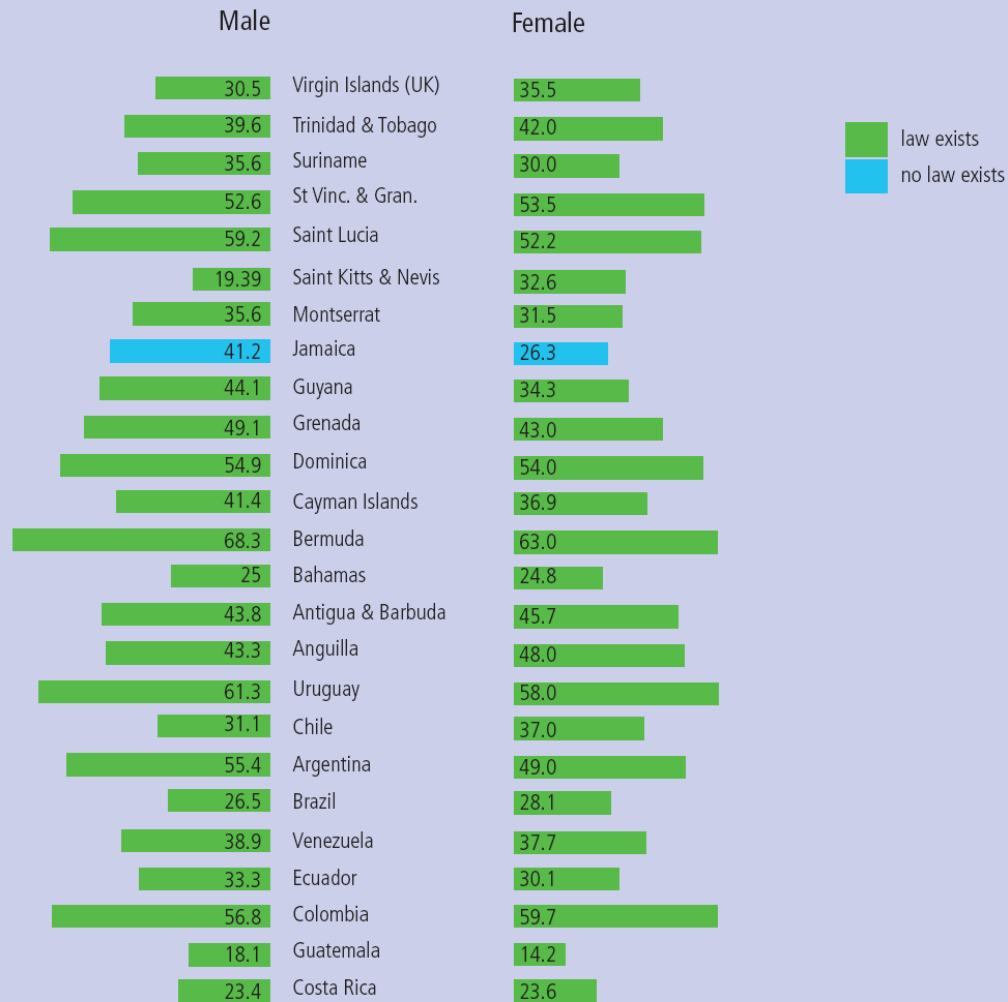
	Tobacco	DM	HA
	<=24	<=7	<=20
	24-31	8-13	20-29
	>=32	>=14	>=30
	yes		
	no		

By observing countries through their income stratification it is evident that those from the lower middle income group do not have national programs on diabetes or cardiovascular disease in place, compared to countries in the high income group that have tobacco policies as well as national DB and CVD programs in place.

Countries with the highest prevalence of selected RF (belonging to last tercile that corresponds to tobacco prevalence over 32 %, DB prevalence over 14% and hypertension prevalence over 30 +) with the exception of Argentina and Uruguay lack policies for tobacco control and/or national programs for diabetes and cardiovascular diseases.

analysis

Prevalence of alcohol consumption by sex among 13-15 years old in selected countries of the Americas in relation to law that ban alcohol sale to minors (2007)



There is a strong empirical support for laws to raise the minimum drinking age requirements for the purchase and consumption of alcoholic beverages. Most of the countries have regulations of this type. Jamaica is the only country that does not have a law that bans the sale of alcohol to minors.

Observing the high prevalence of alcohol consumption among adolescents, these laws need enforcement in the large majority of countries shown in the graph. Evidence exists that a moderate increase in enforcement can significantly reduce the sale of alcohol to underage youth and therefore consumption among this group.

technical definitions

Introduction

1. Selection of indicators was done following the PAHO Minimum data set for NCDs (www.paho.org/cncd_surveillance) and narrowing to indicators that can make a strong case on NCDs for country or Sub region.
2. Presented data are generated in the countries, either reported to PAHO (mortality, prevalence of diabetes, hypertension, obesity and overweight and country capacity of response to NCDs) or identified in official publications on national risk factor studies for adults and for adolescents. In the case of overweight and obesity in children under 5 or in the event that a country did not have data for certain risk factors, WHO estimates were used.
3. For all indicators, data were reported on the last available year (demographic and socioeconomic from 2010; mortality for 2007; RF and use of preventive services for the period 2005-2010; capacity of response from 2010)

Detailed sources by country are presented in PAHO NCD surveillance web page at the following link: http://new.paho.org/hq/index.php?option=com_content&task=view&id=1930&Itemid=1708&lang=en

The publication presents data on the regional level, for all the Americas, for North, South America and Caribbean, as well as by groups of countries that form political integration movements:

- Caribbean community (CARICOM) Antigua and Barbuda, The Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Haiti, Jamaica, Montserrat, Saint Lucia, St. Kitts and Nevis, St. Vincent and the Grenadines, Suriname, Trinidad and Tobago and associated members: Anguilla, Bermuda, British Virgin Islands, Cayman Islands and Turks and Caicos Islands
- Andean Region (CAN): Colombia, Ecuador, Peru, Bolivia and Venezuela
- Central American integration system with Dominican Republic (SICA): Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, Panama and Dominican Republic as associated member
- Southern Cone (MERCOSUR): Argentina, Brazil, Uruguay, Paraguay and Chile as associated member

Political integration movements' aggregates express average values weighted by respective denominators from only those countries reporting data from 2007.

Abbreviations:

(...) data not available

(*) WHO estimates used in absence of country data

(0) -magnitude less than half the measurement unit

Definitions and inclusion criteria

Mortality indicators:

Premature mortality: is represented with the cut of point of 70 years and below. It is expressed in age and sex standardized rates.

Years of life lost YPLL were calculated from birth to age 70 based on the recorded age at death on year 2007, and age-adjusted using the WHO World Standard Population Distribution (%) for the years 2000 – 2025. The information presented is the index age – adjusted YPLL per 10,000 population. For additional technical details see "Age standardization of rates: a new WHO standard" at <http://www.who.int/whosis/indicators/compendium/2008/1mst/en/index.html>; and "Pan American Health Organization, Epidemiological Bulletin, Vol. 24 No. 2, pag. 1 – 4, June 2003" at http://www.paho.org/english/dd/ais/be_v24n2-APVP.htm. Because of incompleteness or inaccessibility to data some countries were not included.

Year(s) of Life expectancy gained in absence of specific disease is presented as potential expected gain in year (s) of life in the absence of a specific disease on a country's overall life expectancy. <http://hiss.paho.org/morest>

Prevalence of 4 conditions relevant for NCDs

Prevalence for 4 conditions for the adult population 25-64 years of age is reported or the following countries: Belize, Argentina, Chile, Uruguay, Aruba, Bahamas, Barbados, Bermuda, British Virgin Islands, Dominica, Grenada, Jamaica, St. Kitts & Nevis, St. Lucia, St. Vincent and Suriname. Other countries have used different age groups, such as 20+: Belize, Costa Rica, El Salvador, Nicaragua; 15+: Peru, Venezuela, Jamaica, Bolivia, Cuba, St. Lucia, and St. Vincent and the Grenadines. Where no nationally representative data exist, data from sub-national adult Risk Factor surveys is reported (Brazil 25-64, Guatemala 20+, Honduras 20+).

Prevalence of overweight (defined as BMI ≥ 25) in adults

Prevalence of obesity (defined as BMI ≥ 30) in adults

BMI calculations come from nationally representative surveys with either measured height or weight data. (Aruba, Barbados, Jamaica, St. Kitts & Nevis, Chile, Colombia, Belize, BVI or self-reported height and weight data (Argentina, Paraguay). Data from sub-national Risk Factor surveys is reported (Brazil, Dominican Republic, El Salvador, Guatemala, Honduras, Nicaragua, Panama).

Prevalence of obesity and overweight among children under 5 years of age country data on prevalence above defined cut-off points for height and weights-for-age.

Prevalence of diabetes type 2 in adults: percentage of adult population at a given time with diabetes type 2 out of the total adult population of a given country, territory or geographic area. Diabetes prevalence is reported by country and is not age standardized. Data are reported from either measured plasma glucose data (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, Panama, Colombia, Chile, Uruguay, Bahamas, Barbados, Belize, Dominica, Jamaica, Aruba, Cuba) or self-reported data (Canada, Puerto Rico, United States, Argentina, Paraguay, Saint Kitts & Nevis, Virgin Islands UK). Where no nationally representative diabetes data exist, data from sub-national Risk Factor surveys is reported (Brazil, Dominican Republic, El Salvador, Guatemala, Honduras, Nicaragua, Panama).

Prevalence of Hypertension among adults includes those adult with systolic blood pressure ≥ 140 and/or diastolic blood pressure ≥ 90 or on medication for raised blood pressure. Prevalence of hypertension is reported by country and/or is not age standardized. Data are reported from either measured clinical data (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, Panama, Colombia, Chile, Uruguay, Bahamas, Barbados, Belize, Dominica, Jamaica, Aruba, Cuba) or self-reported data (Canada, Puerto Rico, United States, Argentina, Brazil, Paraguay, Saint Kitts & Nevis, Virgin Islands UK). Where no nationally representative hypertension data exist, data from sub-national Risk Factor surveys is reported (Dominican Republic, El Salvador, Guatemala, Honduras, Nicaragua, and Panama).

Risk Factors among adults

Prevalence of consumption of 5 servings of fruit and vegetables is the proportion of persons who consume five or more combined servings of fruit and/or vegetables a day at a given time in a given country (25-64 Costa Rica, Argentina, Chile, Uruguay, Aruba, Barbados, Bermuda, Dominica, St. Kitts and Nevis, British Virgin Islands.) (18+: Puerto

Rico, United States, Dominican Republic, Guatemala, Ecuador, US Virgin Islands) All data for this indicator is nationally representative.

Prevalence of current tobacco consumption is the proportion of current tobacco years of age among the national adult population at a given time in a given country (25-64 Costa Rica, Argentina, Chile, Uruguay, Aruba, Bahamas, Barbados, Bermuda, Dominica, St. Kitts and Nevis, Suriname, and British Virgin Island). (18+: Puerto Rico, United States, Dominican Republic, Panama, Colombia, Ecuador, US Virgin Islands; 20+: Belize, El Salvador, Nicaragua; 15+: Peru, Venezuela, Jamaica, Bolivia, Cuba, St. Lucia, St. Vincent and the Grenadines). Data from sub-national adult Risk Factor surveys is reported (Brazil 25-64, Guatemala 20+, Honduras 20+)

Prevalence of Insufficient Physical Activity was defined as not meeting one of the following criteria:

- at least 30 minutes of moderate-intensity activity or walking per day on at least 5 days in a typical week; or at least 20 minutes of vigorous-intensity activity per day on at least 3 days in a typical week; or engaging in 5 or more days of any combination of walking, moderate- or vigorous-intensity activities achieving a minimum of at least 600 metabolic equivalent (MET)-minutes per week.(25-64 Costa Rica, Argentina, Chile, Uruguay, Aruba, Barbados, Bermuda, Dominica, St. Kitts and Nevis, British Virgin Islands.). Where no data for that adult age-group exist, national prevalence among a different adult age-group is reported (18+: Dominican Republic, Ecuador; Canada, Mexico, Belize) Where no nationally representative data exist, data from sub-national adult Risk Factor surveys is reported (25-64 Brazil, Guatemala 20+.)

Prevalence of excessive alcohol consumption (binge drinking) proportion of who, if male report drinking 5 or more drinks on one occasion and if female report drinking 4 or more drinks on one occasion (25-64 Brazil, Argentina, Chile, Uruguay, Aruba, Barbados, Bermuda, Dominica, Jamaica, St. Kitts and Nevis, Suriname, British Virgin Islands). (18+: United States, Dominican Republic, Belize, Ecuador; Canada, Mexico Dominican Republic, Peru) sub-national adult Risk Factor surveys is reported (Costa Rica, El Salvador, Honduras, Nicaragua).

Risk factors among Adolescents were reported among group of 13-15 years of age from the results of Global Student Health Survey.

Prevalence of adolescents' tobacco consumption: the proportion of students 13-15 years of age who smoked cigarettes on one or more days during the past 30 days.

Prevalence of adolescents' fruits and vegetables consumption: Prevalence of students 13-15 years of age who usually ate fruits and vegetables five or more times per day during the past 30 days. **Prevalence of adolescents' consumption of soft drinks:**

Prevalence of students 13-15 years of age who usually drank carbonated soft drinks one or more times per day during the last 30 days **Prevalence of adolescents' physically in active:** Prevalence of students 13-15 years if age been physically active less than 60 min per day in 5-7 of the last 7 days **Prevalence of adolescents' considering suicide:** Prevalence of students 13-15 years of age who in the past 12 months have ever seriously considered attempting suicide

Prevalence of adolescents with overweight & obesity: *Self reported height and weight of students was used to determine whether student is overweight or obese using WHO growth reference for school-aged children and adolescents. For more information, visit www.who.int/growthref.

Population covered by any kind of health insurance:

Existence of health insurance is considered as protective factor for the individual. It is expressed as percent of population covered by any kind of health insurance.

Preventive health services use:

Prevalence of women who had mammogram: ages 40-69 who have had a mammogram within the last 2 years: United States, US Virgin Islands or ages 40-69 who have had a mammogram within the last 3 years: Dominican Republic, Ecuador (45-64 years who have ever had a mammogram: Aruba, Barbados, Bermuda, Suriname, British Virgin Islands, Dominica

Prevalence of women who had Pap smear test: 25-64 years who have had a Pap smear within the last 3 years: Aruba, Barbados, Bermuda, St. Kitts and Nevis, Dominica and 18+ who have had a pap smear within the last 3 years: United States, Dominican Republic, Ecuador, US Virgin Islands

Country capacity to respond to NCDs included following indicators:

1. *National Policy, Strategy or Action Plans in operation* on NCD, CVD, Cancer, Diabetes, COPD, Tobacco, Alcohol, Diet or Nutrition, Physical inactivity,
2. *Components included in the National Health Surveillance System* (spec. mortality, morbidity, RF in adults and adolescents
3. *Components of national Health Services* (RF, management of diseases, self help, self care, home based care)
4. *Components of Health promotion* (Healthy public policies re tobacco, nutrition, alcohol: Countries reporting having regulated 100% smoke free enclosed environments in workplaces (including restaurants, bars, casinos, discotheques);Countries reporting having increased taxes and final price of tobacco products; Countries reporting having strong warning labels on tobacco product packages (matching FTCT requirement);Countries reporting having implementing initiatives to regulate the marketing of foods to children; Countries reporting having regulated limited fat, salt and sugar content of processed foods Countries reporting having obligatory school based physical education programs; Countries reporting having tax on alcohol

Information presented in this publication is under ongoing review. Users are advised to consult detailed data sources. Mortality data sources were defined to ensure comparability, therefore statistics can slightly differ from national statistics. Prevalence data are compiled from countries official sources as reported, so they do not serve for comparison between countries. It is expected to repeat this publication every 3 years.

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