

Buena Salud Americas



Buena Salud (Good Health) – Americas Community Initiatives For Cardiovascular Health in the Americas

Bogota, Colombia, Sept. 17-18, 2013

Executive Summary





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Community Initiatives For Cardiovascular Health in the Americas

Prevention and control of non-communicable chronic diseases, particularly cardiovascular diseases (CVDs), is at the forefront of the health related development goals to improve the health and well-being of the world's population. In fact, the United Nations General Assembly adopted a resolution on the prevention and control of the most common cardiovascular diseases highlighting community-based prevention and control models. This effort emphasizes the need for a commitment and closer international cooperation

There is great common interest in having this society integrate the different aspects and actions that are being carried out. The tension that exists in civil society in its role as community-level advocate and the role of government has also been identified.

in the public health field, and for sharing and exchanging best practices, resources and training to increase local capacity and develop the infrastructure needed to undertake the rising prevalence, morbidity and mortality of CVDs.

Within the context of World Health Day 2013 and Healthy Lifestyles Week, the National Alliance for Hispanic Health (the Alliance), the Pan-American Health Organization (PAHO) and the Colombian Ministry of Health, with support from the Healthy Americas Foundation and an educational grant from the Medtronic Foundation, convened a joint leadership meeting of community and non-governmental organizations to share successful community-based practices.



Analysis and conclusions of the key priorities

REDUCING TOBACCO USE – Recommendations

- **Advocate for countries in the Americas to implement the Framework Convention on Tobacco Control policies and recommendations so that the fight against tobacco use continues to be a priority at the regional and country levels.**
- **Integrate the fight against tobacco and the promotion of healthy eating and increasing physical activity, in order to coordinate efforts and achieve campaign synergy.** The focus must be coordinated to have more joint efforts and greater impact at the individual level.
- **Find mechanisms to utilize support networks against non-communicable diseases (NCDs), emphasizing the sharing of experiences and lessons learned both in tobacco and in diet and physical activity, with the goal of exchanging information, training, and self-support.**
- **A systematic monitoring of the tobacco industry actions against public health is needed and it also needs to have the capacity to act and advocate at the international level against the industry's tactics.**
- **Foster work at the civil society level in collaboration and in harmony with government.** It must be an advocacy and mutual support effort, within a relationship of trust and friendship.

The construction of public health cannot continue to be a concern only of the same actors. At the level of international cooperation and of health ministries, this cooperation must be opened. The ministries are not the only actors in the countries' health...
...community organizations have the ability to be able to respond better to the needs of individuals in their community.

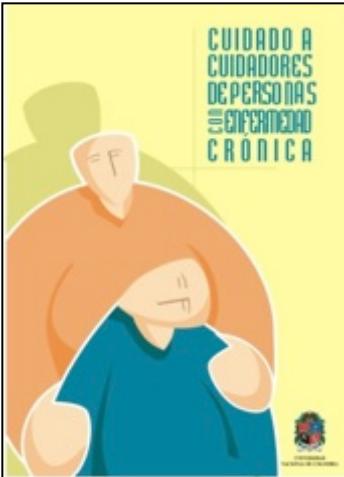
PROMOTING HEALTHY DIET AND INCREASING PHYSICAL ACTIVITY -

Recommendations

- **Create a platform that allows for the coordination of all efforts to comprehensively address the four factors.** Projects and initiatives addressing the four risk factors—tobacco use, physical activity, nutrition and self-management—cannot continue to work in an isolated manner.
- There is an urgent need to **reposition or better position community initiatives where they are given a more important role in public health issues.** From the start, these initiatives need to be a part of every public health policy formulation process.
- **Civil society plays a key role in the promotion of healthy lifestyles for the prevention and control of non-communicable and chronic diseases.** There are many lessons from organizations in the Americas that have shown the importance of community-based support and the work that can be accomplished in the area of non-communicable and chronic diseases.
- **Institutions of higher education should include the promotion of healthy lifestyles in the training and development of health care professionals.** Increased advocacy on the part of academicians and health program faculties should be encouraged, so that they articulate and incorporate health promotion topics in the programs of study and curriculums.
- **Start working with children from infancy to inculcate good habits and to make this learning permanent.** Governments, schools and other organizations should work together to create the environments and develop capacity and skills to be able to incorporate the subject of healthy lifestyles at all levels of schooling.

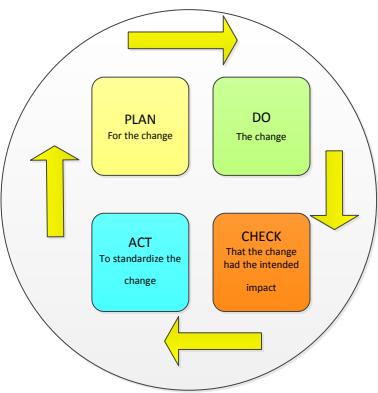


"It's from within communities that transformations are achieved"



PROMOTING COMMUNITY PRACTICES TO SUPPORT SELF-MANAGEMENT, WITH EMPHASIS ON PEOPLE WITH CARDIOVASCULAR DISEASES AND DIABETES - Recommendations

- **Create networks and government-private sector alliances that facilitate site visits or information exchange about self-management practices and community support should be created.** This information should be compiled, disseminated and integrated according to the needs and sociocultural characteristics of each community and its health system.
- **Alliances between non-governmental organizations (NGOs) and the government should be promoted to disseminate information about non-communicable diseases, including aspects related to patient and caregiver self-management.** These alliances should also include the various media outlets, which are key to the process of dissemination health-related information.
- **Develop standard methodologies for the training of health personnel, physicians in particular, on how to manage and facilitate self-management practices among patients.** In a collaborative and multicentric way, information should be collected, results compared, and the participation of academia and community leadership in the construction of these methodologies to promote self-management practices should be supported.



We still have systems of health services oriented toward episode-based and emergency medicine, and that type of services no longer works for a type of diseases and patients who require life-long care, informed and active participation in their own care, as well as to be permanently accompanied. The priority has to be rebuilding health services in the Americas to respond to the needs of individuals in cooperation with families and community organizations.



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