

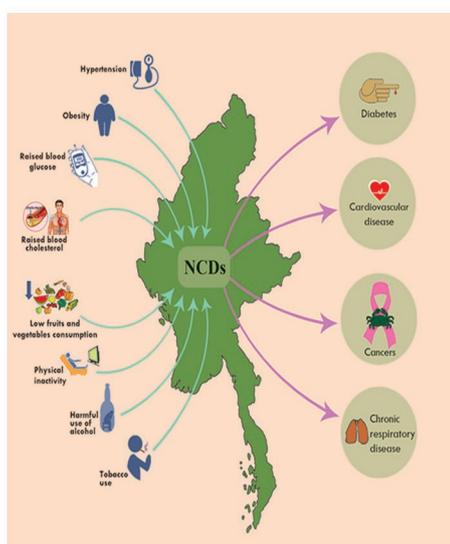
Planning for a Healthy Future: The Importance of Tackling Non-Communicable Diseases in Myanmar

Introduction

Myanmar is currently witnessing a period of rapid socio-economic transition as well as changing disease patterns. The country faces the twin challenges of controlling major communicable diseases while tackling a growing range of non-communicable diseases (NCDs), especially diabetes and cardio-vascular diseases. According to the World Health Organization (WHO), NCDs account for at least 59 per cent of all deaths in Myanmar¹. Working adults over the age of 45, especially women, are most at risk of being diagnosed with NCDs.

According to the 2014 STEPS survey, 94 per cent adults in Myanmar have at least one NCD lifestyle related risk factor (see box) and 20 per cent of the population live with 3 or more NCD risk factors².

Children and adolescents (over a quarter of the population in Myanmar) are growing up learning and practicing unhealthy lifestyle behaviours that could put them at substantial risk of getting an NCD later in life.



What are NCDs?

Non-communicable diseases (NCDs) are chronic, long-term diseases that require on-going management and treatment. The main types of NCDs are: cardiovascular disease (heart disease and stroke), cancer, diabetes, and chronic lung disease. In addition, mental and neurological disorders such as depression and dementia have also been recognized as NCDs¹. These conditions rarely occur in isolation, and many people are affected by more than one condition at the same time.

What are risk factors?

Four major risk factors for NCDs are: tobacco use (all types of use), physical inactivity and unhealthy diets (leading to obesity), as well as harmful use of alcohol.

1. World Health Organisation (WHO), Myanmar NCD Country Profile, 2014, http://www.who.int/nmh/countries/mmr_en.pdf

2. The Ministry of Health and Sports, the Republic of the Union of Myanmar, Report on National Survey of Diabetes Mellitus and Risk Factors for Non-communicable Diseases in Myanmar, 2014.

Some facts and figures

- Tobacco use among men is very high with 43.8 per cent smoking tobacco products and 62.2 per cent using smokeless tobacco (betel nut).
- 86.6 per cent of men and women consume less than the recommended amount of fruits and vegetables per day.
- 26.4 per cent women and men have raised blood pressure, putting them at risk of heart attacks and/or stroke³.

Taking action brings benefits for the country

NCDs can be avoided in many cases through behaviour change to improve diets, increase exercise and reduce tobacco and alcohol consumption. Where prevention is not possible, NCDs can often be treated or managed with positive results, greatly improving the quality of life of the persons affected and of their families. The key to successful prevention and management is an approach for the whole population – from infancy and childhood to adolescence and adulthood, and through to old age. Communities, primary health care facilities and hospitals should work together to make this possible.

Taking action on NCDs will result in children and people of all ages living healthier and more productive lives. In the long run, healthier people will use the public health system less: this will ensure access and

affordability of health for all. Better health means a stronger society and growing economy for Myanmar.

Consequences of not acting on NCDs

There is no doubt that investing in health is good for the economy, as well as for individuals and their families. Failure to act upon NCDs has serious consequences for economies and societies across the globe including Myanmar⁴.

Although little research on the economic impact of NCDs in Myanmar exists, we know that conditions like asthma and angina have been found to contribute to higher household expenditure and lower household income⁵. Further research has shown that poorer households in Myanmar do not visit healthcare services when needed, and that those affected by chronic illnesses may end up bearing catastrophic health expenditures⁶.

3. Ministry of Health and Sports, the Republic of the Union of Myanmar, *Report on National Survey of Diabetes Mellitus and Risk Factors for Non-communicable Diseases in Myanmar, 2014*.

4. World Economic Forum and Harvard School of Public Health, *The global economic burden of non-communicable diseases*, September, 2011.

5. Soe Htet, Khurshid Alam and Ajay Mahal, "Economic burden of chronic conditions among households in Myanmar: the case of angina and asthma," *Health Policy and Planning*, 2014, pp. 1–11.

6. Soe Htet et al, "Financial Risks From Ill Health in Myanmar: Evidence and Policy Implications," *Asia-Pacific Journal of Public Health*, vol. 27, no. 4, 2015, pp. 418–428.

Current Policy and Programme Response on NCDs in Myanmar

In order to address the challenges posed by NCDs, the Government of Myanmar has taken strong and positive steps through multiple strategic actions, which include:

- NCDs are firmly recognised as a priority by the Government: the Ministry of Health and Sports (MoHS) has drafted a national NCD policy.
- NCDs have been integrated into the Government's priority action agenda and emerging universal health coverage plan.
- The Department of Public Health within the MoHS has created a NCD unit having the provision of 64 approved positions, and has started filling those positions.
- In order to integrate action on NCDs into primary healthcare and to reinforce health system strengthening, the MoHS has been piloting the Package of Essential Non-Communicable Disease Interventions (PEN) in two townships since 2012. Now the PEN interventions are being upscalled in 10 townships in 2017.
- Based on the findings and results, the Ministry is now planning a phased expansion of PEN implementation in all townships across the country.



What more needs to be done?

The following strategic actions are recommended for addressing NCDs in Myanmar:

- Developing a multi-sectoral national strategic action plan on NCDs (involving the food sector, the education sector, the social sector, and including police and judiciary) to provide guidance to all levels of government and other stakeholders.
- Establishing coordination mechanism for engaging all concerned ministries and other stakeholders so that necessary action is taken at all levels of Myanmar society.
- Ensuring joint efforts such as raising public awareness on healthy life style, encouraging people for more physical activity, promoting healthy eating habits, food certification and introducing sin taxes on alcohol and tobacco.
- Ensuring adequate human and financial resources are dedicated to addressing the country's rapidly expanding NCD health needs.

Package of Essential Non-Communicable Disease Interventions (PEN)

The WHO has developed a Package of Essential Non- Communicable Disease Interventions (PEN) to facilitate action on NCDs in low resource settings. PEN offers minimum standards to strengthen national capacity to integrate and scale-up care for NCDs. It is a package of innovative, action-oriented and cost-effective, essential population-wide as well as individual interventions. These interventions include – methods for early detection and diagnosis of NCDs using inexpensive technologies, various approaches to modify NCD risk factors, and affordable medications for prevention and treatment of NCD conditions.

- Filling up the research gaps on NCDs through developing a peer reviewed research agenda and conducting research based on this agenda.
- Encouraging international donors for supporting synergetic actions on NCDs in Myanmar as a priority in their development assistance programmes.

Myanmar Government has taken the first important steps in addressing non-communicable diseases in the country, and can stop the upcoming epidemic by taking the necessary measures.

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Strengthening Public Health Capacity Towards Myanmar's Disease Transition

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