In 2002, based on the 2002 WHO Global Burden of Disease data\(^1\), noncommunicable diseases (NCDs) accounted for 72.9% of the total 11,755 deaths in Trinidad and Tobago, cardiovascular diseases being the leading cause, with an Age Standardized Mortality Rate (ASMR) of 378 per 100,000 (51.9%). Malignant neoplasms followed, with an ASMR of 120 per 100,000 (16.6%). Diabetes had almost the same rate, at 117 per 100,000 cases (16.1%); and chronic respiratory diseases had an ASMR of 23 per 100,000 (3.3%). The remainder was due to other non-specified conditions.

<table>
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<th>Date</th>
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Trinidad and Tobago initiated its first CARMEN program in 2004, which sought to integrate health promotion and disease prevention and control.

The expected results were:
- Improving healthy lifestyle practices in communities and schools
- Implementation of measure for creating healthy environment in primary schools
- Community participation
- Health education and promotion embedded into school curriculum

Health promotion and disease prevention practices developed with multi-sector participation

Improving school screening programs in primary schools

The country has had a successful experience, especially in the last decade, over integrating NCD programs at the community level. The context for NCD prevention and control can be found within the Caribbean Charter for Health Promotion (1993), the CARMEN Initiative and partnership-building with various stakeholders, in order to develop sustainable intervention methods with community ownership, organization and empowerment, together with institutional technical support at all levels.

Diabetes Support Group and Awareness Program

The Diabetes Support Group (1997) and a Diabetes Awareness Program targeted persons living with diabetes and their family members. It was introduced to raise awareness of the relationship between diabetes and other chronic diseases, to improve knowledge of risk factors and increase self-management skills, and to provide support for people with diabetes in their efforts to modify behaviors. The program was part of a five-year Health Promotion Plan for the Prevention and Control of NCDs, conducted by the Ministry of Health of Trinidad and Tobago. To date, the groups have evolved into a local network with facilitators providing voluntary services, counseling and are currently in the course of receiving a stipend from the Regional Health Authorities in recognition of the significant contribution and service provided for the prevention and care of diabetes at the primary health care level.

Well-Weight Management Program

A Well-Weight Management Program was also introduced with the objectives of building and increasing the personal health skills of the community relating to physical activity and nutritional practices and empowering communities to achieve well-being by training community persons as exercise instructors and developing community wellness centers as well as an environment within the health sector to support the practice of healthy lifestyles. The

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program formed part of the five-year Health Promotion Plan for the Prevention and Control of NCDs, structured around the Caribbean Charter for Health Promotion. It was developed as a Primary Health Care Program using a health promotion approach and was implemented in a Community Health Center setting seeking to reorient health services to develop new modalities to address the challenges posed by NCDs. Twelve well-weight management programs were established between 1997 and 2003. Instructors have now implemented similar programs in schools and community centers. Special programs were implemented targeting senior adults and pregnant women, providing exercise equipment and programs in health centers.

Another initiative, the Exercise by Prescription program, has also been implemented and consists of clients undergoing a medical examination and later being referred by the Medical Officer and District Health Visitor for physical exercise.

Healthy Spaces Initiative

The Healthy Spaces Initiative was implemented in three communities following the methodology outline by PAHO/WHO, with four specific target groups: school children, out of school youths, adults and elderly, and women. This initiative is multisectoral and enhances the community’s skills to address developmental issues affecting their quality of life. It strives to empower the community to take charge of responding to sensitive needs and mobilizing resources with technical support from a myriad of stakeholders. A situational analysis indicated that NCDs constituted the major burden of diseases among the people with limited access to preventives and health care services. Based on the information collected, historical and current needs were prioritized as identified by their members, including potable water supply, greater access to medical services, developmental skills training programs for youth, and recreational areas for children. To date, the community has obtained approval for the water project with a temporary alleviation measure being put in place, training for job placement was done, shuttle services are provided to access health services with a dedicated team assigned to the community that has achieved public notoriety and now participates in national cultural events, among others.

Other activities have been undertaken in Trinidad and Tobago to address NCDs from the community perspective, such as updated guidelines on the management of certain chronic
diseases, and risk factor surveillance. Policies have been developed to target NCDs and risk factors, especially tobacco use. The country has several future plans in place aimed at the prevention and control of NCDs, in particular, a comprehensive wellness program that is based on a Jamaican model. In 2006, the prime Minister of Trinidad and Tobago, together with the Ministry of Health, hosted the first national symposium that brought forth the international authorities in the field of NCD and ratified the government’s commitment to effectively address the growing burden of NCDs in the population.