

Civil Society's Report on Chronic Non-Communicable Diseases in Brazil: development of the Indicators on the Prevalence of the Main Risk and Protective Factors

The report, released on September 2015th,¹ analyzed the development of the indicators on the prevalence of the main risk and protective factors of the Health Promotion Axis (Axis II) of the Strategic Action Plan to Combat Chronic Non-Communicable Diseases in Brazil 2011-2022.²

All data were originated from using Vigitel³ in 2011, 2012 and 2013. Such choice was not only justified by the existence of a historical series of indicators which allow us to observe its trends, but also due to the fact that Vigitel system integrates the Brazilian Ministry of Health's Monitoring System for Chronic Diseases.

Results:

- A 23,6% decrease in the number of adult smokers in Brazil between 2011 and 2013, from 14,8% in 2011, to 11,3% in 2013 (Table 1). The global goal of the World Health Organization (WHO) is a decrease of 30% in the prevalence of the current level of consumption of tobacco in adults and teenagers. In accordance with Brazil's Chronic Non-Communicable Diseases Plan, the goal is a decrease in the prevalence of smoking among adults from 15.1% (in 2011) to 9.1% (in 2022) (Table 2).
- Regarding physical activities, an increase in the percentage of adults who exercise during leisure time between 2011 and 2013 was noted, from 30.3% to 33.8%, an increase that corresponds to approximately 12%, also showing a significant growth tendency during the same period (Table 1). The global goal of the World Health Organization is to reduce the prevalence of insufficient physical activities by 10%, both for adults and teenagers.
- Regarding eating habits, a significant increase of the number of adults who regularly consume fruits and vegetables during the period between 2011 and 2013 was noted, corresponding to an increase of 16.5% (Table 1). The goal of Brazil's Chronic Non-Communicable Diseases Plan is to increase the consumption of fruits and vegetables from 18.2% (2010) to 24.3% (2022).

¹ http://www.actbr.org.br/uploads/conteudo/1052_Relatorio_dcnt_2_240915.pdf

² http://bvsmms.saude.gov.br/bvs/publicacoes/plano_acoes_enfrent_dcnt_2011.pdf

³ Monitoring system for risk and protective factors of chronic diseases by means of phone inquiries.

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- Regarding issues of excess weight, there was a percentage increase of 4.7% in the number of adults over their weight, but the tendency was not deemed to be statistically important. On the other hand, the prevalence of obesity grew significantly in the same period, from 15.8% in 2011 to 17.5% in 2013, corresponding to an increase of 10.8% (Table 1). The goal of the World Health Organization and Brazil's Chronic Non-Communicable Diseases Plan is to stop that growth (Table 2).
- Regarding alcohol consumption, there was a fluctuation in the amount of adults who reported excessive consumption within 30 days, showing no significant prevalence tendency in the monitored period (Table 1). It's important to point out that the World Health Organization's global goal is a decrease of 10% in the magnitude of the prevalence, and the national goal is a decrease in the prevalence of harmful consumption of alcohol, from 18% (in 2011) to 12% (in 2022). In ACT+ point of view, WHOS's goal is more effective to face the problem and the issue should not rely on excessive consumption but include other politics.

Reccomendations:

- Expand the evaluation of the implementation of the national plan's directives and measures, based on the monitoring of the goals and indicators, in areas where social participation is institutionalized in the Brazilian public health care system(SUS), and social control is ensured and organized at all levels of management.
- Improve the coordination with ministries, state departments and government agencies, as well as with the organized civil society, for better insertion of work agendas of related tasks alongside public policies in order to prevent and control chronic non-communicable diseases.
- Safeguard public policies to battle chronic non-communicable diseases from commercial interests of economic groups which profit from consumption of products which are responsible for aggravating risk factors.
- Develop and implement strategies and measures to battle chronic non-communicable diseases which are sensitive to the Brazilian people's social inequalities, contributing for the reduction of health iniquities.

The report which monitors indicators of chronic non-communicable diseases aims to stimulate an intensification of the efforts of governmental agents and society's relevant groups to tackle the main national challenges regarding those diseases.

Table 1 – Distribution of the prevalence estimates (confidence interval of 95%) of risk and protective factors for chronic non-communicable diseases, year two. Brazil, 2011, 2012 e 2013.

| Vigitel indicators | 2011 | 2012 | 2013 | % difference | p-value |
|---|-------------|-------------|-------------|---------------------|----------------|
| Smoking | | | | | |
| Smoker | 14.8% | 12.1% | 11.3% | -23.6% | 0.01 |
| Physical activities | | | | | |
| Physical activities during leisure time | 30.3% | 33.5% | 33.8% | 11.6% | 0.04 |
| Eating habits | | | | | |
| Regular consumption of fruits and vegetables | 30.9% | 34.0% | 36.0% | 16.5% | 0.00 |
| Excess weight | | | | | |
| Overweight | 48.5% | 51.0% | 50.8% | 4.7% | 0.08 |
| Obesity | 15.8% | 17.4% | 17.5% | 10.8% | 0.04 |
| Alcohol consumption | | | | | |
| Excessive consumption within the last 30 days | 17.0% | 18.4% | 16.4% | -3.5% | 0.63 |

Source: VIGITEL, 2011, 2012 and 2013

* The percentage difference was calculated based on the variation in prevalence between the years 2011 and 2013.

* P-value was calculated based on the years 2011 and 2013.

Table 2 – Estimates of the prevalence of risk and protective factors for chronic non-communicable diseases in the year 2013, percentage difference from the year 2011, level of statistical relevance (p-value), goals of Brazil's Chronic Non-Communicable Diseases Plan for the year 2022, and voluntary global goals from the period of 2015-2025 of the World Health Organization.

| Vigitel indicators | 2013 | % difference | p-value | Goal for 2022 | WHO 2025 |
|--|-------------|---------------------|----------------|----------------------|-----------------|
| Smoking | | | | | |
| Smoker | 11.3% | -23.6% | 0.01 | 9.1% | 30% decrease |
| Physical activities | | | | | |
| Physical activities during leisure time | 33.8% | 11.6% | 0.04 | 22.0% | 10% decrease |
| Eating habits | | | | | |
| Regular consumption of fruits and vegetables | 36.0% | 16.5% | 0.00 | 24.3% | |
| Excess weight | | | | | |
| Overweight | 50.8% | 4.7% | 0.08 | Stop growth | 0% growth |
| Obesity | 17.5% | 10.8% | 0.04 | Stop growth | 0% growth |

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| Alcohol consumption | | | | | |
|---|-------|-------|------|-------|--------------|
| Excessive consumption in the last 30 days | 16.4% | -3.5% | 0.63 | 12.0% | 10% decrease |

Source: VIGITEL, 2011, 2012 and 2013

* The percentage difference was calculated based on the variation in prevalence between the years 2011 and 2013.

* P-value was calculated based on the years 2011 and 2013.