Pekka Puska, Professor, MD, PhD, MPolSc
Director General, National Institute for Health and Welfare (THL), Finland
Vice President, International Association of National Public Health Institutes (IANPHI)

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NCD MONITORING AND NPHI’S
IANPHI Meeting
Helsinki 26-27.9.2011
CONCEPTS

- MONITORING
- SURVEILLANCE
- EVALUATION
- EVALUATIVE RESEARCH
USES OF SURVEILLANCE / HEALTH MONITORING

- ASSESSMENT OF SITUATION FOR PLANNING / ACTION
- DETECTION OF EPIDEMICS
- FOLLOW UP OF TRENDS (ARE OBJECTIVES REACHED?)
- EVALUATION
- FEED BACK TO STAKEHOLDERS, POPULATION
- MATERIAL FOR RESEARCH
- INTERNATIONAL COMPARISONS
## HEALTH MONITORING AT THL: TARGETS AND INSTRUMENTS

<table>
<thead>
<tr>
<th>TARGETS</th>
<th>INSTRUMENTS</th>
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<tbody>
<tr>
<td>Infectious diseases</td>
<td>Infectious disease surveillance</td>
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<tr>
<td>Chronic diseases</td>
<td>Registers and statistics</td>
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<td>Functional capacity and subjective health</td>
<td>Health 2000</td>
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<td>Risk factors</td>
<td>Finrisk surveys</td>
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<tr>
<td>Nutrition</td>
<td>Findiet surveys</td>
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<td>Health behaviour and health promotion</td>
<td>Health behaviour monitoring</td>
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MONITORING AT DIFFERENT LEVELS

DETERMINANTS
- Socioeconomical
- Environmental
- Cultural

RISK FACTORS
Health
Behavioural
Biological

DISEASES
FUNCTIONAL
CAPACITY

OUTCOMES
DEATH
SURVIVAL

HEALTH
PROMOTION

PREVENTION

TREATMENT
SECOND
PREVENTION
EXAMPLES OF MONITORING RESULTS AT THL
Use of Butter on Bread (men age 30–59)

IANPHI Meeting 26.-27.9.2011

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Milk Consumption in Finland in 1970 and 2006 (kg per capita)

- Whole milk
- Whole form milk
- Low fat milk
- Skim milk

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SALT INTAKE IN FINLAND 1977–2007

Calculated, men
Calculated, women
24h urine, men
24h urine, women
Lin. (Calculated,
Injury mortality 1986-2005

- Home and leisure time
- Traffic
- Occupational
SUICIDE MORTALITY PER 100,000 POPULATION IN FINLAND IN 1921–2004
Change in age-adjusted mortality rates
Finland, males aged 35–64 (per 100 000 population)

**Coronary heart disease**
- start of the North Karelia Project
- extension of the Project nationally
- North Karelia -85%
- All Finland -80%

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<tr>
<th>Rate per 100 000</th>
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<tr>
<td>All causes</td>
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<tr>
<td>All cardiovascular</td>
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<tr>
<td>Coronary heart disease</td>
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<tr>
<td>All cancers</td>
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</tbody>
</table>

Gain of some 10 healthy years in Finnish population

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11/10/2011 IANPHI Meeting 26.-27.9.2011
STANDARDIZATION OF MEASUREMENTS

• WITH TIME
• BETWEEN AREAS / COUNTRIES
• INTERNATIONAL RECOMMENDATIONS (WHO etc.)
SOURCES OF DATA

• STATISTICS (DEATHS etc.)
• HEALTH SERVICE DATA (PATIENTS, LABORATORY, etc.)
• NOTIFICATION (INFECTIONIOUS DISEASES)
• REGISTRATION (CANCER REGISTER etc.)
• SURVEYS
  - INTERVIEWS (PERSONAL, TELEPHONE, MAIL)
  - MEASUREMENTS
SURVEILLANCE / HEALTH MONITORING

- STRONG TOOL OF NATIONAL PUBLIC HEALTH
- VITAL FUNCTION OF ANY NPHI
- NCD MONITORING OF INCREASING IMPORTANCE
Cornerstones of NCD prevention and control (WHO global strategy)

• Attention to behavioural risk factors
  – Tobacco use
  – Unhealthy diet
  – Physical inactivity
  – Harmful use of alcohol

• Monitoring and surveillance of
  – Risk factors and diseases
  – Preventive actions

• Redirection of health services
  – Prevention
  – Chronic care model
Surveillance

- Monitoring of
  - Diseases
  - Risk factors/behaviours
  - Determinants
  - Prevention & control process

- "Best buys":
  - NCD mortality trend
  - Core risk factor trends

- National institutional base for surveillance and links with national health monitoring
- International standardization and collaboration
- Active use of surveillance results: Feed-back, communication
Note

• It is important to keep the monitoring simple enough for sake of feasibility, high participation and rapid feed back

• Monitoring does not replace more in-depth studies to understand better the issues and to help develop the monitoring
Role of NPHIs

1. It is one thing to decide on WHAT TO MONITOR, but the big question is:

WHO WILL CARRY OUT THE MONITORING in a sustainable way

INSTITUTIONAL BASE
Role of NPHIs

2.

• A NPHI under the Ministry of Health is the agency for sustainable monitoring in the area of NCD prevention and control, and more generally in the area of health.

• The NPHI not only carries out the monitoring, but has the expertise and skills to:
  – analyse the results
  – to interpret the results to policymakers
  – to communicate the results to the great public
In May 2008, WHO Member States started to mobilize a global response to address non-communicable diseases, with a particular focus on developing countries.
UN high-level summit on NCDs
New York Sept 2011

"Unprecedented opportunity" for high-level political support and action on global NCD prevention and control"

Outcome document
Thank you

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