

# CAPCD

Community Action to Prevent Chronic Disease




# Objective of Soapbox presentation

- Update on the CAPCoD project
- Get feedback to improve the proposal
- Get suggestions for obtaining financial support



# Present

- High prevalence of risk factors
  - Undercontrolled risk factors
  - Transition to unhealthy diets, sedentarism
  - Increased tobacco use among young people and women
  - Fragmented response that does not match burden
  - Much effort diluted in ineffective interventions
  - Low reach of effective interventions
  - Even well-planned programmes such as CARMEN sputter with uneven government support and little or no participation of civil society
- 

# What is CAPCoD\*?

---

Comprehensive community interventions to reduce chronic disease targeting three risk factors:

poor nutrition, physical inactivity and smoking.

Intervening in multiple venues ... schools, workplaces, communities, health centres, and through multi-media approaches.

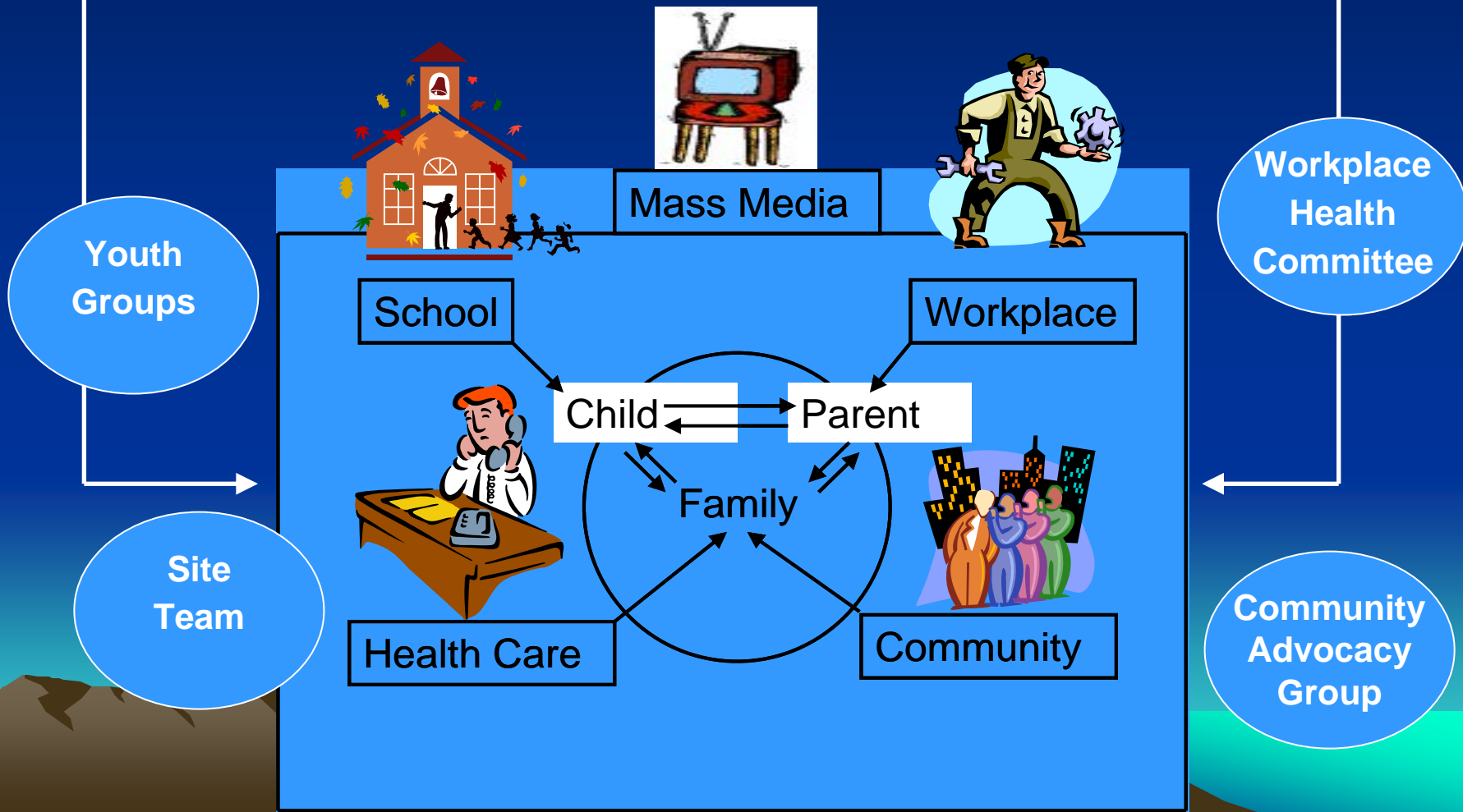
Developed under the auspices of OxHA and Yale University

# What is unique about CAPCoD\*?

---

- Change through structural interventions: policies and environmental modifications
- Applies already proven interventions in multiple venues in a community at the same time
- Common protocol, methodology and instrumentation across all sites with local adaptation
- Promotes sustainability within the community and its institutions
- Complements and expands on CARMEN and CINDI
- Involves government, NGOs and industry in a partnership to support community change
- Change is directed by community

# Comprehensive community interventions ...



Youth  
Groups

Site  
Team

School

Mass Media

Workplace

Child

Parent

Family

Health Care

Community

Workplace  
Health  
Committee

Community  
Advocacy  
Group

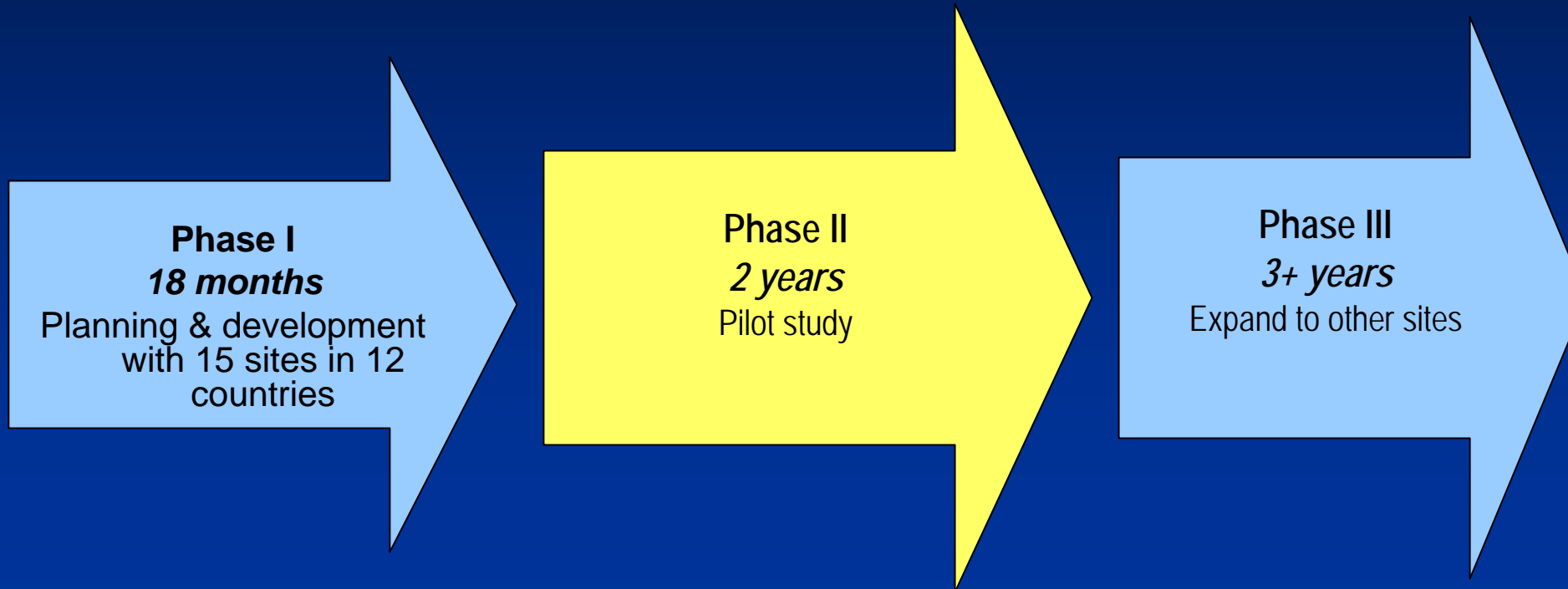
# Intervention objectives

---

1. Develop, implement and evaluate comprehensive community interventions.
2. Build theory-based interventions that focus on policy change, environmental change, community empowerment and novel incentive-based systems for lowering behaviour-change barriers.
3. Develop mechanisms for outcome, process and economic evaluation that may have wider applicability in developing countries



# Progress to date...



Pilot in six locations:



Mexico

Argentina

China

India

Israel  
(Beduin  
pop.)

Tunisia

# Evaluation

---

CAPCoD includes both process and outcome evaluation

*what works:  
how, where, and why?*



# CAPCoD's Core Outcomes...

---

1. Positive short- and long-term **health outcomes** for communities
2. **Behaviour and attitude changes** based on structural interventions
3. **POLICY changes** in
  - \* schools (youth)
  - \* workplace environments
  - \* health settings
  - \* community (including youth & family)
  - \* media

# CAPCoD short-term objectives

---

- Continue to secure funding to pilot six countries
- Create a CAPCoD Advisory Committee representing leaders in the field internationally
- Request bridge funding from OxHA to support grant writing and instrument development



# CAPCoD and OxHA

---

- OxHA is well positioned to be the main NGO for impacting chronic disease globally
- CAPCoD is the actionable arm of OxHA implementing community-level interventions to impact chronic disease

