

# Insights from 10,000 Women on the Impact of NCDs

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***Arogya in Sanskrit means good health. More literally to live a life without disease.***

*Chronic non-communicable diseases called NCDs, include heart diseases, cancer, diabetes and chronic lung diseases*

# Gathering the Voices of 10,000 Women on NCDs

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- Background - Though NCDs are the #1 of killer of women, data on women's views on NCDs are scarce.
- Aim – Capture the voices of women from around the world on the impact of NCDs on their lives, and use the data to inform and inspire multi-stakeholder action.
- 2013 CGI Commitment with Novartis, Partnership to Fight Chronic Disease, American Cancer Society, UNICEF, PSI, Abt SRBI and Jana
  - i. a quantitative survey among 10,000 women,
  - ii. Accompanying Videos
- 10 Countries
  - **Afghanistan, Brazil, India, Indonesia, Kenya, Mexico, Russia, South Africa, UK, US**
  - Urban women in Afghanistan, Russia, Mexico. Urban + Rural women in others.
- Survey Started and Completed in 2014.
  - Used mobile, web technologies (in person in Afghanistan)
  - 18 Question Questionnaire developed with Partner Input.





# First Results

# NCDs Affect Our Everyday Lives – More So in Less Developed Countries

- 2 out of 3 women said they or someone in their household had an NCD
- Half of the women in our survey were caregivers
- Personal experience with NCDs highest in Brazil, India, and South Africa, and lowest in the UK and the US.

<b>Households With Non-Communicable Diseases (Heart Disease, Diabetes, Cancer or Chronic Lung Disease)</b>			
<b>Income Level</b>	<b>Country</b>	<b>Sample Size (N)</b>	<b>Percentage</b>
<b>Low Income</b>	Afghanistan	1015	49%
	Kenya	1000	71%
<b>Lower Middle</b>	India	1000	86%
	Indonesia	1000	68%
<b>Upper Middle</b>	Brazil	1000	82%
	Mexico	1005	66%
	South Africa	1000	78%
<b>High Income</b>	Russia	1004	66%
	UK	1003	30%
	US	1007	28%
<b>TOTAL</b>	All Countries	10034	62%

## The Financial Pain is Felt Most in LMICs ....

- About 30% of the women in Brazil, India, Kenya, South Africa and Indonesia reported spending > 25% of household income on NCDs.

**Q5. What percentage of YOUR HOUSEHOLD income is spent treating these health conditions: heart disease, diabetes, cancer, and chronic lung disease? Please give your best estimate.**

	AFG	BRA	IND	INDO	KEN	MEX	RUS	SAF	UK	US	Total
<b>N</b>	1015	1000	1000	1000	1000	1005	1004	1000	1003	1007	10034
0%	49	22	21	28	30	25	27	32	68	60	36
1 to 25%	28	26	44	29	25	48	48	27	16	21	31
26 to 50	17	19	23	14	20	17	11	18	4	8	15
More than 50%	6	13	6	13	13	6	3	8	1	3	7
I do not know	0	20	7	15	13	4	11	15	11	9	10
No Answer	1	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	100	100	100	100	100	100	100	100	100	100	100

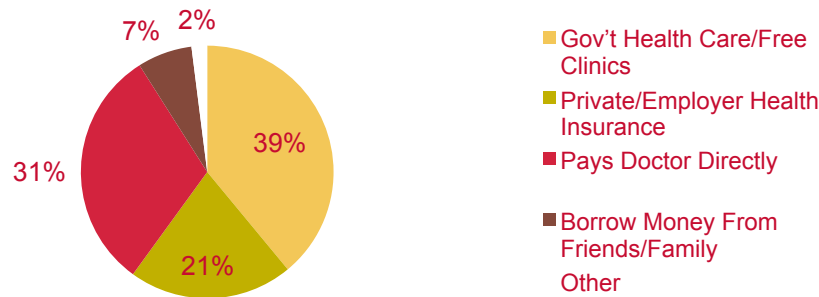
- Overall 2 in 10 say the financial burden from NCDs is major (30% in Kenya - 5% in the UK).

# ... Where Pay-As-You-Go Healthcare is Prevalent

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- 4 in 10 women pay doctors directly for their healthcare or borrow money from friends and family to pay for it.

## How do you pay for health care most of the time?



- This is a bigger problem in some countries
  - In Kenya, India, Afghanistan, 6 in 10 women shoulder burden of healthcare in this way.
  - Half of the women in South Africa and nearly half in Indonesia report paying out of pocket.

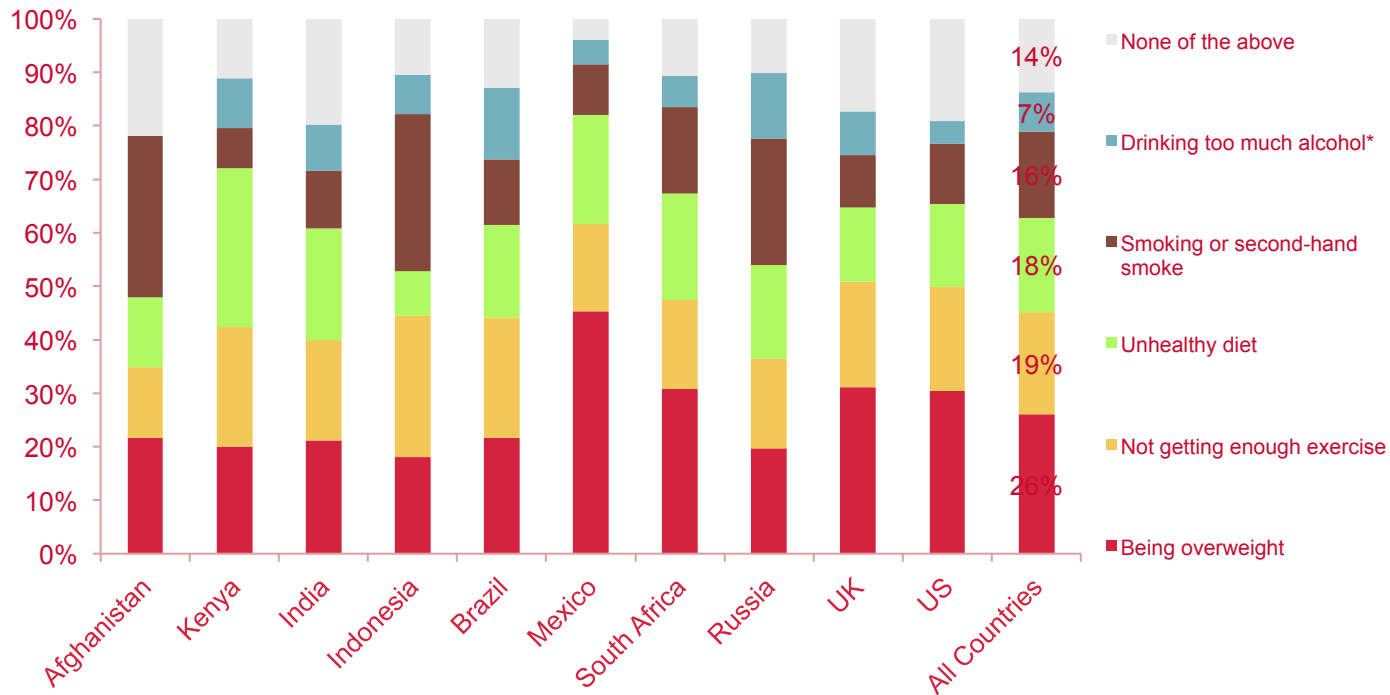
# Caregiving Limits Women's Ability to Work in LMICs

- Two in 10 women said caregiving for family members with NCDs limited their ability to work.
- In India, Indonesia and Brazil, impact is 50% greater.

<b>Burden of Caregiving</b>				
<b>Income Level</b>	<b>Country</b>	<b>Sample Size (N)</b>	<b>Provided Care to HH Member with NCD</b>	<b>Quit Job to Care for HH Member with NCD</b>
<b>Low Income</b>	Afghanistan	1015	43%	13%
	Kenya	1000	58%	19%
<b>Lower Middle</b>	India	1000	63%	37%
	Indonesia	1000	57%	34%
<b>Upper Middle</b>	Brazil	1000	62%	32%
	Mexico	1005	67%	22%
	South Africa	1000	64%	20%
<b>High Income</b>	Russia	1004	49%	17%
	UK	1003	22%	6%
	US	1007	24%	9%
<b>TOTAL</b>	All Countries	10034	51%	21%

# Obesity Related Issues Top Concern

- One-quarter of the women said the single health issue they were most concerned for their household was being overweight (26%).
- In Mexico nearly half of the women expressed this concern.





# Women Access Health Systems, but Lag in NCD Testing

- Two-thirds of the women were examined by a doctor in the previous year.
  - Two-thirds have had a blood pressure test. Half have had a blood sugar test.
  - Less than 3 in 10 women have had breast exams or cervical cancer screening tests performed by a medical professional.
    - The US is the only country in which a majority of women report having had both types of tests.

Health Examinations and NCD Testing	Low-income		Lower-middle		Upper-middle			High-income			Total
	AFG	KEN	IND	INDO	BRA	MEX	SAF	RUS	UK	US	
Had Health Exam in Last Year	64	64	41	48	66	72	66	69	63	64	62
Blood Pressure	57	47	44	48	37	80	65	93	83	79	63
Blood Sugar	43	27	36	28	53	77	55	71	48	61	50
Cervical Cancer Screening	15	16	16	13	22	43	13	35	63	52	29
Breast Exam by Med. Professional	20	26	17	14	15	25	14	56	23	65	27
None of These Tests	0	31	20	28	28	2	20	1	2	2	13

- When asked what reasons prevented women from going to a doctor, cost was the most common answer given—as high as one-third of the women in our survey said they did not have enough money. Long wait times emerged a common barrier except in US

# Risk Factor Exposure

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- ▶ Three-quarters drink soda or cola at least once a week.
  - 3 in 10 women consume soda every other day
  - In Brazil and South Africa 9 in 10 women drink soda once a week.
- ▶ Majorities of women report walking and doing strenuous household chores at least two days a week.
- ▶ Women around the world are juggling so much in their lives – 4 in 10 say not enough time is the main challenge to getting enough physical activity.
- ▶ Eating out is common. 7 in 10 women say they eat food that is not prepared in their home—such as food from restaurants, street food or take-out food—at least once a week.
- ▶ Tobacco is still a problem - 30-40% of women in India, Indonesia, South Africa, and Russia, reported smoking cigarettes, cigars, pipes, bidis or hookah.

## Much Impact from NCDs, Some Progress, More to be Done

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- Pain of NCDs is felt most in less developed countries, especially the financial pain.
- Caregiving limits women's ability to work
- Women from around the world do visit healthcare facilities, but cost and long wait time are major barriers to treatment access
- Women lag in NCD testing
- Women are exposed to a number of risk factors
- Women are concerned about their children's health
- 10,000 women from 10 different countries tell us that chronic diseases affect their every day lives

## Leveraging the 10,000 Women's Voices

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- We will release the full report this September.
- Also preparing several videos in women's own voices
- How are the survey results relevant to you – UN Agencies, Member States, women's health activists and the NCD community?
- How are the insights from the 10,000 women helpful in shaping the Post-2015 dialogue?



# Back-Up

# Barriers to Treatment Access

- When asked what reasons prevented women from going to a doctor, cost was the most common answer given—as high as one-third of the women in our survey said they did not have enough money.
- Long waiting times emerged as a common barrier for women especially in Brazil, Afghanistan and Russia and other countries as well, except the US.

**Q8. In the past year, which of the following reasons prevented you from going to the doctor or other medical professional? [MULTIPLE RESPONSE]**

	Low-income		Lower-middle		Upper-middle			High-income			Total
	AFG	KEN	IND	INDO	BRA	MEX	SAF	RUS	UK	US	
	N	1015	1000	1000	1000	1000	1005	1000	1004	1003	
I did not have enough money	58	39	24	44	25	37	42	24	10	34	34
Health facility was too far away	27	12	26	26	13	6	5	13	7	8	14
I did not have transportation	25	5	20	16	10	3	12	3	6	9	11
Waiting times were too long	43	26	29	35	46	32	19	41	19	11	30
None of the above	0	25	19	13	24	29	30	28	62	48	28
Other	0	3	1	13	3	7	2	15	5	6	5

# Women's Concerns About Children

- ▶ Women in the ten countries surveyed are concerned about the impact of tobacco advertising on children.
  - About 6 in 10 are either somewhat concerned (25%) or very concerned (36%) about children seeing advertisements for cigarettes or tobacco products.

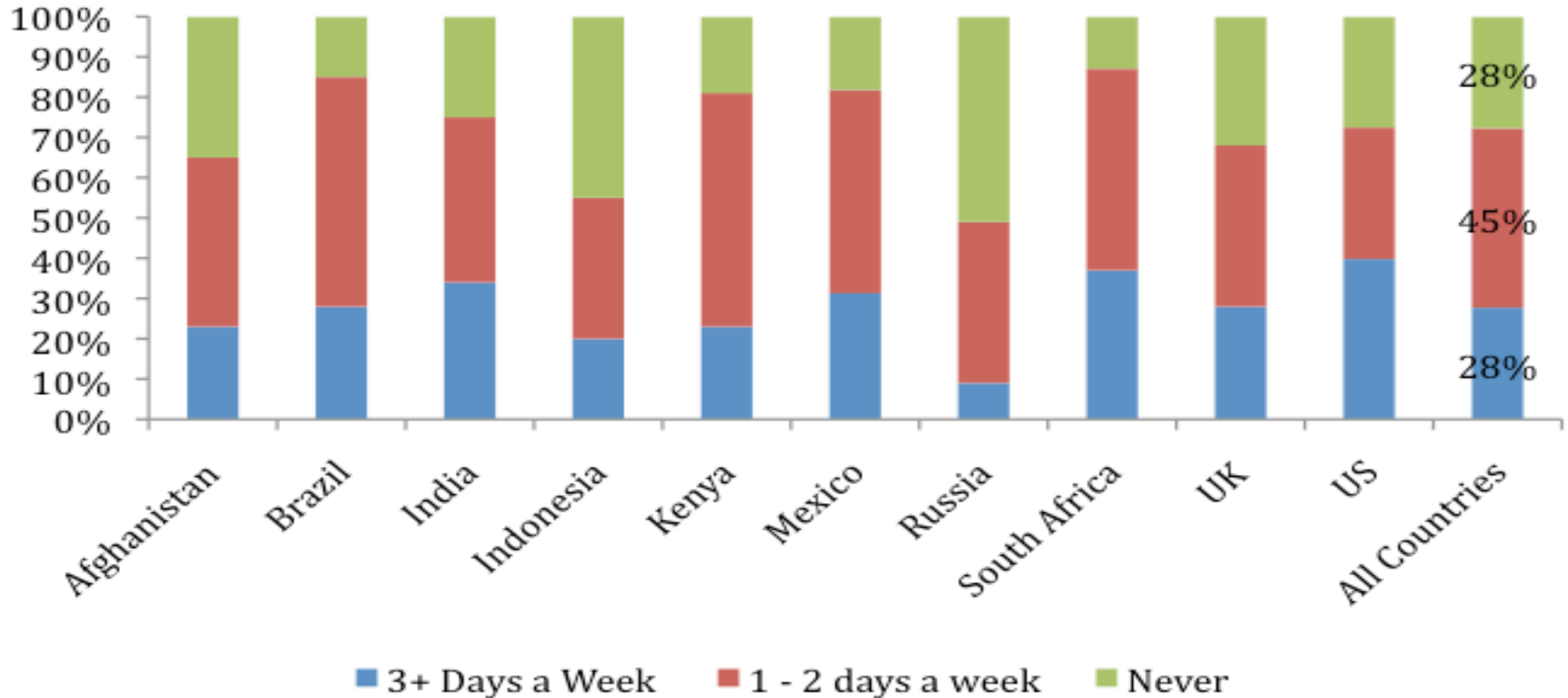
**Q11. How concerned are you about CHILDREN seeing advertisements for cigarettes or tobacco products on TV, billboards and other public places?**

	Low-income		Lower-middle		Upper-middle			High-income			
	AFG	KEN	IND	INDO	BRA	MEX	SAF	RUS	UK	US	Total
<b>N</b>	1015	1000	1000	1000	1000	1005	1000	1004	1003	1007	10034
Not at all concerned	20	7	20	13	8	14	11	12	27	30	16
Slightly concerned	29	13	31	24	20	25	15	28	34	26	25
Somewhat concerned	26	18	19	22	25	30	21	29	23	24	24
Very concerned	25	62	30	42	47	32	54	30	17	20	36
No Answer	0	0	0	0	0	0	0	0	0	0	0
Total	100	100	100	100	100	100	100	100	100	100	100

- ▶ In contrast, women are less concerned about children seeing soda advertisements on TV, billboards or other public places.
  - More than one-third (37%) of women are concerned, though most of these women are only somewhat concerned (22%) rather than very concerned (15%) about this type of advertising.

# Risk Factor Exposure – Soda Consumption

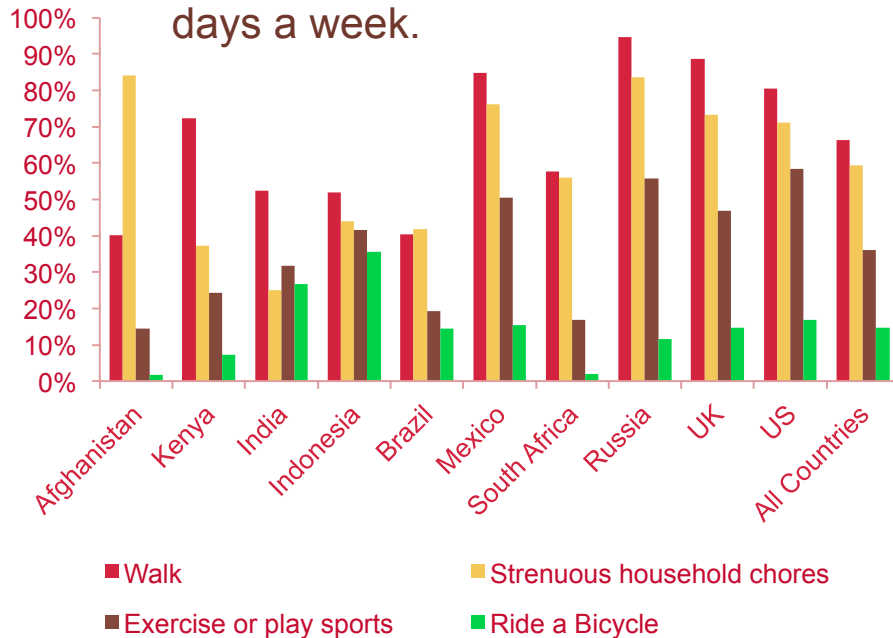
- ▶ Three-quarters drink soda or cola at least once a week.
  - 3 in 10 women consume soda every other day
  - In Brazil and South Africa 9 in 10 women drink soda once a week.





# Women and Physical Activity

Majorities of women report walking and doing strenuous household chores at least two days a week.



Q17. What is your main challenge to exercising regularly (at least 2 days a week for at least 10 minutes each day)? Select the answer that applies best to you.

	Low-income		Lower-middle		Upper-middle			High-income			Total
	AFG	KEN	IND	INDO	BRA	MEX	SAF	RUS	UK	US	
N	1015	1000	1000	1000	1000	1005	1000	1004	1003	1007	10034
Not applicable—I do exercise regularly	8	0	0	0	0	28	0	25	32	34	14
Not interested or motivated	16	31	16	11	25	10	17	17	22	24	19
Not enough time	25	47	36	38	47	43	59	37	32	27	38
No place to exercise	19	17	17	22	17	11	16	13	5	7	14
Physically unable	8	3	15	19	6	4	4	5	5	5	7
Exercising is not culturally acceptable	24	1	15	11	2	0	2	0	1	1	6
Other reason	0	1	1	1	3	3	2	4	3	3	2
No Answer	1	0	0	0	0	0	0	0	0	0	0
Total	100	100	100	100	100	100	100	100	100	100	100

- ▶ Women around the world are juggling so much in their lives – 4 in 10 say not enough time is the main challenge to getting enough physical activity.

## More on Risk Factor Exposure

- ▶ Eating out is common. 7 in 10 women say they eat food that is not prepared in their home—eg food from restaurants, street food or take-out food—at least once a week.

**Q15. In a typical week, how many TIMES do you eat food NOT prepared in your home, such as food from restaurants, street food, or take-out food?**

	Low-income		Lower-middle		Upper-middle			High-income			
	AFG	KEN	IND	INDO	BRA	MEX	SAF	RUS	UK	US	Total
<b>N</b>	1015	1000	1000	1000	1000	1005	1000	1004	1003	1007	10034
Never	70	14	23	34	42	9	33	33	24	16	30
1 - 2 times a week	25	51	53	47	42	68	58	56	66	62	53
3 - 4 times a week	4	18	19	12	7	18	6	8	8	16	12
5 or more times a week	1	17	6	8	10	5	4	4	3	7	6
Total	100	100	100	100	100	100	100	100	100	100	100

- ▶ Tobacco is still a problem - 30-40% of women in India, Indonesia, South Africa, and Russia, reported smoking cigarettes, cigars, pipes, bidis or hookah.