



McCabe Centre  
FOR LAW & CANCER



# Utilising a gender-responsive approach to accelerate action to address NCDs in the Pacific region

**Daiana Buresova, Regional Coordinator – Pacific region**  
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# Acknowledgement of Country



We acknowledge and celebrate the First Australians on whose traditional lands we meet, and pay our respect to the Elders past, present and emerging.

Cancer Council Victoria would like to acknowledge Dixon Patten Jnr – Yorta Yorta and Gunnai [www.cancervic.org.au/dixon-patten](http://www.cancervic.org.au/dixon-patten) for use of their artwork.

# About us

The McCabe Centre for Law & Cancer is the only centre of its kind in the world advancing law to prevent cancer and to protect people affected by it.

Through world-leading research and training programs, we empower individuals, organisations and governments to use law as an effective tool to prevent cancer and other non-communicable diseases and to advance equitable health care for all people.

We are a **WHO Collaborating Centre on Law and Noncommunicable Disease** and the **WHO FCTC Knowledge Hub** for legal challenges to implementation of the WHO Framework Convention on Tobacco Control.



# Our focus areas



Utilising a gender-responsive approach to accelerate action to address NCDs in the Pacific region

# Our programs

Intensive Course | Alumni Workshop | Regional Workshops

Plain Packaging Workshop | Executive Level Training



# Overview

- NCD burden in Pacific region
- Gender and NCD prevention
- Sex disaggregated data and gender analysis in designing NCD prevention
- How might gender affect exposure to NCD risk factors?
- Applying a gender lens: NCD burden in the Pacific region
- Case studies
- Next steps

# NCD burden in Pacific region

NCDs account for 70-75% of all deaths in Pacific countries (2016)

- Highest prevalence in Fiji and in Samoa (84%)

Risk of premature death for people ages 30-70 about 26% higher in Pacific countries (2016)

- Risk higher for males than female



UNICEF/Giacomo Pirozzi

Adolescents learn good eating habits at a youth centre in Port Vila, Vanuatu.

Sources:(1) WHO NCD Country Profiles Report

<https://www.who.int/nmh/publications/ncd-profiles-2018/en/>

(2) First Quadrennial 2018 Pacific Sustainable Development Report;

# NCD burden in Pacific region

- According to a Fiji daily: the *Fiji Times* (24 December 2018), Bank of South Pacific Life – a leading insurance provider in Fiji – paid out **FJ\$10.5 million** under its health insurance scheme for all medical conditions
- **FJ\$1.2 million** for cancer treatment
- **FJ\$2.94 million** for people ages 40-50 (28% of all claims)
- **FJ\$2.4 million** for people ages 31-40 (23% of all claims)



# Gender and NCD prevention



The 2030 Agenda for Sustainable Development:

- Realizing gender equality and empowerment of women and girls will make a crucial contribution to progress across **all the goals and targets** (para 20)
- Goal 5 on achieving gender equality and empowering all women and girls
- Target 5.c on adopting and strengthening sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels

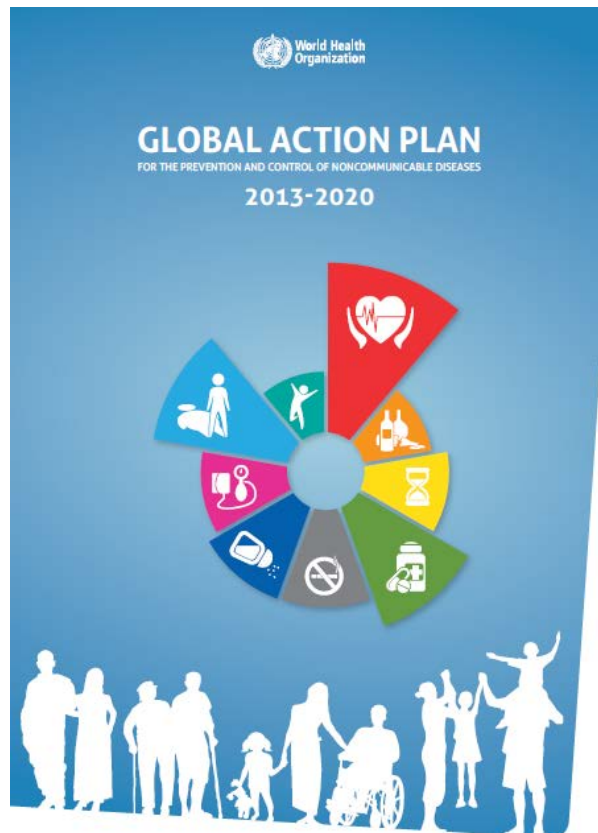


# Gender and NCD prevention

“Acknowledge that mainstreaming a **gender perspective** into the prevention and control of NCDs is crucial to understanding and addressing the health risks and needs of women and men of all ages, giving particular attention to the impact of NCDs on women in all settings” (Political Declaration of the Third UN High-level Meeting on NCDs (2018) para 14)



# Gender and NCD prevention



“Pursue and promote gender-based approaches for the prevention and control of NCDs founded on data disaggregated by sex and age in an effort to address the critical differences in the risks of morbidity and mortality from NCDs for women and men” (WHO Global Action Plan for the Prevention and Control of NCDs 2013-2020)

# Sex disaggregated data and gender analysis in designing NCD preventive measures

“Gender differences and inequalities influence exposure to risk factors, health-seeking and risk taking behaviours; access to and use of health information, and to promotive, preventive, curative, rehabilitative and palliative health services; and experiences with health care, including in terms of access to and control over resources and power relations” (WHO, World Health Statistics (2019))



# How might gender affect exposure to NCD risk factors?

Women are more likely to undertake insufficient physical activity due to financial constraint, lack of decision-making power and extra household workload

- 31.7% of women vs. 23.4% of men

Men consume more alcohol than women

- Worldwide in 2016, men consumed **10.1 Litres** of pure alcohol per person compared to **2.7 Litres** of pure alcohol per person for women

Women and men experience NCDs differently also manifest symptoms of NCDs differently which can affect diagnosis and treatment

- Historically, male patients have been more widely used as a reference in medical research

# Applying a gender lens: NCD burden in the Pacific region

- Pacific men (ages 15+) consume significantly more alcohol than Pacific women (ages 15+) -- 5.6 litres of pure alcohol for males compared to 0.9 litres of pure alcohol for females
- Women are more likely to undertake insufficient physical activity than men due to factors financial constraints, lack of decision-making power and extra household workload
- Women (ages 18+) in the Pacific region are more likely to be physically inactive than men -- 31% women vs. 19% males
- In Palau, women are more likely than men to be outside the labour force (54% women vs. 36% men)
- While no formal data is available, women are likely recognised as carrying multiple burdens of work, care giving (children, elderly and persons with disabilities or chronic health conditions) and customary responsibilities

# Applying a gender lens: NCD burden in the Pacific region

- Women ages 18+ in the Pacific region are more likely to be obese than men  
(47% of women, 38% of men).
- In Nauru, almost 2/3 of women ages 18+ were obese in 2016 and over half of men  
(63% of women, 59% of men)

# Case studies

- SPC Public Health Division assisted by Pacific Nutritionists is currently revising the Pacific food dietary guidelines. It takes into the gendered impacts of food on male and females as well as pregnant women.
- Some Pacific countries eg. New Caledonia and PNG have developed regulations which restrict the marketing of alcohol. These restrictions ensure that the industry is restricted from advertising in spaces where the youth and women dominate.
- Samoa Government has indicated intentions to introduce restrictions on the marketing of alcohol.



# Next steps

- Collection of sex disaggregated data about the implementation of an NCD regulatory measures must be strengthened.
- Gender, intersectionalities, social and economic determinants of health be considered when looking at the effectiveness of an NCD regulatory measure.

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