

# THE ROLE OF THE WORLD HEART FEDERATION IN CARDIOVASCULAR HEALTH PROMOTION AND DISEASE PREVENTION IN DEVELOPING COUNTRIES WITH A SPECIAL EMPHASIS ON SUB-SAHARAN AFRICA

The World Heart Federation (WHF) is a non-governmental organization dedicated to the prevention and control of cardiovascular diseases. The Federation is committed to helping the global population achieve a longer life, of improved quality, through prevention and control of heart disease and stroke, with a particular focus on low- and middle-income countries. The WHF comprises 167 member societies of cardiology and heart foundations from 100 countries and continental members. The WHF supports science, educates and trains, and plays an advocacy role. Africa is of particular concern to the WHF, as it is estimated that, in 1990, the death rate from non-communicable diseases was approximately one third that from communicable diseases, and that by 2020, the death rates will be roughly equal. The WHF is assisting with capacity building through the newly established African Heart Network (AHN), and the Pan-African Society of Cardiology (PASCAR). Through a formal memorandum of understanding, these organizations will work together in the areas of tobacco control and hypertension and will focus on building sustained capacity for health promotion, policy change, and effective clinical interventions. (*Ethn Dis.* 2003;13[suppl2]:S2-164-S2-166)

**Key Words:** Cardiovascular, Sub-Saharan Africa, Partnerships

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## INTRODUCTION

The World Heart Federation (WHF) is a non-governmental organization dedicated to the prevention and control of cardiovascular diseases around the world. The Federation is committed to helping the global population achieve a longer life, of improved quality, through the prevention and control of heart disease and stroke, with a particular focus on low- and middle-income countries. The WHF comprises 167 member societies of cardiology and heart foundations from 100 countries and continental members covering the regions of Asia-Pacific, Europe, Inter-America, and Africa.

Since 1996, the WHF has been a close partner of the World Health Organization's division for Non-Communicable Diseases, and, more recently, of the Heart Disease and Stroke Prevention program at the United States Centers for Disease Control and Prevention.

In order to achieve its mission, the WHF has 3 pillars of activity: to support science, to educate and train, and to advocate.

## Support Science

The WHF supports science by: 1) Facilitating and improving the exchange of cardiovascular expertise and knowledge; 2) Increasing the knowledge of prevention among primary care physicians and allied health professionals, especially in low- and middle-income countries.

## Educate and Train

The WHF facilitates the dissemination of cardiovascular health information for worldwide members, health professionals, and the global population.

The Scientific Councils run training programs in low- and middle-income countries around the globe. Fellowships and traineeships provide training opportunities at an individual level. The WHF has a special interest in working with the World Health Organization (WHO) to conduct global surveillance. *The White Book—Impending Global Pandemic of Cardiovascular Diseases* details the challenges and opportunities for the prevention and control of cardiovascular diseases in developing countries and economies in transition, and is of immense use in defining the significance of the problem.<sup>1</sup>

## Advocacy

### *World Heart Day*

Based on the knowledge that preventive measures could significantly reduce the incidence and burden of cardiovascular disease (CVD), the main cause of death in Western countries, and soon to be the same in developing countries, World Heart Day provides an overall message that preventive measures are, for the most part, inexpensive, and will reduce the worldwide incidence of death and disability due to CVD.<sup>2</sup>

### *The World Heart and Stroke Forum*

In 1999, the Executive Board of the WHF authorized the formation of the Forum for Global Cardiovascular Disease Prevention. The Forum is an alliance of 56 international professional societies, foundations, non-governmental organizations, industries, international organizations, and governments/health systems, all of which are involved in reducing the impact of the developing epidemic of cardiovascular disease, and in achieving its ultimate prevention.

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The World Heart and Stroke Forum brings together these constituencies and experts who share a common interest in seeking to prevent cardiovascular diseases through collaborative and cooperative efforts, while taking into account national, political, economic, social, epidemiological, and cultural issues.

Building capacity for population-based prevention and control of cardiovascular diseases in sub-Saharan Africa has been of concern to the WHF for many years. Over the last several years, progress has been made in establishing an African Heart Network (AHN), and increasing the capacity of the Pan-African Society of Cardiology (PASCAR). The AHN was formed in March 2001, with the financial and technical support of the WHF. The inaugural meeting brought together foundations from the countries of Ghana, Nigeria, South Africa, and Benin. The hope was that as the AHN developed a focus for its activities, other countries in Africa could be assisted in establishing heart foundations. PASCAR began in Nigeria in 1981 and was spearheaded by Egypt, Senegal, and Nigeria. The original aim was to provide an umbrella organization to offer any African country education on cardiovascular disease using the skills and talents of local African scientists and cardiovascular medicine specialists.

The WHF has initiated activities in Africa through the AFN, with its primary efforts focusing on tobacco control and hypertension. As the AFN has evolved they have created, along with PASCAR, a letter of intent defining the working relationships between the AFN and PASCAR. The AFN has defined its focus as "playing a leading role through networking, collaboration, and advocacy, in the prevention and reduction of cardiovascular disease, so that it will no longer be a major cause of premature death and disability throughout Africa." The AFN plans to be active in the fields of public health, national information campaigns, information exchange, and advocacy.

The mission of PASCAR is to "improve the quality of life of the African population by reducing the impact of cardiovascular disease." PASCAR, which represents the African interests of national societies of cardiology, is active in the fields of research, publication, training and education, data gathering, and information dissemination. The AHN and PASCAR have agreed to work toward formal collaboration, which would involve joint meetings, continuous exchange of information, and, wherever possible, joint activities in the areas of tobacco and hypertension.

## RECENT ACTIVITIES

The AHN has held 2 training workshops, with a third being held in Cape Town, March 27–28, 2003, to continue to address the issues of hypertension and tobacco, and to promote enhanced AHN/PASCAR collaboration. An executive secretary has been employed to assist with the coordination and implementation of these activities.

An African twinning project has been established, since there are 53 countries in Africa, and only 3 formal heart foundations in Nigeria, Ghana, and South Africa. The African twinning project was created as a means of building new heart foundations. The twinning project has paired Denmark with Kenya, The Netherlands with Morocco, Pakistan with Tunisia, Ireland with Egypt, and efforts are being undertaken to support Mozambique, as well.

The priority for the WHF will be to support the AHN in developing a strategic plan with sustainable actions for the next several years. In the future, cardiovascular diseases are not only going to be the number one killer in developed countries, but also in developing countries. By 2020, CVD will surpass infectious diseases as the leading cause of death in the developing world. The WHF needs to achieve the following objectives: 1) Work with, and through,

strong foundation and society partners in Africa, to mobilize action through public advocacy efforts, to continue to educate and train medical allied health personnel, and committed lay-people, and to support scientists through congresses, research/publications, and the strong cardiology networks. 2) It must also reach out to partners of other relevant international organizations, in order to work together to reduce morbidity and mortality from cardiovascular disease in Africa.<sup>1,2</sup>

In sub-Saharan Africa, it is estimated that, in 1990, the death rate from non-communicable diseases was approximately one third that from communicable diseases, and that by 2020, the rates will be roughly equal. The Global Burden of Disease study suggested that age-specific death rates from noncommunicable diseases are higher in sub-Saharan Africa than in established market economies. Even in the poorest countries, where communicable diseases predominate, noncommunicable diseases are a substantial cause of mortality and morbidity in adults, especially in urban areas. It must be remembered that sub-Saharan Africa is economically diverse, both between and within countries. In the wealthiest countries, such as Seychelles and Mauritius, noncommunicable diseases are already the predominant health problem.

Three main forces will drive the emergence of noncommunicable diseases as the major health problem in sub-Saharan Africa, as a whole, over the next 20 to 30 years. These are: 1) increasing elderly populations as infant death rates and fertility fall; 2) increasing urbanization, and the associated changes in lifestyles; and 3) the promotion of tobacco, and "Western" diets, by multinational corporations.

The WHO's World Health Report 2002 on selected major risk factors, and the global and regional burden of diseases adds to the evidence that greater focus on, and investment in, the prevention of risk factors is required.<sup>3</sup> The

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WHF believes that, in order to have a long-lasting effect on the prevention of health problems, a fundamental paradigm shift needs to occur at every level, from individuals to international organizations. It also believes that prevention itself is possible, and must be a priority. Translation of these beliefs into action requires the implementation of preventive strategies aimed at programs, policy change, and best practices. The successful result, and the experience of collaborative action, will build the interest and capacity to continue the work. The long term goal is to bring prevention into the mainstream of policy development, health services, community action, information/education, research, and surveillance. To be successful at this task, international organizations and countries must adopt and promote core values, such as health as a human right, equity, solidarity, participation, and accountability, and then collaborate to address inequities between developed and developing countries, the rich and poor within countries, and genders at all ages.<sup>4</sup>

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