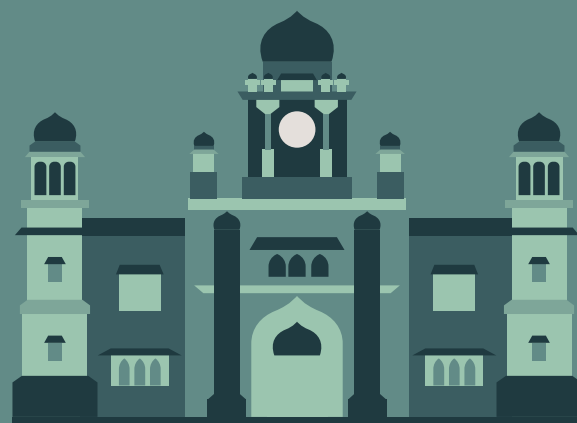


Indore



Intervention area: NCD Surveillance

City action: Creating a local version of a national survey for NCD prevalence and risk factors

Wealth and gender inequalities shape Indoreans' health: Study

TIMES NEWS NETWORK

Indore: Wealth and gender inequalities shape health outcomes for many communities in Indore, a study on non-communicable disease risk factor and environment indicates.

The study- Building Healthy Cities- was released by the project deputy director Dr Damodar Bachani on Friday. It was co-funded by Indore Smart City Development Limited and United States Agency for International Development. The study was conducted by a joint team of MGM Medical College, Government College of Nursing, and School of Social Work.

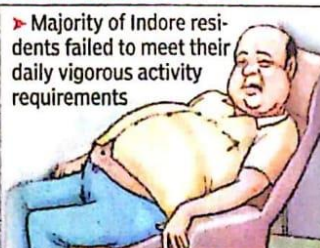
The study, which used a

NOTHING HEALTHY ABOUT IT

► One in three men used tobacco in any form. This figure is six times lower among women

► One in 10 men drank in last 30 days. Among women, the figure is less than 1%

► Nearly 90% of both men and women fell short of their daily servings of fruits and vegetables



► Majority of Indore residents failed to meet their daily vigorous activity requirements

► Approximately one-fifth of men always or often added salt or salt products to their meals

Highlights from the study: Building Healthy Cities

wealth index to sort results, found significant differences in key variable points. It was found that 20% poorest Indore residents were more likely to use tobacco pro-

ducts and add salt to their meals than the richest 20%. "Those in the poorest 20% also eat fruits and vegetables less frequently than the wealthiest," the study reve-

als.

Dr Bachani said that they conducted the survey in 30 random wards of city and reviews of 3070 adult citizens (age between 18 and 69 years) were taken into account.

"We are still working on analysing an additional, unique neighbourhood-by-neighbourhood section of the survey. It will also document environment, safety, and infrastructure within which citizens live, work, learn and play.

"This comprehensive dataset offers a useful baseline to develop better prevention efforts and increase access to health services for poor communities in Indore," he added.

Source: Times of India, Indore Edition, June 2nd 2019

To coincide with World No Tobacco day, the city of Indore in Madhya Pradesh released the results of its comprehensive NCD risk factor and environment survey on 31 May 2019. The city is now planning to leverage these data – gathered in order to support data-driven decision-making – to establish and refine city policies on NCD prevention. These policies include the effective enforcement of the Cigarettes and Other Tobacco Products Act (COTPA), promoting healthy diets and physical activity, and organizing periodic screening for common NCDs such as diabetes and hypertension in public health-care facilities.

In January 2016, Indore was chosen to be one of 100 cities in the Government of India's urban development and retrofitting programme, Smart Cities Mission.ⁱ Indore Smart City Development Limited (ISC DL) was set up to formulate and execute development projects in the city. Conscious of considering health in their planning, in March 2018 ISC DL partnered with John Snow Inc (JSI) under the USAID-funded Building Healthy Cities (BHC) project.ⁱⁱ The partnership considered how the development plans could affect the health of Indore citizens, and established a work plan for a smart, healthy, and liveable Indore.

An NCD risk factor and environment survey was one of the first outputs of the partnership, and formed part of a wider situational assessment that included a political economy analysis, a health needs assessment and data use assessment. NCDs were chosen as a focus because of their interrelationship with urbanization, and because they were deemed a good indicator for monitoring and evaluation.ⁱⁱⁱ Infrastructure development, such as refurbishing road networks for pedestrians and cyclists and improving access to medical services, was expected to have a positive impact on NCDs and their risk factors.

The WHO STEPwise approach to noncommunicable disease risk factor surveillance (STEPS) was chosen for collecting data on risk factor prevalence within the population.^{iv} STEPS is a standardized, comprehensive instrument with three components: a questionnaire to gather demographic and behavioural data, physical health measurements, and collection of urine and blood samples. A new tool was developed for the environmental scan, which included capturing exposure to advertisements and health messages, as well as products available in neighbourhood shops.

The STEPS data collection was carried out by trained investigators throughout May and June 2018, with one adult aged 18 to 69 years per 3000 households surveyed across 30 randomly selected wards. The environmental scan took place in 60 areas across 30 wards. Care was taken to ensure the sample included representation from households in informal settlements to enable accurate stratification. Analysis was supported by All India Institute of Medical Sciences.

Survey coordinators encountered several challenges during the assessment, which highlighted the importance of careful planning. Data collection during the hottest season was difficult for investigators, while surveillance during Ramadan meant accurate blood glucose measurements were not available for 120 participants.

Survey costs were low, as pre-existing resources from India's national survey were utilised and much of the data collection and analysis were carried out without charge. Emphasis was placed on building capacity during the city survey: local people from Indore School of Social Work were trained, and equipment was purchased for the city, making sustained routine surveillance affordable and feasible. Although data analysis was not carried out locally, there are plans for knowledge transfer to facilitate handling of this task by a local unit during the next survey.

Indore is working with BHC to use these data to inform a system-mapping exercise, with NCD risk factor and environment survey data assimilated alongside other assessment findings. The system map is intended to define the enabling environment, leverage opportunities, and prioritize actions and funding for a work plan in which health is considered and health-promoting interventions are included. The data collected will also be added to a public online dashboard. Making data available provides critical foundations for advocacy, public awareness, accountability and routine surveillance.

Indore's model of a strong partnership between a municipal urban planning project and health specialists is one that should be enhanced and replicated. Consideration of NCDs is a progressive approach to policy-making, and the potential benefits to future generations are huge.



Photo credit: Building Healthy Cities Project

ⁱ Smart City Indore [website]. Indore: Indore Municipal Corporation [no date] (<http://www.smartcityindore.org/>, accessed 4 September 2018).

ⁱⁱ Building Healthy Cities [website]. United States of America: John Snow, Inc. and JSI Research & Training Institute, Inc. [no date] (<https://www.jsi.com/buildinghealthycities>, accessed 4 September 2018).

ⁱⁱⁱ Goryakin Y, Rocco L, Suhrcke M. The contribution of urbanization to non-communicable diseases: Evidence from 173 countries from 1980 to 2008. *Economics and Human Biology*. Vol. 26 151–163.

^{iv} WHO STEPwise approach to noncommunicable disease risk factor surveillance (STEPS). Geneva: World Health Organization; [no date] (<http://www.who.int/ncds/surveillance/steps/riskfactor/en/>, accessed 19 September 2019).