

## Noncommunicable Chronic Diseases: the contemporary challenge in Public Health

This issue dedicated to “Noncommunicable Chronic Diseases” (NCDs) is of great importance given the current need to address these diseases, which involve two groups of events: non-communicable chronic diseases (such as cardiovascular diseases, neoplasms, chronic respiratory diseases and diabetes) and external causes (accidents and violence). NCDs represent the majority of causes of morbidity and mortality in the world and in Brazil, as well as premature deaths, disabilities, loss of quality of life and significant economic impacts.

The increase in the burden of NCDs affects people with low incomes more directly and reflects the negative effects of globalization, inequalities in access to health services, rapid urbanization, sedentary lifestyle and high-calorie diet, and marketing that stimulates alcohol and tobacco use. In the case of violence there is strong evidence highlighting inequalities associated with gender, race/color, low schooling and income, people with disabilities, children and the elderly, among others, who should be prioritized in public policies to promote equity.

In the Sustainable Development Objectives and in the 2030 agenda, several NCD indicators reinforce this agenda, such as goals of reducing mortality of NCDs and traffic deaths, targets for reduction of tobacco and alcohol abuse, elimination of violence against women and girls, access to safe, sustainable transportation systems, and expansion of public transport. These indicators reinforce intersectoral action.

Brazil has important milestones in its commitment to tackling NCDs such as the creation of the General Coordination of NCDs in 2003 in the Ministry of Health, the organization of NCD Surveillance, to monitor these diseases. Also worthy of mention is the creation of the national survey system, including household surveys every five years, such as the National Health Survey in 2013, telephone surveys, Vigitel, beginning in 2006 and already featuring eleven years of continuous collection and the National School Health Survey (PeNSE) every three years (2009, 2012, 2015). There is also Violence and Accident Surveillance (VIVA) in its two components, triannual surveys, and compulsory notification of domestic violence, in addition to articulation with the Brazilian National Mortality Database (SIM) and Hospital Information Systems (SIH). NCD surveillance is a breakthrough in Brazilian public health innovating in the support of public policies for prevention and control of NCDs.

Other key agendas in NCDs were a) approval of the National Policy for Health Promotion (PNPS) in 2006 and its revision in 2014, reiterating its commitment to equity, improving conditions and ways of living and affirming the right to life and health<sup>1</sup>; b) The 2011-2022 Plan to Tackle NCDs, which established targets for reducing risk factors and NCDs, and defined a set of actions in the field of health promotion, prevention, surveillance and care; c) Cost-effective regulatory actions and policies, such as the increase of taxes and the price of tobacco, creation of tobacco-free environments, sanitary warnings, with special emphasis on the Presidential Decree on Tobacco Free Environments in 2014; and the law prohibiting drinking and driving (“Lei Seca”) in 2008 and its more stringent terms instituted in 2012; d) The Life in Traffic Project, acting in an intersectoral way and reducing traffic deaths; e) The Healthy Eating Guide in 2014, reiterating the message of healthy eating for the improvement of quality of life.

The learning curve in relation to NCDs is to organize the surveillance of these events, to act in the reduction of inequality and iniquities, to institute a regulatory agenda that reduces vulnerabilities, and above all to act in a participatory, articulated and intersectoral way.

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### References

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