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CARDIO approach – Ownership

Highlights from recommended interventions

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Ownership

Goal

Only strong political will can ensure local authorities and decision makers own the cardiovascular (CV) population health approach, align behind a single goal, set clear targets, and co-design the CARDIO interventions, for maximum impact and long-term sustainability

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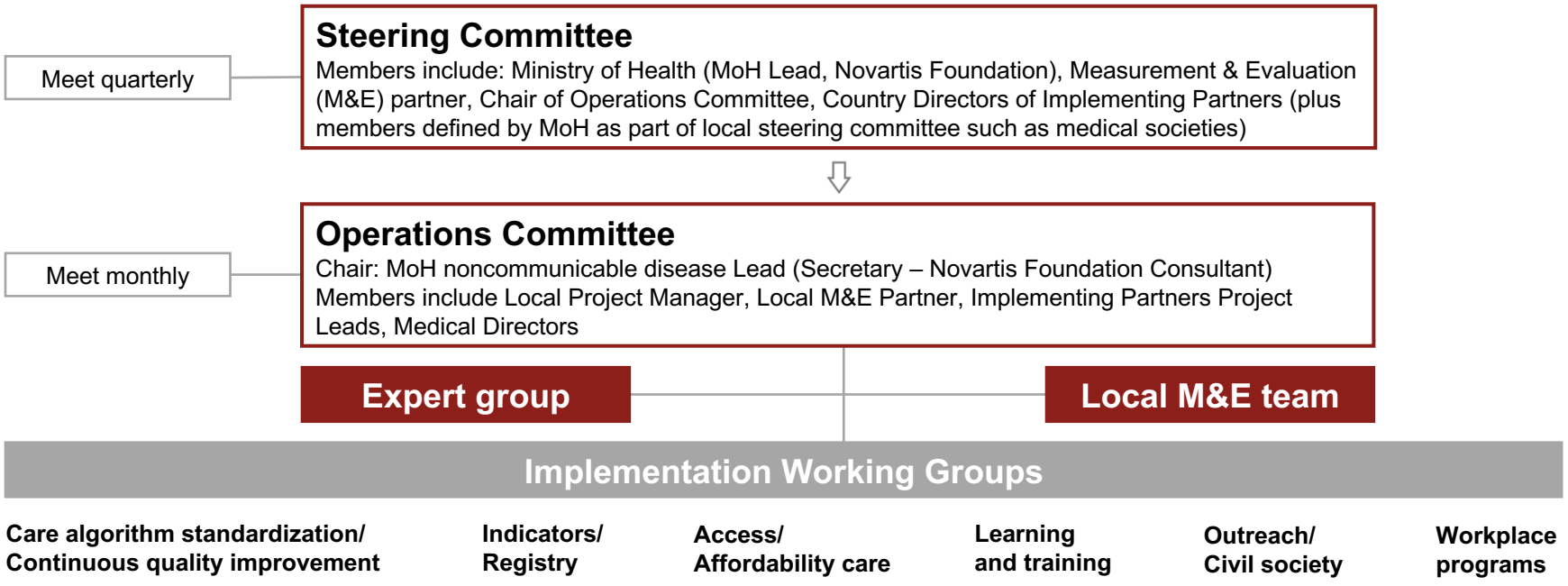
Ownership structure



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Setting targets for cities

What could your overall goal be?

- ... (number) of strokes and heart attacks to prevent?

Ambitious objectives for hypertension – an example:

- 95% of people with hypertension are aware of their condition
- 90% of people with hypertension receive adequate antihypertensive therapy
- 80% of people on drug therapy achieve blood pressure control
- Populations at higher risk have similar rates for blood pressure indicators as the general population

Lowering overall CV risk at population level requires addressing a combination of risk factors – ample evidence exists, e.g., that LDL cholesterol lowering further reduces CV risk both in people with and without hypertension*

Co-develop an approach that lowers overall CV risk in your population

*CTT Collaboration; Lancet 2010

Better Hearts Better Cities in São Paolo, Brazil

In São Paolo, Better Hearts Better Cities worked with **city authorities and local stakeholders** to co-create **30 cost-effective interventions for managing hypertension**. These included promoting early CV risk detection and healthy lifestyles, empowering patients, and improving efficiency and quality of care in primary health centers.

Download case book (in Portuguese):

Cuidando do seu coração (PDF)

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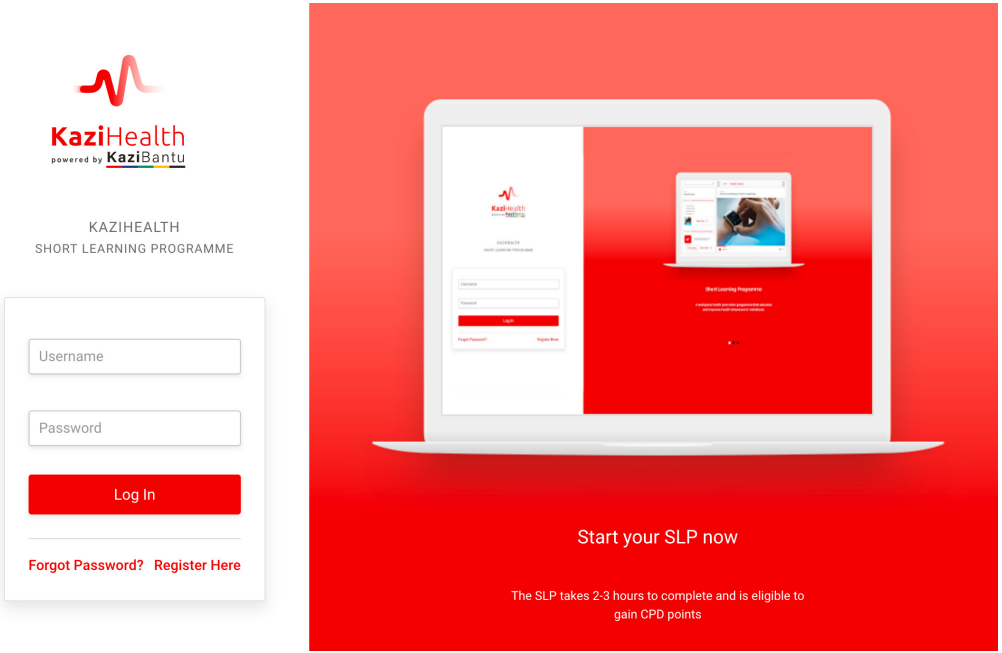
Better Hearts Better Cities in Dakar, Senegal

In Dakar, Better Hearts Better Cities worked with the **Ministry of Health and local stakeholders** to develop the **first national operational plan for cardiovascular and metabolic diseases**. Professional medical societies were actively involved in strengthening decision-making bodies and committees around hypertension and NCD management.

Comprehensive toolkit of interventions in Dakar (in French):

Initiative de santé urbaine pour la lutte contre l'hypertension artérielle

Patient empowerment and self-management for teachers



KaziHealth – an example from the school-based Kazibantu initiative, where teachers were engaged to monitor their own health and incentivized to take on active healthy lifestyles

www.kazislp.kazibantu.org

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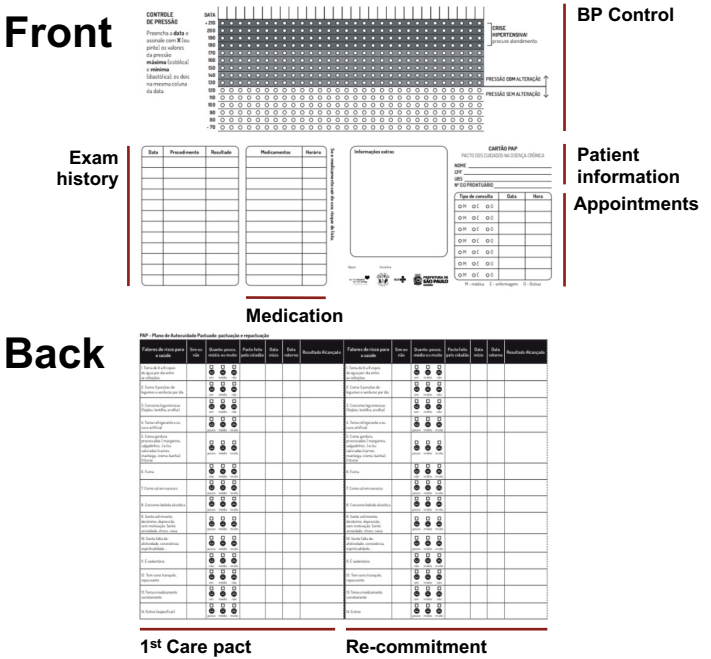
Patient Care Pact for chronic disease

The PAP Card – Patient Care Pact for Chronic Illness is a support tool for patients and health professionals to agree on a self-care plan. Together they elaborate the PAP Card and can follow:

- BP measurement history
- Doctor appointments
- Prescriptions
- Exam results

The treatment protocol requires this tool and the co-responsibility supports the individual's active role in maintaining his health and well-being.

Cartão PAP (YouTube)



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