

Latin Americans, Except for Young Males, Living Much Longer Today

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With the exception of young men, most people in Latin America and the Caribbean are living much longer today than 40 years ago. The mortality rate has dropped by at least 80 percent for children 4 years old or younger and by more than 50 percent for women between the ages of 20 and 44. For men between the ages of 15 and 19, however, the mortality rate has increased by 1 percent, largely due to deaths from road injuries and rising violence. These are some of the findings released by the World Bank Group and the Institute for Health Metrics and Evaluation (IHME) in a new report, The Global Burden of Disease: Generating Evidence, Guiding Policy. Latin America and Caribbean Regional Edition. The report also highlights the fact that the Latin America and Caribbean region (LAC) faces increasing threats from chronic disease, violence, and road traffic injuries. In the region, health loss from heart disease grew by 36 percent between 1990 and 2010, while interpersonal violence, depression and low back pain grew by 35, 40 and 57 percent, respectively. The report is based on the Global Burden of Diseases, Injuries, and Risk Factors Study 2010 (GBD 2010), a collaborative effort of researchers from 50 countries around the world led by IHME at the University of Washington in the United States and supported by the Bill & Melinda Gates Foundation. The report finds that, similar to global trends, communicable, maternal, nutritional, and newborn diseases are becoming less important in LAC as non-communicable diseases kill more people prematurely and cause increasing disability. The rapid shifts in disease burden place poor people in low- and middle-income countries at high risk of not having access to appropriate services and incurring payments for health care that push them deeper into poverty, said Timothy Evans, Director of Health, Nutrition, and Population at the World Bank Group. "The data in these new reports are critical inputs to the efforts of policymakers in countries towards universal health coverage that aim to improve the health of their people, communities, and economies. The report details preventable risk factors that account for a substantial amount of premature death and disability in the region. These include dietary risks, which include not eating enough fruit, whole grains, nuts and seeds, and eating too much salt. Improving Latin Americans diets could substantially reduce ischemic heart disease, stroke, and diabetes, as well as colon and rectal cancers. Health care providers in Latin America and the Caribbean are seeing very different problems today than they did 20 years ago, said Dr. Christopher Murray, IHME Director and one of the lead authors on the study. "Data on potentially avoidable causes of health loss, or risk factors, can help policymakers and donors prioritize prevention strategies to achieve maximum health gains. The report also highlights other critical health issues: injuries from traffic accidents and violence. Brazilian men, for instance, lost nearly 3 million years of healthy life in 2010 as a result of interpersonal violence. In Mexico, loss of healthy life caused by interpersonal violence ranked the highest in 2010, while road traffic injuries ranked third. "While the region has made great progress fighting infectious diseases and saving childrens lives, many of these same children, particularly males, die violent deaths when they reach adulthood, said Rafael Lozano, Director of Latin American and Caribbean Initiatives at IHME and a lead author on the study. "Lack of economic opportunities coupled with easy access to guns has helped make violence the number one cause of health loss in countries such as Venezuela, Honduras, and El Salvador. Among countries in the region, the leading causes of disease burden were as diverse as HIV/AIDS in Belize and Jamaica, diabetes in Dominica and Mexico, and ischemic heart disease, or coronary artery disease, in Cuba, Costa Rica, and the Dominican Republic. When comparing rates of diseases and injuries across countries and taking into account differences in population growth and ages, Costa Rica, Cuba, and Chile performed best while Guatemala, Guyana, and Haiti performed the worst. Detailed findings for Latin America and the Caribbean and each country in the region are available online in a series of country profiles and data visualization tools. Anyone can search by condition or country on the IHME website at <http://www.healthmetricsandevaluation.org/search-gbd-data>. The World Bank commissioned the first Global Burden of Disease analysis as part of its World Development Report 1993. Earlier this year, IHME presented GBD 2010 findings in meetings hosted by the World Bank. Bank officials saw how the GBD analysis could be applied to the Banks work in specific countries and began working with IHME on six regional reports, including the one on LAC. Building on the success of GBD 2010, IHME is expanding its network of researchers from around the world with expertise in specific diseases, injuries, and risk factors. Through this broader network, IHME hopes to strengthen the country-level assessments that are produced and make GBD updates more frequent. Application information is available here. In LAC, the World Bank partners with countries and organizations to tackle the main causes of burden of disease through knowledge, convening, and financing services. A regional study focusing on lessons learned from initiatives promoting healthy lifestyles and preventing chronic diseases will be published in November. That same month, together with the Pan American Health Organization, the World Bank will bring together policy makers and experts to highlight the importance of multi-sectoral efforts to promote healthy living. The World Bank Group and Health, Nutrition, and Population The World Bank Group is a vital source of financial and technical assistance to developing countries around the world, with the goals of ending extreme poverty and boosting shared prosperity. Improving health is integral to achieving these goals. The Bank Group provides financing, state-of-the-art analysis, and policy advice to help countries expand access to quality, affordable health care; protect people from falling into poverty or worsening poverty due to illness; and promote investments in all sectors that form the foundation of healthy societies. The Institute for Health Metrics and Evaluation The Institute for Health Metrics and Evaluation (IHME) is a global health research organization at the University of Washington that provides rigorous and comparable measurement of the world's most important health problems and evaluates the strategies used to address them. IHME makes this information widely available so that policymakers have the evidence they need to make informed decisions about how to allocate resources to best improve population health. 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