UN Expert Group Meeting, New York May 16, 2018

2030 UN Sustainable Developmental Goals and Families: Goal 3 - Health

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UN SDG 3: Families and Health

- SDG 3: "Ensure healthy lives and promote well-being for all at all ages"
- Target 3.4. "By 2030, reduce by one third premature mortality from noncommunicable diseases through prevention and treatment and promote mental health and well-being"
 - Family Interventions for Non-Communicable Diseases (NCDs) (Indicator 3.4.1)
 - Families Interventions for Cardiovascular Disease
 - Families Interventions for Diabetes
 - Family Interventions for Suicide (Indicator 3.4.2)



Non-Communicable Diseases (NCDs) (Indicator 3.4.1) and Suicide (Indicator 3.4.2)

NCDs - 38 million people die / year (WHO, 2015)

Cardiovascular diseases (17.5M), cancers (8.2M), respiratory (4M), diabetes (1.5M)

- Cardiovascular disease (CVD) - leading cause of death

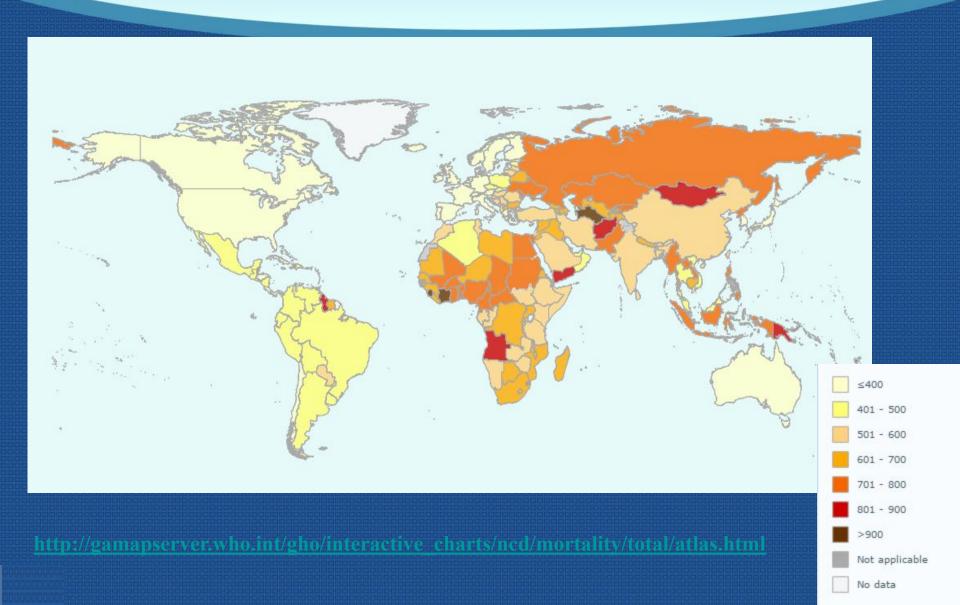
17% of health expenditure (AHA, 2011)

Diabetes - 9 % of adults (WHO, 2014)

12% of health costs (IDF, 2015)

• Suicide - 3rd leading cause of death among 10 to 19 year-olds in U.S.

Non-Communicable Diseases – Death Rate



Family Interventions - Methods

- Electronic social sciences databases (Psychlnfo, Google Scholar, JSTOR)
 - 2010 to 2017
 - Peer-reviewed journals published in English
 - Randomized Control Trials (RCTs)
 - Intervention family members (e.g., partners/spouses, parents, children)

Family Interventions

• 8 RCTs for CVDs - Canada, New Zeeland, Sweden, UK, US -targeted adults

- patients with heart failure and stroke survivors and their partners
- family members of patients with CVDs

16 RCTs for diabetes – Chile, Ireland, Taiwan, Thailand, UK, US

 targeted adults (e.g., partners) and youth (e.g., increase parenting quality)

• 13 RCTs for suicide - Australia, Netherlands, Norway, UK, US
 – targeted *youth* and their relationship with their parents

Family Interventions: Results

- Improvements in patients' and their families' knowledge about the illness
- Increased commitment for healthy life changes diet, weight management, physical exercise
- Improved family relations and support (e.g., increased parental involvement in management of illness)
- Structured, brief, family-focused intervention improve family functioning and reduce adolescent suicidality and other psychiatric symptoms
- No significant direct impact on health (e.g., no improved medication adherence)
- Most of the progress immediate after the intervention, decreases at longer term follow up assessments

Families and SDG 3: Recommendations

- Provide Interventions of sufficient intensity and duration and implement them through multiple methods
- Provide family interventions at different developmental stages along lifespan
- Create multidisciplinary teams to develop and implement family interventions, and include family scientists, such as certified family life educators (CFLE) or family therapists as part of the team since they have in depth expertise on family dynamics
- Promote healthy family functioning and reduce risk behaviors
- Develop and invest in policies and programs for health promotion and effective treatments at international, national and local levels

Thank you!