

among households and care providers. The studies fit within a conceptual framework that defines four trade-offs made by RH decision-makers: today versus tomorrow, self versus other, thinking fast versus slow, and illusion versus reality. The framework serves as a simple tool for examining why individuals might make decisions that are misaligned with their preferences.

Outcome & Evaluation: The initiative's long-term goals are to promote the use of behavioral economics by global health practitioners, recruit psychologists and economists into the field of RH, and generate evidence relevant to health policy-makers. These outcomes are evaluated through ongoing literature review.

Going Forward: While BERI currently focuses on how biases affect RH choices, the program's findings have broader applications for the field of global health. To facilitate adoption of behavioral economics in global health, we invest in outreach, dissemination, and partnership activities that cross disciplines and sectors.

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Abstract #: 2.017_NEP

Prevalence of non-communicable diseases in rural Haiti

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Background: Non-communicable diseases continue to rise as major contributors to the global burden of disease but only a few small studies have been conducted in Haiti. An up-to-date understanding of chronic disease provides the foundation for improving services and health outcomes. This study aims to determine the prevalence of hypertension, obesity, diabetes, hyperlipidemia, and chronic renal insufficiency in rural Haiti.

Methods: We conducted a survey of 458 randomly-selected households in a representative district of rural Haiti using a multi-stage cluster sampling method. Community healthcare workers administered a door-to-door survey including point of care testing for hemoglobin A1c (HbA1c) to assess for diabetes, cholesterol for dyslipidemias, creatinine for chronic kidney disease, as well as weight, height, and blood pressure measurements. Both sexes aged 25–65 years old were eligible. The primary outcomes were the prevalence of each disease.

Findings: Our response rate was 88.7%. Hypertension (n = 445), defined by two systolic blood pressure readings ≥ 140 mmHg or diastolic blood pressure readings ≥ 90 mmHg, had a prevalence of 18.2%. BMI (n = 445) showed 11.0% of rural Haitians are low weight, 30.1% are healthy weight, 55.7% overweight and 3.2 % are obese. HbA1c levels (n = 458) revealed 25.3% of the population is diabetic (HbA1c ≥ 6.5), and another 47.9% are prediabetic (HbA1c ≥ 5.7 , <6.5). Renal insufficiency (n = 457) as measured by creatinine ≥ 1.5 for men, and ≥ 1.3 for women were 2.11% and 1.84% respectively. Cholesterol (n = 445) testing revealed 87.2% had desirable total cholesterol (<200 mg/dL), 9.4% were borderline high (200–239mg/dL), and 3.4% were high (>240 mg/dL).

Interpretation: This is the largest study on non-communicable diseases done in rural Haiti. We found a lower prevalence of hypertension and higher prevalence of diabetes than has been previously reported. This study demonstrates the ability to estimate prevalence of chronic diseases through point of care testing and serves as a model for future studies in resource-limited settings. Limitations include point of care tests which are not the gold standard for disease diagnosis. Further research is required to confirm diagnosis and pilot treatment options.

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Abstract #: 2.018_NEP

Alcohol consumption and violence among young, conditioned by marital status of parents?

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Background: Recent studies show that the presence of a higher consumption of substances in children is seen in poor family dynamic environments. But no data is found regarding this issue in the State of Mexico. We aim to find whether the marital status of parents directly influences on the age children start drinking or if it promotes physical and verbal violence or not.

Methods: An observational cross-sectional study was conducted including 814 patients, inclusion criteria were male and female children of ages from 5 to 19 years old, enrolled in schools from the municipalities of Atlautla, Amecameca, Lerma and Huixquilucan, four communities in the State of Mexico, every participant guardian must have previously understood and authorized the written informed consent. Not willing to sign the informed consent or incomplete polls were exclusion criteria. We carried out a study of dependence using a chi-square between the variables studied, with a reliability of 99% and a margin of error of 0.045.

Findings: According to the descriptive statistics conducted the prevalence of excessive alcohol consumption among children in parent's marital status was: 17% Married, 25% Separated, 21% Divorced, 20 % widowed and 17% free union. On the other hand the prevalence of family violence in children: 33.5% married, 45.9 % separated, 53.3% divorced, 38.1 % widowed and 37.3 % free union. Finally, according to the dependence study, we cannot reject independence between the variables of parents' marital status and alcoholism in children with an alpha of 5 % (p-value of 0.924). Also we found no independence between the variables of parents' marital status and violence in children, with an alpha of 5 % (p-value of 0.059).

Interpretation: According to the results of our study, we found less heavy drinking and violence among children of married parents. We found that the p-value is not sufficient to establish dependencies between studied variables. As the survey was answered by participants, there might be some cases where they lied or wanted to hide the truth. In future studies we will need to increase the power of the population sample.

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