

Non-Communicable Disease DATA-TO-ACTION: Jordan 2021

NCDs Capacity Assessment & Planning (N-CAP) Tool

How to achieve higher level of functioning in NCDs data-to-action: Jordan

The Data-to-Action continuum highlights the steps taken to implement evidence based action. Data needs to be collected and analyzed, and information should be synthesized from it and used to make recommendations, which are then translated to inform decision making.



Increase uptake of recommendations leading to ACTION

WHY IS THIS IMPORTANT TO NCDS IN JORDAN?

As per the 2020 World Health Organization (WHO) Global Health Estimates report, Non-Communicable Diseases (NCDs) account for a considerable majority of deaths globally. In Jordan, a low-middle income country with a rapidly growing population that has surpassed 10 million individuals, NCDs, account for 78% of all deaths in the country.

With its health system oriented towards providing acute care more than promoting prevention and healthy lifestyles, Jordan,, has only limited experience with implementing NCDs policies, programs, and interventions effectively. This is particularly difficult since national evidence and data on NCDs to improve existing programs and policies and to inform new ones is limited, and many of the NCDs "best buys" have not been assessed in Jordan.

Reducing NCDs-related morbidity and mortality in Jordan necessitates effective multi-level evidence informing multisectoral action and policy. None of this is achievable without a strong national capacity to produce locally relevant data and evidence.

HIGHLIGHTS

- The process of data collection and use, to respond to the increasing burden of NCDs in Jordan, faces many barriers that demand layered responses.
- These challenges are compounded by a lack of clearly identified national NCDs data priorities.
- Training and capacity building can help improve data completeness, quality, and dissemination skills.

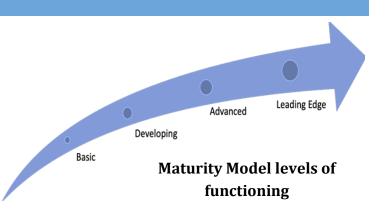
APPROACH

The lessons presented here are based on a workshop that was conducted by the Eastern Mediterranean Public Health Network (EMPHNET) in collaboration with the Royal Health Awareness Society (RHAS), under the guidance of the Jordan Ministry of Health. Bringing relevant NCDs stakeholders together, the workshop utilized the Data-to-Action Discussion Guide of the NCDs Capacity Assessment and Planning (N-CAP) Tool to assess, prioritize, and plan for next steps to inform country led efforts in NCDs data collection and use.

ABOUT N-CAP

The N-CAP Tool is used to conduct assessments of NCDs related public health functions, which leads to a plan of action that informs country-led efforts to address NCDs. It is based on the Staged Development Tool (SDT) created by the U.S. Centers for Disease Control and Prevention (CDC) and the International Association of National Public Health Institutes (IANPHI). The N-CAP Tool was developed in collaboration with CDC, IANPHI, and EMPHNET.

The tool uses a maturity model to *assess* the current level of functioning as basic, developing, advanced and leading edge, within a critical NCDs area, including capacities and gaps, *prioritize* these gaps, and *plan* for how to achieve a higher level of functioning. Discussion Guides facilitate conversations about the country's current maturity level in their efforts to address NCDs and identify areas for improvement.



PRIORITIZED CHALLENGES

National NCDs Priorities

Priorities for NCDs data and information in Jordan are not well defined and transparent through a prioritization matrix that is made visible to data collectors, researchers, and donors. There is a need to have a unified national governmental direction that informs ministries with their variable units and directorates on the NCDs data and information needs and priorities for decision making.

Jordan National Strategy for the Health Sector 2015-2019

The 2015-2019 Health strategy is recognized as a great initiative for the health sector in Jordan and was indorsed by the government. However, it does not focus on NCDs, and does not identify the national priorities for NCDs data collection or research. As no action plan followed, many of its recommendations were not feasible to implement and have become outdated. The strategy needs updating

Health Information System

There is a lack of a national widespread and integrated Health Information System (HIS), with no clear internal communication strategy or a systemized approach to NCDs data flow in-between units. Unifying NCDs data, collected across different sectors, warrants a high-level governmental directive, identifying NCDs priorities and enabling the mobilization of funds accordingly.

Focal Data Collectors

Most focal data-collectors distributed across governmental health centers lack the needed qualifications and skills (data inputting and English proficiency), and are overwhelmed, as they serve to collect data and information on both communicable diseases and NCDs. Due to the workload and limited financial reward, there is no job continuity. Additionally, the trainings offered by the MoH has not been able to keep up with rapid change of employees. Data-collectors are also not involved in the development of data collection tools and thus do not comprehend the significance of data collection. especially with regards to strengthening the health system to respond to the population health needs.

Data validation and quality assurance are yet to be established and integrated into MoH systems. As such, collected NCDs data is incomplete and of poor quality, which results in a general lack of confidence in the available evidence, and leads to its limited uptake by decision and policy makers.

Data Experts

Each ministerial unit oversees the analysis of the data that relates to it. However, even though there are 157 epidemiologists at the MoH, there is a lack of data analysis specialists and statisticians at each unit's level. Analysis of data is usually basic, serving to only provide descriptive results. The NCDs directorate publishes annual reports on its website and the Higher Health Council also publishes reports on the health sector expenditure in Jordan. However, this is not national level NCDs data, as the data from the private sector is not being collected, analyzed, or reported. Additionally, although these reports are published on the MoH website, they are not disseminated in a manner that is understandable to policy policy briefs. makers. e.g., and recommendations. future projections, workplans for next steps, and cost-benefit analysis are not usually included in these reports.



Sustainability of NCDs Initiatives

Financial resources are a big obstacle, affecting all steps of the data-to-action continuum. Even though 82% of deaths in Jordan are due to NCDs, only 17% of the MoH's budget is allocated to NCDs. One reason being that policymakers and external donors are sometimes only interested in "ribbon cutting", or in the publicity that their actions and donation receives, so most choose fast track publicity attractive actionable topics rather than NCDs.

Dependency of big projects on donor funding, limits Jordan's ability to focus on its own national NCDs priorities, and instead projects follow the funder's agenda and priorities, and are usually not sustainable once the funder leaves.

Fragmentation of Efforts

Multiple meetings and workshops on NCDs have been conducted, engaging stakeholders and partners from the various domains. These workshops served to pool together the fragmented efforts to tackle NCDs in Jordan. Several partners are collaborating on NCDs related projects, that involve data-collection, surveillance, and initiatives to build NCDs registries. However, no clear strategy was developed to inform on these collaborations or streamline these efforts.

Engaging Policy Makers

Efforts to engage policy makers are usually futile. Reasons include the low quality of data that the recommendations are based on, and the fact that sometimes the recommendations are expensive to implement. Additionally, due to the lack of experts in the field, very limited cost-benefits reports have been presented to engage policymakers.

PRIORETIZED NEXT STEPS

NCDs Health Strategy

Through a higher ministerial decree, an NCDs Committee should be formed, to develop a National NCDs Health Strategy, building on the available National Strategy for the Health Sector 2015-2019. This committee should include NCDs stakeholders and experts and should identify Jordan's NCDs data needs, including global and national NCDs targets and indicators. The strategy should include a workplan with a timeframe, and step-by-step recommendations with cost-benefit analysis to assist policy-makers in resource allocation and ensure sustainability of initiatives. The Strategy should specify the mechanism for data collection and use, the budget requirements for collecting and monitoring this data, and the roles of the different stakeholders (MoH directorates, Ministry of Higher Education, municipalities, etc.)

Health Information System

The first step to ensuring an efficient and well integrated HIS that caters to NCDs, is for a highlevel governmental directive to identify the needed data elements, measures, and targets, and to unify the case definitions of these targets and indicators between the different data sources. The system should be developed in a way that prevents data inputters from going to the next page or submitting without all fields being completed and filled. Centers and focal datacollectors, submitting complete and good quality data should be recognized, and rewarded for their efforts to encourage others to improve.



NCDs Data Through Academic Research

Universities and academic institutes have the financial resources and expertise to conduct advanced data collection, analysis, and research. The Institutional Development and Quality Control (IDQC) unit at the MoH conducted a workshop in early 2021, in collaboration with the WHO, to specify health research priorities. This workshop was conducted with universities, NGOs, and public and private sectors to identify 30 health research priorities that are specific for Jordan MoH. A similar workshop should be done with NCDs relevant stakeholders to identify national NCDs research needs. The outcome of this workshop should be disseminated to the Ministry of Higher Education's, with the aim of focusing academic health research of master's and PhD students on Jordan's NCDs priorities.

Developing a Research Unit Within the MoH

Creating a dedicated research unit that employs senior researchers, able to lead advanced NCDs research projects will ensure research focuses on national needs. Within this unit, employees should have a specified role and Standard Operating Procedures, with protected time to develop research proposals, attract funders, and conduct NCDs priority data-collection, research and information translation. The unit should also work on building advanced research capacities, especially of the available epidemiologists and develop a protocol for researcher reimbursement. Expert employees above the age of 60 years should be retained in the capacity of consultants and mentors to future generations of employees.

Data Quality Monitoring

Data validation can be done transparently within the different directorates, by designating a person within each unit to do this. However, there is a need for a protocol for data validation , and this should be developed by the IDQC Directorate. Data quality control measures should be developed and implemented, and actions should be taken towards individuals who do not comply with these measures.

Eastern Mediterranean Public Health Network (EMPHNET)



WRAP UP

There is a need for a high-level governmental directive institutionalizing a system that ensures specific priorities and targets are set for every ministry and directorate.

Directors at all levels of the ministry need to feel empowered to take decisions. They need to build a strong reliable evidence base that can back up their decisions.

Directors can create processes for data collection, analysis, and dissemination, and develop quality criteria and standards of operations within their own directorates. This brief highlights key findings from The Data-to-Action NCDs-Capacity Assessment and Planning (N-CAP) workshop in Jordan, that was conducted in September 2021.

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The Eastern Mediterranean Public Health Network - EM-PHNET

The Eastern Mediterranean Public Health Network is a regional network that focuses on strengthening Public Health Systems in the Eastern Mediterranean Region (EMR). EMPHNET works in partnership with Ministries of Health (MOH), non-government organizations, international agencies, private sector, and other public health institutions in the region and globally to promote public health and applied epidemiology.

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