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Feature

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Feature

EMPHNET Expands Contributions to Prevention and Control of Non-communicable Diseases in the Eastern Mediterranean Region



Iraq: Health promotion activity under the project United Against Tobacco and COVID

While the prevalence of non-communicable diseases (NCDs) in the Eastern Mediterranean Region (EMR) is alarmingly high, a substantial proportion of the burden is caused by modifiable risk factors. Focusing on this opportunity for change, EMPHNET is putting its strategy into action and is working with partners across countries and sectors to strengthen the prevention and control of NCDs in the EMR. Alongside ministries of health, universities, research centers, and international organizations, EMPHNET enhances national health information systems to regularly track and monitor NCDs trends and their related risk factors and advocates for national policy changes towards creating an enabling environment that promotes and reinforces healthy choices. EMPHNET also supports efforts to build the capacity of national health care systems to improve quality of care for NCDs in clinical settings and implement community-based intervention for prevention, care, and management of NCDs.

A Focus on Communities

Since its establishment, EMPHNET worked with the Ministry of Health (MOH) in Jordan on increasing community involvement, improving health awareness, supporting physical activity and good nutrition, and maximizing counseling opportunities. A most recent project was implemented as a **community-based intervention** whereby large-scale awareness sessions were conducted in schools to create an enabling environment for **salt intake reduction** within host and refugee communities.

To further enhance NCDs management among vulnerable communities, EMPHNET implemented an evidence-based intervention to standardize hypertension management in primary health care levels **by adapting, implementing, and evaluating the HEARTS technical package**. The implementation of the HEARTS technical package successfully achieved better control of the blood pressure (BP) of enrolled patients and the proportion of patients with uncontrolled BP decreased from 71.5% to 29.1%. In collaboration with the MOH, EMPHNET is also working to develop a roadmap

for modernizing primary healthcare services. An enhanced, comprehensive **Family Health Teams (FHT) approach** will be introduced. The FHT is an innovative approach that creates a partnership between physicians at the PHC, family medicine physicians, nurses, community health workers, and other health service providers to coordinate the highest possible quality of care for patients.

In the past two years, EMPHNET also maximized collaborations in several countries across the EMR to combat NCDs. EMPHNET united with the CDC, and Vital Strategies, in a regional campaign **Against Tobacco and COVID** to raise awareness of the harms of tobacco use, especially during the COVID-19 pandemic. Together with ministries of health, NGOs and academic institutes in Egypt, Iraq, Jordan, and Palestine, EMPHNET developed and disseminated country-tailored and culturally appropriate mass media risk messages to educate about the harms of tobacco and promote smoking cessation, especially to reduce morbidity and mortality from the virus.

Partnering for Health

EMPHENT is a founding member of **the Jordan NCD Alliance (JNCDA)**, which organizes and implements public health NCD events and activities across Jordan. Through the JNCDA, EMPHNET has been involved in an all-encompassing NCD stakeholder mapping which served as a basis to assess the engagement of all key organizations in Jordan, as well as extensively evaluate which NCD areas are a priority to tackle, including the lack of proper NCD surveillance systems and prevention/ management guidelines and protocols and the inadequate use of collected data on NCDs. EMPHNET’s partnership with the Ministries of Health has also enabled EMPHNET to steer the MOH NCD Risk Factors Surveys, encouraged the use of data among public health planners and policymakers and in planning and implementing scalable NCD projects, and collaborated with partners in estimating projections for the prevalence of major NCDs and their related risk.

Additionally, EMPHENT has supported several activities to prevent the occurrence of NCDs and increase awareness about some of their risk factors in several countries. Indeed, and in collaboration with the Jordan MOH and the Royal Health Awareness Society, EMPHNET is heavily involved in expanding the implementation of the **Jordan Integrated NCD Humanitarian Response project**, a health promotion and capacity building initiative brought about through the Partners for Health initiative, which is a partnership among the School Health Program, Health Community Clinics, Community Health Committees, ministries of health and education, Caritas, Institute of Family Health and Community Based organizations (CBOs).

In the same vein, EMPHNET is supporting Iraq MOH to understand the current situation concerning the **salt intake reduction-related legislation, policies, and existing system** and provide a priority action frame to enforce law implementation.

EMPHNET worked with the CDC and IANPHI in customizing Staged Development Tool to develop the **NCD- Capacity Assessment and Planning (N-CAP) Process**. The N-CAP supports ministries of health and other stakeholders to assess, prioritize, and plan how to improve national capacity to address NCDs and population health. This tool was piloted in Jordan for NCDs Data-to-Action, and again in Iraq, with a special focus on NCDs Coalition Strengthening. This year, it will be implemented in Pakistan and Sudan with a focus on NCDs priority topics that are specific to the context of each of the countries.

More recently, a **large-scale, school-based cross-sectional mental health survey** was launched in Jordan by EMPHNET in collaboration with Japan International Cooperation Agency (JICA), the MOH, the Ministry of Education, and the United Nations Relief and Works Agency for Palestine Refugees (UNRWA). The target population in this survey includes Jordanian children and adolescents aged between 8 and 18 years as well as of other nationalities and groups including Syrian and Palestinian refugees from public, private, and UNRWA schools in all governorates of Jordan, in addition to schools in Zaatari camp. Data from this research is expected to generate estimates on the burden of mental disorders and psychosocial problems and describe mental health seeking behaviors and barriers among the target population.



Jordan: Field activity from the **Integrated NCD-Humanitarian Response Project**

A Selection from Our Research on NCDs

1. Blood Pressure of Jordanian Workers Chronically Exposed to Noise in Industrial Plants
2. Colorectal Cancer in Jordan: Survival Rate and Its Related Factors
3. Epidemiology of Colorectal Cancer in Iraq, 2002-2014
4. Knowledge, attitude, and behaviors of health professionals towards smoking cessation in primary healthcare settings
5. Mental Disorders Among Elderly People in Baghdad, Iraq, 2017
6. Pattern of road traffic injuries in Yemen: a hospital-based study
7. Projecting the prevalence of major non-communicable disease/ risk factors for the Jordanian youth population for the years 2007-2050
8. Risk Factors for End-Stage Renal Failure Among Patients on Hemodialysis in Aljomhory Hospital, Sa’adah Governorate, Yemen: Hospital-Based Case-Control Study
9. Risk Factors of Breast Cancer in Hadramout Valley and Desert, Yemen
10. Survival Rate of Gastric Cancer Patients in Jordan: Secondary Data Analysis
11. The capacity of primary health care centers in Jordan to manage hypertension: areas for improvement
12. Adaptation, implementation, and evaluation of the HEARTS technical package in primary health care settings in Jordan to improve the management of hypertension
13. Trends in the Incidence of Cervical Cancer in Jordan, 2000-2013

An Expansion for NCDs

EMPHNET is using its expanding experience to inform relevant interventions at a regional level. Accordingly, an **operational guide “Responding to the Challenges of NCDs in the EMR”** was developed to present a framework for action, the different approaches, and implementation strategies that EMPHNET uses to support countries in their response to NCDs burden. This guide ensures an effective integrated action on

risk factors and their underlying determinants and strong health systems for improved prevention and control of NCDs in the EMR. EMPHNET also established **the Eastern Mediterranean NCDs Research and Prevention Center (NCDs-RC)** to achieve higher levels of NCDs prevention and control in the EMR through multi-sectorial, multi-disciplinary collaboration in the areas of research, training, and informed decision-making.



Iraq: The N-CAP Process SWOT Workshop

The Experts

Professor Nitish Chandra Debnath

In Bangladesh, Prof. Debnath is an expert of around forty years in veterinary education and research. In his home country and beyond, he has been a prominent advocate for One Health.



Prof. Debnath received his early undergraduate and postgraduate education in Bangladesh where he earned a DVM and an MSc in veterinary medicine from the Bangladesh Agricultural University. He later had further postgraduate studies in the United Kingdom where he received an MSc from the University of Edinburgh's Center for Tropical Veterinary Medicine and a PhD from the University of Surrey. He also completed a postdoctoral fellowship at the National Institute of Entomology and Sericulture of Japan.

Early in his career, Prof. Debnath worked as a veterinary surgeon at Bangladesh's Department of Livestock services, acquiring practical experience, which was useful for his subsequent research work of over ten years, at the country's Livestock Research Institute.

Prof. Debnath has been a leading figure of veterinary education in his home country. He was the founding Vice Chancellor of the only specialized veterinary university in Bangladesh, Chattogram Veterinary and Animal Sciences University. There, he also taught as a professor for over twenty years. Prof. Debnath presided the Bangladesh Veterinary Council, a self-regulatory agency under the Ministry of Fisheries and Livestock responsible for regulating veterinary education and practice as well as animal welfare in the country. He was also the President of the Agriculturists (Krishibid) Institution of Bangladesh (KIB). With this impressive record in veterinary academia, he became a core member of the Council on International Veterinary Medical Education and contributed to the country's collaborations with renowned entities from abroad, including Arid Agricultural University of Rawalpindi of Pakistan, Massey University, Royal Veterinary College of London, Tamil Nadu Veterinary and Animal Sciences University in India,

Tufts Cummings School of Veterinary Medicine, University of Liverpool, and Veterinary University of Copenhagen.

For One Health, Prof. Debnath put his advocacy into action. He was one of the founders of One Health Bangladesh, a civil society platform that promotes One Health practices in Bangladesh and beyond. There, contributed to One Health Bangladesh's work with government partners to establish One Health Secretariat in the Institute of Epidemiology, Disease Control and Research to coordinate government's One Health activities. He also played an important role cofounding the One Health Alliance of South Asia. Prof. Debnath worked for One Health beyond national and regional borders as a member of executive boards of WHO's One Health High Level Expert Panel (OHHLEP), Germany's Health for Nature (H4N), and the UKs' One Health Poultry Hub.

Prof. Debnath is called upon by international entities as an expert. He is an alternate member of the Governing Board of the World Bank Pandemic Fund and an Associate Fellow of Chatham House Centre for Global Health Security.

Apart from having over 70 published papers in peer-reviewed journals, Prof. Debnath is a member of the editorial board of renowned journals including of the Journal of Agricultural Sciences and Bangladesh Journal of Veterinary and Animal Sciences.

With EMPHNET, Prof. Debnath has been instrumental to the implementation of several successful collaborations in Bangladesh, most notably the launch of the country's Field Epidemiology Training Program for Veterinarians and the initiation of One Health collaborations to combat zoonotic diseases in the country.

In Focus

EMPHNET Joins Regional and National Efforts to Strengthen Disease Surveillance in the EMR



Yemen: Field project for trainees of the Public Health Empowerment Program-Surveillance for Polio Officers (PHEP-SPO)

Surveillance empowers public health practitioners and decision-makers to lead and manage their programs more effectively and efficiently. The broad scope of surveillance covers different public health focus areas from early warning systems for rapid response (in case of communicable disease outbreaks) to planned response efforts (in case of non-communicable diseases).

*Given the utmost importance of surveillance in public health, EMPHNET has been closely involved with countries' ministries of health in the Eastern Mediterranean and beyond through various types of surveillance-related activities: assessing population's health status, interpreting mortalities and morbidities and keeping track of diseases with the aim to **enhance evidence-based policy formation and informed strategic prioritization, evaluating the effectiveness of interventions, improving quality of care, and strengthening early warning systems.***



Jordan: Training in preparation for the implementation of the harmonized Reproductive Health Registry (hRHR)

Introducing Surveillance Systems

Harmonized Reproductive Health Registry in Jordan

A global initiative introduced by the WHO to improve maternal and child health (MCH) data across the world, the harmonized Reproductive Health Registry (*hRHR*) (2018-2021) was implemented in the Mafrq, the second largest governorate in Jordan, as an intervention to improve the availability and accessibility of MCH data to assure a responsive health care system when it comes to mothers and their children. As an electronic registry, the *hRHR* serves as an effective tool for bridging the information gap between the different levels of care. The *hRHR* was implemented by the Ministry of Health (MOH) with funding from the International Development Research Center- Canada and with support from EMPHNET.

Jordan's Maternal Mortality Surveillance Response System

Under the leadership of the Jordan MOH, EMPHNET implemented Jordan's Maternal Mortality Surveillance Response (JMMSR) system (2016-2020), a national surveillance system designed to eliminate preventable maternal mortalities by obtaining and using information on each maternal death to guide public health actions. The JMMSR system provides data for decision makers to develop national and subnational responses for reducing maternal morbidity and mortality and improving access to quality care that women receive during pregnancy, delivery, and the postpartum period.

Congenital Rubella Syndrome Surveillance in Afghanistan and Egypt

With support from EMPHNET, Afghanistan and Egypt established a Congenital Rubella Syndrome (CRS) surveillance system that obtains standardized data on CRS incidence and creates a basis for documentation and verification of rubella virus elimination, detection, and isolation of CRS-affected infants. Availability of the system insures early provision of appropriate care of the disease and hence rapid mitigation of it.

Laboratory-based Surveillance of Brucellosis in Jordan

Using the One Health Approach, EMPHNET joined the Ministries of Health and Agriculture in their efforts to strengthen brucellosis surveillance, diagnosis, and control in East Amman, Karak, and Mafrq. Laboratory-based surveillance was introduced using appropriate confirmatory testing. Introduction of laboratory-based surveillance resulted in determining the circulating brucella species. Epidemiological analysis also estimated and characterized the true incidence in humans and animals and subsequently identified risk factors that drive transmission.

Real-Time Neonatal and Stillbirth Mortality Audits Among Vulnerable Communities in Jordan

Between 2016 and 2021, EMPHNET has been conducting neonatal death audits in Azraq and Zaatari camps and stillbirth audits. These audits aim to decrease neonatal mortality and stillbirths among Syrian refugees by conducting periodic review meetings with stakeholders about the findings and recommendations and investigating possible causes of death and factors affecting the coverage and quality of care. This project contributed to improving the quality of neonatal care in Zaatari and Azraq camps and provided the evidence to prioritize the actions needed to save the lives of neonates.

Surveillance of Meningitis and Septicemia to be Launched in Egypt and Iraq

In the MENA region, EMPHNET will be working with the Meningitis and Septicemia Mapping Network (Men Map) to expand understanding of vaccine preventable Invasive Bacterial Disease (IBD); in particular, those caused by *Neisseria meningitidis*, *Streptococcus pneumoniae*, and *Haemophilus influenzae* type b (Hib); and bridge the gaps between research, clinical practice, and public health policy priorities. Through coordinated leadership of researchers from public and private sectors, Men Map will undertake broad collaboration to build knowledge infrastructure, research and communication capacity in the network participating countries.

Engaging Communities

Community-based Surveillance of VPDs

EMPHNET supported ministries of health to establish and strengthen and/or strengthen community-based surveillance in Iraq, Sudan, and Yemen. In Yemen, EMPHNET trained volunteers from all over the country, under the Polio Village Volunteers Project which expanded community engagement toward strengthening surveillance and improving RI. In Sudan, EMPHNET supported the Federal Ministry of Health in conducting supportive supervision and job coaching visits to enhance reporting on VPDs from community informants among special populations. In Iraq, EMPHNET helped engage the local community in VPDs surveillance as trained community members are engaged to report suspected cases, based on the simple case definition, to a designated focal person.

Workforce Development

In 2017, EMPHNET developed the **Public Health Empowerment Program- Surveillance for Polio Officers (PHEP-SPO)** to equip polio officers, surveillance officers, immunization officers, and nutrition officers at central, provincial and district levels, with the skills needed to sustain Polio eradication activities and strengthen routine immunization. PHEP-SPO has been previously implemented in Sudan and Yemen and will soon be launched in Lebanon for the first time. In Iraq and Morocco, EMPHNET supported national efforts in this regard and contributed to the improvement of AFP surveillance indicators by implementing extensive training for surveillance officers.

Research for Surveillance

Hospital-based Surveillance of Meningitis in Iraq

In the first wide-scale surveillance of meningococcal meningitis in the country, EMPHNET collaborated with the MOH in a prospective hospital-based surveillance study aiming at estimating the etiology and incidence of vaccine preventable bacterial meningitis and identifying the most commonly circulating serogroups of N. meningitidis among the Iraqi population. Identified and selected sites were from multiple geographical regions in the country, including mid, northern, and southern provinces. The selected sites included 18 major hospitals. The study showed that bacterial meningitis is endemic and is impacting a significant number of individuals in the country. Based on its findings, the study recommended continuous surveillance of N. meningitidis through improved detection methods. Given the incidence of meningococcal meningitis, the study also recommended improved vaccination programs.

Mortality Surveillance System in Pakistan

EMPHNET and Centers for Disease Control and Prevention (CDC) Pakistan are exploring the efficacy of mortality surveillance and civil registration systems in the country in estimating deaths during COVID-19 at district, provincial, and national levels. They conducted a retrospective study to estimate overall excess deaths and their causes during the pandemic in particular regions of Pakistan. Based on this study, a report was developed detailing opportunities for improvement that can be utilized to eventually bring about efficient interventions that can help improve the overall quality of life and quality of healthcare services for both the mother and child.



Iraq: Field visit to oversee the progress of study on hospital-based surveillance of meningitis

Evaluation of COVID-19 Surveillance in Humanitarian Settings in Iraq

Working with Iraq’s MOH, EMPHNET conducted an evaluation of COVID-19 surveillance in IDPs camps in Kurdistan Region Government. The evaluation results were shared publicly with the central MOH, the MOH in Kurdistan’s region, different members of the health cluster which represented the WHO country office, and different representations of local and international humanitarian NGOs.

Surveillance Reviews

EMPHNET has been actively involved in external and internal reviews of Acute Flaccid Paralysis (AFP) surveillance in reviews. In Morocco, EMPHNET worked with the MOH in conducting an internal review and is currently engaged in as similar effort with Iraq’s MOH. In collaboration with the World Health Organization, EMPHNET worked with partners conducted an external review of AFP surveillance in Iraq as well as Sudan.

Surveillance for Enhanced Emergency Response

Real-Time Surveillance of Infectious Diseases during Mass Gatherings in Iraq

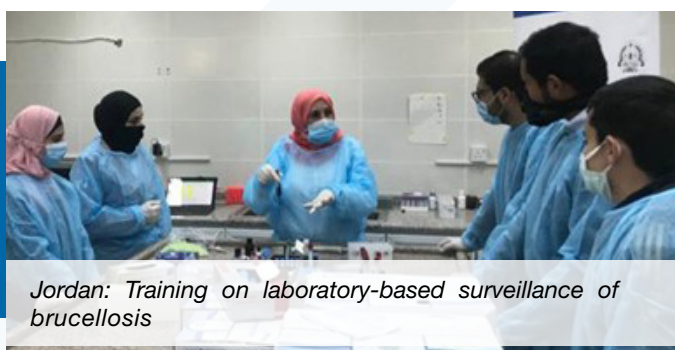
For the Arba’een mass gathering event, the MOH expanded a real-time surveillance system to enhance preparedness and rapid response capabilities by which evidence-based decision making is enabled to protect the health of communities taking part in the gathering. Implemented with support from EMPHNET, this was an enhanced and effective real-time syndromic surveillance system powered by mobile technology and linked to a server where real-time data from all governorates was aggregated. The system was piloted in 2016 and has been implemented during the Arba’een ever since.

Event-Based Surveillance Iraq, Lebanon, Libya, Morocco, and Sudan

With the coordinated efforts of partners, EMPHNET is providing support to Iraq, Lebanon, Libya, Morocco, and Sudan to strengthen infrastructure of the event-based surveillance system (EBS), which is an essential component of Early Warning Alert and Response (EWAR), as per the International Health Regulations (IHR) - 2005. The support focuses on COVID-19 and Influenza-like Illnesses and Severe Acute Respiratory Illnesses (SARI) surveillance and reporting structures. EMPHNET is working closely with the countries’ Ministries of Health to strengthen infrastructure through the identification of EBS implementation sites, development of signals, guiding documents and tools, training materials, and M&E frameworks. EMPHNET ensures the sustainability and integration of EBS into existing surveillance systems.

Web-based Surveillance at Sub-district Level in Bangladesh

The Institute of Epidemiology, Disease Control and Research (IEDCR) is Bangladesh’s mandated government agency for surveillance and outbreak investigation. The IEDCR has an excellent platform for Web-Based Diseases Surveillance System (WBDSS) at the sub-district (Upazilla) level throughout the country. In collaboration with the CDC, EMPHNET is providing logistical and human resources support for IEDCR to enhance their WBDSS. Technical support is in data management, technology support, along with staff training.



Jordan: Training on laboratory-based surveillance of brucellosis



Iraq: data collection for real-time surveillance during the Arab'een mass gathering



Project Updates

Afghanistan Conducts EPI Supportive Supervision Missions in Priority Provinces

With support from EMPHNET and to strengthen routine immunization service delivery at the sub-national level, the Ministry of Public Health organized two supportive supervision missions in Logar and Wardak provinces during September 2022. These sessions focused on the use of different methods for strengthening service delivery such as observation, on-site training, and taking immediate action, reporting, and providing feedback.



Iraq Builds Capacities of Immunization Workforce

In collaboration with Iraq's MOH, EMPHNET conducted two TOT workshops for Expanded Program on Immunization (EPI) managers and Adverse Events following Immunization (AEFI) surveillance technical officers on vaccine safety and in Iraq. The workshops took place in September 2022. The TOTs' participants were over 70 from all provinces of Iraq including the Kurdistan region. These participants are expected to train over 2000 vaccinators and AEFI focal points at eth district and health centers level by January 2023.



Egypt Conducts Outreach Activities to Boost Immunization Program Performance

To support Egypt's Ministry of Health and Population in increasing vaccination coverage, EMPHNET started conducting integrated outreach services to populations in hard-to-reach areas in six frontier governorates: Aswan, Matrouh, New Valley, North Sinai, Red Sea, and South Sinai. These services include vaccinations as well as health promotion activities especially for hard-to-reach communities living in informal settlements and IDP camps. Over a period of 8 months, these outreach activities will be implemented in 38 districts in these governorates.



Morocco Invests in Event-Based Surveillance in Response to Emerging Respiratory Diseases

EMPHNET, has been working with the MOH on strengthening Event-based surveillance in Morocco. This collaboration is a response to the need, underlined because of the pandemic, for a strong integrated respiratory disease surveillance system. In November 2022 in Rabat, and as a part of collaboration among the MOH, EMPHNET, the USCDC, and the WHO, a TOT for surveillance offers from Rabat, Tangier, and Casablanca was conducted on internationally accepted EBS guidelines.



Large-scale Mental Health Survey Targets Children and Adolescents in Jordan

A large-scale, school-based cross-sectional mental health survey was launched in Jordan by EMPHNET in collaboration with Japan International Cooperation Agency (JICA), the MOH, the Ministry of Education, and the United Nations Relief and Works Agency for Palestine Refugees (UNRWA). The target population in this survey includes Jordanian children and adolescents aged between 8 and 18 years as well as of other nationalities and groups including Syrian and Palestinian refugees from public, private, and UNRWA schools in all governorates of Jordan, in addition to schools in Zaatari camp.



EMPHNET Publishes Paper on Lessons Learned for Health System Resilience in the Eastern Mediterranean

EMPHNET wrote a viewpoint paper “[Health System Resilience in the Eastern Mediterranean Region: Perspective on the Recent Lessons Learned](#)” that was recently published in Interactive Journal of Medical Research. The paper synthesizes discussions of a panel of public health experts from the Field Epidemiology Training Programs (FETPs), Centers for Disease Control and Prevention in Atlanta, the World Health Organization, EMPHNET, universities, and research institutions at regional and global levels. The paper discusses challenges faced by health systems and lessons learned in times of new public health threats to move toward more resilient health systems, overcome current barriers, and explore new opportunities to enhance Health System Resilience (HSR).

ANNOUNCEMENT



The Eighth EMPHNET Regional Conference will be held between **October 22 and 25, 2023**, in Amman, Jordan under “**Advancing Public Health Preparedness and Response: Challenges, Opportunities, and Ways Forward.**” Visit the [EMPHNET website](#) for information on important dates.

Iraq Disseminates Mass Gathering Policy Briefs to Stakeholders Focusing on ‘Lessons Learned’ from the Arba’een Mass Gathering

Since 2014, EMPHNET has been working with the MOH in Iraq to enhance its capacity in public health surveillance and response efforts during the Arba’een MG. To build on its experience gained and share lessons learned from such collaboration, EMPHNET and the US Department of State’s International Security and Nonproliferation, Office of Cooperative Threat Reduction ISN/CTR Iraq Program, supported the development of three Policy Briefs focusing on mass gathering areas related to chemical and biological threats and the adoption of threat mitigation best practices during the Arba’een MG. The developed policy briefs were officially shared with mid to senior-level professionals from the MOH and other key stakeholders who are directly responsible for the coordination and implementation of supporting mass gathering activities in the country.



Jordan and Morocco Enhance Management and Control of Biological Toxins

As part of its regional-scale collaborations for biothreats reduction, EMPHNET is working with the ministries of health in Jordan and Morocco, and the Jordanian Armed Forces (JAF) to build the capacity of laboratory technicians in biological toxins handling and detection. This effort in biotoxin management is among the first of its kind in the region. A training workshop was conducted between October 24-26, 2022, to raise the awareness of laboratory technicians and concerned professionals of handling, detection, and disruption of low efforts toxins (Ricin, Abrin, and Botulinum).



Project Spotlight CDC and EMPHNET Support Ministries of Health to Improve National Capacity to Address Noncommunicable Diseases in the Eastern Mediterranean

Noncommunicable diseases (NCDs), such as heart disease, diabetes, cancer, and chronic respiratory disease, are responsible for 7 out of 10 deaths worldwide, with 77% occurring in low- and middle-income countries. In 2015, world leaders committed to meeting the United Nations’ Sustainable Development Goal (SDG) target 3.4 to reduce premature mortality from NCDs by one-third by 2030. To date, only 14 countries are on track to meet this target and many countries will not without immediate action. , New approaches and tools are needed to help all countries lead their efforts in addressing the high burden of NCDs.

The Office of Global NCDs (OGNCDs), in collaboration with the International Association of National Public Health Institutes (IANPHI) and Global Health Development | Eastern Mediterranean Public Health Network (GHD | EMPHNET), developed the NCD Capacity Assessment and Planning (N-CAP) Process.

The N-CAP Process supports ministries of health and other key government and nongovernmental stakeholders to assess, prioritize, and plan how to improve national capacity to address NCDs and population health.

The N-CAP Process consists of three sequential activities:

- Stakeholder mapping to identify NCD technical and policy stakeholders who may be invited to participate in subsequent N-CAP activities
- A Strengths, Weaknesses, Opportunities, and Threats (SWOT) Workshop to understand the landscape of addressing NCDs in the country and identify critical NCD areas that can be assessed during the N-CAP Workshop
- An N-CAP Workshop that uses a maturity model to assess the country’s current level of progress in critical NCD areas and prioritizes next steps to better address and respond to NCDs.

In 2021, CDC and IANPHI trained GHD|EMPHNET and the Royal Health Awareness Society (RHAS), a community partner in Jordan, on facilitation of the N-CAP Process. Together, GHD|EMPHNET and RHAS conducted the N-CAP activities with the Jordan MOH, World Health Organization, and civil society organizations. The N-CAP Workshop was held in September 2021 and focused on the “data-to-action continuum” of how the country collects, analyzes/synthesizes NCD data, then uses it to inform programs and policy making. Results of the N-CAP Workshop were useful in the development of a policy brief published by GHD|EMPHNET in December 2021 about the need for an NCD National Strategy that addresses data priorities, including a health information system for NCD data collection.

Based on lessons learned in the Jordan pilot, the N-CAP Process was modified to prioritize engagement with ministries of health from the beginning of the activities. Materials expanded to include Standard Operating Procedures (SOPs) and additional Discussion Guides for the N-CAP Workshop that align with critical NCD areas. In 2022, GHD|EMPHNET identified Iraq to pilot the revised N-CAP Process because their MOH expressed interest and motivation to address NCDs in the country. GHD|EMPHNET supported the training, coordination of consultants who facilitated activities in Iraq, and provided technical assistance in collaboration with CDC and IANPHI throughout the pilot. The N-CAP Workshop was held in October 2022 and focused on strengthening



an existing coalition that promotes healthy diet and physical activity.

Success of the pilots in Jordan and Iraq garnered interest from other countries in the Eastern Mediterranean Region. Trained facilitators and recorders are critical for implementation of the N-CAP Process. To increase access to and use of the N-CAP Process materials, a modified version of N-CAP trainings for facilitators and recorders will be available as self-guided, on-demand eLearning in 2023. The new format will incorporate lessons learned and best practices from live trainings held virtually in Jordan and Iraq. The eLearning materials will be available to countries, regional public health networks, and national public health institutes that wish to use the N-CAP Process. eLearning increases the accessibility of the N-CAP Process so it can be used across the globe, enabling regions and countries to lead their own assessment, and planning efforts.

“CDC is excited to provide a tool to facilitate country-driven planning to effectively address barriers to addressing NCDs, the leading cause of death worldwide and an emerging global health threat. Efforts are underway to offer on-demand, web-based training on the N-CAP process.”

– Dr. Patricia Richter, Chief of the Office of Global Noncommunicable Diseases in the Division of Global Health Protection

With the engagement of multisectoral stakeholders, the N-CAP Process advances NCD prevention and control efforts through collaboration to achieve more sustainable progress, a step forward in the fight to beat NCDs.

With Partners



EMPHNET's Executive Director Dr. Mohannad Al Nsour speaking at the 69th Session of the WHO Regional Committee for the Eastern Mediterranean



At EMPHNET's headquarters in Amman with the President of the International Pediatric Association Dr. Naveen Thacker visiting as a member of Sabin Institute's Advocates for Immunization

EMPHNET's Executive Director Dr. Mohannad Al Nsour with WHO's Director General Tedros Adhanom Ghebreyesus at WHO's headquarters in Geneva, Switzerland where Dr. Al Nsour participated in the second meeting of the **Review Committee on the IHR Amendments**





EMPHNET’s participation in the 31’st Intercountry Meeting of National Managers of Expanded Programs on Immunization

EMPHNET’s Executive Director Dr. Mohannad Al Nsour co-chairing the 32nd GOARN steering committee meeting



EMPHNET team facilitating a virtual session on Global Prioritization Exercise (GPE) for representatives of research and humanitarian aid entities across six geographic regions: **Central and West Africa; Central Asia and South Asia; Latin America and the Caribbean; Oceania, Eastern and South-Eastern Asia; Southern and East Africa; and Western Asia and North Africa**

GHD|EMPHNET: Working Together for Better Health

The Eastern Mediterranean Public Health Network (EMPHNET) is a regional network that focuses on strengthening public health systems in the Eastern Mediterranean Region (EMR) and beyond. EMPHNET works in partnership with ministries of health, non-government organizations, international agencies, private sector, and relevant institutions from the region and the globe to promote public health and applied epidemiology. To advance the work of EMPHNET, Global Health Development (GHD) was initiated to build coordination mechanisms with partners and collaborators. Together, GHD|EMPHNET is dedicated to serving the region by supporting efforts to promote public health policies, strategic planning, sustainable financing, resource mobilization, public health programs, and other related areas.

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