Project: INTEGRATION OF NON-COMMUNICABLE DISEASES INTO PRIMARY HEALTH CARE: A SNAPSHOT FROM EASTERN MEDITERRANEAN REGION
Case Studies from Iran, Jordan, Morocco, Oman, and Pakistan

Department: Community Health Sciences

Project Sponsors: WHO-EMRO

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Project Aim:

Study Objectives:

1. To conduct a regional situational analysis assessing the existing practices among selected EMR member states with regards to the integration of NCD in primary health care, addressing the progress, challenges and best practices.

2. To develop pragmatic, contextualized and actionable policy recommendations in health system strengthening to allow better management and integration of NCDs at PHC level across the Eastern Mediterranean Region.

Methods:

- Five Member States were selected with WHO-EMRO support, drawing upon high income (Oman), middle income (Iran, Jordan, Morocco) and middle-low income states (Pakistan).

- Diabetes, Hypertension, Asthma, and Cervical and Breast cancer were taken as „tracer” conditions to examine NCD integration into frontline services. Tobacco Control as a risk factor for most disease was also included in terms of provision of facility level services. A triangulated approach was taken combining desk review, key informant interviews and health facility visits to provide required information.

- We looked at the breadth of NCD services being covered i.e. whether all four tracer conditions of Hypertension, Diabetes, Breast & Cervical Cancer and COPD & Asthma are being covered. We also explored depth of services offered for each of these tracer conditions in terms of diagnostics, management and drugs being offered and the ensuing challenges

Expected Outcomes:
Policy and Governance
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Expansion of NCDs Services
Larger Policy Level Multi-Sectoral Control of NCDs
Cost-Efficiency Measures
Targeted Funding
Engaging and Mobilizing Larger Stakeholders
Developing Coalitions of Academia, Civil Society and Government Experts

Organization of Services
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Cost-Effective Best Buys for the Four NCD Tracers
Developing Local Context-Specific Best Buys
Increasing Production and Institutionalization of Family Physicians
Quality Assurance
Provision of Regular Trainings
Gate-Keeping and Cross-Referral back to the Frontline PHC Facilities
NCDs Essential Surveys
Public Private Partnerships
Reform Options
Advanced Programme and Financial Planning for NCDs

Community Action
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Strengthening Coordination and Common Planning
Widening the Scope of Community-Led Programmes