

Contract # 202238075

Barriers and Potential Solutions to Implementing Multisectoral Actions on NCD Prevention and Control within UNRWA's Health System

United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA)

SECTION A. GENERAL INFORMATION

- PI name: Yassir Turki
- Reporting Period: June to August 2019 (Q2)
- Objectives of the study:
 - o General:

To assess the barriers against and potential solutions concerning the implementation of multisectoral preventive actions for non-communicable diseases (NCDs) from the points of view of professionals working in different sectors including health and non-health staff from inside and outside UNRWA
 - o Specific:
 1. To explore the current status of NCDs preventive actions at different sectors inside and outside UNRWA
 2. To identify barriers facing the implementation of a multisectoral NCDs prevention and control actions from the participants' perspectives
 3. To reach to a common understanding among the sectors concerned in order to develop efficient solutions for strong multisectoral cooperation in line with UNRWA's scope of action

SECTION B. TECHNICAL REPORT:

INTRODUCTION:

Non-communicable diseases (NCDs) are one of the worldwide burdens that affect countries in terms of health, and socioeconomic status. NCDs contribute to 70% of deaths worldwide (WHO, 2017), and it is believed that the number of death caused by NCDs will be increased from 38 million cases in the year of 2012 to 52 million by the year 2030 (WHO, 2014).

Suffering from the impact of mortality and morbidity of NCDs is more in low and middle income countries, where 48% of deaths before age of 70 are due to NCDs (WHO, 2014). Moreover, health expenditure of NCDs in low and middle countries estimated as US\$ 7 trillion from year 2011 to 2025 (WHO, 2014).

Despite the severity and chronicity of NCDs, most of them are as a result of unhealthy

lifestyle behaviors including: physical inactivity, unhealthy diet, smoking, and alcohol abuse; which are well known modifiable risk factors that can reduce the incidence of newly diagnosed NCD patients and reduce the cost of long term treatment (Matheson et. all, 2013).

The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) started in 1950 to assist and protect Palestine refugees in the near east, and to enable them achieving their full potential in human development. For 70 years, UNRWA Health Programme continues to provide comprehensive preventive and curative primary health care (PHC) services to Palestine refugees, currently through 143 health centers in its fields of operation including Jordan, Lebanon, Syria, West Bank and Gaza strip, as well as supporting the patients' access secondary and tertiary health care services (UNRWA, 2017).

Palestine refugees are also suffering from non-communicable diseases (NCD) which accounts for 70 to 80% of their mortality in which UNRWA health program provide preventive and curative services for more than 267,000 Palestine refugees having Diabetes mellitus or/and hypertension that cost the agency 450,881\$ in 2017 (UNRWA, 2017).

In conclusion of above mentioned morbidity and mortality of NCD worldwide, it is agreed to reduce the burden of NCD by 2030 as an important target of the Sustainable Development Goals (SDG). Therefore , WHO recognized in its " Global Action Plan 2013 – 2020 " that effective non- communicable disease prevention and control require coordinated multi-stakeholder engagement for health at multiple managerial levels across sectors such as health, communication, education, , finance, food, , housing, justice and security, etc. (WHO, 2015).

In 2014, the UN high-level meeting (UNHLM) adopted operational multisectoral action plan (MSAP) as one of four commitments based on the global action plan (WHO, 2018). Though this adoption by WHO to implement MSAP, there is inefficient implementation among countries caused by certain barriers such as limited availability of relevant resources for non-health sectors, lack of proper communication and coordination between health and non-health sectors , unclear roles and responsibilities between different sectors, and weak social capital (Tangcharoensathien, 2017).

In order to prepare and then to implement and MSAP for NCDs prevention and control by UNRWA Health Programme to protect the health of Palestine refugees, it is important to do a baseline assessment comparing the current situation of multisectoral collaboration and the potential strengthening of that collaboration with the recommended WHO action plan framework.

METHODOLOGY:

Study design:

An observational cross sectional study will be conducted to assess the perception, by staff from different sectors inside and outside UNRWA, of the barriers and potential solutions to deal with the challenges against the implementation of multisectoral NCDs preventive actions.

Study population:

This study targeting all staff working at the selected programs in UNRWA including; Headquarter in Amman (high level managers of different programmes including health, education, infrastructure and camp improvement and relief & social services), Jordan Field Office (senior managers of different programmes including health, education, infrastructure and camp improvement and relief & social services), the four Area Offices in Jordan (middle managers of different programmes including health, education, infrastructure and camp improvement and relief & social services), staff at UNRWA health centres (medical doctors, nurses, pharmacists and lab technicians), staff at UNRWA schools (head teachers and teachers), Women Programme Centres (including managers and social workers), Youth Centres, in addition to community members. Staff from non-UNRWA's sectors will also be included.

Sample size:

- Total number of persons to complete the questionnaire (from UNRWA and outside UNRWA): 194
- Total number of Focus Groups/ Sessions (Eight for UNRWA staff and one from UNRWA staff and outside UNRWA participants): 9 groups including a total of 117 participants

Sampling method:

First, the target population will be stratified into UNRWA and non UNRWA sectors, within which there will be further stratification; where UNRWA sectors will be stratified into health, education, relief and social services, and infrastructure and camp improvement, while non-UNRWA sectors will be stratified into agencies working in Jordan, and those working outside Jordan, and then from each strata the participants will be selected randomly to ensure the representativeness of the sample.

Data collection:

Two validated tools will be used:

1. First tool: A structured self-administered questionnaire will be distributed to the targeted sample, the first draft of the questionnaire includes 4 main parts:
 - Part 1: General information
 - Part 2: Knowledge about Multisectoral approach for prevention and control of NCD
 - Part 3 : barriers against Multisectoral action plan implementation
 - Part 4 : Suggested solutions to overcome the existing barriers
2. Second tool: A focus group guideline will be used in this study. First part will address the awareness about the MSAP among the key individuals, and then the discussion will focus on the barriers affecting the risk factors prevention through multiple sectors. This will be followed by solutions suggested each of the participating key individuals

Ethical considerations:

All research proposals submitted for the EMRPPH grant must adhere to ethical conduct of research on human subjects. This commitment will be ensured by the WHO/EMRO Selection Committee. The PIs are required to obtain clearance from an official Ethical Review Committee / Institutional Review Board *before* submitting the proposal, which is a *condition* for consideration for funding. Litigation involving human research must be accompanied by: (a) copy of ethical clearance certification and (b) the informed consent documents (in English and local language).

Activity implementation:

Time period	Activities
June 2019	Stakeholders' analysis based on the sectors to be engaged
June 2019	Preparation of a list for staff from stakeholders/sectors who will be involved in the study
July 2019	Tools validation by international and local experts
August 2019	Translation of the questionnaire to Arabic and back-translation to English
August 2019	Preparations/ communications for piloting of the questionnaire are ongoing

Preliminary Results:

1. Lists of participants to be involved in the study are finalized
2. The two tools were validated based on the revision and feedback made individually by eight experts
3. The questionnaire Arabic version is ready for use

References:

1. Getting to 2018: Preparing for the third UN High-level Meeting on NCDs, WHO, 2018. Accessed on 15/05/2018 from: <http://www.who.int/nmh/events/2015/getting-to-2018/en/>
2. Matheson GO, *et. al.* Prevention and management of non-communicable disease: the IOC consensus statement, Lausanne 2013. *Sports Medicine*, 1;43 (11):1075-88, Nov. 2013.
3. Rose S, Spinks N, Canhoto AI. Management research: Applying the principles. *Routledge*, 2014 Jul 25.
4. Tangcharoensathien V, Srisookwatana O, Pinprateep P, Posayanonda T, Patcharanarumol, W. Multisectoral actions for health: challenges and opportunities in complex policy environments. *Int. J. Health Policy and Management* ;6(7):359, Jul. 2017.
5. UNRWA Health Department Report, 2017. Accessed on 24/05/2018 from: <https://www.unrwa.org/resources/reports/health-department-annual-report-2017>

6. 2013-2020 Global action plan for the prevention and control of noncommunicable diseases, World Health Organization, 2013.