

## FACT SHEET

# Strengthen Public Health Surveillance for the Prevention and Control of Priority Diseases

Communicable diseases remain the leading cause of illness, death and disability globally and in Iraq. Even though well-known efficacious responses are available for the control and prevention of these diseases, the capacity for timely detection, confirmation and response actions needs reliable public health systems. The Ministry of Health (MOH) is coordinating with PHCPI to strengthen Iraq's priority disease surveillance system.

### Surveillance Strategy

The development of a National Surveillance Strategy for Priority Communicable Diseases by the MOH in coordination with PHCPI will be the roadmap for MOH surveillance support efforts for the next 5-10 years. The strategy is comprised of 8 sections; the first encompassing the general aspect of the strategy including an introduction to communicable disease surveillance, the structure of the system, objectives, milestones and monitoring and evaluation. The first section also includes the general outline of the response system while the other 7 sections encompass the specific strategy for each of the priority diseases (Polio, Measles, Cholera, Tuberculosis, Corona virus (and SARI), VHF, and Hepatitis A and C). Each section includes standard case definitions, case detection, confirmation/investigation, reporting, data analysis response and feedback with milestones and M&E for each plan.

This strategy will allow for a more prompt response to public health threats, including communicable diseases, and early detection and control of epidemics to limit the devastating health consequences these diseases can have.

### Epi Info

Improving the reporting system for communicable diseases will have a major impact on providing timely, accurate and credible information for the decision makers to establish a proper response in cases of imminent epidemics for International Health Regulations (IHR)-Notifiable Diseases. A timely and accurate response will limit the spread, facilitate the selection of the most appropriate action and modify immunization plans.

PHCPI is working with the MOH/ Kurdistan (KMOH) on two parallel pathways to reach this target; the first is to provide

training at the district level for two surveillance unit staff from 102 districts to use the already established Epi Info surveillance program for IHR-Notifiable disease reporting.

Additionally, PHCPI is helping the MOH upgrade the software used for reporting at the Communicable Disease Control Center (CDCC). PHCPI is supporting the CDCCs effort to use Epi Info 7 as all sectors of the CDCC (other than surveillance) completely rely on a paper-based system for surveillance reporting.

PHCPI trained 261 MOH staff across Iraq (with the exception of Ninawa, Salah Addin, and Anbar) on Epi Info, improving the capacity of surveillance unit staff. Additionally, PHCPI conducted a training course to train two members from each sector within the CDCC on Epi Info 7. Fifteen doctors and technicians participated in the training which covered form creation, data entry, classic and dashboard analysis.

Epi Info is not currently available in Arabic therefore, as many data entry users will not necessarily be proficient in English and will be unable to fully understand and use the program, PHCPI is translating Epi Info into Arabic. About 80% of the program has been translated to date with the remaining in progress. Translation of Epi Info into Arabic will not only benefit Iraq but all the Arab countries in the region by incorporating the user's native language into the program.



*MOH Staff working on Epi Info at PHCPI Training*

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