



BRAC SCHOOL OF
JAMES P GRANT PUBLIC HEALTH



Report of the Short Course on Health Economics and NCD policies Short Course on Health Economics and Non-communicable Diseases (NCD) Policies

(Jointly developed the Centre for NCD and Nutrition and the Centre for Professional Skills Development of the BRAC James P Grant School of Public Health)

Supported by:

Global Health Research Unit on Diabetes and Cardiovascular Diseases in South Asia

Funded by:

National Institute for Health and Care Research (NIHR)

BRAC James P Grant School of Public Health, BRAC University
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Dhaka-1213, Bangladesh

1.1 BACKGROUND

Global Health Research Unit on Diabetes and Cardiovascular Diseases in South Asia has conducted a training course on health economics and non-communicable disease policies, jointly developed by the Centre for NCD and Nutrition and the Centre for Professional Skill Development of the BRAC James P Grant School of Public Health. Policymakers, program managers, researchers, and postgraduate students successfully joined the 3-day course. In this course, the facilitators discussed the key concepts of health economics, NCD policies implementation of NCD policies, and approaches to develop and implement policies to prevent and control non-communicable diseases in lower- and middle-income countries. After completing this course, the participants were expected to be able to apply the knowledge and skills to develop and analyze NCD policies critically through a health economics lens and implement NCD policies. The 3-day training was free of cost as the funding the run this course came from the National Institute for Health and Care Research.

Objectives:

- To develop an understanding of the key concepts of health economics relevant to NCD prevention, and control of chronic diseases
- To develop an understanding of the key concepts of policy analysis
- To learn about the global and regional NCD prevention and control policies
- To develop an understanding on the formulation, analysis and implementation of NCD prevention and control policies

Course dates:

From 27 February 2023 and 1 March 2023 (3 days)

Course venue:

8th Floor, BRAC James P Grant School of Public Health

Course features:

- Interactive in-person and online classes
- Expert facilitators
- Certificate of completion
- Emphasis on practicum

1.2 Course outline: Training Agenda

Day 1		
Time	Activity	Facilitators
08:00-08:30	Registration	
08:30 -09:00	Inauguration, introduction, and ice breaking, training objectives, and ground rules	Malay K Mridha Zahidul Quayyum Ataur Rahman
09:00-09:30	Pre-test	
09:30-10:30	From evidence to policy and the know-do gap	Malay K Mridha
10:30-10:45	Healthy Break	
10:45-12:00	Overview of selected NCDs and risk factors in South Asia and life course approach for NCD prevention and control	Malay K Mridha
12:00-13:00	The policy process: steps of policy development and implementation	Zahidul Quayyum
13:00 -14:00	Lunch & prayer break	
14:00 -15:15	Policy evaluation: principles and framework	Zahidul Quayyum
15:15- 15:30	Healthy Break	
15:30- 16:45	Health economics concept relevant to policy development and evaluation	Zahidul Quayyum
16:45-17:00	Facilitators' meeting	All facilitators

Day 2		
Time	Activity	Facilitators
08:30 -09:00	Recapitulation from Day-1	
09:00-10:45	Global and national action plans for the prevention and control of NCDs	Malay K Mridha
10:45-11:00	Healthy Break	
11:00-13:00	Global strategies and guidelines for the prevention and control of NCDs	Malay K Mridha
13:00 -14:00	Lunch & prayer break	
14:00 -15:30	Best-buys for the prevention and control of non-communicable diseases	Malay K Mridha
15:30- 15:45	Healthy Break	
15:45- 16:45	Program frameworks for prevention and control of NCD	Malay K Mridha
16:45-17:00	Facilitators' meeting	All facilitators

Day 3		
Time	Activity	Facilitators
08:30 -09:00	Recapitulation from Day 2	
09:00 -10:15	Practical on assessment of public health problems in the context of NCD and prioritization of public health problems for policy formulation	Malay K Mridha Zahidul Quayyum Ataur Rahman
10.15- 10.30	Healthy Break	
10.30- 11.45	Practical on evaluation of existing NCD policies	Malay K Mridha Zahidul Quayyum Ataur Rahman
11.45- 13.00	Practical on NCD policy development and implementation	Malay K Mridha Zahidul Quayyum Ataur Rahman
13:00 - 14:00	Lunch & prayer break	
14:00- 15:30	Group presentation	All Participants
15:30 -15:45	Healthy Break	
15:45 -16:15	Post-test	All Participants
16:15 -16:45	Closing and certificate distribution	All Participants and facilitators
16:45-17:00	Facilitators' meeting	All facilitators

1.3 Pre and Post-test questionnaire:

Total time: 20 minutes

Total score: 30

Please mark true or false for the following statements.

1. Non-communicable diseases (NCDs) are diseases of affluence
2. Urbanization and globalization are fueling NCDs
3. NCDs has no impact of the gross domestic products of a country
4. High risk approach for the prevention of NCDs is a better than population-based approach
5. Communicable diseases are still the main causes of deaths worldwide
6. NCDs primarily affect older people
7. The World Health Organization is promoting multi-sectoral approaches for NCD prevention and control
8. NCD prevention is complicated and expensive
9. Lower income countries should focus on controlling infectious diseases before taking on NCD prevention and control activities
10. Disability-adjusted life years (DALY) is a measure of diseases burden
11. Quality-adjusted life years (QALY) combines measures of mortality and morbidity

12. In terms of NCDs, within country inequity is not a major concern for the policy-makers
13. Air pollution is one of the risk factors included in the 5X5 models for NCD prevention and control
14. NCD best buys are effective interventions that need less than or equal to 100 international dollars to avert one DALY in lower and middle income countries
15. Cost-benefit analysis can be done for evaluation of policy implementation
16. Policy can be evaluated for content, process, outcome and impact
17. A policy intervention is categorized as beneficial when benefit to cost ratio is less than 1
18. Costs should be compared based on net-present value
19. During cost analysis, opportunity cost is not considered
20. The center for disease control (CDC) policy process involves five different steps
21. During problem prioritization for policy formulation both economic and social cost of the problem should be considered
22. All health policies are aimed at saving human lives and livelihoods
23. Prevention of multiple risk factors can have a synergistic effect on the reduction of new NCD cases
24. Health policies can only target only modifiable risk factors
25. Policies are primarily evidence-informed not evidence-based
26. Multi-sectoral action is one of the overarching principles of the global action plan for NCD
27. Life course approach has the potential to improve NCD prevention and control
28. In the global monitoring framework for NCD, there are nine global NCD targets for each country of the world
29. The WHO technical package of salt reduction is known as MPOWER
30. The WHO technical package of tobacco reduction is known as SHAKE

1.4 Participants' list

Serial	Participant name	Designation	Organization
1	Dr. K. M. Halimur Reza	Director, Rural Health	Gonoshasthaya Kendra
2	Hossain Mohammed Omar Khayum	Research Associate	BRAC University
3	Masroor Salauddin	Research Assistant	ARK Foundation
4	Mithila Faruque	Assistant Professor	Bangladesh University of Health Science
5	Mohima Benojir Hoque	Lecturer	ASA University Bangladesh
6	Mohammad Rashedul Islam	Principal Research Officer	Bangladesh College of Physicians and Surgeons
7	Palash Chandra Banik	Assistant Professor	Bangladesh University of Health Science
8	Sanjida Sultana	Lecturer	BRAC University
9	Md. Siddikur Rahman	Lecturer	Begum Rokeya University, Rangpur
10	Monaemul Islam Sizear	Technical Advisor-Policy Analytics	Open Development

Serial	Participant name	Designation	Organization
11	Tahzir Faiaz Chowdhury	Research Assistant	ARK Foundation
12	Tanima Islam	Scientific Officer	Institute of Epidemiology Disease Control and Research
13	Thilak Wanasinghe	PhD Student	University of Kelaniya, Sri Lanka
14	Thilina Anuradha Samarathunga	Research Assistant	University of Colombo, Sri Lanka
15	Zarin Zafrin Munnee	Senior Research Associate	BRAC JPGSPH
16	Mst. Mostary Zannath	Oral and Dental Surgeon	Armed Forces Medical Institute
17	Shahanaz Chowdhury	Associate Professor	Bangladesh University of Health Science
18	Dr. Md. Rezaul Karim	National Coordinator	UNICEF
19	M. L. Dilakshi Lekamge	PhD Student	University of Kelaniya, Sri Lanka
20	Nasrin Akter Lina	UHFPO, DGHS	Community Based Health Care, Government of Bangladesh
21	N. M. Rabiul Awal Chowdhury	Associate Professor	Comilla University
22	Mamata Bhattarai	Lecturer	Universal College of Medical Sciences
23	M. H. T. K. Chandrasiri	PhD Student	University of Kelaniya, Sri Lanka
24	Warisha Mariam	MPH Student	BRAC JPGSPH
25	Prof Dr Md Anower Hussain	Dean	Bangladesh University of Health Science
26	Bhavana Sharma	Clinical Research Coordinator	Max Super Speciality Hospital, Saket, India
27	Fahmida Akter	Senior Research Fellow	Brac JPGSPH
28	Dr. Md. Jahangir Alam Jewel	Medical Officer	BCSIR
29	Umme Salma Anee	Research Assistant	ARK Foundation
30	Shemankkary Thulanchanan	PhD Student	University of Kelaniya, Sri Lanka

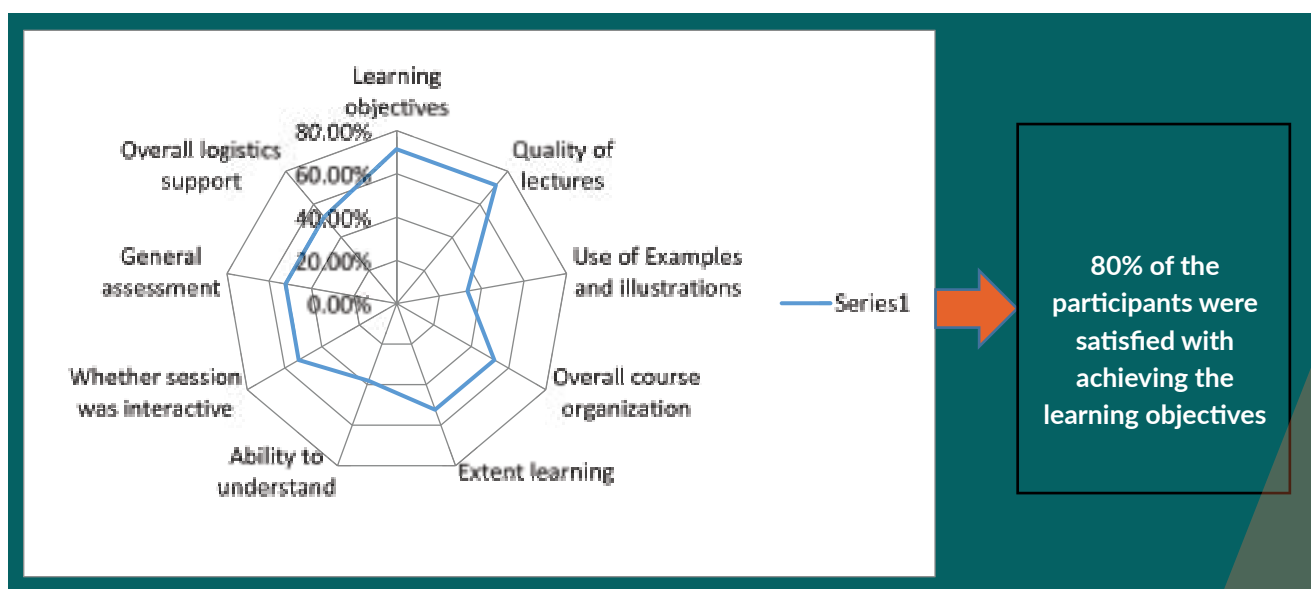
1.5 Training Evaluation

1.5.A Evaluation of the course (scoring by participants):

Most participants scored the training course as excellent in all aspects. No one scored the training course as fair or needs improvement category.

Components	Scoring (n=21)		
	Excellent (5)	Very good (4)	Good (3)
	%	%	%
Course addressing the stated learning objectives	71	19	10
Quality of lectures, discussions, and facilitations	71	24	5
Examples and illustrations in explaining different concepts of the course	33	48	19
Overall course organization	52	33	15
Extent of your learning in the course	38	33	19
Your ability to understand the interactive sessions	48	48	4
The extent to which the interactivity assisted your understanding of the course content	52	38	10
General assessment of the learning environment	52	38	10
Overall logistics support (training room and facilities were comfortable, food quality)	52	33	15

*Excellent=5, Very good=4, Good=3, Fair=2, Needs Improvement=1



1.5 B Evaluation of facilitator (scoring by participants):

All the facilitators received a score between excellent and very good with an average score from 4.6 to 4.8 out of 5 for the domains. The majority of the participants were satisfied with all the aspects of facilitation (such as communication, enthusiasm, responding to student's questions, and support during sessions).

a. Prof. Malay K Mridha

Domain	The percentage of participants marked as satisfied (Excellent/very good) %	Average Score out of 5
Communication	95	4.7
Support during session	95	4.8
Responding to students' questions	95	4.8
Overall facilitation	100	4.8
Demonstrated interest/enthusiasm	100	4.8

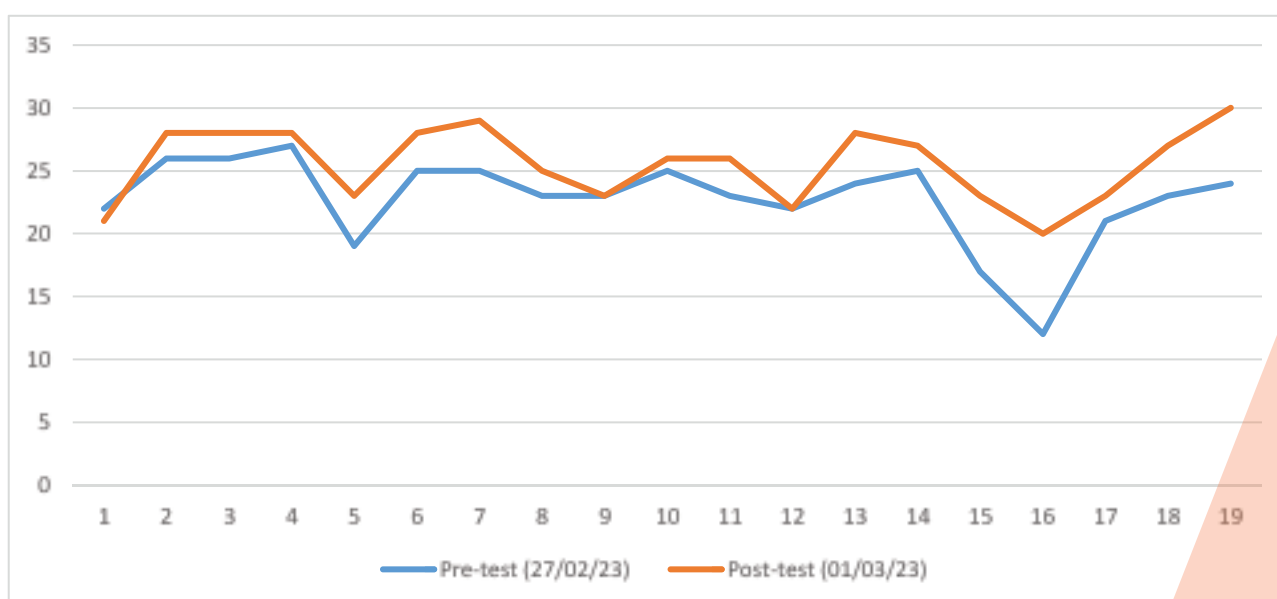
*Categories of scoring: Excellent, Very Good, Good, Fair, Needs improvement

a. Prof. Zahidul Quayyum

Domain	The percentage of participants marked as satisfied (Excellent/very good) %	Average Score out of 5
Communication	100	4.6
Support during session	95	4.6
Responding to students' questions	86	4.6
Overall facilitation	86	4.6
Demonstrated interest/enthusiasm	90	4.6

* Categories of scoring: Excellent, Very Good, Good, Fair, Needs improvement

1.6.C Evaluation of the participants by pre-test and post-test score



Analysis of pre- and post-test results shows that almost all of the participants could their knowledge after joining the short training course.

1.6 Some important comments made by the participants improving the next training courses

1. Course duration should be increased
2. Increase course duration
3. Enrich with more logistical support
4. Need more examples, Need field-based example, you can introduce surveillance and screening, NCD risk factor survey can be discussed in a session as it is a classic example of a survey
5. Plan a 5-day course with some content but less sessions per day, Have it in a conference or session room to enable active discussion.
6. Please include all types of oral diseases that means universal health coverage in the future short course
7. More focus on practicability, provide computer facility, funding should be increased
8. It is a highly standard course. Please keep it up
9. Include more practical sessions, to relate global aspect with national aspect
10. The course duration was too small to cover all the NCDs; the suggestion is to increase the duration
11. Congested schedule (change number of contents or the content)
12. Include practical session and research work
13. The course was good so far, but you can exclude many things, this will enable the facilitators to go deeper into the topic.
14. Should be focused on considering the duration of the course, individual assignments rather than group work can be more effective for all participants
15. This short course should be minimum 5 days, give more time to complete group work
16. Everything was excellent, Slide clarity needs to be focused
17. The course materials were not focused on the title " Health economics and NCD policies"; the practical session also should be related to health economics; the course materials are little bit advanced for the participants who hear about NCDs and related activities for the first time, there are overloaded sessions - either reduce the session or increase the time
18. The course was very good. It would be much better if more activities were included.
19. Increase the number of online participants
20. In my experience, the overall course was excellent. But proper broadcast connections should be developed and used for online participants.

1.7 Some important comments made by the participants about the most important topics

1	1. Identification of problem, 2. Rating the problem, 3. Analysis of existing policies, 4. Policy Development, 5. Preparing the strategy
2	1. Steps of policy development and implementation, 2. From evidence to policies and the know-do gap, 3. Assessment of the known public problem, 4. Best Buys, 5. Program framework for prevention and control of NCDs
3	1. Evidence-based strategies, 2. Universal health coverage, 3. Management of proceedings and potential conflict of interest, 3. Multisectoral approach, 4. Global action plan
4	1. It recaps my existing knowledge, 2. It will help me academically, 3. It will help me in research
5	this course has increased my critical thinking ability, Concept of best buy, policy formation, proposal evaluation, NCD action plan for global and BD, Advocacy in NCD
6	Best buys, NCD disease, Formulation and evaluation of NCD policies, budget, SEA country related information
7	Estimate the global burden of NCDs, predict the comprehensive risk factors for the NCDs in Bangladesh, analyze policy gaps for NCDs, Health economics for NCDs, recommend technology-based techniques to prevent NCDs
9	Priority NCDs, NCDs policies, Relevant health economics with that, Economic evaluation, how we can prioritize a problem
10	Through the course, I learned so many things as the NCDs-related policies was totally new to me. So, the mentioned topics may help to further work. The know do gap, the risk factors and prevention and control for NCDs, National plan and control
11	Policy exercise, basic 'NCD related' knowledge materials, National policy review, WHO reviews, Introduction to overall ideas.
12	policy issue relevant to NCD, Group work, Different bet MRF and Non-MRF, Global and national action plans, global strategies
13	Economic evaluation, Policy development, health economics concept, session 9, steps f policy development and implementation
14	Best buys, life course approach, international dollar, Policy formation and steps, Major NCDs
15	Best buys, know do gap, policy framework, know global and national NCD policies
16	best buys, good buys and ORIs; economic evaluation, policy process, WHO 5x5 framework, Global NCD related framework
17	Policy process, Policy evaluation, best buys for prevention and control of NCDs, program framework, practical on NCD policies development
18	Identification and prioritization of the problems, Analysis of policies
19	Steps Policy development and evaluation, NCD risk factors, policy framework, life course approach for NCD prevention and Control, best buys for NCD prevention and control
20	NCD Prevention, NCD policy making, Evaluation of Policy making, Various Health Models & Strategies, Various Health related Action plans
21	Overview of NCDs and risk factors, in South Asia and life course approach for NCD prevention and control, NCD prevention and control: Global and national plans, NCD prevention and control: Global Program Frameworks, Policy implementations and procedures, Importance of health economic knowledge and policy making

1.8 Important moments of the training captured in photographs



Inauguration and introduction session



Group work Sessions (Brain Storming)



Group work Sessions (Brain Storming)



Group Presentation (Practical 1)



Group Presentation (Practical 1)



Group Presentation (Practical 2)