Some new and exciting developments have taken place in the WHO Cluster of Noncommunicable Diseases and Mental Health (NMH). Several major changes have been made by the Director-General which concern the amalgamation of three Departments in NMH. This new Department has not yet been officially named but is currently referred to as the Department of Health Promotion, NCD Surveillance, Prevention and Management. Dr Robert Beaglehole has been asked to head up this new Department. With his long standing passion for NCD Prevention and Control, he is the ideal candidate for such a challenge. The new Department is currently going through a strategic review process which is expected to be completed by the end of March 2004. The NCD Surveillance Group would like to take this opportunity to welcome Dr Beaglehole to the Department and Cluster.

Dr Ruth Bonita has been requested by the Director-General to take on a new challenge as Director of Cross-Cluster Surveillance in the Office of the Assistant Director-General, Evidence and Information for Policy (EIP). Her new role encompasses linking Surveillance in the NMH Cluster and Health Information Systems in the EIP Cluster. This offers an excellent opportunity to entrench the work in NCD Surveillance over the past four years and at the same time expand the scope of availability of country level data. The WHO mortality database, currently based in EIP, will be linked to the Global NCD InfoBase, house in NMH. In addition, close links between the Global Burden of Disease Group in EIP and the efforts of the NCD InfoBase Team in NMH Surveillance will be supported. The NCD Surveillance Team looks forward to the continued collaboration with Dr Bonita in her new position. We hope to profile some of the new joint EIP/NMH surveillance activities in future editions of “Surveillance in Brief”.

For additional information, please contact Dr Robert Beaglehole (beagleholer@who.int) or Rachel Pedersen (pedersenr@who.int)
On November 7-8, 2003 the Non-communicable Diseases Unit, PAHO organized a surveillance workshop as a satellite meeting of the Global Forum for Non-communicable Diseases sponsored by PAHO, WHO and the Government of Brazil. This workshop gathered around 60 people from various countries: Argentina, Brazil, Costa Rica, Colombia, Cuba, El Salvador, Guatemala, Honduras, Nicaragua, Panama, Peru, Puerto Rico, Trinidad & Tobago, USA-CDC, Canada-Health Canada, WHO and PAHO.

This workshop was a very productive forum of discussion guided by leading experts in the field to review methodological aspects of surveillance, to showcase the advances in surveillance in the Region, and make recommendations to overcome barriers for effective organization of surveillance in Latin America and the Caribbean (LAC). The representatives of four countries that were awarded by a PAHO NCD-Surveillance Small-Grant Program to develop surveillance systems in Argentina, Brazil, Chile and Colombia using the WHO STEPwise approach (STEPS) were also invited. One of the objectives of these projects is to set a model of surveillance for each country. Leading experts in the field provided guidance and useful feedback to these projects that were, at the time, in the design stage. These projects are due to finish by the end of 2004.

Among the main objectives for 2004 are the following two activities: The NCD surveillance team at PAHO is preparing a sustainable surveillance system for Nicaragua that would include the use of established periodic national surveys and other sources of national data. It is hoped that the model can be used in other neighboring countries. The NCD Unit in PAHO is currently working with the WHO Noncommunicable Disease Surveillance Team in Geneva to build a common information data base on risk factors of NCDs in LAC using the WHO Global NCD InfoBase software.

The number of countries implementing the STEPwise approach to risk factors is increasing. Currently nineteen countries in the AFR have attended a STEPS training and implementation regional workshop. Of those nineteen countries, thirteen are in the field collecting data. In the EMR, participants from eight countries have undergone STEPS training. And out of these, four are collecting data, and one has completed data collection. The aggregate data from Syria will soon be available for the NCD InfoBase. In the SEAR, all eight countries that have attended regional STEPS training workshops are in the process of collecting data in the field. In the WPR, among the eleven countries that have embarked on STEPS, seven are undertaking data collection and two have completed data collection and cleaned weighted aggregate data will soon be available to inform the NCD InfoBase. The level of uptake of STEPS within the four WHO Regions and the number of countries moving quickly from training to implementation shows the strong commitment from Ministries of Health and WHO Regional Country Offices for the STEPwise approach to Surveillance of NCD Risk Factors. The map below shows current STEPS coverage and the implementation stage.

The use of new technology for risk factor surveillance activities in STEPS is currently being developed among some Member States. The use of electronic hand held devices, to carry out data collection, “e-STEPS”, is being assessed in the Western Pacific, Kenya and the Seychelles. This technique is being used more frequently and experience is showing that it requires less training, less staff, and is more efficient in terms of data capture and reduction of data transcription errors.

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### PROFILE: STROKE COMPONENT OF THE WHO GLOBAL NCD INFOBASE

**A WHO-ISS-WFN Project**

No data, no problem? Only a few countries have updated and reliable data on stroke occurrence. The limited data from the WHO Global Burden of Disease study indicate that stroke is already a major public health problem in both developed and developing countries. Demographic projections suggest that even with stable rates, a steep increase in the number of stroke events can be expected in the next decades especially in Asian and South-American countries. Better prevention will be required together with an understanding of the social and economic consequences on families, communities and health systems.

Good stroke data is essential for documenting why a government should invest in stroke prevention and treatment. To highlight the current availability of stroke data, and the gaps, the World Federation of Neurology (WFN) and the International Stroke Society (ISS) have initiated a collaboration with the WHO by supporting the development of a stroke component of the WHO Global NCD InfoBase. In 2003, WHO launched the WHO Global Non-Communicable Disease (NCD) InfoBase, which acts as a repository for country level survey information relevant to eight risk factors: raised blood pressure, tobacco use, diabetes, alcohol consumption, raised cholesterol, fruit and vegetable intake, overweight, and physical inactivity (http://www.who.int/ncd_surveillance/infobase/en/). Stroke is the first disease module to be included in the Global NCD InfoBase.

In addition to providing an overview of the current status of country level stroke data, the Stroke InfoBase will be an important tool for promoting increased awareness about the global burden of stroke.

**The Stroke Component of the WHO Global NCD InfoBase**

Since the establishment of the Stroke component of the Global NCD InfoBase in June 2003, data from 200 stroke publications have been entered. Stroke data are available from many different sources such as national hospital admission data, routine death certificates, and different types of epidemiological studies of various population sub-groups. For the first phase of the project, studies published in English during the past 10 years have been included.

The stroke data entered thus far show clear regional differences in number of studies published on stroke. Few publications come from the African region, and whereas there are several studies published from North-American studies, only few stroke publications from South and Central American States have yet been identified. For many regions there is a shortage of country-specific stroke data creating difficulties in estimating the stroke burden. With uncertainty about the size and impact of the stroke burden, preventive efforts and initiatives to improve treatment and rehabilitation of stroke patients may be difficult to defend.

**Future development**

The stroke component of the Global NCD InfoBase is a first step in collating and displaying current available data. This InfoBase will require expansion and further development with the inclusion of data published before 1993 in order to understand trends, more detailed data on outcome in stroke patients, and continuous update of new stroke data. It will also be important to expand the search to include papers written in languages other than English, data from National statistics, and unpublished data.

The extensive international network between stroke researchers connected to the WFN and the ISS will provide potential access to unpublished data. Furthermore, survival after stroke, prevalence of long lasting disabilities, and the need for support in activities in daily living, are other important measures of stroke impact which can be included in the future work. Direct costs and loss of production will be important arguments for bringing stroke in the top of the health agenda. A continuous update of the InfoBase will ensure that this becomes an important tool and reliable source of information for all those concerned with stroke.

**Launch and further information**

Dr Thomas Truelsen is the WHO Coordinator of the Stroke Initiative.

The launch of the on-line Stroke InfoBase is scheduled for June 2004 and it will be available on the WHO web site. The Stroke InfoBase will be presented at the World Stroke Congress taking place in Vancouver in June 2004 as one key product of the WHO Stroke Surveillance Initiative.

### IMPROVEMENTS TO THE USEABILITY OF THE WHO GLOBAL NCD INFOBASE ON-LINE

In an effort to make the WHO Global NCD InfoBase as user-friendly as possible and to meet the needs of a wider potential audience, two contractors, David Hagan and Linsey de Guzman, are working together to:

- Identify current and potential user groups of the InfoBase
- Carry out a usability study. This will allow individual respondents to show whether or not they can identify specific and overall aspects of the InfoBase and whether or not they can use the InfoBase to do typical tasks. It will also elicit what each user wants, needs, and likes.
- Generate a usage-profile for each class of user.
- Produce an action plan with prioritized tasks for the continuing development of the NCD InfoBase in the current biennium (2004/2005).
**SURVEILLANCE IN BRIEF**

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**PUBLICATIONS**

- FAO web story “Increasing Fruit and Vegetable Consumption Becomes a Global Priority” is now available online: http://www.fao.org/english/newsroom/focus/2003/fruitveg1.htm

**UPCOMING MEETINGS AND EVENTS**

- National Seminar on Epidemiology of Noncommunicable Diseases, Chennai, 18-21 March 04. This seminar is being jointly organized by the Madras Diabetes Research Foundation and the University of Alabama and supported by the National Institute of Health (NIH), USA at which Drs Robert Beaglehole and Ruth Bonita will be presented with the fourth MDRF Lifetime Contribution Award for their extensive work in this field.
- 18th World Conference on Health Promotion and Health Education, Melbourne, 26-30 April 04.
- 4th INDEPTH Network Annual General and Scientific Meeting, Hanoi, 3-7 May 04.
- 5th World Stroke Congress, Vancouver, June 04.
- 5th Conference of the International Heart Health Society, Milan, 13-16 June 2004

**STEPS RELATED DOCUMENTATION**

These documents can be accessed through the Surveillance web site: http://www.who.int/ncd_surveillance/en/

1. The WHO STEPS Approach to NCD risk factor surveillance - Summary (WHO/NMH/CCS/01.01) - available in Arabic, Chinese, English, French, Russian, Spanish
2. The WHO STEPS Instrument: formatted Core and Core & Expanded (Version 1.4)
3. The WHO STEPS Framework
4. The WHO STEPS Planning & Implementation Manual
5. The WHO STEPS Field Manual
6. Rapid Assessment Protocols for Surveillance (RAPS)
7. Data Management and Analysis documentation

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**SURVEILLANCE IN BRIEF CONTACTS:**

If you would like to provide information for future editions of “Surveillance in Brief”, please send your submission to: Rachel Pedersen, Editor, NMH/CCS: pedersenr@who.int; Fax: +41 22 791 4769

Previous editions of Surveillance in Brief are available on the web site: http://www.who.int/ncd_surveillance/en/

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