Republic of Bulgaria

**STRENGTHENING THE CAPACITIES OF THE SOUTH-EASTERN EUROPE HEALTH NETWORK (SEEHN) REGIONAL HEALTH DEVELOPMENT CENTERS**

# TECHNICAL REPORT ON

## *REGIONAL HEALTH DEVELOPMENT CENTER FOR NCDS TECHNICAL MEETING*

## *"NCDS POPULATION-BASED SURVEYS IN THE SEEHN MEMBER STATES"*

*25-26th March 2025, Podgorica, Montenegro*



**SEEHN Secretariat**
Address: "50 Divizija" 6, 1000 Skopje, Republic of Macedonia Tel.:+389 2 3139 968; E-mail: secretariat@seehn.org
Web: www.seehn.org

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# BACKGROUND

Noncommunicable diseases (NCDs) continue to be the leading cause of morbidity and mortality across the South-Eastern European Health Network (SEEHN) member states, placing an immense strain on healthcare systems and national economies. The growing burden of NCDs — including cardiovascular diseases, cancers, diabetes, and chronic respiratory diseases — not only affects individuals and families but also limits workforce productivity, increases healthcare costs, and threatens sustainable development. As countries strive to achieve universal health coverage (UHC) and fulfill commitments to the Sustainable Development Goals (SDGs), addressing the NCDs epidemic through evidence-based strategies becomes imperative.

Robust policy responses require high-quality, standardized, and regularly updated population-based data. Comprehensive surveillance of NCDs prevalence, associated risk factors, health behaviors, and healthcare service utilization enables decision-makers to formulate targeted interventions, allocate resources efficiently, and monitor the effectiveness of prevention and control measures. Population-based surveys are essential in capturing these critical data, offering insights into disease trends, disparities in healthcare access, and gaps in service delivery.

However, the successful implementation and sustainability of these surveys vary significantly across SEEHN member states. Challenges related to financing, logistical execution, data harmonization, and integration into policy frameworks pose significant barriers to achieving systematic and reliable NCDs monitoring. Strengthening national capacities for survey implementation, ensuring sustainable funding mechanisms, and enhancing the use of data for decision-making are all crucial for addressing these challenges.

Recognizing the urgent need for improved NCDs surveillance, this technical meeting aims to foster regional collaboration, facilitate knowledge exchange, and identify common solutions for strengthening population-based surveys systems. By sharing best practices and aligning methodologies, SEEHN member states can work toward a more integrated and resilient approach to NCDs prevention and control, ultimately improving health outcomes and ensuring sustainable development in the region.

The SEEHN Secretariat initiative on fostering the collaboration was designed to support SEEHN RHDCs in enhancing their capacity to address the public health issues of their mandate areas. The

SEEHN Technical Meeting on "NCDs Population-Based Surveys in the SEEHN Member States," held in Podgorica, Montenegro, on March 25–26, 2025, was implemented as a result of successful application for SEEHN Secretariat’s co-financing support towards strengthening the capacities of the SEEHN RHDCs.

# A. KEYNOTE PRESENTATION

Keynote speech at the meeting: Progress towards NCD targets and strengthening NCD surveillance in SEEHN, was delivered by Dr Ivo Rakovac, Regional Advisor and Unit Head NCD surveillance, WHO Regional Office for Europe. He highlighted that the key risk factors such as smoking, obesity, and diabetes remain significant challenges, and while some progress has been made in risk factor reduction, SEEHN remains off track to meet global NCD targets regarding the burden of NCDs and risk factors, which remain higher than the regional average. Preventable and treatable NCD mortality contributes to substantial economic losses, estimated at over 23 billion USD annually due to productivity loss. Strengthening surveillance systems is critical to improving prevention and management strategies.

WHO-endorsed methodologies such as STEPS provide a structured approach to risk factor assessment through household surveys, physical measurements, and biological sampling, while the European Health Interview Survey (EHIS) includes information on prevalence of larger number of diseases. Regular implementation of risk factor surveys, ideally every five years, ensures data-driven policymaking and accountability in NCD prevention efforts. The Progress Monitor indicators set out at the Second High-Level Meeting on NCDs highlight key policy areas requiring urgent action, including tobacco and alcohol control, nutrition improvements, and enhanced health system interventions.

Strengthening national surveillance capabilities, improving data utilization, and setting clear NCD targets are essential to closing the gap between policy commitments and implementation. Countries must prioritize funding for repeated surveys, collaborate with national statistical agencies, strengthen CRVS, especially cause of death data and integrate available data such as electronic health records, insurance claims, PHC, hospitals discharge records etc. into surveillance frameworks. WHO stands ready to support SEEHN Member States in planning, implementation, and data analysis to ensure that NCD policies are evidence-based and effective.

# B. Conclusions of Roundtables on NCDs Surveillance

## 1. Introduction

This section of the report presents the conclusions from the roundtables on strengthening Noncommunicable Diseases surveillance within SEEHN Member States. The country presentations highlighted the critical role of population-based surveys in informing evidence-based policies, addressing health inequalities, and improving national and regional responses to the growing NCDs burden. Participants explored national methodological approaches, implementation challenges, stakeholder engagement, sustainability strategies, and adaptation of surveys to ensure alignment with international standards. These findings will support SEEHN Member States in advancing NCDs surveillance systems, optimizing health interventions, and fostering collaborative solutions for long-term sustainability.

## 2. Methodologies and Approaches

### Survey Types

SEEHN member states have implemented various population-based surveys, including STEPS, EHIS, MICS, COSI, GYTS, ESPAD, and FCS, to assess NCDs prevalence and risk factors. These surveys differ in scope, frequency, and target populations, reflecting national priorities and available resources. A comprehensive, harmonized approach to survey implementation could enhance comparability, data utility, and informed policymaking across the region.

### Data Collection Tools

Surveys employ diverse data collection methods such as household surveys, telephone interviews, and school-based assessments to reach different population groups. Furthermore, most of the surveys conducted in the countries are using standardized methodology for common and regionally or globally accepted and commonly conducted surveys. Many countries are transitioning from paper-based to digital-based data collection, improving efficiency, accuracy, and timeliness of reporting. Strengthening digital infrastructure and capacity-building for data collectors will be essential in facilitating a smooth transition and optimizing data reliability.

### Data Quality Assurance

Ensuring high-quality survey data involves rigorous validation processes, including accuracy checks, verification against trusted sources, error rate calculations, and consistency evaluations. Digitalization has been recognized as a critical tool for improving data quality, minimizing manual errors, and standardizing reporting formats. The introduction of automated data processing and artificial intelligence-based validation methods can further enhance data integrity and usability for policy decisions.

## 3. Challenges and Obstacles

### Lack of Funding

Limited and unstable funding remains one of the most pressing challenges for NCDs surveys in majority of the SEEHN Member States. Some countries rely on short-term project-based funding, restricting the ability to conduct regular, nationally representative surveys. Securing multi-year financial commitments and integrating NCDs surveillance into national health strategies will be crucial in ensuring sustainable data collection efforts.

## Data Integration

Fragmentation of health data systems complicates efforts to integrate survey data with patient health records, provider databases, and external public health registries. Addressing interoperability issues through standardized coding, data linkage strategies, and the adoption of secure electronic health records could significantly improve the utility of survey findings and facilitate evidence-driven decision-making.

## Healthcare System Limitations

Diverse data formats and collection practices create inconsistencies that affect the comparability and usability of survey findings. Furthermore, a shortage of healthcare professionals with expertise in conducting public health surveys limits their participation in survey execution forcing them to rely on other institutions. Strengthening intersectoral collaboration and expanding the pool of trained, experienced public health personnel could lead to improving the design and methodology toward the more impactful and specific collected data.

## Resource Constraints

Many institutions struggle with inadequate resources, outdated record-keeping systems, and limited technical support for large-scale data collection and analysis. Investing in digital health infrastructure, creating national data repositories, and establishing regional knowledge-sharing platforms could help overcome these obstacles and promote efficient NCDs monitoring.

# 4. Best Practices for Stakeholder Engagement

## Programs for Health Protection

Effective engagement of stakeholders, including policymakers, healthcare providers, and civil society groups, is essential for strengthening NCDs surveillance, prevention and control. Targeted health protection programs tailored to vulnerable populations, such as maternal and child health initiatives or mental health services, have proven effective in improving participation and generating actionable data for prevention efforts.

## Education and Training

Capacity-building programs for medical staff, data collectors, and analysts are fundamental in enhancing survey implementation, ensuring adherence to methodological standards, and improving data interpretation. Regular training workshops and cross-country exchanges of expertise could further strengthen technical capacities across the SEEHN network.

## Cost-Benefit Analyses

Conducting comprehensive cost-benefit analyses with short-, medium-, and long-term perspectives provides compelling evidence for policymakers on the importance of NCDs surveillance. Demonstrating the economic advantages of early intervention, prevention strategies, and data-driven policy formulation can incentivize investments in sustainable surveillance systems.

# 5. Funding and Sustainability

## Main Funding Sources

National budgets and externally funded projects serve as primary sources for financing NCDs surveys. However, limited allocations for long-term surveillance pose risks to continuity. Developing multi-sectoral partnerships and advocating for increased government commitment to public health data collection can strengthen funding sustainability.

## Sustainability Strategies

Diversifying funding mechanisms and integrating surveys within national health programs can improve sustainability. Establishing direct financial links between additional taxes on unhealthy products (e.g. tobacco, alcohol, and sugar-sweetened beverages) and prevention-focused health initiatives—including NCDs surveillance—could secure more predictable funding and reinforce public health priorities.

# 6. Adaptation of Methodologies

## Technological Integration

Survey methodologies are evolving to incorporate new technologies, such as mobile data collection, electronic platforms, and machine-learning algorithms for data analysis. These innovations enhance efficiency, accuracy, and participant engagement, ensuring that surveys remain relevant and responsive to emerging public health challenges while maintaining data comparability with previous studies.

### International Guidelines

Survey designs are being adapted to align with recommendations from international organizations such as Eurostat and WHO. While maintaining global standards, among countries there are some examples of tailoring methodologies to reflect national health priorities and demographic characteristics, ensuring applicability while preserving comparability with previous studies.

## 7. Key Findings and Usage

### Data-Informed Policies

Survey findings serve as a critical foundation for shaping public health policies in SEEHN member states. However, inconsistent data utilization remains a challenge, with some countries struggling to effectively translate findings into actionable interventions. Strengthening mechanisms for data dissemination, policy engagement, and evidence-driven advocacy could optimize the impact of survey results.

### Intervention Design

High-quality survey data facilitates the design of targeted interventions for conditions such as cardiovascular diseases, cancer, diabetes, and respiratory illnesses. However, to build a data-driven healthcare system, countries must focus on improving data accessibility, fostering collaboration between researchers and policymakers, and integrating survey results into national health strategies.

# C. Conclusions from Plenary Discussions

## 1. Introduction

This section of the report summarizes the key conclusions from the plenary discussions held during the Technical Meeting NCDs Population-Based Surveys in the SEEHN Member States. The plenary sessions provided an opportunity for in-depth exploration of obstacles, sustainability strategies, and the role of data-driven policies in transforming health systems. Discussions aimed to address pressing challenges, identify adaptable solutions, and propose concrete actions to enhance NCDs surveillance across SEEHN Member States.

## 2. Addressing Obstacles, Models, and Solutions for National NCDs Population-Based Surveys Approach

### Active vs. Passive Surveillance

Participants examined the differences between active surveillance (population-based surveys) and passive surveillance (registries, administrative health records). Active surveillance was recognized as essential for capturing real-time health behaviors and risk factors, while passive surveillance plays a vital role in tracking disease progression and healthcare utilization. A complementary approach that integrates both methods can improve data completeness, reliability, and utility for policymaking, while at the same time taking into account cost benefit ratio of both approaches.

## Standardization vs. Local Adaptation

Finding the right balance between harmonizing methodologies for cross-country comparability and adapting surveys to local contexts emerged as a key priority. Standardized frameworks enhance regional data consistency, while tailored methodologies ensure relevance to national health priorities, population demographics, and resource availability. Striking this balance will require capacity-building efforts, flexible guidelines, and regular methodological assessments.

## Ideal Survey Frequency

Determining optimal survey frequency depends on public health needs, resource availability, and data utilization for monitoring and evaluation. While annual surveys may be impractical due to funding and logistical constraints, intervals of three to five years were discussed as suitable for ensuring data validity while maintaining policy relevance. Enhancing real-time surveillance mechanisms through digital tools could complement periodic surveys and improve responsiveness.

## Other Considerations

Participants highlighted the importance of ensuring multi-sectoral collaboration in survey implementation, involving ministries of health, statistics bureaus, and research institutions for comprehensive data collection and analysis.

# 3. Best Practices for Sustainability of Implementation and Financial Sources for National NCDs Population-Based Surveys Approach

## Excise Laws and Taxes on Unhealthy Products

Discussions explored whether excise taxes on products such as tobacco, alcohol, and sugar-sweetened beverages should serving primarily for health protection but also for revenue-generation purposes. Strengthening policy frameworks to allocate portions of these tax revenues toward NCDs prevention, including funding for surveys, could provide a sustainable financial model while incentivizing healthier consumption patterns.

## Ensuring Sustainable Survey Implementation

Maintaining regular NCDs surveys requires more than funding—it necessitates strong institutional structures, capacity-building initiatives, and integration with passive surveillance systems. Establishing a dedicated, well-trained workforce to oversee survey processes between implementation cycles was emphasized as a sustainability measure. Digitalization offers an opportunity to streamline data collection, analysis, and storage, reducing costs and improving efficiency.

## Role of International and Non-Health Institutions

International organizations and non-health institutions can play a crucial role in supporting NCDs surveillance sustainability. Technical expertise, methodological guidance, and financial assistance from organizations such as WHO, Eurostat, and academia can bolster national survey capacities, as well as boost political commitment and support. Leveraging non-health institutions—such as economic and education sectors—can facilitate cross-sectoral integration of survey findings for broader policy impact.

### Other Considerations

Participants recognized the need for coordinated regional advocacy efforts to promote sustainable financing, emphasizing the importance of collaborative strategies among SEEHN Member States to attract international funding for long-term surveillance initiatives.

## 4. Data-Driven NCDs Policies and Health System Transformation

### Translating Survey Findings into Policy Action

Effective communication of survey findings is essential to drive health system change. Discussions emphasized the importance of framing data within compelling narratives for policymakers, demonstrating real-world implications, economic costs, and actionable solutions. Clear, accessible reporting and strategic dissemination enhance policymaker engagement and public awareness. Additionally, different languages should be used for different target population data should be communicated with i.e. for public, for policy and decision makers etc.

### Return on Investment for Population-Based Surveys

Participants explored how demonstrating the return on investment of NCDs population-based surveys can strengthen political and financial support. The ability to quantify how survey-driven interventions reduce long-term healthcare costs, improve population health outcomes, and optimize resource allocation was highlighted as key to securing continued funding.

## Strengthening Feedback Loops

Establishing structured feedback mechanisms between analysts, healthcare practitioners, and policymakers ensures that survey findings directly inform evidence-based decision-making. Strengthening communication channels within ministries of health and research bodies can streamline the integration of data into national health strategies.

## Shifting Focus to Prevention and Early Intervention

Utilizing NCDs survey findings to shift healthcare approaches from reactive treatment models toward proactive prevention and early intervention is a priority for SEEHN member states. Integrated prevention strategies informed by high-quality data can reduce disease burden, minimize healthcare costs, and improve long-term health outcomes.

## Building Sustainable Health Systems through Real-Time Data

A long-term vision for SEEHN Member States involves building adaptable health systems that incorporate real-time surveillance for continuous NCDs monitoring. Investments in digital health infrastructure, interoperability between databases, and predictive analytics will support data-driven policies that respond to emerging trends.

## Regional Collaboration Platform

Participants discussed the potential benefits of establishing a joint regional platform to facilitate knowledge exchange, align methodologies, and strengthen collective advocacy for NCDs surveillance, prevention and control across SEEHN Member States. Furthermore, the RHDC NCDs should dedicate its activities including similar meetings to an annually chosen theme in the area of its mandate.

## Other Considerations

Discussions highlighted the value of integrating behavioral insights into survey analyses to enhance public engagement, improve intervention effectiveness, and inform strategic health communications. Considering the change of prevention narrative from focusing on individual NCDs risk factors to focusing on different settings (i.e. working environment) and empowering population to choose enabled, easy to implement healthy lifestyles, to enhance the health status of individuals living in the SEEHN region.

# D. Conclusion

The meeting underscored the vital role of population-based surveys in advancing NCDs prevention and control efforts across SEEHN Member States. Strengthening funding mechanisms, stakeholder engagement, digital transformation, and methodological harmonization will be essential in improving surveillance systems. Addressing key challenges through collaborative regional efforts and knowledge exchange will enhance the effectiveness of NCDs monitoring, contributing to more impactful health policies and sustainable prevention strategies. By implementing the insights from this meeting, SEEHN countries can reinforce their commitment to data-driven decision-making and safeguard public health through more robust NCDs surveillance mechanisms.

The plenary discussions provided valuable insights into improving NCDs surveillance approaches, ensuring sustainable survey implementation, and leveraging data for transformative health policies. Strengthening funding mechanisms, stakeholder engagement, and digitalization will be crucial for advancing NCDs prevention and control strategies across SEEHN Member States. Regional collaboration, methodological innovation, and proactive policy engagement will contribute to more efficient and sustainable NCDs monitoring systems, reinforcing data-driven approaches for public health improvement.

# Annex 1: PARTICIPATING COUNTRIES

The meeting was attended by representatives from the following countries:

- **Albania**
- **Bosnia and Herzegovina**
- **Bulgaria**
- **State of Israel**
- **Moldova**
- **Montenegro** (host)
- **North Macedonia**
- **Romania**
- **Serbia**

# Annex 2: LIST OF PARTICIPANTS

1. **Albania**:
    - Besjan Elezaj, Specialist, Institute of Public Health
    - Herion Muja, Epidemiologist, Institute of Public Health
2. **Bosnia and Herzegovina**:
    - Aida Ramić-Čatak, Assistant Director for Medical Affairs, Institute for Public Health of the Federation of BiH
    - Aljoša Đudurović, Head of the Centre for Health System Development and International Cooperation, Public Health Institute of the Republic of Srpska
3. **Bulgaria**:
    - Vesselka Duleva, Prof. Head of Dep. Food and Nutrition, National Center of Public Health and Analyses
4. **State of Israel**
    - Sharon Levi, Ministry of Health Head, Health Education and Promotion Department
5. **Moldova**:
    - Svetlana Cociu, National Agency for Public Health, Department for NCDs Surveillance and Prevention
6. **Montenegro**:
    - Ivana Zivkovic, General Director of PH Directorate, Ministry of Health
    - Snežana Barjaktarović Labović, Acting Director, Institute of Public Health of Montenegro

- Milica Stanisic, Director of SEEHN RHDC on NCDs, Institute of Public Health of Montenegro
- Marija Raicevic, Epidemiologist, Centre for Prevention and Control of NCDs, IPHMNE
- Aleksandar Obradovic, Epidemiologist, Centre for Centre for Prevention and Control of NCDs, IPHMNE
- Adrijana Vujovic, Director of the Centre for Prevention and Control of NCDs, IPHMNE
- Ivana Nikcevic Kovacevic, Epidemiologist, Centre for Prevention and Control of NCDs, IPHMNE
- Marija Palibrk, Social Medicine specialist, Centre for Health Policy and management
- Vilnerina Ramčilović, Director of the Centre for Health Promotion, IPHMNE
- Mirjana Vukovic Nedovic, Director of the Centre for data evidence and research in public health, IPHMNE
- Natasa Terzic, Head of the Department for health statistics, Centre for data evidence and research in public health, IPHMNE
- Enisa Kujundzic, Hygiene specialist, Centre for Hygiene and Health Ecology, IPHMNE
- Agima Ljaljevic, Social medicine specialist, professor at Medical Faculty Podgorica, Director of the Centre for Science and Education, IPH MNE

7. **North Macedonia**:
    - Aleksandra Nedelkovska, Specialist for Occupational Medicine, Institute of Public Health

8. **Romania**:

    - Claudia Dima (online), National Institute of Public Health, National Centre for Public Health Statistics

9. **Serbia**:

    - Verica Jovanovic, Acting Director, Institute of Public Health of Serbia "Dr Milan Jovanovic Batut"

10. **WHO Regional Office Europe**

    - Dr Ivo Rakovac, Regional Adviser on NCDs Surveillance, WHO RO Europe

11. **SEEHN Secretariat**

    - Dr Tatiana Paduraru, Acting Director, SEEHN Secretariat
    - Vesna Arsova, Finance Officer, SEEHN Secretariat
    - Metodi Micev, IT Officer, SEEHN Secretariat

# Annex 3: AGENDA - CONCEPT AND TIMETABLE

The meeting focused on the following key areas:

- **NCDs Population-Based Surveys**: Presentations and discussions on methodologies, data quality assurance, and challenges faced by member states.
- **Best Practices in Stakeholder Engagement**: Strategies for effective engagement of healthcare providers, policymakers, and community leaders.
- **Funding and Sustainability**: Exploring diverse funding sources and aligning surveys with national health programs.
- **Adaptation of Methodologies**: Integrating new technologies and aligning with international guidelines.

## Timetable

**Day 1: March 25, 2025**

- 09:00 - 09:30: Welcome and Introduction
- 09:30 - 10:00: Break
- 10:00 - 10:30: Keynote presentation: Strengthening NCDs Surveillance in SEEHN: Trends, Challenges, and Opportunities for Population-Based Surveys. Best practices in the European region. Next steps for the SEEHN.
- 10:30 - 13:00: Roundtable: Conducted NCDs national population-based surveys: best practices and various obstacles (country presentations in alphabetical order, 10+5 min)
- 13:00 - 14:00: Lunch Break

- 14:00 - 15:00: Plenary discussion: Addressing obstacles, models and solutions for national NCDs population-based surveys approach
- 15:00 - 15:15: Break
- 15:15 - 17:00: Roundtable: Conducted NCDs national population-based surveys: sustainability, potential and used financial sources (country presentations in alphabetical order, 7+3 min)

**Day 2: March 26, 2025**

- 08:30 - 09:30: Plenary discussion: best practices for sustainability of implementation and financial sources for national NCDs population-based surveys approach
- 09:30 - 10:00: Break
- 10:00 - 12:00: Roundtable: Usage of data collected in national NCDs population-based surveys (country presentations in alphabetical order, 8+4 min)
- 12:00 - 13:00: Lunch Break
- 13:00 - 14:00: Plenary discussion: Data driven NCDs policies and health system transformation
- 14:00 - 15:30: Conclusion and Next Steps

# Contact Information

For further inquiries or collaboration, please contact:

Milica Stanišić (milica.stanisic@ijzcg.me),
Aleksandar Obradović (aleksandar.obradovic@ijzcg.me) and
Marija Raičević (marija.raicevic@ijzcg.me) from
Institute for Public Health of Montenegro (ijzcg@ijzcg.me).