Welcome to the first edition

Welcome to the first edition of the Mongolian Public Health Professionals’ Association (MPHPA) Quarterly Newsletter. The MPHPA is the most diverse organization of public health professionals in Mongolia and has been working to improve public health since 2001. It is the mission of the organization to support sustainable development of public health in Mongolia through pooling the skills of professionals and strengthening multi-sectoral collaboration in order to protect and promote health of the population. The MPHPA is active in many areas including alcohol and tobacco, non-communicable diseases, road traffic injuries, maternal and child health, communicable disease, health policy, health management and administration. Through its skilled membership base of public health and other professionals, the Association undertakes research, training and advocacy related activities.

This newsletter is designed as a way for members and interested others to stay in touch with the activities of the MPHPA and members. Each quarter, the newsletter will be distributed and will contain news of the activities of the association and members, upcoming events and opportunities to members to become involved. Members are welcome to contribute anything that might be of interest to others, including news, announcements, or more in depth public health related articles.

Contents

- Community based TB project 2
- RTI advocacy campaign 2
- Recent assessment of MPHPA 2
- Member update 3
- Healthy diet and physical activity advocacy campaign 3
- Alcohol and tobacco advocacy campaign 3
- Recent newspaper article 4
- Announcements 5
- MPHPA success stories 5
- Opportunities to be involved 5
Community based tuberculosis project

The four-year community based tuberculosis (TB) project, a collaboration between World Vision Mongolia, local authorities and health organizations in Selenge and Dornod provinces, has recently been completed. The purpose of this project was to reduce TB prevalence over four years in the selected areas through implementation of ACSM (advocacy, communication, and social mobilization), health education activities and improving the capacity of local health workers and peripheral laboratories on TB diagnosis and treatment.

A baseline and a follow up survey in July 2011 were completed. There were 1,319 respondents in the follow up study, with an equal proportion from Selenge and Dornod provinces. Participants indicated that their main sources of information about tuberculosis were television (31%), print media such as newspapers (22%) and healthcare workers (15%). The results of this study show that misconceptions about tuberculosis, symptoms, transmission and treatment are common. However the continued implementation of ACSM and other activities undertaken as part of the project is recommended to increase this knowledge.

Recent assessment of MPHPAs capacity

The “Leading Researchers” NGO undertook an assessment to determine the capacity of the MPHPA and other NGOs that work in the field of alcohol harms prevention. This assessment included the capacity of the organization in various areas including governance, strategic planning, monitoring and evaluation, policy, advocacy and networking, human resources, as well as communication, knowledge sharing and information technology.

The assessment highlighted some of the many strengths of the MPHPA. These included its involvement in public health and related networks in Mongolia and good working relationships with its various partners and stakeholders. It also points out the major role the MPHPA has played in advocacy campaigns, including the successful allocation of alcohol taxation towards public health.

Some limitations of the organization raised in the report include the funding of the organization, particularly because the Association’s activities are donor driven, and a lack of a monitoring and evaluation plan for the organization, although monitoring and evaluation is carried out for individual projects. Other factors suggested in the report to improve the capacity of the organization to achieve its goals were more transparent decision making, increasing engagement of members and improvements to and regular updates of the website.

If you are interested in seeing the full report, please email mphpa.mongolia@gmail.com.

The MPHPA strives to support sustainable development of public health in Mongolia through pooling the skills of professionals and strengthening multi-sectoral collaboration in order to protect and promote health of the population.
Member update

The Third European Conference on Injury Prevention and Safety Promotion was held in Budapest, Hungary, on 16-17th of June 2011 and it was a major international event bringing stakeholders in the prevention of accidents and injuries from Europe and other countries to exchange and discuss the latest results in injury research, policies and practices. The conference is organized by EuroSafe (European Association for Injury Prevention and Safety Promotion), the Ministry of National Resources of the Republic of Hungary, and co-sponsored by the European Commission and the WHO Regional Office for Europe. The goal of the conference is to introduce available evidence based interventions, address the challenges in implementation and to transfer of good practice in low-resource settings. About 200 participants (policy makers, health professionals, consumer protection officers, injury prevention experts, safety promotion practitioners, and researchers etc.) from 39 countries representing government organizations, academic institutions, NGOs, private sectors have participated in the conference.

One of the conference topics was Road traffic injury and Dr. Oyunbolor Munkhtuvshin’s research on “Road Traffic Injury in Mongolia” was accepted to be presented as a poster presentation. MCA-M Health project sponsored participation of Dr. Oyunbolor Munkhtuvshin to the conference.

The conference concluded that the relative burden of injury is growing in the region. Vulnerable and socially excluded people are more exposed to injury risk and higher injury rates are found in countries with higher inflation rates and low investment in public health and education.

Alcohol and tobacco advocacy campaign

This campaign was run earlier this year and aimed to prevent young people from taking up drinking and smoking, to encourage healthy alternative choices and to reduce the harms to others from second hand smoke. Like other advocacy campaigns, the activities undertaken as part of this campaign include media activities, information, education and communication (IEC) materials, advocacy and outreach activities. The campaign was well received by the target audience, and there was also much success in building the relationship between health centre staff, local officials and the target audience.

Health diet and physical activity advocacy campaign

This advocacy campaign centered on the reduction of non-communicable diseases such as type 2 diabetes and cardiovascular diseases, through activities to promote eating a healthy diet and partaking in regular physical activity. This campaign ran for three months between March and June 2011 and is the first of three campaigns to be run between now and 2013, in Ulaanbaatar and 21 provinces.

This campaign will be evaluated at the end of the third campaign; however the report for this first campaign has been completed. This report documents some of the lessons learned from the implementation of this campaign, for example, public service announcements should be shown on MNB as well as other television stations, and media activities such as print media were effective in influencing decision makers.

For more information, contact mphpa.mongolia@gmail.com.
Alcohol feeding policy is not necessary for public
Author: Ts. Munkhjin, journalist, August 15th 2011, Serial Number 155

It is almost 20 years since we began to exclaim about the problems of alcohol in Mongolia. Since this time we have not seen a reduction in alcohol consumption, but instead a sharp rise. The alcohol industry has bloomed and expanded to become big business, an indication of just how much alcohol consumption has increased in Mongolia. Instead of seeing less people with alcohol misuse problems, the number has increased among many segments of the population that were previously not common including school children, educated and employed people.

Research has shown that alcohol misuse can be a serious problem during transition periods in developing countries. However Mongolia is now one of highest consumers of alcohol on a per capita basis. A World Health Organization survey found that in 1998 Mongolian’s consumed 4.7 litres of alcohol, which had doubled by 2009 reaching 9.2 litres per person. This shows just how quickly the problem has grown. Although these calculations are based on adult consumption, other evidence shows alcohol consumption has continued to rise among adolescents and young people. In a survey of Mongolian adolescents, 81.9% indicated they live in home environment with an individual who has an alcohol problem. Whilst 70.6% of the students from 6-11th grade said they had tried alcohol before. In addition 86.8% of these students had used alcohol in harmful way, with 8.5% consuming alcohol at a dangerous level. This study shows that alcohol misuse is going to be an increasing problem for future generations of Mongolian young people.

The Mongolian government should take responsibility for this problem, though not everyone will argue for this. These survey results show us how approving and implementing laws to reduce alcohol consumption and the related harms has made no difference at all. For example, article 7, section 7.2.2 of the Alcohol Prevention Law states very clearly that it is prohibited to serve alcohol to young people less than 21 years of age. However, this article has not been implemented by any company and organization. For these companies, money and profits are important and they are therefore not interested in the alcohol misuse problems of young people. If they were to pay attention to it, perhaps today’s young people would not be drinking to intoxication and developing addictions. One of main reasons that the alcohol industry is blooming in Mongolia is money. It is clear that parliament members do not have any intention of closing the door on the alcohol industry because the industry contributes a huge amount of tax to the annual government budget. It is time to look at consequences. If we decrease the size of the alcohol industry, the health of Mongolian population will improve, and there will be less alcohol related deaths. International evidence around this is very strong.

The Mongolian government is proud to have the world’s top mining resources however they should begin to pay attention to the public health sector. In the near future, the government will be required to pay much more because of alcohol related harms than it currently earns. During the last few years, besides seeing increases in the local production of alcohol, the volume of imported alcohol has also increased. For example, in 2008 19,199 billion tugrug, and in 2009 16,408 billion tugrug was collected in alcohol import taxes, showing how much alcohol Mongolians consume.

The government is already short on money and therefore they cannot reduce the size of the alcohol industry but they should control consumption. Parliament has approved law articles giving permission for alcohol product advertisement in the media. This approval has earned the media sector much money, and they showed their appreciation to some parliament members by giving them certificates. This is a very tragic picture. It is very clear to see that government regulations exist in Mongolia that encourages people to consume more alcohol. Of course the picture is not all negative. Through the efforts of the public health sector’s civil society, it was legislated that two percent of the alcohol import product tax should be allocated toward alcohol prevention activities through the Health Promotion Foundation and Foundation against Alcoholism. This is one opportunity to decrease consumption through prevention interventions. Annually this two percent allocation equates to approximately 300 million tugrug. Of this, one percent should be allocated to the Health Promotion Foundation (authorized by the Ministry of Health), and the other one percent should go toward the Foundation against Alcoholism (under the Ministry of Justice). However, currently these funds have still not been completely allocated.

This year, the Health Promotion Foundation received only 81 million tugrug, or fifty percent of their expected allocation. The rest of this money has been allocated to different health programs. This policy is not enough of a commitment from the Minister of Health, who should find more opportunities and sources of funding for alcohol prevention to conduct more expanded interventions in this area.

In another WHO survey, alcohol consumption was third in the list of ten leading causes of mortality and alcohol consumption accounts for the largest number of DALYs in the Asia Pacific region. This really provides clear statistics about alcohol consumption. No country should have policies that encourage alcohol consumption. Mongolia cannot be saved from the problems of alcohol without good policy.
Announcement: 1st Annual Mongolian Public Health Conference

The Mongolian Public Health Professionals’ Association (MPHPA) is holding its 1st Annual Mongolian Public Health Conference on December 8th, 2011, in Ulaanbaatar, Mongolia. The theme of the meeting is: **Advancing public health through learning, advocating and working together.** The conference is open to both those who wish to present or to attend only. The MPHPA is now accepting submission of abstracts for presentation at the conference. The conference streams are: Knowledge Translation and Policy Implications; Health Sector Management; Health Promotion; Environmental Health.

Please see the MPHPA website (www.mphpa.com) for the conference brochure and all information required for submission of abstracts or registering to attend the conference.

**PLEASE NOTE:** The abstract submission deadline has been extended until 10th November 2011.

Recent MPHPA successes

The alcohol advocacy campaign, led by the MPHPA in conjunction with other NGOs working in the area of alcohol misuse prevention, was successful, resulting in the government legislating for 2% of the alcohol product tax to be allocated to alcohol prevention activities.

Government and non-government organizations partnered to facilitate advocacy and community outreach activities in the healthy diet campaign, result in one of biggest bakery companies Talkh Chikher reducing their amount of salt in their products and improving their product labeling. Jur-Ur bakery company also recently improved their product labeling.

As a result of the road traffic injury prevention campaign the City governing office has made a commitment to improve of road traffic safety conditions in secondary school areas. The necessary financial resources have been allocated to solve this issue.

Last year, in 2010, five interest groups were established. These are Communicable Diseases, Non-communicable diseases, Health Administration and Management, Environmental Health and Reproductive Health (Maternal and Child Health). These groups are currently looking for interested members to join them. Leaders of these groups and their contact information can be found above.

The Royal Tropical Institute in the Netherlands is currently offering courses relevant to members of the MPHPA, for example post graduate studies in tropical medicine and hygiene, as well as public and international health. More information on these courses can be found on the Institute’s website (http://www.kit.nl/training).

The Salzburg Medical Seminars link physicians from leading American hospitals and their affiliated medical schools with physicians practicing in Central and Eastern Europe, Central Asia, the former Soviet Union and other countries in transition. The program for 2012 is not available, for more information about this training opportunity, see the MPHPA website under “Seminars” (www.mphpa.com).

If you would like to contribute to the next Quarterly Newsletter, please send your contribution to mphpa.mongolia@gmail.com by December 15th 2011. All contributions are welcome, and could include interesting news, photos, announcements or updates on current or recently completed projects.