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## **Abstract**

## Empowerment of Public Health System in Rapid Response and Early Detection by Building Front-line Epidemiological Capacity - Egypt, 2017

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## **Abstract**

**Background:** The Egyptian Ministry of Health (MoH) launched Public Health Empowerment Program-Basic Field Epidemiology (PHEP-BFE). PHEP-BFE is a three-month in-service training program that focuses on detection of and response to diseases and events of public health concern. In July 2017; first training course was conducted for first cohort and graduation was in October 2017.

**Objective:** We aimed to raise the epidemiological capacity of sanitarians due to their valuable contribution in detection of and response to public health threats and evaluate program effectiveness.

**Methods:** A team from MoH was assigned for planning, preparing and rephrasing of training material to fit Arabic language. Material from the Front-line Field Epidemiology Training Program (FETP), referenced by CDC, was used for developing parts of the curriculum. Inclusion criteria for participants were applied. Three workshops were conducted, and participants were asked to conduct field activities after each workshop. Each participant was supervised by a mentor. Evaluation approaches and tools include; documents review, questionnaires and check lists. Instructors, Mentors and Participants were asked to complete an evaluation tool after each workshop and fieldwork. Data was collected and analyzed.

**Results:** Out of 27 Participants joined the program, 25 (92.6%) were graduated. All participants were males aged from 24-50 years. Out of 25 participants, 19 (76.0%) were at directorate level. During their fieldwork, 22/25 (88.0%) noticed low surveillance reporting at district level, and 15/25 (60.0%) participated in outbreak investigations. By the end of training; knowledge of subject of epidemiology was improved, the difference between results of pre- and post-test raised by (30.4%) *P*<0.0001. All participants gained presentation skills and were able to write scientific reports. Yet 16/25 (64.0%) participants need practicing data analysis on Microsoft Excel during training workshops.

**Conclusions:** PHEP-BFE was successful and met its objectives. PHEP-BFE could target sanitarians at district level. More time could be dedicated for statistical skills improvement.

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