

Onom Foundation to Improve Blood Pressure Control in Mongolia Highly Competitive Grant Awarded by Resolve to Save Lives Awards

November 7, 2019 (New York, NY)— The Onom Foundation has been awarded a highly competitive, two-year grant to address high blood pressure in Mongolia, expanding its successful blood pressure treatment program from Ulaanbaatar to cover all 21 Mongolian provinces.

The grant program, part of the [LINKS](#) platform that connects people working to improve cardiovascular health around the world, is funded by Resolve to Save Lives, an initiative of Vital Strategies, and managed by Resolve along with the World Health Organization (WHO) and the U.S. Centers for Disease Control and Prevention through the CDC Foundation.

“Cardiovascular disease is an endemic that affects almost everyone in Mongolian society— it causes more than one third of all deaths,” said Naranjargal Dashdorj, CEO of the Onom Foundation. “The LINKS grant means an opportunity for us to expand the work we’ve been doing in the capital to the rest of the country, and improve high blood pressure care for over 1 million people.”

High blood pressure causes heart attack and stroke and is the leading cause of death worldwide. [A recent analysis](#) concluded that increasing global control of high blood pressure to could save almost 40 million lives in 25 years.

“Cardiovascular disease kills more people each year than all infectious diseases combined, but it remains neglected by many health systems and the global health community,” said Dr. Tom Frieden, President and CEO of Resolve to Save Lives. “LINKS is connecting champions on the front lines of work in low- and middle-income countries and sharing lessons and resources to accelerate progress.”

This second round of grant funding will support government and civil society organizations working in [18 countries](#): Armenia, Azerbaijan, Costa Rica, Ecuador, Georgia, Haiti, Jordan, Kazakhstan, Kenya, Malaysia, Mongolia, Nigeria, Pakistan, South Africa, Tanzania, Tajikistan, Uzbekistan and Vietnam. Funded programs include a patient-centered hypertension screening and treatment program in Pakistan, monitoring South Africa’s sodium reduction laws, and advocacy for effective regulation of trans fat in Kenya.

“The LINKS grant program will help to identify local solutions to hypertension control and advance control of non-communicable diseases through primary health care,” said Dr. Cherian Varghese, Coordinator of Management of Non-communicable Diseases at WHO. “The program will also build capacity in health systems, which is critical to advance universal health coverage.”

“To address cardiovascular disease, the CDC Foundation is pleased to work with partners by providing support to countries around the world seeking technical assistance through the LINKS online community and platform,” said Dr. Judy Monroe, president and CEO of the CDC Foundation. “Working together to address the health challenge of cardiovascular disease ensures that knowledge, best practices and lessons learned are shared and utilized across the globe.”

[First round grants totaling USD 1.25 million were awarded in March 2019](#) to LINKS members in 11 countries. The grants are intended to help health systems and non-governmental organizations pilot approaches that will lead to scalable national programs that can save both lives and money, including by reducing health care costs associated with avoidable heart attacks, strokes, and kidney failure.

LINKS [membership is free](#) and members are eligible to apply for one-time grants to improve cardiovascular health in their communities using one of three proven, effective approaches to improving heart health: increasing control of high blood pressure, reducing salt intake or eliminating trans fat. [LINKS](#) also provides members access to technical assistance from cardiovascular health experts from around the world, networking opportunities, useful [tools](#) for cardiovascular health, and live webinars.

2019 LINKS Grant Recipients and Projects:

Caucasus Region (Armenia, Azerbaijan, & Georgia): WHO European Office for the Prevention and Control of NCDs

Reduce salt intake in the Caucasus region by collecting quality data on population salt consumption and nutritional composition of selected products, bringing together policy makers to develop national salt targets and nutritional guidelines for public institutions and implementing a national campaign to raise awareness about salt reduction among primary care professionals and the food and hospitality sector.

Central Asia (Kazakhstan, Tajikistan, & Uzbekistan): Kazakhstan WHO Country Office, WHO/Europe

Reduce salt intake in Central Asia by estimating population salt intake, training researchers, primary care professionals and the food and hospitality sector on salt reduction, implementing a campaign about the risks of excess salt among consumers, cooks and caterers, and promoting food reformulation and product improvement.

Costa Rica: Costa Rican Institute of Research and Teaching in Nutrition and Health (INCIENSA)

Support salt regulation policy by assessing amount, sources and trends in population salt consumption, surveying knowledge, attitudes and practices around salt in food services, and adapting a regional social media campaign for national use.

Ecuador: Pan-American Health Organization (PAHO)

Improve control of high blood pressure by training health staff and developing monitoring and evaluation tools for the national implementation of the WHO HEARTS technical package.

Haiti: Weill Cornell Medicine & GHESKIO Centers

Train physician, nurses, and community health workers at 30 clinics across Haiti to implement new national primary-care blood pressure guidelines, support the Ministry of Health with strategic planning for blood pressure medication supply management, and expand a community-based blood pressure management program.

Jordan: The Eastern Mediterranean Public Health Network (EMPHNET)

Implement the WHO HEARTS technical package for cardiovascular disease management in 20 health care centers in the north of Jordan and evaluate impact on blood pressure control.

Kenya: Ministry of Health and Ujamaa Health and Strategy Solutions

Train community health workers and primary health care workers to implement appropriate blood pressure screening, diagnosis, care, follow-up and reporting.

Kenya: International Institute for Legislative Affairs (ILA)

Assess the existing policy and regulatory framework and identify stakeholders for trans fat elimination and advocate for effective policy and legislative approaches for the regulation of trans fat in Kenya.

Malaysia: Ministry of Health Malaysia, National University of Malaysia, The George Institute for Global Health (TGI) and the WHO Office in Malaysia

Analyze salt levels in street foods to accelerate mandatory sodium labelling, inform salt-reduction education messages, and engage the food industry in reformulation efforts.

Mongolia: Onom Foundation

Expand blood pressure control program to all provinces in Mongolia by training healthcare professionals and increasing screening and diagnosis.

Nigeria: Epidemiology and Biostatistics Research Unit at the Institute of Advanced Medical Research and Training (EBRU-IAMRAT)

Determine salt content of meals served by National Home-Grown School Feeding Programme, educate students on the risks of too much salt, train school food vendors on reduced-salt cooking, and evaluate the effectiveness of salt reduction education in primary schools.

Nigeria: African Field Epidemiology Network (AFENET)

Improve blood pressure control in three communities in Anambra state by raising awareness about high blood pressure, promoting patient-centered approaches for community-based diagnosis, building health systems capacity for blood pressure management, and ensuring availability of blood pressure drugs in primary care centers.

Pakistan: Indus Health Network-Global Health Directorate (IHN-GHD)

Launch a patient-centered hypertension screening and treatment program at four IHN-GHD primary care sites by using standardized screening and treatment protocols, creating a patient registry, and ensuring accessibility of regular blood pressure monitoring and convenient, affordable medication refills and adjustments.

South Africa: University of Wollongong (UoW)

Establish a rigorous, transparent and sustainable mechanism for monitoring and evaluation of salt reduction legislation in South Africa.

Tanzania: Muhimbili University of Health and Allied Sciences (MUHAS)

Assess trans fat levels in street foods and edible oils/fats, and generate local evidence to promote best practice policies for trans fat elimination and the use of healthier replacement oils/fats.

Vietnam: National Institute of Hygiene and Epidemiology

Improve access to quality, affordable cardiovascular medications among rural populations in northern Vietnam by implementing and scaling up the Revolving Fund Pharmacy model, a patient-centered supply chain system to bridge gaps in government pharmacy medication supply.

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About Resolve to Save Lives

Resolve to Save Lives is a five-year, \$225 million campaign funded by Bloomberg Philanthropies, the Bill & Melinda Gates Foundation, and Gates Philanthropy Partners, which is funded with support from the Chan Zuckerberg Foundation. It is led by Dr. Tom Frieden, former director of the US Centers for Disease Control and Prevention, and housed at [Vital Strategies](http://VitalStrategies.org). To find out more visit:

<https://www.resolvetosavelives.org> or Twitter [@ResolveTSL](https://twitter.com/ResolveTSL)

About Vital Strategies

Vital Strategies is a global health organization that believes every person should be protected by a strong public health system. We work with governments and civil society in 73 countries to design and implement evidence-based strategies that tackle their most pressing public health problems. Our goal is to see governments adopt promising interventions at scale as rapidly as possible. To find out more, please visit www.vitalstrategies.org or Twitter [@VitalStrat](https://twitter.com/VitalStrat).

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