



Request for Proposals (RFP)

Study of Knowledge, Attitudes and
Practices (KAP) to Non-Communicable
Diseases, Breast and Cervical Cancers in
Ajloun, Mafraq, and Tafilah



Table of Contents

Introduction	2
Breast Cancer in Jordan	3
Purpose	6
Objectives	7
Considerations	8
Data Processing	9
Deliverables	10
Proposal Technicalities	11
Financials	12
Qualitative information to be submitted	12
Proposal General Information	14
Proposal Evaluation	16
Instructions to Bidder	17
General Terms and Conditions	18
RFP Timetable	20



Jordan Breast Cancer Program

Jordan Breast Cancer Program (JBCP) is a national program led by the King Hussein Cancer Foundation and Center (KHCF/KHCC) and the Ministry of Health (MOH) that was established in 2007 upon the directive of MOH to respond to the increased burden of breast cancer as the most common cancer in Jordan, and as most of the cases were diagnosed in late stages. Jordan Breast Cancer Program (JBCP) was established in 2007 upon the directive of the Ministry of Health and under the leadership of King Hussein Cancer Foundation and Center (KHCF/KHCC) as a national program that coordinates and leads breast cancer early detection efforts across Jordan. JBCP's main mandate is the down-staging of breast cancer from its late stages (III and IV) to early stages (0, I, and II), wherein the disease is more curable, survival rates are higher, and treatment costs are lower. To achieve that JPCP coordinates and leads national breast cancer early detection efforts in Jordan by ensuring the availability of quality screening services, improving access to screening and early detection services, raising public awareness and education about breast cancer, and creating an enabling environment for adopting breast cancer control practices.

Breast Cancer in Jordan

Breast cancer is the most common cancer overall as well as the most common malignancy afflicting women in Jordan. According to the latest statistics from **2017** Jordan National Cancer Registry, **1,302** breast cancer cases were diagnosed accounting for **20.5%** of the total new cancer cases among Jordanians were **1,292** females and **10** males.¹ Breast cancer is ranked first among cancer in females, accounting for **38.4%** of all female cancers, and is the leading cause of deaths pertaining to cancer among Jordanian women. The alarming increase of new cases highlighted the importance of addressing the awareness in Jordan.

Awareness of breast cancer screening in Jordan was assessed through a knowledge, attitudes, and practices (KAP) study in 2020.² KAP studies are commonly used tools to evaluate the ways that study participants experience a health issue and health care services aiming to address that health issue.³ Following the successful implementation of a KAP study on breast cancer in Jordan in 2020, this study aims to evaluate attitudes surrounding beliefs surrounding screening of all cancers amenable to early detection in Jordan: breast, cervical, and colorectal.

Cervical Cancer in Jordan

The cause of cervical cancer is usually HPV, which is a common virus that infects millions of people at some point in their lives.⁴ Cervical cancer can be prevented by routine pap smears, which are tests used to detect precancerous cells in the cervix. The pap smear test can also be used to detect cervical precancerous cell changes before they develop into cervical cancer.⁵ Regular pap smears are an important part of preventing cervical cancer and saving lives, as early detection can prevent cervical cancer from developing. Cervical cancer can be prevented by increasing awareness of the importance of pap smears, getting regular screenings, and maintaining healthy lifestyle habits.⁶ Pap smears, along with HPV vaccine and other screening methods, can prevent up to 90 percent of cervical cancers, if caught early.⁶ Eliminating risk factors like smoking and HPV also plays a role in prevention, as well as educating women about the importance of regular checkups. Cervical cancer is one of the most preventable cancers, but detection is key to survival.⁷

Cervical cancer is less common in Jordan, and according to 2021 statistics, 115 cervical cancer cases are diagnosed in women each year.⁸ Rates of cervical cancer in Jordan are expected to be underreported, have inadequate case findings, and are sometimes associated with societal disapproval.⁹

The most effective method of cervical cancer screening is Pap smear, and is currently not available in the public sector in Jordan (MOH).¹⁰ Population-based screening for cervical cancer has shown to be a powerful tool to decreasing cervical cancer mortality; for example, the introduction of cervical cancer screening decreased the mortality rate from cervical cancer by 50-70%.¹¹ It is recommended that women begin Pap smears a few years after the beginning of sexual activity.¹² A 2020 study of 500 married Jordanian women aged 21 to 65 years found that only 31% had been screened for cervical cancer. In contrast to previous studies that had associated low education and low income levels with low rates of screening, sociodemographic factors had no influence on rates of cervical cancer.¹²

Non-Communicable Diseases in Jordan

Non-Communicable Diseases (NCDs) are a group of diseases that are not passed from person to person and non-infectious.¹³ They mainly include cardiovascular diseases, diabetes, and cancers.¹⁴ Jordan is one of the countries in the world with the highest NCD mortality rate¹⁵. They account for more than half of all deaths in the country and are a major cause of morbidity.¹⁶ The high prevalence rates of NCDs are also driving up health care costs.¹⁵ The prevalence of these diseases is increasing due to lifestyle changes, such as increased obesity, sedentary lifestyles and other modifiable risk factors. Jordan is also one of the countries with high prevalence of obesity and diabetes among adults.¹⁷ The Jordanian government has taken steps to prevent this by launching a National Strategy for Prevention of Non-Communicable Diseases (NCD). The strategy includes awareness campaigns as well as initiatives to promote healthier lifestyles through education, media coverage, and community involvement.¹⁸ Also, the World Health Organization responded to the NCDs pandemic with multiple international and regional initiatives to prevent the NCDs and decrease their morbidities and mortalities.¹⁹

The World Health Organization states that the prevention of cancer, especially when integrated with the prevention of chronic diseases shares common risk factors such as cardiovascular diseases, diabetes, chronic respiratory diseases, alcohol dependence, and other related issues, offers the greatest public health potential and the most cost-effective long-term method of cancer control.²⁰

Common risk factors underlying these conditions include:

- Tobacco use
- Dietary factors
- Physical inactivity
- Overweight and obesity
- Alcohol use

Purpose

The purpose of this RFP issued by the Jordan Breast Cancer Program is to solicit proposals from an eligible firm, individual consultants, organization, company, or institution that has extensive experience in conducting surveys in general along with vast practical knowledge of the use of both quantitative and qualitative research methods to implement a Knowledge, Attitudes and Practices (KAP) to Non-Communicable Diseases, Breast and Cervical Cancers in three Jordanian governorates (Ajloun, Mafrq, and Tafilah). According to the World Health Organization, knowledge, attitude, and practice (**KAP**) surveys are representative of a specific population to collect information on what is known, believed and done in relation to a particular topic, and are the most frequently used study tool in health-seeking behavior research

The purpose of this survey to assess the level of women knowledge, awareness and practices regarding screening and early detection of breast and cervical cancer, and to assess the level of women and men knowledge, awareness and practices regarding the NCDs prevention in Ajloun, Mafrq, and Tafilah. Moreover, we expect that the survey will identify gaps and barriers which may prevent individuals from getting screened or having the appropriate information related to cancer, available screening services, NCDs prevention, a healthy lifestyle and risk factors. This survey will pay special attention to factors found to be associated with breast cancer screening practices in previous studies and laid out in the introduction. This survey will also address participants' knowledge regarding screening guidelines and the rates at which individuals avail themselves of screening for the breast cancer.

Definitions of Terms

Knowledge	<p>Knowledge of women regarding breast and cervical cancers in general and its prevention through screening in particular.</p> <p>Knowledge of women and men regarding the risk factors of NCDs and NCDs prevention.</p>
Attitude	<p>Attitude is the belief that can influence the exposure of the sampled population (women) to different risk factors for cancer and their intention to follow the breast and cervical cancer prevention and detection strategies based on the existing knowledge.</p> <p>Attitude is the belief that can influence the exposure of the sampled population (women and men) to different risk factors for NCDs and their intention to follow NCDs prevention strategies based on the existing knowledge.</p>
Practice	<p>Practice of women which can expose them to the risks of breast and cervical cancer and influence the compliance to cancer screening.</p> <p>Practice of women and men which can expose them to the risks of NCDs.</p>

Objectives

- To study KAP of women toward early detection methods of breast and cervical cancers, and KAP of women and men regarding NCDs prevention and risk factors.
- To assess current awareness levels for the various cancer screening tools.
- To measure participants' familiarity with those tools in terms of the required starting age, how often they should be carried out, how to carry them out, where, etc.
- To identify participants' main source of cancer related information (internet, doctors, word of mouth etc.).
- To assess and understand current behavior with regards to NCDs prevention, risk factors and cancer screening tools, especially in terms of their commitment towards the outlined procedures.
- To identify and understand the main reasons behind not committing to the necessary early detection procedures and barriers (such as age, parity, education, employment, socio-economic status, availability of services and family attitude).
- To evaluate existing opportunities and resources for cancer care and to assess awareness of these resources among Jordanians in Ajloun, Mafraq, and Tafilah.
- To estimate the prevalence of usage of different methods of early detection of breast and cervical cancers and NCDs prevention among participants aged 20-69 years.
- To utilize evidence of comparative conclusions from collected data to develop interventions to overcome barriers, promote advocacy and to support existing opportunities for cancer care, awareness and NCDs prevention.
- To utilize study outcomes to build bridges and encourage collaboration between institutions, the Ministry of Health, policy makers, community leaders, international organizations, and donors to support projects, initiatives, and research on cancer and NCDs prevention in Jordan.

Considerations

- The firm/individual consultant is expected to start process in **21 of June 2022**.
- The questionnaire will be developed by firm/individual consultant and JBCP.
- The awarded firm/Individual consultant will present a preliminary draft of the sampling plan to JBCP management for review and comments.
- The survey revision will be conducted by the consultant.
- The survey will be conducted by using a face-to-face methodology targeting the sample of audience within the requested criteria for the Jordanian women and men in Ajloun, Mafraq, and Tafilah.
- The scientific guidance, analyzing and reporting the data will be done by the consultant.
- All proposals should be submitted with a detailed budget, time frame for work, and the methodology will be considered, process of collecting and the data and analysis completion.
- The governorates that will be involved are **(Mafraq, Ajloun, and Tafelah)**.
- The awarded firm/Individual will proposed the sampling technique that will be used for the survey. All proposals should present a detailed description of the sampling plan and sampling frame for a random representative sample form **each** targeted governorate with a margin for non-response rate.
- The preliminary awarded firm/individual consultant will only be considered finally awarded by JBCP if they fulfilled JBCP requirements and adjusted the questionnaire and sampling methodology as per JBCP instructions.

Data Processing

- Question coding: Each question or question item (in multi-part questions) shall be coded by assigning a consecutive series of codes beginning with the number 1. Each question shall include a separate code (99) for “Don’t know/no response” as a volunteered response.
- Data labels: The data file shall include complete and clear variable and value labels in English. Labels do not need to exactly duplicate the question wording but rather should make each question easily distinguishable.
- Open-end codes: The firm/Individual Consultant shall suggest categories for open-ended questions and explain the rationale for these choices. The categories should be specific; the Firm/Individual Consultant will collapse the categories into a manageable set in consultation with JBCP, after which the Firm/Individual Consultant will use the approved questions, do data entry and content analysis.
- Data Cleaning: All data should be “cleaned” that is, checked for omissions, inconsistencies, or other errors.
- Statistical analysis using multivariate statistical techniques for the close ended questions and content analysis for the open-ended questions.

Deliverables

The following deliverables are required:

- **Analytical report** of the quantitative and qualitative data collected through the individual interviews.
- **Complete Data:** The Firm/Individual Consultant shall submit the complete, cleaned data file in SPSS statistical software to JBCP, the data file shall include variable and value labels that clearly summarize the question wording. All variable and value labels must be in English. Qualitative data file must include the transcription, the coding and the steps of the content analysis of the open-ended questions.
- **Socio-demographic Data:** The Firm/Individual Consultant shall submit to JBCP marginal results that include frequency distributions and significant variables associations that are related to socio-demographic characteristics including age, residence (urban, rural, and desert), education, income, marital status, and occupation.
- **A PowerPoint Presentation:** The Firm/Individual Consultant will present an English comprehensive KAP PowerPoint presentation summarizing the findings in person at JBCP offices and will deliver a softcopy that includes both English and Arabic versions of the same presentation.
- **Final Report:** The Firm/Individual Consultant shall submit two final bilingual reports with detailed narrative analysis of the data collected through the individual interviews. The report will provide recommendations for JBCP implementation in the future.

Proposal Technicalities

- Detailed description of the methodology, including proposed survey sample, and a description of how the sample will be selected from each governorate.
- The offer should be submitted for: **KAP study with a random stratified sample of Jordanian women and men aged between 20-69 years in Ajloun, Mafraq, and Tafilah.**
- Detailed information about the women and men who will participate in the study and how they are selected from each governorate upon the requested criteria.
- Methods of quality control.
- **A comprehensive timeline of work**, including the number of days required for each stage of the project, questionnaire revision processing and its testing, training of the field force, fieldwork, survey data entry, delivery of survey socio-demographic-data to JBCP, analysis and reporting, and final delivery of all required materials and report to JBCP.
- The qualifications of the Firm/ Individual Consultant, including description of previous similar assessments and surveys (please provide three references); and the qualifications of researchers who perform the sampling methodology, the qualifications of the researchers who will analyze the data, the qualifications and the number of field supervisors and the interviewers who would take part in the project (disaggregated by gender).
- Assigned person (or team) to respond to final decisions and follow-up implementation.
- Samples of similar work, particularly any prior national or subnational surveys conducted by the Firm/Individual Consultant.
- Any scheduling conflicts you may have due to work on other projects.
- The proposal should be presented to JBCP on a date and time clearly agreed upon (Refer to timetable).

Financials

Financials should be presented in as much detail as possible and include, at a minimum, the following:

- Financial offer for an online survey with a total sample size of Jordanian women and men that will be selected randomly.
- Human resources costs in details: including those for the key researchers, analysts, statisticians, data entry staff, interviewers, and the field supervisors.
- Other costs related to field work, final report writing and presentation.
- Any costs intended to be paid to a third-party subcontractor.

Qualitative information to be submitted

Guidelines

All responses must provide the information requested below. To ease review and evaluation, please provide the information in the following order, indicating the number of the question at the beginning of each response.

Proposal Definition

All bidders must provide a statement of understanding of the scope of the proposal and an overall description of the bidders' role and responsibilities.

Information on Firm/Individual Consultant

Introduce the Firm/Individual Consultant's organization (e.g. parent, age, size, number of customers, offices, number of employees, etc.). Most importantly, provide examples of similar work and a list of customers specific to non-governmental, non-for-profit and previous national or subnational surveys.

- **Information on Individuals and Access to Firm/Individual Consultant Resources**
 1. Provide the name, title, office location, and phone number of the individual(s) who will serve as the primary contact(s) with JBCP and, if different, office locations and addresses where service will be performed.
 2. Provide the relevant credentials and qualifications of the primary person(s).
 3. Identify the Firm/Individual Consultant's key support personnel, and discuss the availability to JBCP of all such personnel.

- **Other Information**
 1. Provide any additional information that the Firm/Individual Consultant feels would assist JBCP in evaluating the proposal.
 2. Summarize the reasons that the Firm/Individual Consultant is best suited to conduct "Study of Knowledge, Attitudes and Practices (KAP) to Non-Communicable Diseases, Breast and Cervical Cancers in Ajloun, Mafraq, and Tafilah"
 3. Discuss the unique attributes of the Firm/Individual Consultant and the individuals assigned to the project.
 4. Be specific and clearly verify how JBCP will benefit from the involvement of the Firm/Individual Consultant.

Proposal General Information

Definitions

Table (1): Definitions and Abbreviations

Bidder	Organization or individual consultant submitting a proposal in response to this RFP
JBCP	Jordan Breast Cancer Program
KHCF	King Hussein Cancer Foundation
KHCC	King Hussein Cancer Center
RFP	Request for Proposal

Questions

Any questions by the bidders concerning this RFP should be made to Ms. Ehsan Qtaishat (+9626)5530800 ext.179, mobile: 0776844815, e-mail at e.qtaishat@jbcp.jo

Last date to receive questions is 24th of May 2022.

Interpretation

No employee of JBCP is authorized to interpret any portion of this RFP or give information as to the requirements of the RFP in addition to that contained in the written RFP document. Interpretations of the RFP or additional information as to its requirements, where necessary, shall be communicated to Bidders by written addendum only.

Requests for Additional Information

Requests for additional information or clarification must be made in writing and will be accepted until 24th of May 2022. The request must contain the Bidder's name, address, phone number, and e-mail. E-mails will be accepted at e.qtaishat@jbcp.jo

Responses to Inquires

JBCP will issue responses to inquiries and any other corrections or amendments it deems necessary in written addenda issued before the Proposal Due Date. Bidders should not rely on any statements or explanations other than those made in this RFP or in any addendum to this RFP. Where there appears to be a conflict between the RFP and any addenda issued, the last addendum issued will prevail.

This RFP supersedes any verbal communication carried out between the Bidder and JBCP prior to release of this RFP.

Please note that responses to inquiries will be shared with all bidders.

Proposal Evaluation

Selection Criteria

A review and evaluation of the submitted proposals and other information provided will be the sole basis for the selection of the final service provider. The submitted proposals will be going through an assessment phase with a main focus on the following criteria: (criteria are not listed according to level of importance)

- Comprehensiveness of proposal.
- Compliance with JBCP's mission and overall theme.
- Fulfillment of objectives of the KAP study (shared in earlier sections)
- Creativity of proposed concepts. Proposing supplementary/complementary research ideas and creative ways to conduct the research will be considered in the selection criteria.
- Quality based on company's or individual's portfolio and previous client satisfaction.
- Financials (The proposal with the lowest dinar's amount will not necessarily be considered as the best proposal, selected proposal must score highest in JBCP assessment process).
- Institution's/Consultant's credentials and past experience in similar work.

Evaluation

Within two weeks of receipt, JBCP will evaluate the proposals based on the requirements as described in this RFP.

- JBCP may determine, in its sole discretion, that in certain cases, particular risks/conflicts/litigation/regulatory matters would disqualify a firm from further consideration.
- Incomplete and/or late proposals will not be considered and will be automatically disqualified from further consideration.
- All proposals will be reviewed for compliance with the instructions provided in this RFP. A responsive proposal:
 - Includes all documentation;
 - Is of timely submission; and,
 - Has the appropriate signatures

Contract Negotiation

In the case that there are two finalists that JBCP has to decide between, the finalists may be called back for oral interviews with the committee. JBCP will negotiate with the selected Firm/Individual Consultant the final contract. If JBCP is unable to reach acceptable terms with the highest ranked Firm/Individual Consultant, JBCP may seek to reach acceptable terms with the next highest ranked Firm/Individual Consultant and formulate a contract with that Firm/Individual Consultant.

Instructions to Bidder

Submission of Hardcopy

- All interested companies are expected to submit both a technical and a financial proposal in sealed labeled envelopes to JBCP offices no later than **(14/June/2022)**.
- Technical and financial proposals should each be presented in a separate sealed envelope. JBCP will expect two sealed envelopes per bidder (Technical and Financial).
- Envelope labels should read the following:

Ms. Ehsan Qtaishat

Monitoring and Evaluation Department

AL - Koufeh Street

Um Uthayna. Amman – Jordan

Name of the company

Study of Knowledge, Attitudes and Practices (KAP) to Non-Communicable Diseases, Breast and Cervical Cancers in Ajloun, Mafraq and Tafilah

Duration

The bidder must clearly note that the RFP is valid for a period of 30 days from the date of submission.

Condition Statement and Officer Signature

The proposal must be signed by an officer of the company/individual consultant who is legally authorized to enter into a contractual relationship in the name of the Bidder with JBCP. The following statement shall be repeated in the Firm/Individual Consultant's proposal and signed by such officer: "I agree to bid by all conditions of this RFP and certify that all information provided in this proposal is true and correct, that I am authorized to sign this proposal on behalf of {FIRM/INDIVIDUAL CONSULTANT NAME}, that {FIRM/INDIVIDUAL CONSULTANT NAME} is in compliance with all requirements of this RFP, and that {FIRM/INDIVIDUAL CONSULTANT NAME} will immediately notify JBCP if any conflict of interest or litigation occurs following selection of {FIRM/INDIVIDUAL CONSULTANT NAME} as the provider of the survey.

General Terms and Conditions

JBCP Rights

JBCP may, at its sole and absolute discretion, reject any and all, or parts of any and all proposals; re-advertise this RFP; postpone or cancel, at any time, this RFP process; or waive any irregularities in this RFP or in the proposals received as a result of this RFP.

Proposal Expenses

All expenses involved with the preparation and submission of proposals to JBCP, or any work performed in connection therewith, shall be borne by the Bidder. No payment will be made neither for any responses received, nor for any other effort required of or made, nor expenses incurred, by the Bidder prior to commencement of work as defined by the approval by JBCP of a contract.

Negotiations

JBCP reserves the right to enter into compensation negotiations with the highest ranked Bidder(s). If JBCP and the first selected Bidder can not negotiate a successful compensation arrangement, JBCP may terminate said negotiations and begin negotiations with the next selected Bidder. This process will continue until appropriate compensation has been agreed upon or all Bidders have been rejected. No Bidder shall have any rights against JBCP arising from such negotiations.

Formal Agreement

This RFP and the related responses of the selected Firm/Individual Consultant will constitute the basis of the formal agreement between the Firm/Individual Consultant and JBCP.

Governing Laws

By submitting a proposal, the Firm/Individual Consultant agrees that all contracts resulting here from or as a function of the provision of services contemplated hereby shall be governed by the laws of the Hashemite Kingdom of Jordan.

Payment

JBCP Payment toward the contractual agreement will follow an agreed payment schedule during negotiation. The contracted work may begin sooner than the first payment.

Termination

JBCP may terminate the agreement with the awarded Firm/Individual Consultant at any time if based on JBCP assessment the consultant did not meet the commitments agreed on with JBCP. In this case, JBCP will give the Firm/Individual Consultant one-month notice to take corrective measures. If the Firm/Individual Consultant did not take the necessary actions, then this agreement with JBCP will be considered void and the Firm/Individual Consultant will reimburse back to JBCP all the previous payments and will compensate JBCP for the losses incurred due to the delay. If the Firm/ Individual Consultant decided to terminate the agreement for any reason, JBCP is entitled to get one-month notice that clearly states the reasons behind that and the Firm/Individual Consultant will reimburse back to JBCP all the previous payments and will compensate JBCP for the losses incurred due to the delay.

RFP Timetable

Table 2: Timetable

RFP sent out to company	17/05/2022
Acceptance to Bid	31/05/2022
Proposal due to JBCP	14/06/2022
JBCP Response to Proposal	21/06/2022

References

1. Nimri O, Sharkas G, Tan'ni N. Statistical Digest: Jordan Cancer Registry Cancer Incidence in Jordan 2017. Published online 2017. https://moh.gov.jo/ebv4.0/root_storage/ar/eb_list_page/%D8%A7%D9%84%D8%AA%D9%82%D8%B1%D9%8A%D8%B1_%D8%A7%D9%84%D8%B3%D9%86%D9%88%D9%8A_%D9%84%D8%A7%D8%B5%D8%A7%D8%A8%D8%A7%D8%AA_%D8%A7%D9%84%D8%B3%D8%B1%D8%B7%D8%A7%D9%86_%D8%A7%D9%84%D9%85%D8%B3%D8%AC%D9%84%D8%A9_%D9%81%D9%8A_%D8%A7%D9%84%D8%A7%D8%B1%D8%AF%D9%86_%D9%84%D8%B9%D8%A7%D9%85_2017.pdf
2. Al-Mousa DS, Alakhras M, Hossain SZ, et al. Knowledge, Attitude and Practice Around Breast Cancer and Mammography Screening Among Jordanian Women. *Breast Cancer Targets Ther.* 2020;12:231. doi:10.2147/BCTT.S275445
3. Goutille F. Knowledge, Attitudes and Practices for Risk Education: How to Implement KAP Surveys Guideline for KAP Survey Manager. Octobre 2009. Handicap international; 2009.
4. Okunade KS. Human papillomavirus and cervical cancer. *J Obstet Gynaecol J Inst Obstet Gynaecol.* 2020;40(5):602-608. doi:10.1080/01443615.2019.1634030
5. Tovar JM, Bazaldua OV, Vargas L, Reile E. Human papillomavirus, cervical cancer, and the vaccines. *Postgrad Med.* 2008;120(2):79-84. doi:10.3810/pgm.2008.07.1794
6. Kessler TA. Cervical Cancer: Prevention and Early Detection. *Semin Oncol Nurs.* 2017;33(2):172-183. doi:10.1016/j.soncn.2017.02.005
7. Mzarico E, Gómez-Roig MD, Guirado L, Lorente N, Gonzalez-Bosquet E. Relationship between smoking, HPV infection, and risk of Cervical cancer. *Eur J Gynaecol Oncol.* 2015;36(6):677-680.
8. Bruni L, Albero G, Serrano B, et al. Human Papillomavirus and Related Diseases in Jordan. Published online October 22, 2021. <https://hpvcentre.net/statistics/reports/JOR.pdf?t=1650880012420>
9. Sharkas G, Arqoub K, Khader Y, et al. Trends in the Incidence of Cervical Cancer in Jordan, 2000–2013. *J Oncol.* 2017;2017:e6827384. doi:10.1155/2017/6827384

10. Hawkins NA, Cooper CP, Saraiya M, Gelb CA, Polonec L. Why the Pap test? Awareness and use of the Pap test among women in the United States. *J Womens Health* 2002. 2011;20(4):511-515. doi:10.1089/jwh.2011.2730
11. Sharma P, Rahi M, Lal P. A Community-based Cervical Cancer Screening Program among Women of Delhi using Camp Approach. *Indian J Community Med Off Publ Indian Assoc Prev Soc Med.* 2010;35(1):86-88. doi:10.4103/0970-0218.62576
12. Al-amro SQ, Gharaibeh MK, Oweis AI. Factors Associated with Cervical Cancer Screening Uptake: Implications for the Health of Women in Jordan. *Infect Dis Obstet Gynecol.* 2020;2020:9690473. doi:10.1155/2020/9690473
13. Kim HC, Oh SM. Noncommunicable diseases: current status of major modifiable risk factors in Korea. *J Prev Med Public Health Yebang Uihakhoe Chi.* 2013;46(4):165-172. doi:10.3961/jpmph.2013.46.4.165
14. Beaglehole R, Bonita R, Horton R, et al. Priority actions for the non-communicable disease crisis. *Lancet Lond Engl.* 2011;377(9775):1438-1447. doi:10.1016/S0140-6736(11)60393-0
15. Brown DW, Mokdad AH, Walke H, et al. Projected burden of chronic, noncommunicable diseases in Jordan. *Prev Chronic Dis.* 2009;6(2):A78.
16. Jawaldeh AA, Al-Jawaldeh H. Fat Intake Reduction Strategies among Children and Adults to Eliminate Obesity and Non-Communicable Diseases in the Eastern Mediterranean Region. *Child Basel Switz.* 2018;5(7):E89. doi:10.3390/children5070089
17. Ajlouni K, Khader Y, Batieha A, Jaddou H, El-Khateeb M. An alarmingly high and increasing prevalence of obesity in Jordan. *Epidemiol Health.* 2020;42:e2020040. doi:10.4178/epih.e2020040
18. Jordan forms National NCD Committee to Implement National NCD Strategy. Published November 30, 2011. <https://ncdalliance.org/news-events/news/jordan-forms-national-ncd-committee-to-implement-national-ncd-strategy>
19. The World Health Organization (WHO). Noncommunicable diseases. Accessed May 17, 2022. https://www.who.int/health-topics/noncommunicable-diseases#tab=tab_1
20. Cancer Control: Knowledge into Action: WHO Guide for Effective Programmes: Module 3: Early Detection. World Health Organization; 2007. Accessed May 17, 2022. <http://www.ncbi.nlm.nih.gov/books/NBK195408/>

**Thank
You** 