



Global Health
Development



EMPHNET
The Eastern Mediterranean
Public Health Network

EXPANDING EFFORTS



ANNUAL REPORT
2016 - 2017

**LETTER FROM
THE EXECUTIVE
DIRECTOR**



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EXECUTIVE DIRECTOR

LETTER FROM THE EXECUTIVE DIRECTOR

The Eastern Mediterranean Region shows us that practicing public health is a great challenge. It speaks of a public health community that is determined to make health better for its people. Every year, we look at what we accomplish and realize that it is the strength, willingness and motivation of countries that drives us to achieve more. Countries in our region refuse to surrender to the consequences of poverty, instability and war, and this is what makes our region special. It is what drives us forward with determination to achieve more.

We have grown accustomed to release and channel forces of change. Our slogan speaks about us as a driving force and the escalated momentum and achievements we bring is obligated to the countries and to our partners. Therefore, I would like to thank the countries for their dedication and express gratitude to the support of our partners. We look towards taking an advantage of new opportunities that will help us work together to achieve more.

This annual report is a mere verification for collective efforts. It presents areas of expansion that confirm our ability to excel in an environment that is conducive to collaboration, learning and networking. What we present in this annual report is only a taste of what can be achieved if resources were abundant, for the needs are enormous and the desire to change is unlimited. This report is a reward for the hard work of our network. It is what we have accomplished together and what will drive us to achieve more.

TABLE OF CONTENTS

INTRODUCTION	6
A DYNAMIC EXPANSION	7
EXPANDING OUR SCOPE IN FIELD EPIDEMIOLOGY	8
EXPANDING OUR SCOPE IN THE AREA OF KNOWLEDGE SHARING	10
EXPANDING EFFORTS TO ERADICATE POLIO AND STRENGTHEN ROUTINE IMMUNIZATION	13
EXPANDING OUR SCOPE IN THE AREAS OF EMERGENCY RAPID RESPONSE AND GLOBAL HEALTH SECURITY	17
EXPANDING OUR SCOPE IN BRUCELLOSIS SURVEILLANCE	22
EXPANDING OUR SCOPE IN ICT	23
EMPHNET COMPLETES AN INTEGRATED SCHOOL HEALTH PROJECT IN SYRIAN REFUGEE CAMPS IN JORDAN	25
WAY FORWARD	27



INTRODUCTION

Since its establishment in 2009, the Eastern Mediterranean Public Health Network (EMPHNET) has been operating in the Eastern Mediterranean Region (EMR), a region that is known to suffer the consequences of war, poverty, and political instability. Such conditions continue to affect health outcomes and impede health development, given the duality of health problems brought about by the increasing burden of non-communicable diseases and the predominance of communicable diseases. Unfortunately, many countries in the region are still challenged by health adversities and threats that overload their health systems, which are already frail and overstrained due to inadequate resources and disease burden. This heavy burden that continues to prevail in these countries weakens the countries' health systems and traps the health coverage and development spectrum.

Positioned as a non-profit organization working to support EMR countries strengthen their public health systems, EMPHNET's primary focus was initially manifested in supporting the Field Epidemiology Training Programs (FETPs) to strengthen the human resource component that serves as an essential building block for improving health systems performance. Over the years, and with the increasing demand from several EMR countries to develop capacities in other public health areas besides field epidemiology, EMPHNET broadened its scope to include emergency response, health security, communicable diseases, biorisk management, and health protection. Such expansion brought EMPHNET an opportunity to collaborate with a wider range of partners in trying to address public health issues that are of importance to EMR countries and the global public health community. As such, EMPHNET was driven to seek innovative approaches to work on positioning the EMR public health context within a global vision, thus bringing prominence to the growing public health needs in the EMR. Better health outcomes in the EMR shouldering a global standpoint and significance became EMPHNET's vision. This broader perspective propelled EMPHNET to develop the Global Health Development (GHD) initiative that is driven by the robust vision of impacting global health by meeting the need to respond to the existing and emerging public health challenges in the region.

A DYNAMIC EXPANSION


GHD operates to advance the work of EMPHNET by building coordination mechanisms with Ministries of Health, International Organizations and other institutions to improve population health outcomes in the EMR. Serving as a collaborative platform, GHD/EMPHNET is dedicated to serve the region by supporting national efforts to promote public health policies, strategic planning, sustainable financing, resource mobilization, public health programs, and other related services.

GHD/EMPHNET is committed to support EMR countries strengthen their health systems performance by identifying priorities and bringing new opportunities to implement activities to address these priorities. In doing so, GHD/EMPHNET assures that countries expand their efforts to maintain and build an adequate public health infrastructure. With this foresight, GHD/EMPHNET seeks to identify opportunities that can assist countries enhance their health system performance by supporting capacity development, program development, implementation research, information management and more. To do so, GHD/EMPHNET engages in developing new partnerships to expand its scope while maintaining the need to support countries address their growing needs and challenges. With this approach, GHD/EMPHNET employs a dynamic strategy that can accommodate the complexity and diversity of existing and emerging challenges in the region.



GHD/EMPHNET is home to a wide range of projects that address existing and emerging public health challenges in the region. GHD/EMPHNET brings together public health experts and leaders to build new collaborative approaches to address these challenges, thus contributing to global health development. GHD/EMPHNET collaborates with associations, institutions, networks and organizations that hold similar views.

EXPANDING OUR SCOPE IN FIELD EPIDEMIOLOGY



The epidemiological profile of Sudan is dominated by the widespread of communicable diseases, whereby the main causes of morbidity and mortality are diseases such as malaria, tuberculosis, diarrheal diseases and respiratory infections, hence the importance of FETP.

Over the years, GHD/EMPHNET has established a prominent role in developing capacity in a wide range of areas. As a key supporter for FETPs in the EMR, GHD/EMPHNET continues to support the FETPs in the region as a mechanism for enhancing health system performance. The year 2016/2017, has seen significant enhancements in this area with the establishment of two new FETPs in Tunisia and Sudan. These two programs were established in response to a request from the countries indicating a priority need to improve the public health infrastructure, particularly in the areas of surveillance systems, outbreak investigation and response.

With the FETP in Tunisia established as a one-year program and the Sudan program as a two-year program, both programs employ a mixture of didactic and field training and a requirement for each resident to plan and conduct a research project

While the FETP two year and one-year programs have proved to be very effective, GHD/EMPHNET identified a need for a shorter course that would predominantly meet the urging requests of some countries to further enhance the capacity at the fore front. Therefore, with the start of 2017, GHD/EMPHNET launched the Public Health Empowerment Program (PHEP) following consultation and close collaboration with the countries.

PHEP is a three-month in-service training that focuses on detection of and response to diseases and events of public health importance. Through this program participants learn and practice the fundamental skills needed to perform efficiently in district surveillance units, disease detection and reporting, summarization of data using simple tables and graphs, case investigation, outbreak investigation and response, surveillance monitoring and evaluation, and data analysis and interpretation for decision-making. PHEP trainees include health workers from the governorate and district health levels, at any of the preventive sector departments and health facilities. These are: epidemiology and surveillance, communicable diseases department, expanded program on immunization, infection control unit, environmental health department, food and water safety department, occupation health department, department for vector-borne diseases, Health Centers, health workers at points of entry and others,

This year the program was offered across the EMR in two variations PHEP- BFE (Basic Field Epidemiology) and PHEP-SPO (Surveillance Polio Officers). Hosted by the ministry of health to increase the sustainability factor, PHEP-BFE was launched in Iraq, Egypt and Jordan; while PHEP-SPO was launched in Sudan and Yemen. All these programs managed to graduate their first cohort in 2017.

DEVELOPING AN ONLINE PLATFORM

The fiscal year of 2016/2017 saw GHD/EMPHNET expand its capacity building reach to include online training, whereby it offered its first Online Course in Biorisk Management. The curriculum of the course was offered using the Global Biorisk Management Curriculum developed by Sandia National Laboratories.

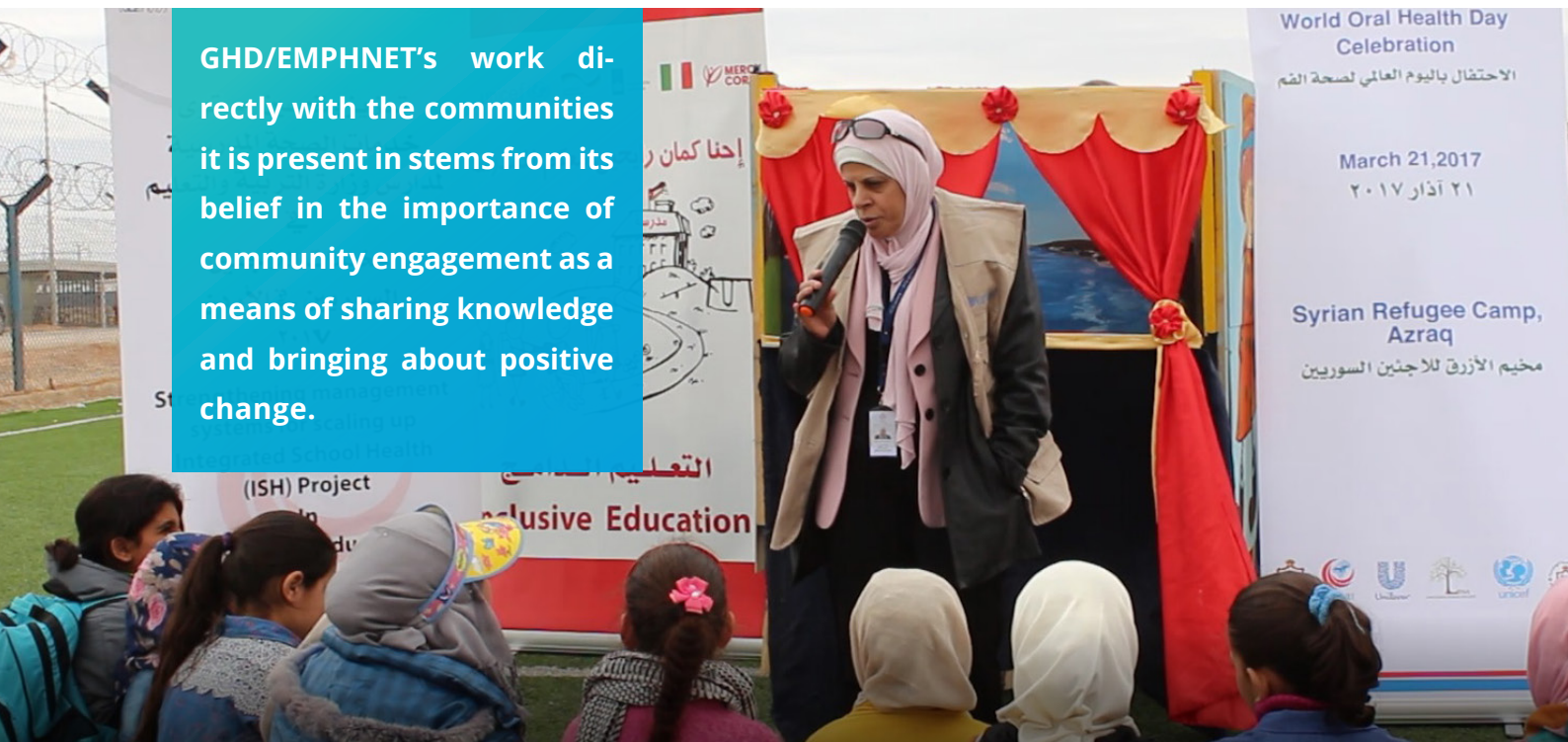
Targeting professionals from the MENA region, the course's participants were 20 professionals who included biosafety officers, biorisk management officers, scientists, and researchers. The course was designed to enhance participants' basic skills and knowledge in biosafety, biosecurity and biorisk management, thus enabling them to implement measures for protecting the safety and security of their laboratory environment. The course's sessions were facilitated by a team of instructors from GHD/EMPHNET, Princess Haya Biotechnology Center at the Jordan University for Science and Technology, and the Kabul University of Afghanistan. These instructors, checked the assignments, provided feedback on quizzes, guided online discussions, and provided support to the participants when needed.

Following the successful implementation of this course GHD/EMPHNET is looking to further explore online training as an option to expand its capacity building reach in the future.

EXPANDING OUR SCOPE IN THE AREA OF KNOWLEDGE SHARING

GHD/EMPHNET has always made knowledge sharing one of its main priorities, thus it has thrived on partnerships, agreements, and on allowing members of its network to be present in regional and global conferences. Furthermore, the team at GHD/EMPHNET has played a pivotal role in contributing to regional and global conferences and meetings. This has been the trend since the establishment of EMPHNET in 2009, and this year was no exception.

GHD/EMPHNET's work directly with the communities it is present in stems from its belief in the importance of community engagement as a means of sharing knowledge and bringing about positive change.



EXPANDING ITS SCOPE IN THE AREA OF HEALTH PROMOTION

This fiscal year, GHD/EMPHNET also expanded the scope of its work in the area of health promotion. Developing a real hand-on approach in the area of community engagement in Jordan. It worked alongside the Jordanian Ministry of Health (MOH) and Relief International to observe World Health Day in April 2017 which for the year held the theme “Depression-Let’s Talk.” In an event it hosted at the Zaatari Refugee Camp located in Mafraq, Jordan, its team engaged with the local community in a Q&A session, encouraging them to speak about their experiences with depression, low self-esteem, and their support systems at home and within

their broader communities. The event also featured talks by specialists in the field. A month prior to this event, GHD/EMPHNET also collaborated with Unilever, a multi-national consumer goods company, and Jordanian MOH to honor World Oral Health Day, globally celebrated each year on March 20.

For this occasion, it held a one-day activity targeting over 100 children living in the Azraq Camp, an area East of Jordan predominantly populated by Syrian refugees. Held during the last week of March 2017, the events of this day served to complement the health education agenda lined-up for the Integrated School Health Project (ISH), a project EMPHNET implemented in the same year in collaboration with the United Nations International Children's Emergency Fund (UNICEF) and Jordanian MOH.

GHD/EMPHNET saw the importance of expanding its scope in this area after seeing that for this segment of the population, raising awareness about health especially important. This need was identified following health examinations conducted by EMPHNET, Jordanian MOH, and UNICEF as part of the ISH project whereby over 13,000 cases of dental plaque and dental cavities were identified in Syrian refugee camps alone alongside other health challenges. Therefore, these events did not only fall in line with the world's celebrations, but it also responded to a pressing health need seen within this population in particular.

Recognizing the high prevalence of NCDs in the region and the world at large, GHD/EMPHNET also joined forces with Jordan Health Aid Society, Lina and Green Hands Society, Al Waad Society for Advocacy and Survivorship, the Jordanian CSO Health Alliance, the Royal Health Awareness Society and others to promote a healthier, more sustainable lifestyle across Jordan, thus launching the Jordan Non-Communicable Disease Alliance (JNCDA) on April 4, 2017.

JNCDA's goals echo the global efforts made to reduce the prevalence of NCDs in communities across the country. It particularly works to reduce the risk of early deaths and encourage NGO, private sector, and community participation. Similar alliances have been established around the world to support global strategies to combat NCDs.

GHD/EMPHNET SUPPORTS FETPS IN CONFERENCES

GHD/EMPHNET has supported FETP residents and graduates in the region while attending several regional and global conferences this year. In December 2016, it held its Fifth Regional Conference in Marrakesh, Morocco. The conference saw oral and poster presentations presented by FETP Residents from Afghanistan, Egypt, Iraq, Jordan, Lebanon, Morocco, Pakistan, Sudan, and Yemen. Members not able to attend the conference made video and audio recordings of their presentations which were played during the sessions. Similarly, GHD/EMPHNET also supported FETP residents and graduates from the region to attend and present at TEPHINET's 9th Global Conference held in Chiang Mai, Thailand in August 2017.

The conference saw participation from FETP residents from Egypt, Iraq, Jordan, Morocco, and Pakistan. Four months earlier, GHD/EMPHNET also supported FETP residents and graduates from Afghanistan, Jordan, and Pakistan at the FETP International Nights of the 66th Annual Epidemic Intelligence Service (EIS) Conference held in Atlanta, Georgia, USA. Its support for such participation stems from its belief in networking and exchange as a means to elevate public health practice. Such conference present valuable opportunities for members of the EMR network to expand their knowledge and their horizons. This year saw the largest participation from our region in such conferences.



EXPANDING EFFORTS TO ERADICATE POLIO AND STRENGTHEN ROUTINE IMMUNIZATION

For the past 20 years, routine immunization coverage has shown remarkable improvement in the Eastern Mediterranean Region (EMR); however, due to humanitarian crises, poverty and other prevailing situations afflicting the region some children still miss getting vaccinated, and worse still, some countries even see a decline in the immunization coverage. Within such challenges, GHD/EMPHNET continues to work towards closing gaps in the areas of routine immunization.

In February 2017, GHD conducted a three-day training workshop on Needs Analysis for staff working in Expanded Program on Immunization (EPI), in Amman Jordan. This workshop was attended by 20 EPI managers, EPI training and supervision officers, Vaccine Preventable Diseases (VPD) surveillance officers, and EPI focal persons from, Egypt, Jordan, Morocco, Sudan, and Tunisia. Held as a collaborative effort between GHD/EMPHNET, Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), and UNICEF, this workshop allowed the countries to identify and analyze the training needs of EPI staff members. The sessions concluded with country representatives presenting draft training strategies and expressing their expectations from GHD/EMPHNET and partners in terms of future support to address their training needs.

A month later, GHD/EMPHNET participated in an event hosted by UNICEF for Improving Coverage and Equity of Routine Immunization through Strengthening Supply Chain Management in MENA Countries. Hosted in Jordan at the Dead Sea, the objectives of this meeting included



status review of current ISC (Immunization Supply Chain) system performance throughout the MENA region; identification of successful interventions both within and outside the MENA region which support continuous improvements in ISC performance and wider program outcomes; identification of appropriate strategies and interventions for each country to help improve the ISC system including linkages with global support streams; and identification of opportunities where ISC improvements can also improve immunization coverage/equity (including emergencies), demand creation, new vaccine introductions, product safety/quality and health systems strengthening. Some of the outcomes of the meeting included the mapping of the status of ISC across all participating MENA countries and identifying key constraints and interventions required for 2017 and 2018 which require both regional and global support; the updating knowledge of the global best practice on ISC and immunization program standards, strategies, tools, innovative approaches and country best practices; raising greater awareness about the programmatic importance and strategies that ISC systems and providing in wider coverage contribution and equity goals with the support of different partners; and creating a regional workplan that helps all children by mapping out the technical assistance and capacity development required to support ISC improvement with major focus on CCEOP that also contribute to wider gains in sustainable and resilient health systems.



During the last fiscal year, GHD/EMPHNET supported the Ministry of Public Health in Afghanistan implement activities to support strengthening routine immunization and polio eradication services in the country. These activities addressed inadequate knowledge about vaccinations in the country and consequently contributed to addressing its low immunization coverage. The project targeted twenty districts within the provinces of Nangarhar, Laghman and Kunar in the East, and Kandahar and Helmand in the South, starting with the pre-intervention survey where information on KAP, vaccination history, and households' demographics were collected over a period of three months.

Following this phase, the intervention was made, engaging parents, community health workers, elders, Mullas and teachers. These participants were provided with mobile phone numbers with subscriptions (of receiving voice messages) from the Afghanistan Telecom Regulatory Authority (ATRA) about risks of Vaccine Preventable Diseases (VPDs) and benefits of vaccination. The targeted groups were mothers, fathers, grandmothers, grandfathers, and any other family head members.

A follow-up survey was then conducted eight months after the beginning of the intervention period. This survey recruited the same households identified in the pre-intervention survey. Information on KAP and vaccination histories were collected as well as information on whether they received voice messages, messaging from key community leaders, or from the local community health workers.



KNOWLEDGE SHARING ON POLIO

GHD/EMPHNET participated in a conference titled Bridging the Gaps, this event was hosted by the Jordan University of Science and Technology (JUST), in collaboration with the Jordanian MOH, in April 2017. The conference focused on exploring opportunities for integrating new vaccines into the national program, acquiring the financial support to do so, and assessing the current disease burden of VPDs in Jordan.

Also taking place in April and extending throughout May 2017, the Iraqi MOH conducted a total of nineteen training workshops for 255 routine immunization (RI) staff from the primary health care centers of the Kirkuk and Maysan provinces. Supported by GHD/EMPHNET, these workshops trained RI staff on how to develop and update micro-plans for routine immunization for their centers with the purpose of improving immunization coverage and equity by maximizing the number of children vaccinated in the community in the two provinces, known to be at high risk for VPDs. The workshops' facilitators were provincial-level EPI managers

who participated in GHD/EMPHNET's Training of Trainers (ToT) conducted last year as well as district-level EPI focal points. In Kirkuk, the Director of Preventive Affairs joined in facilitating sessions, while in Maysan the sessions were facilitated by GHD/EMPHNET representative.

Furthermore, in June 2017, GHD/EMPHNET, the World Health Organization Regional Office for the Eastern Mediterranean (WHO EMRO), and the CDC co-organized a meeting with major partners involved in RI and Measles Elimination in the EMR; namely GAVI- Vaccine Alliance, the International Federation of Red Cross and Red Crescent Societies (IFRC), UNICEF, and the United Nations Relief and Work Agency (UNRWA) in Amman.



The meeting served to study the challenges confronting RI and measles elimination in the region, especially in conflict-stricken countries. More importantly, the meeting also sought to identify mechanisms for sustainable synergies among key actors with the objective of combining and integrating their efforts for short-term and long-term impact on immunization outcomes.

EXPANDING OUR SCOPE IN THE AREAS OF EMERGENCY RAPID RESPONSE AND GLOBAL HEALTH SECURITY

In the last four decades, over 77.5 million people in the EMR have been affected by natural disasters, including floods, droughts, and earthquakes, in addition to, ongoing civil unrest from wars, violent demonstrations, and disease outbreaks, thereby increasing the region's fragility and complexity. Hundreds of thousands of people have died due to these disasters, often afflicted with injuries or related diseases and other disabilities. Higher maternal and infant mortality rates are often associated with these events, which also increase the disease burden. Much of this suffering can be reduced if countries have the capacity to respond effectively in the immediate wake of disasters. With the 2005 revisions of the International Health Regulations (IHR), epidemic alert and response become critical to ensuring global health security. GHD/EMPHNET continued to engage with health security-related projects this fiscal year working towards the prevention of epidemics, early detection of biological and chemical threats, and rapid assessment of disease outbreaks, including emerging and re-emerging infections (natural, accidental, and intentional).



NEW PARTNERSHIPS

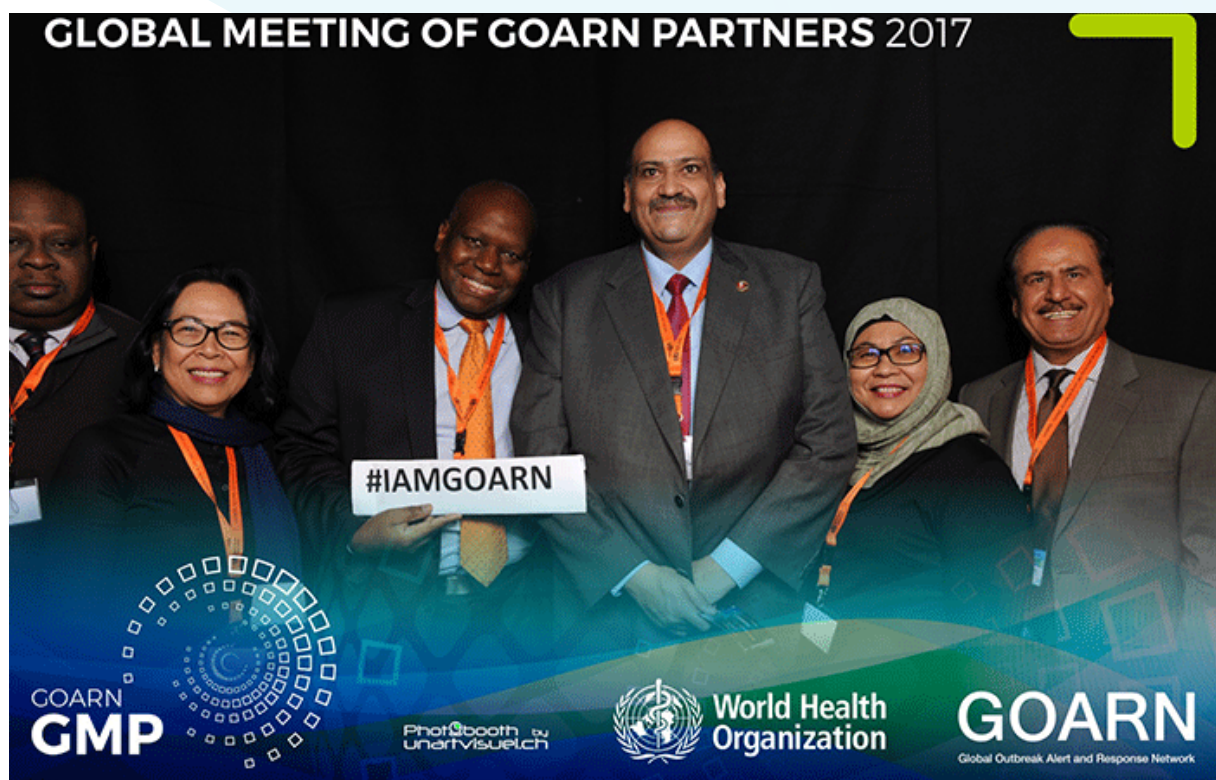
In order to effectively expand its contribution in this vital area, GHD/EMPHNET formed new partnerships during the fiscal year of 2016-2017. On December 14, 2016, it signed a partnership agreement with CRDF Global, an independent nonprofit organization that promotes international scientific and technical collaboration through grants, technical resources, training, and services, headquartered in the US, with offices in the MENA and Eurasia regions. Under this agreement, both parties will partner to utilize and explore opportunities for projects of mutual interest. More specifically, they will capitalize on their respective resources, reach, and capacities to launch joint projects in Global Health Security and related areas.



KNOWLEDGE SHARING IN EMERGENCY RAPID RESPONSE AND GLOBAL HEALTH SECURITY

Believing that the fastest way for advancement is through knowledge exchange, GHD/EMPHNET continued to be present in conferences, meetings, and it also collaborated in meetings that promised opportunities for fruitful interactions, networking opportunities, and the healthy exchange of information regarding the issues pertaining to Global Health Security.

GHD/EMPHNET, participated in the Global Outbreak Alert and Response Network (GOARN) Training Partners' Workshop conducted in February 2017. The objectives of the workshop were to discuss the GOARN Outbreak Response Scenario Training, to learn more about relevant priorities of partners, and to agree on future collaboration for the development of the training program. GHD/EMPHNET shared its expertise in the area through participating in a panel, and in discussing the accreditation of the GOARN training packages. It explored the ways in which GOARN training courses could or should be accredited. GHD/EMPHNET's representative presented EMPHNET's training experience and voiced interest in expanding GHD/EMPHNET's Roster of Experts by supporting and mobilizing well-trained rapid response team members.



GHD/EMPHNET's representatives were also present in the International Health Regulations (IHR 2005) meeting for National Focal Points (NFPs) from the region, held in April 2017 in Amman, Jordan. IHR NFPs from Afghanistan, Bahrain, Djibouti, Egypt, Iran, Iraq, Jordan, Kuwait, Lebanon, Libya, Morocco, Oman, Pakistan, Palestine, Qatar, Saudi Arabia, Somalia, Sudan, Syria, Tunisia, and the United Arab Emirates also participated in this meeting, alongside representatives of the WHO Secretariat, CDC, and the Finnish National Institute for Health and Welfare. In this meeting, recommendations were made to improve the functionality of existing IHR multi-sectoral committees in Lebanon, Oman, and Tunisia by putting into practice a needs assessment and creating new committees in other countries across the region.

Later in the same year, the Jordanian MOH, in collaboration with EMPHNET, launched the National Rapid Response Teams (RRT) Guidelines to be the first national reference to enhance preparedness and response in the event of public health events of international concern (PHEIC). They also meet the pressing need for effective and comprehensive preparedness measures to face the current health emergencies affecting the region.

A month later, GHD/EMPHNET participated in a meeting with Health Security Partners (HSP), a non-governmental organization based in Washington, D.C. The meeting was held in Istanbul, Turkey, highlighting the status of Syrian refugees in the Middle East. In this meeting, participants discussed the two major health security threats facing Syrian refugees namely psychosocial disorders and communicable diseases. The discussions focused on risk factors and prevention measures.

CAPACITY BUILDING AND RAPID RESPONSE TEAMS

To respond to the needs of the volatile and fragile environment of the EMR, GHD/EMPHNET continued to build capacities in rapid response. It continued to hold RRT training sessions to serve the human resource gap in the region and to enable countries to build their capacity in rapid assessment and response to public health events to reduce human suffering.

To assist public health professionals in how best to identify and investigate disease outbreaks while coordinating with stakeholders, GHD/EMPHNET, the Jordanian MOH, and the National Center for Security and Crisis Management (NCSCM), conducted a five-day training workshop with an emphasis on biological agents, March 2017. Over thirty public health professionals working participated in the training including public health physicians, veterinarians, laboratory

personnel, applied epidemiology professionals and others. These public health professionals included representatives from the Jordanian MOH, the Royal Medical Services (RMS), the NCSCM, the Ministry of Agriculture (MOA), UNRWA, the Jordan Food and Drug Administration (FDA), Forensic Laboratory Department, and private sector hospitals.



A month later, GHD/ EMPHNET joined forces with the Jordanian MOH and NCSCM to improve the capacities of public health professionals in the areas of rapid assessment and response in Jordan.

In Egypt last April, similar efforts were made since Egypt has been experiencing repeated Avian Influenza outbreaks over the past years, an issue that has contributed significantly to compromising the health status of some of its communities. A workshop in this regard saw participation of 22 public health professionals. Coming from five governorates and central Egypt, these participants included; surveillance officers, doctors, veterinarians, pharmacists, laboratory personnel and other national public health selected technical staff who were nominated based on their current and planned national level involvement in the areas of outbreak detection and response.

EXPANDING OUR SCOPE IN BRUCELLOSIS SURVEILLANCE

Known as Mediterranean Fever, Brucellosis is a zoonotic disease that is primarily present in sheep, goats, cattle, pigs, equines, camels, dogs amongst other animals. Humans can contract Brucellosis if they are in contact with an infected animal or its product. Brucellosis infects over 500,000 people every year world-wide. It remains endemic and most prevalent in the Middle-East and Sub-Saharan Africa.



In 2015, GHD/EMPHNET started collaborating with the CDC in efforts targeted at reducing Brucellosis prevalence. In October 2016, a delegation from the CDC conducted a visit to Jordan to further efforts to strengthen brucellosis surveillance, diagnosis, and control in Jordan and Iraq, two Brucellosis-endemic countries. CDC delegates met with the GHD/EMPHNET team and stakeholders to follow up on progress of Brucellosis management and control projects in two countries Jordan and Iraq. Moreover, they also discussed the potential expansion of existing projects in these countries to include; laboratory support by incorporating more advanced molecular laboratory tests for the disease, such as the enzyme-linked immunosorbent assay (ELISA), an advanced serological test used to detect infection with Brucella.

During Fiscal Year 2016 - 2017, GHD/EMPHNET conducted training for Jordan on documenting cases of Brucellosis for both human and animal cases using the mobile version of the investigation forms designed on Epi Info; determining the location of these cases; and performing analyses, such as mapping the correlation between animal and human cases.

This training is part of an initiative to enhance the capacity in diagnosis of human and animal Brucellosis, where twenty clinicians were updated on issues specific to the diagnosis of brucellosis, including case definition, clinical signs, and treatment. The clinicians were also trained on using the official investigation form to report cases; referring suspected cases for further testing; and collecting, preserving, and transporting samples for testing (Rose Bengal Test) to the Central Public Health Laboratory in Amman.

EXPANDING OUR SCOPE IN ICT

As digital media transforms the landscape for communication, public health professionals are seeking new and innovative ways to engage audiences. Today, everyone is going digital, and Information and Communications Technology (ICT) is being used extensively for offering efficient public health services and solutions. Mobile data collection and digital forms are replacing paper-based forms. New areas of ICT like Geographical Information Systems (GIS) are being used as a technology to map outbreaks and disease.

During the last fiscal year, GHD/EMPHNET supported several countries in utilizing information technology solutions and digital tools. For example, it developed its own Business Automated Workflow System (BAWS) to automate all internal processes to reduce work time and human resources, minimize paper use, and improve quality of work. In addition, EMPHNET introduced for the first time, the online registration system to make the registration process for EMPHNET's Sixth Regional Conference fast and easy.

EXPANDING OUR NETWORKING CAPACITY

GHD/EMPHNET worked on developing its own networking platform 'EpiShares' which is designed to join public health professionals and experts in a space where they can express thoughts, address concerns



and discuss issues relevant to public health. EpiShares was developed to ensure a mechanism for sharing information and experience. It is home for public health experts, FETP residents, FETP graduates, or any community of practice joined by mutual interest, cause or concern. As a virtual platform, it will enable public health professionals and experts to come together to reflect and explore solutions necessary for managing challenges and doubtful situations in various settings.

EpiShares includes features similar to those found on other social media platforms, allowing members to be listed in a directory, like posts, share posts, share blogs, form groups, and search for jobs and announcements. This development brings GHD/EMPHNET closer to its goals for fostering ease of communication, knowledge sharing, and fostering a stronger public health network where people can work together.

GHD/EMPHNET COLLABORATES IN COLD CHAIN ASSESSMENT IN IRAQ



Responding to a necessity that has been identified in Iraq to strengthen the immunization supply chain and to support the country in achieving its goal for ensuring that vaccines are in the right place, condition, quantities, time and cost, GHD/EMPHNET collaborated with UNICEF

and Iraq MOH to conduct a Cold-Chain Equipment Inventory Assessment (CCEIA) throughout the country.

The assessment was performed using a web-based, mobile data collection tool, Survey for Data, which provides full data on health facilities and the available cold chain equipment. This allows for the availability of information and its use, and in turn it will ensure that vaccines are widely available and that they remain safe and effective through the entire supply chain, particularly in remote areas.

Through this collaboration, GHD/EMPHNET introduced WHO's web-based vaccination supplies stock management (w-VSSM) system to involved parties at the Ministry. Two training workshops were conducted by GHD/EMPHNET and UNICEF targeting both administrators and users of the software, focusing on guiding both admins and users on setting and/or configuring the data based at their respective levels.

EMPHNET COMPLETES AN INTEGRATED SCHOOL HEALTH PROJECT IN SYRIAN REFUGEE CAMPS IN JORDAN

To model the national School Health Program implemented jointly by the Jordanian MOH and Ministry of Education (MOE) in government schools throughout Jordan, the Integrated School Health (ISH) project was first piloted by UNICEF in 2014. It aimed to provide school health services in three government schools located in the Syrian refugee camps. Based on the positive outcomes of the pilot phase, UNICEF decided to expand the project in 2016 to include all government schools and Makani centers across all Syrian refugee camps in Jordan.

To be part of the response efforts made to Syrian children, EMPHNET collaborated with UNICEF and the Jordanian MOH and MOE for two years on this Integrated School Health Project. The project was carried out over two phases: the first was in 2016 and the second was in 2017. In 2016, EMPHNET supported the strengthening of communication and information sharing among the project's stakeholders, thus organizing regular stakeholder coordination meetings in every camp. Over a period of ten months, a total of 24 coordination meetings were conducted. Second, EMPHNET, MOH and MOE, developed guidelines for the ISH. These guidelines were adapted from the MOH guidelines to fit the health demands and context of the camps and were later approved by all involved parties.



EMPHNET also helped build the capacities of staff from MOH and the MOE as well as outreach teams from NGOs and CBOs in the areas of providing quality school health services and managing the school health program. Thirty-two health education training workshops were conducted for Makani facilitators and 50 for the school teachers to enable them to effectively deliver critical health messages to Syrian refugee children and youth.

In the year 2017, ISH services were provided to 11 newly established schools (4 schools in Zaatari and 7 schools in Azraq camp). These schools were not covered during the first phase of the project. Services were also provided to the newly enrolled students in the schools and Makani centers.

As part of its involvement in this project, EMPHNET also developed a Digital ISH Data Management System for the digitalization of student's health records. The data management system collects, stores, and analyzes student health data in one place to facilitate the use of data management and analysis for strategic planning and policy development.

WAY FORWARD

Challenged by the difficult circumstances in the region, we are augmenting our efforts to increase momentum to achieve more. We have high expectations for the future as we set our strategies to bring more benefits and significant change. We intend to increase our investment in knowledge sharing with strong determination to lead networking to capture concerted efforts. We will continue to support the needs of EMR countries and promote opportunities to assist the countries in strengthening their public health systems. Our focus will continue to embrace strategic partnerships and collaborations that will fill critical gaps while leveraging forces that are beneficial to global health development.

We have achieved a lot during 2016 and 2017, but we believe that we are positioned to achieve more. We want to step into the future with a transformational vision that will allow us to adopt new approaches for inflicting change. Our main drive remains forceful, where we will employ technology in networking and knowledge sharing. We aim to become a knowledge sharing organization that aligns knowledge with needs and priorities. Therefore, our focus next year will address the importance of building an enabling environment with robust knowledge sharing culture that is based on experience. Such an environment will pool resources and offer the region with a practical foundation for integrating knowledge sharing into real time experiences as a mechanism for improving performance.

Many countries in our region face challenges, which are frequently complicated by lack of knowledge, skills, tools and resources. Scaling up solutions to address these challenges in a systematic way, requires bringing into the spotlight expertise, knowledge and effort. Therefore, we will showcase knowledge and expertise and exert effort to maximize success. Doing so systematically will allow us to identify areas that require improvement while raising the value of knowledge exchange in the process of doing so. We look for a future where we can connect public health professionals with ideas and experience. It is with this notion and context that we

ANNUAL REPORT **2016 - 2017**

**GLOBAL HEALTH DEVELOPMENT (GHD)
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