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Feature Story

Pakistan and Sudan Move to Ensure Immunization for Hard-to-Reach Communities

As an essential public health service, routine immunization (RI) must be made available to all children. Ideally, this should be the case. Prior to the pandemic, the delivery of RI services in the region was challenged by several factors that are now compounded with COVID-19 restrictions. Hard-to-reach communities are the most affected.

To make RI services- which are provided by the Expanded Programs on Immunization (EPI)- available to these communities, detailed planning is needed through what is termed as RI microplanning which covers all details of the immunization service delivery, ensuring that such services are delivered continuously and efficiently.

In the region, Pakistan and Sudan are among several countries moving towards implementation of RI microplanning. With technical support from GHD|EMPHNET, these two countries are working towards empowering immunization workers with the skills needed to prepare and implement microplans to enhance RI service delivery.

As a first step, both countries began with conducting training of trainers (ToT) workshops to build a core team of facilitators at the state and provincial level who will be in charge of training EPI frontline workers in the districts.

In Pakistan, a ToT led by the EPI trained forty participants from Khyber Pakhtunkhwa between February 15-20, 2021. The training focused on integrating EPI services into the Lady Health Workers Program as an essential step toward achieving universal health coverage.

In Sudan, the EPI conducted eighteen ToT workshops for 451 immunization officers from 188 localities in eighteen states. This training focused on enabling local management to plan comprehensively for immunization services by applying strategies suitable to the COVID-19 context.

Following these training workshops, participants trained frontline immunization staff at the facility level on how to develop microplans. At this point, these plans are being developed and expected to be implemented in the coming months.





Spotlight on Public Health Experts Dr. Faris Al Lami

Prof. Faris Lami is a prominent public health figure from Iraq who has contributed to the public health field in different capacities. As an Associate Professor at the University of Baghdad's Department of Community and Family Medicine and the Resident Advisor of the Iraq Field Epidemiology Training Program (FETP), he has supervised over 90 postgraduate students specialized in public health, field epidemiology, and family medicine. Prof. Lami was among the team members in charge of establishing the FETP back in 2009.

Prof. Lami has formerly served as the Director General of Public Health at the Iraq Ministry of Health, and he has led several national public health surveys and assessments related to surveillance systems, infectious diseases, immunization, among others. Currently, he is the chair of the Medical Research Committee and the National Immunization Technical Advisory Group (NITAG) and is a member in the Supreme Advisory Committee of the COVID-19, Injury Surveillance Technical Committee, Non-Communicable Diseases Technical Committee, among others.

Regionally, Prof. Lami has shared his expertise as a consultant with organizations like the World Bank and the World Health Organization. With GHD|EMPHNET, he has been an invaluable resource with his technical assistance and advice. Prof. Lami is a regular facilitator for training workshops at national, regional, and international levels.

Along with presenting papers at regional and international conferences, Prof. Lami has published over 150 research articles in peer-reviewed journals. His research mainly relates to epidemiology of NCDs and injuries, public health education, and field epidemiology.

Prof. Lami holds an MD and has a PhD in Public Health. He is a fellow of Faculty of Public Health of the Royal College of Physicians, UK.

News Updates

Afghanistan and Yemen Strengthen COVID-19 Rapid Response with Additional Deployments

Rapid Response Teams (RRTs) play a crucial role in health systems' response to public health events. In the Eastern Mediterranean Region (EMR), RRTs contributed substantially to scaling up alert and response activities to many outbreaks, more recently COVID-19 where they supported outbreak investigation, contact tracing, data collection, risk communication and community engagement, surveillance activities, and exchange of information.

Afghanistan and Yemen are among several EMR countries that are furthering investments in RRTs to strengthen national response to the COVID-19 pandemic. With support from GHD|EMPHNET, both countries are deploying additional RRTs in the field.



This was made possible after conducting pre-deployment refresher trainings focusing on COVID-19 for RRT members and Field Epidemiology Training Program (FETP) graduates involved in COVID-19 response activities. After undergoing training, these RRTs and FETPs were deployed in the field for two weeks to enhance alertness and response to emergencies in priority areas. They participated in outbreak investigation, contact tracing, and risk communication.

For almost a decade, GHD|EMPHNET has been supporting EMR countries to build and maintain their rapid response capacities when it launched its RRT initiative back in 2012. More recently, GHD|EMPHNET is prioritizing the deployment of national responders to capitalize on the countries' existing capacities to reduce the overall impact of COVID-19.



Jordan Addresses Increasing NCD Burden Among Vulnerable Communities

In Jordan, the burden of non-communicable diseases (NCDs), particularly hypertension and diabetes, is increasing among nationals and refugee communities, placing a strain on primary healthcare services. Despite this rising burden, studies show suboptimal control of hypertension and diabetes at primary health care level, and this has been attributed to several factors including the lack of national treatment guidelines, inadequate counseling from physicians, lack of consistent medical follow-up, and communication barriers between healthcare providers and patients.

To improve primary health care management of NCDs among vulnerable communities in northern Jordan, including refugees, the Ministry of Health is working to standardize treatment protocols and improve the quality of clinical care. With support from GHD|EMPHNET, the Ministry of Health is adapting the World Health Organization's HEARTS technical package in primary healthcare settings in the north to better manage hypertension and diabetes among patients.

Based on HEARTS, an updated hypertension and diabetes management guidelines, along with a service delivery model, was developed. Over 100 health service providers from primary healthcare providers to health facility managers and district supervisors were trained on topics essential to implementing these guidelines. Topics included treatment protocols, service delivery, patient monitoring, assessment and supervision for patients, evidence-based hypertension management guidelines, healthy lifestyle, and cardiovascular disease risk assessment. The providers came from the three health directorates in the north: Irbid, Mafraq, and Ramtha. After receiving the training, the providers started implementing the updated guidelines.

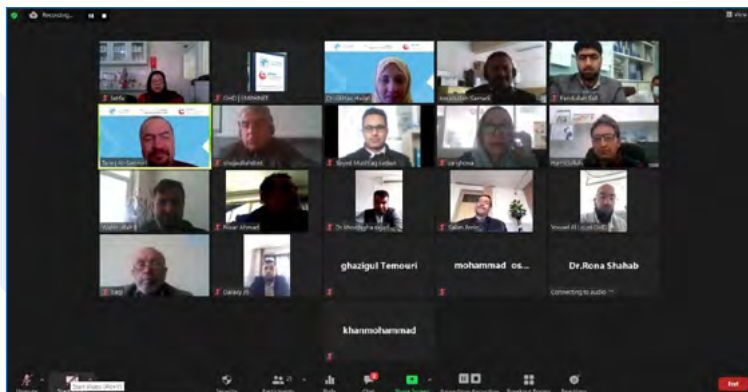
Iraq Builds Capacities for Biomedical Waste Management in Recently Liberated Areas

To strengthen essential capacities for biological threat prevention in recently liberated areas in Iraq, the Ministry of Health, supported by GHD|EMPHNET, is building national capacities in human and animal health laboratories in biomedical waste management and laboratory best practices. Their focus is on building capacities of the workforce by training laboratory staff on treating, securing, and safely disposing biomedical waste.



To identify specific needs for training- as well as the need for physical mitigation materials, an assessment was first conducted between February 15 and 16, 2021 in eight human and animal health facilities in recently liberated areas: Anbar, Diyala, Nineveh, and Sala al-Din. Working in coordination with the Central Public Health Laboratory and the Ministry of Agriculture's Veterinary Department, public health professionals and laboratory specialists from both public and animal health laboratories participated in this assessment.

Based on the results of the assessment, the Ministry of Health and GHD|EMPHNET will be working on preparing a training package targeting laboratory professionals from both human health and animal health. They will also identify and provide the supplies needed in terms of mitigation materials.



Afghanistan Builds Essential Capacities for Biological Threat Reduction

The Afghanistan Ministry of Public Health (MoPH), with support from GHD|EMPHNET, is building national biosafety and biosecurity capacities with focus on proper handling of biological samples and safe storage and disposal of reagents.

Between March 16 and 18, 2021, a joint Training of Trainers (ToT) for human and animal health laboratories was conducted: over twenty staff members attended from the MoPH's Directorate of Diagnostic Services, the Central Public Health Laboratory, the Central Veterinary Diagnostic and Research Laboratory, the Vaccine Production Directorate, and the National Environmental Protection Agency. The ToT's focus was on sample packaging and transport: safe disposal of reagents SoPs, safe and secure handling and packaging of biological samples for intra- and inter-lab shipment, and safe storage and disposal of reagents that support diagnostics assays and other daily laboratory operations.

Following this ToT, these trainers will support training for regional and provincial laboratories targeting field staff from technicians to veterinarians and para-veterinarians responsible for collecting human and animal biological samples.

Afghanistan is Improving Immunization Front-liners' Capabilities in Limiting COVID-19 Transmission During Vaccination Sessions

The Afghanistan Ministry of Public Health (MoPH) is enabling vaccinators for polio and routine immunization in priority provinces to maintain immunization program's performance, while also ensuring they implement safety measures to prevent COVID-19 transmission.

The MoPH trained over 100 vaccinators in 12 districts in Nangahar province on infection prevention and control during vaccination sessions. Similar training will be conducted for Laghman and Parwan provinces soon.

Survey to Identify Immunity Gaps in Iraq



To identify gaps in immunity, the Ministry of Health, with support from GHD|EMPHNET, is conducting a limited scale immunization coverage survey in Anbar, Baghdad Al-Kerkh, Baghdad Rasafa, and Ninewa in areas which reported fever and rash cases. This survey will collect vaccination data for children less than five years of age around these cases.

Iraq Supports Improved Immunization in Practice for Health Staff

With support from GHD|EMPHNET, the Ministry of Health completed cascade training workshops on Immunization in Practice for over 90 staff members of the Expanded Program on Immunization at central, provincial, district, and frontline levels in 10 provinces: Babel, Baghdad AlKerkh, Diyala, Diwaniya, Kirkuk, Kerbala, Misan, Muthana, Thi Qar, and Wasit.





Jordan Promotes Gender Equity Awareness to Improve Access to Sexual and Reproductive Health Services in Mafraq

The link between gender rights and health rights is universally acknowledged. Wherever gender inequality exists, sexual and reproductive health (SRH) outcomes are adversely impacted. The most affected are young females. Traditional gender roles, for instance, can coerce women into repeated pregnancies and influence their decision-making to access SRH services. While to a lesser extent, gender inequality affects men too who view SRH as a “woman’s issue” and as such do not monitor their SRH health thereby compromising their health and their spouses’.

Taking this into account, the Ministry of Health (MoH) in Jordan is raising community awareness on gender equity to improve uptake of SRH services in Mafraq, the second largest governorate which also houses Syrian refugee communities.

With support from GHD|EMPHNET, the MoH conducted a training of trainers (ToT) workshop to build the capacity of six healthcare professionals from Al Mafraq Health Affairs Directorate (HAD) from both genders to act as facilitators for gender equity awareness sessions. This took place between February 23 and 25, 2021. Focusing on the impact of gender, inequity, inequality, and gender-based violence on SRH issues, this ToT incorporated practical gender understanding on SRH services using case studies.

Following this ToT, six awareness sessions were held targeting over 90 maternal and child health service providers and community members from both genders who are involved in reproductive health in Al Mafraq HAD: community leaders, community-based organizations representatives, and local women committees. The sessions were designed and delivered in a way to enhance the community involvement in SRH services.

In Mafraq, the MoH is simultaneously working on improving the availability and accessibility of SRH services. Also collaborating with GHD|EMPHNET and Electronic Health Solutions, the MoH is establishing a harmonized Reproductive Health Registry (hRHR) to facilitate maternal and child health data flow through different levels of the health care system, to institutionalize protocols for data confidentiality, and to determine equity in service accessibility. The health information generated by hRHR is expected serve as recommendations for decision makers. Initially targeting Mafraq, the hRHR is planned to later cover governorates across the country.





Since the very beginning, the COVID-19 pandemic established that coordination and cooperation at the global level is the only way out of it. Many countries and organizations have made appeals to make the COVID-19 vaccines available to most vulnerable groups around the world. However, the real situation showed a limited production matched by feverish competition by countries to possess the majority, if not all, of produced vaccines.

Vaccines must be considered global benefits that are necessary to save lives. Monopolization of the vaccine by a limited number of countries will lead to the prolongation of the pandemic. It will also result in the continuing moral, health, and economic repercussions of the pandemic.

We should also appreciate that life will not return to normal until all countries are free of this pandemic. Certainly, none of this will materialize without coordinated cooperative efforts and the access of low-income and poor countries to its fair share of the vaccines.

GHD|EMPHNET's Response:

Launching Petition for Equal Distribution of COVID-19 Vaccines

GHD|EMPHNET is voicing its concern over inequality in the distribution of COVID-19 vaccines. It is asking that the world take advantage of the manufacturing capabilities of some companies in different countries of the world, including low-income and poor countries, to increase the production of COVID-19 vaccines and make them available to all countries according to good manufacturing practices. It is urging rich countries not to monopolize or store large quantities of vaccines that exceed their needs to allow the delivery of vaccines to low-income and poor countries. It is requesting rich countries and vaccine producing countries to allocate

15-20% of their production, purchases, or surplus stocks of vaccines to low-income and poor countries. It is asking the world to adopt a code of conduct that regulates vaccine use to prevent stockpiling or bilateral contracts on quantities that exceed the staging need and to postpone mass vaccination campaigns after vaccinating the most at-risk groups.

[Sign petition here](#)



Invitation to Join

The Public Health in the Arab World (PHAW) is one of the largest electronic health networks in the region with over 2000 members who use it as forum for information exchange and as a platform for mobilization. PHAW was launched by the Faculty of Health Sciences at the American University of Beirut as part of its efforts to promote dialogue and collaboration on regional health issues.

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