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# The EMPHNET Emergency Bulletin





## **Promoting Global Health Readiness and Collaboration to Prevent Future Epidemics**

**In an era of unprecedented health challenges, fostering preparedness and strengthening partnerships are critical to mitigating risks and safeguarding communities. By sharing lessons learned and insights from public health professionals in the field, this issue is designed to inspire proactive measures for epidemic prevention and preparedness worldwide.**

## EMPHNET's Role and Commitment to Assisting EMR Countries in Preparing for and Responding to Epidemics

The Eastern Mediterranean Region (EMR) has been experiencing one of the most turbulent eras in its history. Chronic, acute, and protracted crises across multiple countries, leading to a significant increase in the number of refugees and internally displaced populations. This places an immense strain on the region's already fragile health systems. With its mission to advance public health practices, EMPHNET works in close collaboration with governments, international organizations, and public health stakeholders to address and tackle the region's health challenges, including infectious disease outbreaks and health emergencies. This collaboration serves to strengthen regional and national capacities to prepare for and respond to health emergencies, ensuring health system resilience in alignment with the principles of the Global Health Security Agenda (GHSA), the Sustainable Development Goals (SDGs), and International Health Regulations (IHR).

EMPHNET is committed to building the capacity of public health systems. Its training programs empower health professionals with the knowledge and skills they need to manage disease surveillance, conduct outbreak investigations, and implement evidence-based interventions. EMPHNET

supports the Field Epidemiology Training Programs (FETPs) in the region, empowering them to develop a skilled workforce capable of detecting and responding to public health threats promptly and efficiently. In 2024, more than 3,000 field epidemiologists have completed their training at the different tiers of FETP in the EMR.

Another one of EMPHNET's focus areas involves empowering Rapid Response Teams (RRTs) and institutionalizing Public Health Rapid Response systems and programs within the national public health emergency response frameworks. These efforts ensure a systematic and standardized approach for forming and managing RRTs. Over 1,500 RRT members have been trained and mobilized to respond to 80% of emergencies in their respective countries. Additionally, EMPHNET has established robust networks of Community Health Champions (ChampNet) in conflict zones. These networks support the efforts of preparedness, response, and prevention of health emergencies, including epidemics. The champions are trained in various health-related areas, including health promotion, service delivery, and mental health counseling. They have also played a vital role in supporting the ongoing response efforts in Gaza and Sudan.

Over the past few years, EMPHNET supported several EMR countries in strengthening disease surveillance and early warning and response (EWAR). These efforts have included supporting investments in integrated disease surveillance (IDS) systems, which incorporate Event-based Surveillance (EBS) to collect and analyze potential public health risks from sources beyond routine surveillance systems.

In addition to capacity-building efforts, EMPHNET offers technical support and fosters regional collaboration. It facilitates the sharing of knowledge, best practices, and resources among EMR countries to strengthen their collective response to epidemics. It also emphasizes the importance of multi-sectoral partnerships and works to improve coordination between different national health authorities, international agencies, and local communities.

Despite the challenges caused by limited resources and complex geopolitical contexts in the EMR, EMPHNET is committed to collaborating with countries and partners to address these issues. Through its multifaceted approach, EMPHNET continues to demonstrate its dedication to enhancing epidemic preparedness and response in the region.



Check out the latest [Episode](#) from EMPHNET's "Gaza Health Chronicles: Inside the Crisis" Series





## The Role of the Sudan FETP in Enhancing Epidemic Preparedness and Response During the Ongoing Crisis

The crisis in Sudan has severely impacted essential service delivery for the population. Climate changes exacerbate public health challenges and put additional pressure on an already fragile healthcare system. Outbreaks of cholera, dengue, malaria, and measles have surged due to inadequate infrastructure and widespread displacement, while the lack of medical services and high levels of malnutrition have contributed to increased fatality rates, especially among vulnerable groups.

The Sudan FETP, integrated within the Health Emergencies and Epidemics Control (HEEC) department of the FMoH, has played a crucial role in addressing the ongoing crisis as part of HEEC's coordinated response. However, as of January 2024, the program has ceased enrolling new residents, and it now offers a response to crises solely through its graduates, many of whom are working within national or state health authorities. Following the onset of the war in April 2023, a significant number of the program's graduates and their families were displaced. Currently, fewer than 40 graduates remain actively serving in four states across Sudan.

The Sudan FETP graduates who were displaced from their home states have joined national or state-level emergency departments (HEEC), where

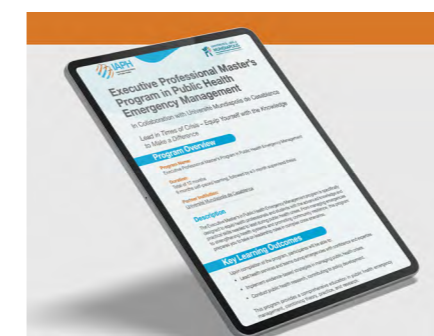
they contribute to outbreak preparedness and response efforts. The primary public health threats they are addressing include cholera, dengue, and malaria outbreaks, with cumulative cases reaching 47,000 for cholera and 8,000 for dengue as of week 52 of the war. Other prevalent health issues include dermatitis, conjunctivitis, and malnutrition. In addition, they have actively participated in surveillance activities, joined rapid response teams (RRTs), conducted several outbreak investigations, implemented control measures, and contributed to Emergency Operations Center (EOC) meetings by presenting and participating. Four states have been significantly affected by internally displaced persons (IDPs). Graduates working in these areas have been involved in needs assessments, health education, community engagement, clinics, and providing humanitarian services.

In addition to their integrated roles, graduates participated in two **targeted cholera control missions**, supported by EMPHNET and the World Health Organization (WHO). Each mission lasted two months, utilizing adapted methodologies to ensure an effective response to the cholera outbreaks. They also took part in a pilot training on **Integrated Outbreak Analytics (IOA)**, conducted by a

multi-agency team that included the United Nations Children's Fund (UNICEF), the United States Centers for Disease Control and Prevention (US CDC), WHO, the International Federation of Red Cross and Red Crescent Societies (IFRC), and Médecins Sans Frontières (MSF). This multidisciplinary approach serves to analyze outbreak dynamics comprehensively. Six graduates attended this four-day workshop, and the next step involves implementing the pilot phase soon.

The ongoing armed conflict disrupts the safety and stability of daily life and work conditions, threatening the sustainability of health programs. The halt in funding has led to the suspension of new program activities, putting the continuity of the Sudan FETP's vital contributions at risk.

Despite significant challenges, the Sudan FETP graduates remain essential to Sudan's response to public health emergencies. Their contributions to epidemic preparedness and response, particularly in cholera control and support for IDPs underscore the program's critical role. Ensuring the sustainability and expansion of the program is vital to strengthening Sudan's health system resilience amid ongoing crises. - By **Dr. Mohamed Nageeb, the Sudan FETP Technical Advisor**



Amid ongoing crises in Gaza, Lebanon, Sudan, and other regions, the demand for skilled health leaders is more urgent than ever. Explore the Executive Master's in Public Health Emergency Management offered by the International Academy of Public Health (IAPH) in collaboration with Université Mundiapolis de Casablanca.

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## Lessons Learned from One Health Partnerships and their Role in Strengthening Collaborative Frameworks to Prevent Future Epidemics

The “One Health” approach, which emphasizes and highlights the interconnectedness of human, animal, and environmental health in disease prevention and control, is becoming more widely recognized for its effectiveness in addressing emerging infectious threats. Such threats include Nipah, Ebola, avian influenza, and severe acute respiratory syndrome (SARS). The integration of the One Health approach into epidemic investigation and response can be traced back to outbreaks of Nipah and avian influenza, although efforts to formalize this approach began with the establishment of the One Health framework.

Collaboration among veterinarians, environmental scientists, social scientists, human health experts, and policymakers is encouraged under the One Health approach. Such collaborations offer significant benefits, including stronger early warning systems, improved risk assessment, enhanced preparedness, and more targeted interventions.

The One Health investment framework supports countries, donors, as well as international organizations in effectively allocating financial resources to prevent pandemics. By investing in One Health, the risk of emerging infectious diseases can be significantly reduced. However, successful implementation requires tailored interventions that address specific local and national contexts, as there is no one-size-fits-all solution.

Despite the clear advantages of One Health, its application faces several challenges. Coordinated responses are often hindered by the isolation of government departments,

funding bodies, and academic institutions. Overcoming barriers to cross-sector collaboration and breaking down institutional silos remain significant obstacles. Additionally, a lack of awareness and political will can hinder the implementation of One Health concepts. However, there are plenty of opportunities to address these challenges. The COVID-19 pandemic has underscored the critical importance of this approach. Promoting collaboration and advocating for investments in One Health are essential for international organizations such as WHO, the United Nations Environment Programme (UNEP), the Food and Agriculture Organization (FAO), and the World Organization for Animal Health (WOAH).

Several case studies showcase the effective implementation of the One Health approach. For instance, the early detection of highly pathogenic avian influenza (HPAI) in animals has enabled several countries to take proactive measures, preventing the disease from spreading to human populations. In efforts to control and prevent rabies, international organizations, public health officials, and veterinarians have worked together, exemplifying successful collaboration. Similarly, Bangladesh and Malaysia adopted a One Health strategy to combat the Nipah virus, which involved managing bat populations, improving biosafety procedures in pig farms, and educating farmers and date palm sap harvesters. These examples underscore the potential of One Health in averting future epidemics and pandemics. – By **Prof. Dr. Mahmudur Rahman, the Director of EMPHNET’s Office in Bangladesh**



## Dr. Ehsanullah Halimi: An Inspiring FETP Graduate Driving Emergency Preparedness and Response in Afghanistan

Since its establishment, the Afghanistan FETP has trained over 150 technical staff from the Ministry of Public Health (MoPH). These staff members are directly involved in emergency management and response. FETP graduates and residents are working across the country in various organizations and entities, primarily with the National Disease Surveillance and Response, CDC, the National Expanded Program on Immunization (EPI), the Polio Eradication Initiative, and other relevant entities. Such organizations play a key role in emergency response, epidemic control, and public health data collection and management. Within their daily duties, the employees investigate outbreaks of infectious diseases, they respond to health-related events such as floods, earthquakes, poisonings, and accidents, and they manage relevant data and reporting. During workshops conducted by the Afghanistan FETP, residents are tasked with responding to emergencies as part of their training, with their findings and responses reported in subsequent sessions.

Dr. Ehsanullah Halimi, a graduate of the fourth cohort of the Afghanistan Intermediate FETP, has been serving as the head of the Emergency Preparedness and Response (EPR) Department at the Ministry of Public Health since 2022. Dr. Halimi and his department’s staff are responsible for emergency preparedness and response related to healthcare. They play a key role in responding to disease outbreaks, floods, earthquakes, and traumatic events. Additionally, they manage EPR committees in all provinces, oversee the collection of public health emergency data, and coordinate the incident management system across the country. Since the beginning of his tenure, he has achieved several key milestones, including the activation of the Incident Management System (IMS), the preparation of a Trauma Center proposal for emergencies, the development of the EPI operational plan, and the establishment of EPR committees in 34 provinces. Dr. Halimi has also worked on preparing an air ambulance MoU for emergencies, alongside overseeing other routine activities related to preparedness and response to health-related emergencies.

Recently, he and his team responded to a Crimean-Congo Hemorrhagic Fever (CCHF) outbreak in Kafshan district, Parwan province. The outbreak affected 36 individuals, all presenting with symptoms such as fever, headache, body pain, thrombocytopenia, and epistaxis. Four blood samples were collected, along with epidemiological data on the cases. During the response, emergency kits, mobile health teams, medications, technical support, and additional beds in relevant health centers were mobilized. Awareness campaigns and health education sessions on CCHF were conducted for the community, and the final reports were shared with the MoPH leadership for further action and decision-making. This is a true example of the impact of training and resilience coming together to positively impact the health communities. Dr. Halimi’s true sense of initiative and dedication are an example worth learning from. – By **Dr. Khawaja Mir Islam Saeed, the Afghanistan FETP Technical Advisor**

# Emergencies in Focus: A Global Overview

Crises remain a fixture in the lives of communities in the EMR and beyond. These crises range from natural disasters to human-made emergencies brought on by war and conflict. All crises take their toll on healthcare systems and health of populations. Here is a quick update on what is happening this month.

## Gaza Health Status in Numbers between December 18 and 21, 2024<sup>1</sup>



**2**

hospitals, 1 primary healthcare center (PHC) and 2 medical points in the Gaza governorate, and 4 medical points and 1 PHC in the eastern part of Deir al Balah, were impacted by Israeli attacks on December 18



**1791**

children were admitted for outpatient treatment of acute malnutrition and 22 others for inpatient treatment, reflecting both a further deterioration in the nutritional situation in the Gaza Strip up to December 15



**600,000**

cooked meals prepared in 160 kitchens were distributed daily to families in Gaza, Deir al Balah, Khan Younis, and Rafah governorates, representing a 28 percent increase compared to late November



**94,207**

cubic meters of water was produced daily across the Gaza Strip, less than a quarter of the water supply prior to October 2023

<sup>1</sup> United Nations Office for the Coordination of Humanitarian Affairs (OCHA). **Gaza humanitarian response update: 8–21 December 2024** [Internet]. New York: OCHA; 2024 [cited 2024 Dec 29]. Available from: <https://www.unocha.org/publications/report/occupied-palestinian-territory/gaza-humanitarian-response-update-8-21-december-2024>

## Sudan Displacement in Numbers Up to December<sup>2</sup>



**80,000**

individuals have crossed into South Sudan since December 8 through six entry points.



**20**

months into Sudan's civil war, has displaced 12 million people including 3.2 million refugees and over 8.6 million internally displaced individuals



**1,027**

reported cases of mpox in Uganda with seven refugee cases across various settlements

## Lebanon Updates in Numbers - December 26<sup>3</sup>



**819,693**

people displaced within Lebanon reported back in their cadasters of origin as of December 25 (IOM)



**160,900**

people remain displaced outside their cadasters of origin, a three percent decrease since December 19 (IOM)



**90,000**

people entered Lebanon from Syria as of December 24 (UNHCR)

<sup>2</sup> ReliefWeb. **Sudan situation external update #92: 8–14 December 2024** [Internet]. ReliefWeb; 2024 [cited 2024 Dec 29]. Available from: <https://reliefweb.int/report/sudan/sudan-situation-external-update-92-8-14-december-2024>

<sup>3</sup> United Nations Office for the Coordination of Humanitarian Affairs (OCHA). **Lebanon flash update #52: Escalation of hostilities in Lebanon, 26 December 2024** [Internet]. New York: OCHA; 2024 [cited 2024 Dec 29]. Available from: <https://www.unocha.org/publications/report/lebanon/lebanon-flash-update-52-escalation-hostilities-lebanon-26-december-2024>

## Syria Updates in Numbers - December 2024<sup>4</sup>

As Syrian refugees are returning to their homeland, the demand for essential services such as clean water, healthcare, and stable infrastructure becomes increasingly urgent, highlighting the critical role of coordinated humanitarian efforts.



**10 million**

people across Syria are benefiting from UNICEF's efforts to ensure the continuity of WASH services



**850,000**

people now have stable power and water supply after UNICEF coordinated the entry of essential materials and technicians to repair the Tishreen Dam in Aleppo



**30**

mobile medical teams have been deployed by UNICEF partners to underserved areas and IDP camps in response to the strain on healthcare infrastructure in NWS

## Yemen Updates in Numbers - December 2024<sup>5</sup>



**249,900**

suspected cases of cholera as of December 1, 2024



**861**

associated deaths since the beginning of the year



**35%**

of the global cholera burden and 18% of global reported mortality are from Yemen

<sup>4</sup> United Nations International Children's Emergency Fund (UNICEF). **Syria humanitarian situation report no. 1: 20 December 2024** [Internet]. New York: UNICEF; 2024 [cited 2024 Dec 29]. Available from: <https://www.unicef.org/media/166681/file/Syria%20Humanitarian%20Situation%20Report%20No.1%20%2020%20December%202024.pdf>

<sup>5</sup> World Health Organization (WHO), Regional Office for the Eastern Mediterranean. **Yemen reports the highest burden of cholera globally** [Internet]. Cairo: WHO; [cited 2024 Dec 29]. Available from: <https://www.emro.who.int/fr/media/actualites/yemen-reports-the-highest-burden-of-cholera-globally.html>

## Get Involved: Inspiring Action and Sharing Knowledge

Dr. Mohannad Al Nsour, EMPHNET's Executive Director, has taken on a vital role in global health security as the newly elected Chair of the [Global Outbreak Alert and Response Network \(GOARN\)](#) Steering Committee. His election comes after two years of service as Deputy Chair, during which he reinforced its mission to protect lives during crises.

Read more: <https://bit.ly/4ij1ulc>



EMPHNET expresses its relief that WHO Director-General Dr. Tedros Adhanom Ghebreyesus and his team are safe following the tragic incident at Sana'a Airport. We extend our heartfelt condolences to the families of those who lost their lives and wish a full recovery to those injured. This incident serves as a reminder of the significant challenges and dangers faced, even by senior public health leaders and humanitarian workers, in conflict zones. Ensuring their safety is critical to sustaining vital health and humanitarian efforts in areas of crisis.

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