

### Read in this issue:

- ▶▶▶ EMPHNET joined the CDC non-communicable disease mission in Jordan
- ▶▶▶ Public Health Surveillance during Mass Gatherings Workshop
- ▶▶▶ Training of Syrian physicians in Jordan FETP
- ▶▶▶ Needs Assessment Survey
- ▶▶▶ Risk Factors of Diarrhoea in the Mahmood Raqi District of Kapisa Province Afghanistan-2010
- ▶▶▶ Launching "Field Epidemiology Training Programs UPDATES" newsletter
- ▶▶▶ Pakistan's FELTP public health response to the 2010 floods
- ▶▶▶ Training of the First Iraq-FETP Cohort
- ▶▶▶ The Progress of Establishing Yemen-FETP

## EMPHNET's Word

By: Dr. Mohannad Al Nsour, Executive Director

Welcome to the second issue of EMPHNET's newsletter. Hopefully, this issue is a consecutive success for addressing the updates and news regarding applied epidemiology and FETPs in the MENA region.

Since its offices were established in April 2010, EMPHNET is continuously achieving many of its objectives and missions. EMPHNET moved to new offices to match the demand of hiring more technical employees to handle its activities.

EMPHNET is directing its efforts to

achieve its goals of its work plan 2011-2012. These include: strengthening EMPHNET's organization; improving the quality of field epidemiology programs, networking and enhancing communication among FETPs in the region; organizing and conducting special training; developing relevant educational materials through FETPs' residents; as well as conducting and supporting collaborative projects.

EMPHNET is glad to share with you the contents of this issue, which surely you will enjoy it.

### Your contributions are welcome!

If you like to share a paper, article, idea, or any another material with the readers, please do not hesitate to send it to:  
[tech@emphnet.net](mailto:tech@emphnet.net).

## EMPHNET joined the CDC non-communicable disease mission in Jordan

EMPHNET joined The U.S. Centers for Disease Control and Prevention (CDC), and the Jordan Ministry of Health to implement an interventional project which targets behaviors and primary risk factors associated with chronic diseases.

EMPHNET will play an important role in conducting and coordinating the activities among the various partners during implementing the project. Also, EMPHNET will provide the technical assistance

to the FETP to ensure sharpening their experience in the non-communicable (NCD) area.

The project aims to add NCD track to the Jordan FETP and conducting a demonstration intervention project. The aforementioned parties agreed that the project will focus on physical activities (or lack of) and diet as the main risk factors for the major chronic conditions in Jordan. This partnership will also promote and support Jordan

Field Epidemiology Program on NCD area. It is expected that at least two residents will be selected for the next cohort to focus on NCD. Those residents will receive specialized training in NCD. The FETP curriculum will be revised to include NCD topics of relevance providing all residents with more knowledge and competencies on NCD topics.



Dr. Mohannad Al Nsour; executive director of EMPHNET; is introducing the workshop



Participants of the first mass gathering workshop



Participants working on one of the scenario activities during the workshop

## Public Health Surveillance during Mass Gatherings Workshop

EMPHNET together with Centers of Disease Control and Prevention (CDC), and Council of State and Territorial Epidemiologists (CSTE) conducted the first “Public Health Surveillance during Mass Gatherings” workshop which was held in Amman, Jordan 25-29 September 2010. Mass gatherings are common events that are held throughout the world for religious, political, sports, or cultural occasions. These events increase the demand for providing appropriate healthcare services. The crowdedness during mass gatherings usually increases the incidence of many health problems such as infectious diseases, injuries, worsening of chronic illnesses, and heat-related illnesses.

The workshop aimed to raise the knowledge on the preparedness, surveillance, and response during mass gathering events among the residents of Field Epidemiology Training Programs (FETP) in the MENA region. Another objective was encouraging the publishing of mass gathering surveillance results in the literature by the residents.

Residents of Field Epidemiology Training Programs in the MENA region (Afghanistan, Egypt, Iraq, Jordan, Morocco, Pakistan, Saudi Arabia, Syria, and Yemen) participated in the workshop. Experts from CDC contributed in providing the training on the workshop’s topics. EMPHNET presented an overview of experiences with mass gatherings surveillance in the region.

During the workshop, the participants; as country groups; planned for a selected mass gathering event that held in their countries. EMPHNET and CDC are supporting the projects’ implementation financially and technically. The data of the projects will be analyzed and discussed in the second mass gathering workshop which will take place on February 2011 in Morocco.

The workshop was very successful in achieving its goals to heighten the experience and to share the knowledge by the participants regarding the public health issues related to mass gathering events.

## Training of Syrian physicians in Jordan FETP

The Jordan Ministry of Health, the Syria Ministry of Health, and the Eastern Mediterranean Public Health Network (EMPHNET) are collaborating to conduct training of three Syrian physicians in Jordan Field Epidemiology Training Program (FETP). The objective of this training is to strengthen the epidemiology capacity in Syria.

Training will be conducted over a 2 year time period. The first year of training will take place in Jordan. At the end of year 1, candidates will be asked to develop proposals for work in Syria. These proposals will be reviewed with their Jordanian and Syrian supervisors. Candidates will be asked to return to their work places and conduct these projects with local supervision and intermittent technical assistance from EMPHNET, and the Jordan FETP staff.

During the training, the residents will sharpen their experience in evaluating surveillance systems, conducting analytical epidemiological studies, writing scientific manuscripts, investigating outbreaks, and conducting non-communicable diseases activities.

The collaboration of EMPHNET in this corporation by providing technical assistance is an additional successful achievement for EMPHNET’s goals which emphasize on promoting epidemiological capabilities in the region through practicing and training.

## Risk Factors of Diarrhoea in the Mahmood Raqi District of Kapisa Province Afghanistan-2010

By: Dr. Jawad Mofleh “Afghanistan FETP”

Surveillance data revealed that higher number of diarrhoeal cases was reported after a flash flood swept off some villages of Mahmood Raqi district in Kapisa province. The water sources were treated with chlorine and still outbreak was not controlled, therefore.. a case control study was conducted to identify other risk factors of diarrhoea in Mahmmod Kheil, Haroki , Baloch khil and Najarah villages of Mahmood raghi district in Kapisa province. Total population of these villages are about 5000 people. A case control study was designed and 50 families were selected as cases and 50 families were selected as controls in the affected villages. All case and controls were selected randomly. A structured questionnaire was prepared and administered on all families (cases and controls). The study was conducted part of outbreak detection and control on 8-9 August 2010.

The study revealed that an outbreak of acute watery diarrhoea was confirmed in the affected villages, which was not associated with water. Poor hand washing practices, improper water storage in the households and types of latrine were associated with the outbreak of diarrhoea.

Level of parents' education is key for prevention and control of diarrhoea in children of under five years of age.

The full paper document posted on the EMPHNET website [www.emphnet.net](http://www.emphnet.net)

## Launching “Field Epidemiology Training Programs UPDATES” Newsletter

In November 2010, U.S. Centers for Disease Control and Prevention (CDC), Division of Public Health Systems and Workforce Development launched the first issue of its electronic quarterly “Field Epidemiology training Programs UPDATES” newsletter. The newsletter provides insight into

key information of international FETPs, epidemiology resources, career advancement and training opportunities. In the first issue it addressed the role of Pakistan FETP in the floods disaster; the efforts of a graduate from Brazil FETP; the course of management for international public health;

public health online community; surveillance at mass gatherings workshop in Amman, Jordan; and upcoming conferences. The newsletter is available in [http://www.cdc.gov/globalhealth/fetp/pdf/Field\\_Epidemiology\\_Training\\_Programs\\_Updates\\_Newsletter\\_Issue\\_1.pdf](http://www.cdc.gov/globalhealth/fetp/pdf/Field_Epidemiology_Training_Programs_Updates_Newsletter_Issue_1.pdf)

## Needs Assessment Survey

By :Dr. Kashef Ijaz

### Field Epidemiology Training Programs Eastern Mediterranean Region and North Africa

A needs assessment survey was conducted at the Eastern Mediterranean Public Health Network (EMPHNET) Mass Gatherings Surveillance Workshop. It was held in Amman, Jordan from September 25 – 29, 2010. The workshop attendees included FETP Directors and Residents from 8 FETP programs in the region. The country FETPs included Afghanistan, Egypt, Iraq, Jordan, Morocco, Pakistan, Saudi Arabia and Yemen.

Three FETPs i.e., Saudi Arabia (1989), Egypt (1993) and Jordan (1998) have been in existence for the longest time and are self-sustained. Although the FE(L)TP in Pakistan is relatively new and was established in 2006, however, it is already well-established with good support from the Ministry of Health. The remaining four FETPs in Afghanistan (2008), Iraq (2009), Yemen (2010) and Morocco (2010) are newly established and the Ministries of Health appreciate their value.

To date, 255 public health professional have graduated from the FETPs in the region, which provides a substantial well-trained human resource capacity that

can be utilized within the region for technical assistance and training needs. Survey results showed that there is a dearth of publications, such as newsletters, epidemiologic bulletins etc. which needs to be enhanced. Another aspect of the FETPs that needs development is establishment of country-specific FETP websites.

All programs identified specific areas requiring technical assistance and trainings, which could be conducted either at the local or regional levels. FETPs identified strengthening of program activities related to communicable as well as non-communicable diseases as priority for technical assistance. Additionally, some of the programs also identified the need for expansion of the program activities to include laboratorians and veterinarians.

In terms of resource and logistical needs, majority of the programs have a shortage of financial resources to continue their programs as well as to make them attractive to the best persons in the field of public health. The full Needs Assessment Survey Document posted on the EMPHNET website [www.emphnet.net](http://www.emphnet.net).



## Pakistan's FELTP public health response to the 2010 floods

Pakistan Field Epidemiology and Laboratory Training Program (FETLP) had responded to the flood waters rose in Pakistan in late July 2010 as a part of infectious disease taskforce which was created by Pakistan Ministry of Health. Thirty one FELTP residents and graduates, as well as 70 public health professionals are investigating disease outbreaks, monitoring health situation,

planning and responding for emergencies.



Fellows from Sindh working on Disease surveillance from flood affected area with FELTP faculty

The involvement of Pakistan FELTP in this humanization crisis highlighted the role of the program in building effective surveillance systems meeting the national demands. FELTP is one of the major parts of problem solving associated with the floods disaster emphasizing the necessity of building epidemiology capacity to ensure proper response for public health concerns.

## Training of the First Iraq-FETP Cohort

On Nov 7, 2010, the first Iraq-FETP cohort began their didactic training course in the Department of Community Medicine/ College of Medicine/ Baghdad University. The I-FETP consists of 10 residents from different governorates.

The I-FETP fellows will spend the first twelve weeks in didactic courses at Baghdad University where they will build a solid foundation in epidemiology. The fellows will then go on to complete eight weeks of short term assignments within the Ministry of Health, followed by nine months of long term field assignments within the Ministry of Health. In year two, the I-FETP fellows will complete field work at the Governorate level.

It is worth to address that the surveillance section in Iraq Ministry of Health releases a weekly report for investigating diseases as an advanced step to state local health departments regarding public health concerns. Such reports facilitate the development of preventive measures. The weekly report includes descriptions for the reported cases of acute diarrhea and its relation to cholera, acute respiratory illness, zoonotic diseases, neonatal tetanus, diphtheria, hemorrhagic fever, and meningitis.



## The Progress of Establishing Yemen-FETP

On October 22 thru 27, the Yemen FETP team, consisting of Aisha Jumaan, Team lead, Steve Becknell, Public Health Advisor, Lisa Bryde, Instructional designer, and Henry Walke, Branch Chief, FE(L)TP Systems- Asia and the Americas, met with the Yemen Ministry of Public Health and Population (MOPHP) in Sana'a in order to finalize the plans for The Yemen Field Epidemiology Training Program (Y-FETP).

The (Y-FETP) is a two-year in-service training program supported by the Yemen Ministry of Public Health and Population (MOPHP), and the U.S. Centers for Disease Control and Prevention (CDC).

Upon completion of the program requirements, graduates will

improve the health systems by identifying gaps in surveillance systems, strengthening early response, and using data for decision making. They will also be able to characterize disease burden and support the MOPHP with policy recommendations.



"Henry Walke and the Yemeni Minister of Health shaking hands after the signing of the MOU"

Within 10 years, the Yemen FETP plans to train approximately 500 personnel working in epidemiology, surveillance and response at national/sub-national levels in three tiers: FETP (Advanced): Two-year, intermediate: 9 months, and basic: Introductory Course (6 months). This pyramid in-service training model is expected to graduate approximately 380 in the Basic level, 60 in the Intermediate level, and 60 at the FETP or Advanced Level over the ten year period. The principal program is the advanced FETP, a two-year competency-based, training-in-service program.

The first Introductory Course of the Y-FETP will begin on January 15, 2011 and will continue for six weeks.

