

# EMPHNET NEWS

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## EMPHNET's Word By: Dr. Mohannad Al-Nsour, Executive Director

In looking at the milestones we celebrated over the past three months, I feel that this year will be a promising and inspiring one. On this occasion, I would like to acknowledge our member countries for the high level of cooperation and collaboration demonstrated by their Field Epidemiology Training Programs (FETPs). The energy and motivation of the FETPs continues to play a critical role in the success of EMPHNET's initiatives.

The start of this year comes with a significant expansion in the scope of work EMPHNET undertakes. We have seen the launch of our Center of Excellence for Applied Epidemiology through which we will continue to respond to the epidemiological needs of the Eastern Mediterranean Region. EMPHNET had also launched its Polio and Immunization program, while continuing to expand its reach in areas of disease control, outreach and emergency response, health security, and health protection and promotion.

In looking at year 2015, I can say that we managed to strengthen our prominence in the region. We enhanced our ability to respond to public health challenges unique to this region. We have delivered planned activities successfully making progress towards widening our scope to serve through a regional context.

We work to improve public health status for communities in the EMR and to respond to global health challenges. This year we are proud to be contributing to global Polio Eradication efforts, alongside other pressing health chal-

lenges you will read about in this issue.

As we approach the coming year, I wish you all a Happy New Year, and I confirm that we at EMPHNET always strive to accomplish more and to focus on areas that are of priority concern to our member countries. At the same time, we remain committed to supporting the regional approach in combatting and responding to public health threats in the region. We appreciate the support of the Board of Directors, member countries and all other partners and stakeholders.

## EMPHNET Contributes to Global Polio Eradication and Ionization Efforts in the Eastern Mediterranean Region

The Eastern Mediterranean Region (EMR) comprises 22 countries that spread across Asian and African continents. It encompasses Pakistan and Afghanistan, as well as South Asia, Iran and countries in the Gulf region and Middle East. The region also includes Somalia, Djibouti and Sudan, and it spreads from East Africa, Egypt, Libya and Tunisia to North Africa, Morocco and West Africa.

The EMR is known for its young population, with a wide population pyramid indicating a high proportion of children and a low proportion of elderly people. This age structure characterizes an underdeveloped demographic situation that does lend its effect on public health. More specifically, health in the EMR is influenced by a wide range of factors which cut across all aspects of life including: society, culture, spirituality and economics.

These factors disproportionately afflict poorer countries, as well as populations affected by conflict as is seen to be the case in Syria, Yemen, and Iraq. War, occupation, sanctions, civil strife, and insecurities are key determinants of health status and this region has a large and increasing number of refugees and internally displaced and stateless people and numbers are still increasing.



In addressing these challenges, work needs to be done to strengthen public health systems. This is the challenge for public health, especially in light of the spread of Ebola, Polio, MERS-CoV, alongside other emerging and re-emerging diseases. Realizing these needs, and in keeping with its mission to improve public health in the EMR, EMPHNET expanded its scope of work. Launching new projects, and enhancing its team of experts to best respond to the health needs of this region.

One threat especially affecting the EMR is the potential spread of Polio. Polio is a serious disease that mainly affects children under five years of age. It is a crippling and potentially deadly infectious disease that is caused by poliovirus. Affecting only humans, the poliovirus is highly infectious and can spread rapidly in a community, especially where hygiene and sanitation conditions are poor and such environments are many across the EMR. Seeing that the EMR has a high population of IDPs and refugees as a result of conflict and ongoing political unrest, EMPHNET recognized the importance of responding to this threat.

The World Health Organization (WHO) considers a single confirmed case of polio paralysis to be evidence of an epidemic. Children in all countries remain at risk of contracting Polio if there is a single child that is infected with the wild Polio virus. While there is no cure for polio, it can be prevented through immunization with multiple doses of polio vaccine protecting a child from getting the disease for life. Despite making significant global progress in immunization initiatives in the past decades, strengthening Polio immunization remains a central global challenge due to the risk of its spread.

Since the launch of the Global Polio Eradication Initiative (GPEI), the number of polio cases decreased by 99%. In 2013, GPEI developed the Polio Eradication and Endgame Strategic Plan as a long term strategy for reaching a polio-free world by year 2018. In May 2014, the WHO declared the international spread of wild poliovirus as a Public Health Emergency of International Concern and issued temporary recommendations under the International Health Regulations (IHR) (2005) to reduce the international spread of the disease.

This year, EMPHNET launched its Polio and Immunization Project to contribute to global effort and to assist countries in the EMR. EMPHNET is working in partnership with Ministries of Health (MOH) in countries of the EMR for the project; as well as UNICEF, UNHCR, IMO, IMC and other non-government organizations. To implement new approaches that will help to support the Polio endgame strategic plan, these new approaches include; regional coordination and collaboration to ensure that the plan is facilitated between government organizations, capacity building and enhancing information specifically through effective data management that can reflect the eradication of polio. In line with the polio endgame strategic plan, and in close coordination with partners.

More specifically, EMPHNET is supporting countries to meet the Polio endgame strategic plan and to build effective surveillance and immunization systems and expand their capacities to fight Polio VPDs, and other infectious diseases. To achieve these goals, EMPHNET is collaborating with project partners to support development of the local public health

workforce through training, mentoring and other capacity building activities that are designed to effectively plan and evaluate activities carried out to eradicate Polio and strengthen routine immunization systems in polio endemic outbreak countries, and other Polio at-risk countries in the EMR.

EMPHNET will also collaborate with the CDC Global Immunization Division (GID) and CDC Division of Global Health Protection (DGHP) to improve expertise in building workforce capacity. EMPHNET will also work closely with Ministry officials to ensure decision consensus, and will maintain close and regular engagement of ministries and other relevant stakeholders. The overall project goal is to achieve polio eradication, and strengthen Immunization Services in the Eastern Mediterranean Region in collaboration with the other partner organizations, and expanding the countries' capacities to fight other infectious diseases.



To achieve the overall goal, the project will adopt the Global Polio Eradication Initiative (GPEI) strategies; assisting countries to strengthen routine immunization services, maintain highly sensitive AFP surveillance, and conduct supplementary immunization services and focused campaigns as planned. More specifically, Polio Endgame strategic plan will be used as the road map to assist polio endemic and high risk countries in the region to meet their progress targets to achieve polio eradication and measles elimination goals, improve implementation systems for other vaccine preventable diseases (VPDs); improve their capacity to fight other communicable diseases and support implementing the Polio legacy plan.

## Country Program News

### **Pakistan FELTP has been very active in the last quarter of 2015, here is a summary of its achievements**

Pakistan's Field Epidemiology and Laboratory Training Program (FELTP) was active over the last three months of 2015. It initiated the intake of two Cohorts per year. The first session of the newly inducted eighth Cohort commenced at the National Institute of Health in Islamabad, with the session lasting from October to December 2015. The residents were given didactic training on basic epidemiology and biostatistics in addition to outbreak investigation and disease surveillance. This move to expand the base of specialized epidemiologists was implemented following the request of Pakistan's Federal Ministry and Provincial Health Departments.

Enduring tough winter conditions, residents of the eighth and sixth Cohort participated in a field exercise in the hilly Murree Town. This exercise was held from December 7 to 10, 2015. It comprised an assessment of acute respiratory illness in children under five years of age. The assessment was done as a community based prevalence study in Murree Town. Residents participated actively in questionnaire development, and the collection and study of data.

From their end, residents of the sixth Cohort completed their 2-year training in December 2015. To commemorate this occasion, a course completion ceremony was held at the National Institute of Health (NIH) Islamabad on December 22, 2015. The ceremony was chaired by the Executive Director of NIH. Delegations from the Provincial Health Departments of Azad Jammu and Kashmir, as well as Armed Forces were in attendance.

From another angle, the Pakistan FELTP also made progress in areas of outbreak investigations. In September 2015, FELTP residents and the Federal Disease Surveillance and Response Unit residents assisted the provincial department of health in Punjab, in the outbreak investigation of Dengue fever in the Rawalpindi district. 373 cases were identified. Investigations showed that affected households were storing water in containers which became the mosquito breeding sites.



The residents identified the probable cause of the outbreak and gave recommendations to the health department. Additionally, the FELTP residents did monumental work in the Rawalpindi district, where they investigated an outbreak of gastroenteritis due to contaminated water supply in cooperation with the Federal Disease Surveillance and Response Unit. The investigation was made in November, 2015. Through this investigation, they were able to identify the source of the outbreak and recommended measure for control.



## Y-FETP Pushes Forward Despite Deteriorated Security and Health Situations in War-Torn Yemen

The Yemen Field Epidemiology Training Program (Y-FETP) residents continue struggling in deteriorated security and health situations. The conflict in Yemen, which has been raging for the past nine months, has led to a humanitarian catastrophe that has caused more than 6,000 deaths, the displacement of over 2.5 million people, and it caused millions of Yemenis to be in dire need of immediate assistance. The Human Rights Organization has also projected that 2.5 million children are suffering from chronic diarrhea, 1.3 million from pneumonia, and 280,000 from severe malnutrition. Prior to the war the Y-FETP was functioning normally and operations were proceeding according to plan for the second Cohort. However, plans were not interrupted, at best they were slightly challenged.

“Of course the war in itself was a shock to us.” says Technical Advisor of the Y-FETP, Dr Abdulwahed Al-Serouri, “It was a shock for our residents and their families who, on their part were concerned about their sons and daughters being away from home. “Dr. Al-Serouri further added that families urged their sons and daughters, the FETP residents, to leave Sana’a and to go back to them.

“Most of our residents have families in the different governorates in Yemen. So, more than half our residents left Sana’a due to the war. This meant that we only had four residents left out of 12 and those were mainly the people living in Sana’a and its surrounding governorates. We tried as much as possible to absorb this challenge. We felt that our residents were needed more than ever in these times, so we tried to convince them to come back to Sana’a. We tried telling them that the situation is not as bad as it seems. Some outbreaks were happening here and there and we also needed them to complete their deliverables. After much convincing some of them did return, others would stay for one or two weeks, only to feel unsafe and then return back to their homes and families under the influence of pressure from their mothers, fathers, and wives,” says Dr. Al-Serouri.

### Pushing Forward with the Third Cohort

This situation did not stop the Y-FETP From pushing forward with the program. In fact, The Y- FETP team was even thinking to proceed in planning for the third Cohort as scheduled. There were strong debates regarding this issue even within the team. Some team members were wondering if it was even a good idea. Questions were raised regarding who will come and who will register in such situations, especially given that their main target to recruit residents from the cornerback from the governorates and not only from the city of Sana’a. The Y-FETP started advertising for the third Cohort just to see what will happen. The first announcement was sent to governorate offices, noting that at the time there was no electricity or faxes even to properly advertise for the program. The internet was out across the country, and the phones were cut in some areas due to bombarding. Some governorate health offices were not even operational, so it was difficult to communicate with them at times.



“In response to such challenges, we decided to delay the deadline for application for another month and we decided not to go the traditional way,” says Dr. Al-Serouri, “we contacted the people in the health offices by phone and we asked them to nominate some people to be part of the Y- FETP third Cohort”. Dr. Al-Serouri added that some teams within the health offices were reluctant so they were asked to just nominate and then see what will happen.

The health offices did nominate applicants and eventually people started to apply. “We ended up with 32 applicants from outside Sana’a and 16 from Sana’a. After the initial screening of all applications we ended up with 16 who fit the criteria for FETP residency,” Dr. Abdulwahed Al-Serouri says. “A training course was conducted for the 16

who were accepted and 12 others as a step towards building epidemiological capacities. Surprisingly enough we had strong pressure from those who didn't fit the criteria to be part of the program. We promised them to do intermediate courses for them. We even feel guilty for not accepting them, but at the end we have criteria to abide by. However, they opened our eyes to their need for a training. After the initial course, 12 candidates were chosen for the third Cohort, but due to the war and pressure from their families only 10 made up our third Cohort. We ran the introductory course for one month. While continuing plans to graduate the second Cohort “



### Challenges in the Day to Day Running of Operations

In search of further support, the Y-FETP team recently conducted an official visit to EMPHNET's offices in January 2016. During this visit the Director General of Disease Control and Surveillance at the Yemen Ministry of Public Health and Population, and Y-FETP Program Director Dr. Abdul-Hakim Al Kohlani and Technical Advisor of the Y-FETP Dr. Al- Serouri met with EMPHNET's Executive Director Dr. Mohannad Al-Nsour. They discussed the challenges the program is currently facing in-light of the current war situation in Yemen, and they stressed their need for securing financial support for maintaining the program's sustainability. According to Dr. Al-Serouri, these engagements have been fruitful and the initial response from the entities the Y-FETP had reached out are positive. During their meeting, EMPHNET's Executive Director Dr. Mohannad Al-Nsour affirmed that EMPHNET will continue to find ways to support the Yemen FETP program to the best of its capacity.



For now, some residents are continuing their work on a voluntary bases. In the last three months, they have carried out four outbreak investigations namely in: cases of food poisoning, Neonatal tetanus, and a confirmed case of bacterial meningitis due to Neisseria Meningitis and Dengue. “Carrying out these investigations isn't easy, as our residents need to finish their work within a tight timeframe, to offset the risk of bombardments.” He added.

The Y-FETP also works within logistical challenges as well, Dr. Al-Serouri explains that another challenge faced by Y-FETP is that there have had been no electricity for the past six month. “We managed to get solar energy with the support of TEPHINET, “he explains “, this allowed our residents to come to the program, carry out their work, and this is a key success for us. The availability of solar energy had really solved a problem for our residents, since they do not have electricity in their home. Our residents are now always happy to come to the program office and fully charge their laptops, and in turn continue their work. We got more rooms from the Ministry of Public Health. We were also able to buy chairs and tables for our program. We can now say we are self-sustained. This makes life easy for us. We also managed to buy a photocopier and to have a better infrastructure. We can even say that we set an example for other programs. Our progress opened the eyes of other programs. This was all three months after the war. Some other programs followed our example and they applied for the WHO and got solar energy as well. “

### Empowered by Determination

Dr. Al-Serouri ended his talks by stating that “It is the determination of residents and applicants that inspires us to continue as our Third Cohort candidates claimed that they are willing to start the program as volunteers, even if there is no funding. They are enthusiastic for such work, and it is this enthusiasm that fuels our determination to continue.”

From his end, Dr. Al Kohlani added that the Ministry of Public Health and Population grasps the importance of the work done by Y-FETP and that this program's work



should be included in the ministries budget. This is something the program will strive for, after the war. He further explains that, “the Ministry of Public Health and Population is fully committed to this important program. H.E the Minister and the Deputy Minister for Primary Health Care attended two activities conducted by the Y-FETP namely; the Advisory Consultation Workshop held in March 2015 and the Mentorship Meeting in October 2015. The last one was also attended by the WHO representative in Yemen. H.E. the Minister himself submitted the award of the 4th EMPHNET Regional Conference for the best oral presentation to Y-FETP resident Dr.Eshraq Al-Falahi. These are just a few signs of recognition for the Y-FETP program and the work it does. This recognition is granted by the higher health authority in Yemen.”

## EMPHNET News

### EMPHNET Expands Brucellosis Surveillance Project in Iraq

With aims of strengthening brucellosis surveillance, diagnostics, and control in Iraq, a team of experts from EMPHNET met with officials from the Iraq Centers of Disease Control and Prevention (CDC) and the Central Public Health Laboratory (CPHL) last October in Baghdad, Iraq.

During these meetings, delegates discussed the importance of estimating the burden of Brucellosis. They identified the type of circulating Brucella in two Iraqi districts, previously agreed upon in a steering committee meeting held in Amman May 2015. They also discussed selecting two more high or suspected high incidents areas in Iraq for examination. The two provinces selected were Dyala and Babil.

Meetings were also held with the Director of Communicable Diseases Department at the Ministry of Health Dr. Muthanna Ibrahim. The objective of this meeting was to introduce the Brucella project. Another meeting was held at the CPHL, during which attendees agreed on relevant purchases to be made for the project’s implementation. A steering committee meeting was held during which the project expansion was discussed and additional provinces, namely Alkout and Misan will be selected for the project’s implementation. All districts were selected based on: livestock availability, safety, and the number of reported Brucellosis cases.



Furthering the advancement of Brucellosis surveillance in Iraq, EMPHNET in collaboration with CDC and the Jordan University for Science and Technology (JUST) conducted a five-day training session titled “Molecular Diagnosis and Subtyping of Brucellosis”. The training was hosted at the Princess Haya Biotechnology Center PHBC located on the JUST campus between October 25 and October 29, 2015. Its sessions were attended by 6 participants from Iraq including four lab technicians from Iraq’s Central Public Health Laboratory and two veterinarians from Iraq’s Central Veterinary Lab.

Key topics discussed during the training included; new molecular based methods of diagnosis, real time PCR, diagnosis of animal and human Brucellosis, Qiagen DNeasy blood and tissue extraction protocol, and biosafety considerations when working with infectious samples. The sessions were conducted by a team of experts from CDC and PHBC/ JUST, while EMPHNET liaised between CDC, the Central Public Health Lab in Baghdad, and other involved parties to oversee the training’s proceedings.

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## EMPHNET Participates in Technical Consultation Meeting on Monitoring and Evaluation of Core Capacity for IHR Implementation

In keeping with its mission to provide better public health for the people of the Eastern Mediterranean Region (EMR), EMPHNET participated in a technical consultants meeting held to monitor and evaluate the core capacities needed for the implementation of International Health Regulations (IHR).

Organized and sponsored by the World Health Organization (WHO) and hosted in Lyon-France, the meeting was attended by representatives from WHO Headquarters and WHO regional offices, the Centers for Disease Control and Prevention (CDC), the European Centre for Disease Prevention and Control (ECDC), the Food & Agriculture Organization (FAO), the World Organization for Animal Health (OIE), and the International Civil Aviation Organization (ICAO), amongst other international organizations. Key issues discussed during the meeting included; the concept note on the IHR monitoring and evaluation framework (IHRMF) post 2016, the evaluation approaches followed by the different agencies and partners of WHO, information sharing and reporting, and operational timelines. More specifically, participants used a new approach for developing a more comprehensive assessment tool for countries.

Solidifying its role as a regional capacity builder, EMPHNET provided technical input on the improved assessment tool, while it also participated in a group discussion. During the discussion, it took on the role of rapporteur on issues related to laboratory and human resources. Its representatives among other participants helped in the drafting of recommendations to be presented at the sixty-ninth session of the World Health Assembly scheduled for May 2016, and on a lighter note EMPHNET connected with participants representing different stakeholders.

The event agenda included presentations from participating organizations on the different evaluation approaches, group work activities designed to evaluate IHR core capacities and the Global Health Security Agenda (GHSA), the drafting of recommendations and more.

## EMPHNET Trains Data Collectors Involved in “Global Flu” Study



In collaboration with the CDC, EMPHNET is conducting a multi-year study on the burden posed by influenza virus infections on low- and middle-income countries. Between 400-500 hospitalized infants will be enrolled over a period of two years, with the study plan including specimen sampling and medical record abstraction. The purpose of this project is to address the critical

knowledge gaps regarding influenza burden and the potential value of influenza vaccination programs in addressing this burden in low- and middle income countries.

The project's primary objective is to assess potentially preventable disease burden amongst < 1 year olds in the study's specific socioeconomic setting. However, the study also enables

research into the preventative value of vaccine and antiviral interventions, the preventable disease burden of other diseases like respiratory syncytial virus (RSV), and the examination of diagnoses and management of influenza in hospital settings.

As an initial step for the project's implementation, EMPHNET conducted a workshop titled “Burden of influenza on infants” The two-week didactic workshop was commenced on November 15, 2015. Its sessions focused on providing data collectors with the skills they need to operate the Jordan REDCap tools and forms. REDCap is the software which will be used for all data collection pertaining to this project. Currently, and following the didactical training, a two-week Practical Workshop was held in Al Basheer hospital, where data collectors did a pilot test on the questionnaire, the participants will receive training on oropharyngeal sampling, and the follow up research required for infants three to five weeks after discharge.

This training increased participants' ability to accurately and effectively implement the goals of this study.

## **EMPHNET Attends BEP Implementers Workshop**

EMPHNET representatives participated in the Biosecurity Engagement Program (BEP) two-day implementers' workshop hosted at the Ronald Reagan Building and International Trade Center of Washington, DC. Held between November 9 and November 10, 2015 the workshop aimed to provide participants with an overview of current BEP activities, as well as the global, regional, and national priorities of bioscience.

BEP team members, including BEP Acting Team Chief, CTR Budget team, and BEP Program Advisors facilitated the workshop. Representatives from over 60 different agencies including universities, NGOs, international organizations, and U.S. and foreign government departments attended the sessions. The workshop agenda was divided into two components, whereby regional presentations took up its first day, and information consultations took up its second day.

On the first day of the workshop, BEP Acting Team Chief Alex Stolar presented BEP's objectives and priority regions. In his presentation, he stressed on the importance of all partners working together as nations within an international community to improve biological security. He stated that BEP's areas of focus include biosecurity, holistic biosecurity, disease detection and control, and research that advances health security.

From her end, Drew Masada from the CTR Budget Team presented proposal templates, reporting processes, competitions, and agreements' standards, while BEP advisors presented current work in progress focusing on priorities in different regions and emphasizing the importance of implementing creative solutions in addressing biosecurity concerns.

On the second day of the workshop, informal consultations took place between BEP officers and implementing partners. EMPHNET representatives discussed current projects and proposed topics for 2016. Implementing partners also had the opportunity to network with others in attendance and to brainstorm opportunities for collaboration and joint proposal activities. Furthermore, EMPHNET representatives visited the Health Policy and Management Department at Milken Institute School of Public Health at George Washington University. There, they met with Associate Professor and Co Director of Global Health Security Rebecca Katz and Senior Research Assistant Claire Standley. The visit served as a brainstorming session for areas of collaboration. The representatives also visited the Civilian Research and Development Foundation (CRDF) Global offices, where they discussed opportunities of collaboration on future projects.

All in all, the BEP Implementers' Workshop presented a valuable opportunity for EMPHNET to get information on focus areas for proposals and the related submission process for the Fiscal year of 2016. The workshop provided a valuable platform for identifying future opportunities for networking and collaboration with agencies that can pose as new partners for EMPHNET. EMPHNET also received positive feedback on its current projects whereby its presence and contribution to the meeting was well noticed. The workshop also provided ample time for one-on-one discussions with partners as well as BEP advisors.

## **EMPHNET Solidifies its Role as a Training Body Building the Capacity Public Health Officers Working in Zaatari Camp**

EMPHNET has been taking on a pivotal role in building capacities of public health officers working in Zaatari camp, an area located North of Jordan and which is predominantly inhabited by Syrian refugees. Establishing itself as a training body working in partnership with the Jordan Ministry of Health and other International Organizations, EMPHNET has trained 332 public health officers between February 1<sup>st</sup>, 2015 and October 27, 2015. The public health officers trained all came from Local and International NGOs.

Its training sessions focused on Rota Virus and the latest issues on Rota Virus vaccines. and procedures in infection control within health care institutions. Other topics handled within these training sessions included; Surveillance for acute flaccid paralysis, prevention of Hepatitis, quality control in laboratories, Polio immunization, and prevention of communicable diseases, prevention of non-communicable diseases, environmental health, public health in mass gatherings, and other issues.



EMPHNET also conducted a series of training sessions targeting both health educators and healthcare specialists. The training sessions aimed to raise awareness about the Cholera disease, its symptoms, modes of transmission, and methods of prevention while providing health educators with the skills they need to raise awareness about the disease. These trainings targeted health educators and health specialists.

EMPHNET continues to work in Zaatari camp with other international organizations, as this project falls in line with its mission to provide better public health for the people of the Eastern Mediterranean Region.

### **EMPHNET Conducts Field Laboratory Assessment Visit in Guinea-Conakry**

In the aftermath of the Ebola Virus Disease outbreak, EMPHNET, in collaboration with the US Biosecurity Engagement Program (BEP), started work this year on the implementation of a project titled: “Promoting Security of Biological Samples and Sustainable Sample Management in West Africa.” In particular, the project targets several West African



countries including; Guinea, Liberia and Sierra Leone. The project will be implemented in two phases. The first phase aims to promote the security of pathogen samples in the event of biological incidents, “from cradle to grave”, and to support secure and sustainable management of Ebola sample collections. The second phase will integrate training in responsible science alongside technical discussions of sample shipping and transportation to meet the International Air Transport Association (IATA) shipping standards.

As part of this project’s implementation, EMPHNET conducted a field visit to Guinea-Conakry between November 18 and November 26, 2015. During this visit, EMPHNET’s delegation met with the National Institute of Public Health Director in Guinea (INSP), and visited the Guinea’s Central Veterinary Laboratory, the Ignace Deen National Hospital Laboratory, and the American and Russian BSL3 laboratories.

The delegation also met with partners to discuss the current laboratory system in Guinea and to assess laboratory capacities in terms of sample management, security and the Biobank. Through these meetings, EMPHNET and its partners arrived at a consensus on activities needed to reinforce the laboratory capacity and to enhance the infrastructure of Public Health Laboratories. Discussions also touched on ways in which laboratory staff’s competencies can be increased to best achieve the project’s goals.

It is worth noting that the Ebola outbreak which started in West Africa in December 2013. Revealed weaknesses in the current laboratory system. These findings prompted the mission to assess the current laboratory situation on the ground, and in turn, to launch this project. EMPHNET, therefore, assigned a Health Security Project Manager and a team dedicated to achieving this project’s goals.

*To be featured in future newsletter issues please send your country program updates to:*

*comm@emphnet.net*

## EMPHNET Launches Center of Excellence in Applied Epidemiology

In keeping with its aims to build epidemiological capacities in the Eastern Mediterranean Region, EMPHNET launched its Center of Excellence for Applied Epidemiology this year.

The Center strives to help countries in the region to achieve better public health for the people within their respective local communities. It is founded on EMPHNET's strong belief in education and information sharing as a means to improve public health systems.

EMPHNET's Center of Excellence for Applied Epidemiology is set to build country and regional capacities in several priority public health areas such as; applied epidemiology, outbreak investigation, disease surveillance, rapid response, and International Health Regulations.

Bringing together diverse levels of expertise, the Center efficiently enables public health professionals to tackle the unique challenges facing their respective countries. EMPHNET recognizes knowledge sharing as an ongoing

and powerful process and therefore it is keen to offer innovative training at various levels, while leveraging on the ability to customize all instruction so that it meets the specific needs of different target audiences.

Upon its launch, the center issued the first edition of its instructional catalogue this year. The catalogue will serve as a valuable information resource listing training courses and suggested target audiences. The instructional subjects it lists cover different aspects of public health, namely; population health and applied epidemiology, evidence-based public health, preparedness and emergency response, public health leadership and management, and other specialty courses. The courses it offers are instructor led and are designed to be facilitated in locations as demanded by course participants.

This center was launched in keeping with EMPHNET's role as a reference source on public health in the EMR.

## EMPHNET Participates in the 18th GOARN Steering Committee Meeting

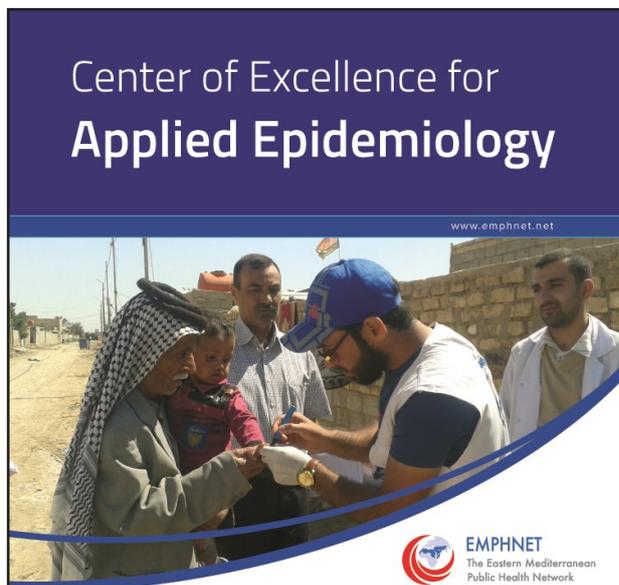
As a member in the Global Outbreak and Response Network (GOARN) since December 2013, EMPHNET participated in the 18th GOARN Steering Committee Meeting. The meeting was held between December 3 and December 4 2015, in Geneva, Switzerland.

The meeting's discussions focused on the World Health Organization's (WHO) reform of 2015. Meeting sessions also touched on GOARN's support in the Ebola crises, and the GOARN partners' experiences and perspectives for Ebola response. Meeting participants also reviewed the status of outbreaks and emergencies and they provided feedback on current challenges and priorities across regions. Furthermore, the meeting featured a presentation of GOARN's development and operations strategy, alongside other pressing topics.

Most of the 21 member institutions of the Steering Committee (SCOM) attended this meeting, whereby they engaged in open discussions regarding their institutions' experiences in outbreak responses and the approaches they employed. More specifically, the steering committee comprised technical experts who provided input on issues related to rapid identification, confirmation, and response to outbreaks around the world.

From its end, EMPHNET discussed its established approach for responding to outbreaks at the provincial, national, and regional levels, during the meeting. The meeting also provided an opportunity for EMPHNET representatives to communicate with other institutions and explore future response activities at the global level. Furthermore, EMPHNET representatives updated the steering committee on its work achievements in the Eastern Mediterranean Region (EMR) and other areas in the world, while also exploring opportunities through which EMPHNET can contribute to future trainings and developments in areas of rapid response internationally, especially given that EMPHNET plays a significant role in the training work-stream.

All in all, the meeting proved to provide the ideal platform for information exchange regarding outbreaks and response efforts made within WHO regions.



## EMPHNET Collaborates with CRDF to Hold Workshop on “Rapid Assessment and Investigation of Outbreaks of Suspicious Origins”

As part of a project that aims to build national capacity for disease detection and outbreak response in Ukraine, EMPHNET conducted a training session titled “Rapid Assessment and Investigation of Outbreaks of Suspicious Origins.” Held between November 9 and November 13, 2015 in Odessa, Ukraine, the training session targeted public health officials working within the Ukraine’s national health system. The sessions highlighted ways to identify and investigate disease outbreaks in the field, with a particular emphasis on identifying potential malicious use of biological agents.

More specifically, sessions focused on famous incidents with biological and toxic agents while going over the steps taken during outbreak investigation. The workshop also included an assessment of events posing a public health emergency of international concern, in accordance with the International Health Regulations (IHR 2005). Furthermore, sessions highlighted public health threats in Ukraine. Other topics discussed during the workshop included; the public health response to the deliberate use of biological and chemical agents, the detection of biological and chemical outbreaks/accidents, the use of syndromic surveillance, environmental investigation of outbreaks with a suspicious origin, the role of veterinarians in outbreak investigation of food borne diseases, and other issues.

With a team of facilitators coming from EMPHNET and the Jordan Ministry of Health (MOH), the workshop agenda combined presentations, and practical exercises.

Participants worked in groups to analyze three case studies, including; the September 1984 outbreak of gastroenteritis which affected persons living in the community of Dallas, Oregon, in the United States, and the tularemia epidemic which affected Kosovo from October 1999 to May 2000. From these case studies and the wealth of information the workshop’s facilitators provided, the sessions concluded with the resolve that there is not a single response to an incident. Therefore, controllers in cases of outbreaks should remember to observe, discuss, take notes, and follow up on any potential epidemiological clues to a deliberate epidemic.

### Call for Applicants is Now Open

#### The Overall Goal

The Eastern Mediterranean Public Health Network (EMPHNET) is working to strengthen routine immunization in the Eastern Mediterranean Region (EMR) as part of a key strategy for polio eradication. It is building a roster of experts at the regional level.

#### Why Create a Roster?

Great efforts are still needed to strengthen routine immunization in the EMR to provide safe, effective vaccines, and to reach the underserved in remote and deprived urban settings, displaced people and those located in war zones. Therefore, EMPHNET, in partnership with the Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO) and United Nations Children’s Fund (UNICEF), propose building a roster of experts to strengthen routine EPI at the regional, sub-regional and national levels in the EMR.

This initiative will build the roster of experts from the pool of available EPI experts who have technical expertise in planning, implementation, supervision, monitoring and evaluation of immunization programs. A refresher training will be conducted in relation to this goal.

#### More Details about the Training

This course is a six-day training. A total of 40 participants will be selected through this open announcement on EMPHNET’s website. WHO, UNICEF, CDC, and EMPHNET experts will facilitate the course.

This training is planned to be conducted in Amman, Jordan. The tentative dates for the implementation of this course are between **April 16 to 21, 2016. Please keep checking this announcement for updates.**

#### How to Apply

Applicants are required to complete the biodata form [HERE](#) and to submit it online after uploading their latest Curriculum Vitae. This form should be completed and submitted only once. **Deadline for submission was extended for February 15, 2016 at 5:00 p.m. Amman time.** If you face any difficulty completing the form please contact [mghoneim@emphnet.net](mailto:mghoneim@emphnet.net) or [dyousef@emphnet.net](mailto:dyousef@emphnet.net). Please do NOT send your CV through email.

## EMPHNET Participates in WHO-EMRO Meetings for Expanded Programs on Immunization

EMPHNET participated in WHO-EMRO 29<sup>th</sup> Intercountry Meeting for National Managers of the Expanded Program on Immunization and the WHO-EMRO 16<sup>th</sup> Intercountry Meeting on Measles/Rubella Control and Illumination. Both meetings were hosted at the Amman Kempinski Hotel between November 29 and December 3, 2015, providing an ideal platform for participants to receive updates on routine immunization services, polio eradication efforts and measles/rubella elimination in the Middle East.



During meeting sessions, representatives from EMPHNET met with country teams from WHO headquarters, the United Nations Children’s Fund (UNICEF), the Bill and Malinda Gates Foundation (BMGF) and the Centers for Disease Control and Prevention (CDC). They exchanged experiences and ideas regarding the priority countries that need to benefit from the routine immunization strengthening and polio eradication project EMPHNET is currently implementing.

The sessions presented opportunities for participants to discuss the existing polio situation in the region, particularly in view of current conflicts affecting different countries in the Middle East. Meeting participants identified the gaps and challenges affecting polio eradication efforts, while making plans to satisfy unmet needs to fulfill Polio irradiation objectives.



More specifically, participating entities discussed means to strengthen routine immunization in low coverage countries. They also discussed the polio eradication initiative and polio End-Game strategic plan. They highlighted developments pertaining to measles/rubella control and elimination, the current measles/rubella situation, and achieving and sustaining high population immunity against measles/rubella. Additionally, the participants reviewed country situations regarding measles/rubella control and elimination in relation to population immunity.



At the close of the meeting EMPHNET representative met with program managers from the different priority countries identified in EMPHNET’s plan to strengthen routine immunization and achieve polio eradication. Through these meetings, the program managers agreed to participate in 2 proposed workshops by EMPHNET, set for the last week of December 2015. These workshops are aimed at developing draft specific country plans.

## My Experience in Jordan

### By EMPHNET's Intern Mustafa Abid

I found out about the opportunity to do an internship at EMPHNET from my Fulbright Commission Director only a few days before arriving to Jordan. I was very excited to be involved in public health at the national and regional level, as this was the research area that Fulbright was funding me for. I had no idea what my time at EMPHNET would involve, but I was fortunate to have been mentored by EMPHNET's team of leaders, and to gain experience in each of their fields.

I began my internship with the Media and Communications team, where I worked specifically on conference promotion under the leadership of the Senior Communication Specialist. This was a very invaluable opportunity for two reasons. Firstly, I gained important insight on developing social media campaigns, promoting events, and developing a variety of 'adverts' for the Fourth EMPHNET Regional Conference and secondly, this experience gave me a month of working just with EMPHNET's information materials. By the time the conference had begun, I had gained a deep working knowledge of what EMPHNET had done, was doing, and all what it wanted to do. I wouldn't have been able to work on any other project at EMPHNET without this knowledge and experience.

During the Fourth EMPHNET Regional Conference, I worked under the leadership of the ICT Manager and the ICT team. I helped to rollout the tablet-platform based evaluation system that was used by poster and oral presentation evaluators at the conference. While this may sound like a pretty simple task, it became a rather consuming one. Thanks to the ICT Manager's knowhow, we achieved a very successful rollout of the system, and we had demonstrated EMPHNET's commitment to applying high technology standards to its work. I also had the opportunity to sit-in on a pre-conference workshop on Polio. This gave me exposure to the latest updates and work in one of the most pressing (and successful) global and regional public health stories.

After the Fourth EMPHNET Regional Conference, I was able to transition into a more technical capacity. I worked under the direct guidance of EMPHNET's Research and Policy Manager and EMPHNET's Outreach Response and Emergency Program Manager. I spent two and a half months working with EMPHNET's Research and Policy Manager on different aspects of the Influenza Burden study being conducted at al-Bashir Hospital in Amman. The Research and Policy Manager introduced me to this project's working details, and I have been able to help in finishing its RedCAP survey development and other project details.

Working with the Outreach Response and Emergency Program Manager, I had the opportunity to contribute to different areas of project development and project finalization. I was able to participate in the Integrated School Health (ISH) project EMPHNET is implementing in partnership with UNICEF. I had also developed a few project



proposals under the Outreach Response and Emergency Program Manager's guidance, working to keep EMPHNET at the forefront of responses to different health challenges arising in Jordan. We worked on topics ranging from cholera to reproductive health and clinic mapping. This experience gave me depth in the project proposal development process and breadth in the public health topics to which I am exposed.

Through my internship at EMPHNET, I discovered how unique the organization is. At EMPHNET, I get to work alongside a diverse staff, both in terms of who they are and what they do. I also think it's fascinating to be working on the flip side of things. I am someone whose research has been focused on the current refugee healthcare situation in Jordan, and through my work with EMPHNET I am helping to develop responses to these same issues. Because EMPHNET is on the cutting edge of regional public health responses, it is interesting to see how the EMPHNET team collaborates across different departments to develop multi-faceted responses.

I learned that there is no single solution that is accepted as sufficient for a problem, and it's always fascinating to see what different team members bring to the table in terms of ideas, but I think that the most important skill I have developed at EMPHNET is the ability to scope out of an issue and to critically look at the gaps that are causing it. I am also able to understand what tools are available to fill these gaps. It is a skill that served me well in getting my Fulbright Fellowship and coming to Jordan, but working with EMPHNET has helped me hone it to a much finer degree.

At the end of my internship, I want to leave Jordan knowing I have made tangible impacts on peoples' situations. I am always reminding myself that the point of my research here is not personal edification or skill building as much as it is trying to get the right information to make necessary improvements to systems people rely on. The same goes for my work at EMPHNET. While I am always looking to improve and expand my public health skill set, I am also very intent on being part of the incredible work EMPHNET is doing to produce tangible improvements in not only Jordan's, but the region's, public health situation.