Eastern Mediterranean Public Health Network
EMPHNET

CORDS Conference 2018
January, 29-30, 2018
Dr Mohannad Al Nsour - Executive Director, EMPHNET

A driving force in public health

August, 2017
EMR Context

• EMR consists of 22 countries with varying political and economical status, some experiencing socio-political unrest

• EMR is one of the most affected regions by various types of emergencies e.g. epidemics of different diseases, wars, conflicts, population displacement, and natural disasters

• This complex emergency profile necessitates the existence of competent systems that can respond to various public health events in the context of crisis

• Response comes in the form of a scientific, evidence based approach that is based on the local context and yet enlightened by international experiences
Building Network: Networking countries

2009 Founding Members:
- Egypt
- Jordan
- KSA
- Pakistan

2011:
- Afghanistan
- Iraq
- Morocco
- Yemen

2017:
- Sudan
- Tunisia

2018:
Expected new FETPs to be launched
# Current Involvement through GHD

**A Driving Force for Change**

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EMPHNET works with countries in the Eastern Mediterranean Region (EMR) to strengthen public health systems in an effort to contribute to improved health outcomes.
Enabling Factors

- Commitment to the Region
- Strong sustained relations with countries
- Access to capacity in the region (FETP graduates)
- Skilled diverse team
- Accessibility to difficult to reach area/ countries
- International and regional engagement
Activities: GHSA

• Initiatives in line with GHSA Action Packages particularly:

  Prevent 3: Biosafety & Biosecurity

  Detect 5: Workforce Development

  Respond 2: Rapid Multisectoral Response
1. Rapid Response Initiative

- Training
- Facilitation & Coordination
- Database
- Documentation & publications
- Networking
- Mobilize people within countries and the region for field deployments
Rapid Response to outbreaks

GHD/Regional

GOARN
Global Outbreak Alert and Response Network

JEE Alliance

RRT Global Network
Filed Deployments

Contribution to outbreaks investigation in the field

- Yellow fever in Sudan
- Measles in Jordan
- Cholera in Iraq
- Syrian refugee camps
- Cholera in Yemen
- After Typhoon Yolanda in Philippines
- Ebola in West Africa
Dr. Tarik Rhandour Gives Us an Inside Look at the Ebola Epidemic

February 16, 2015

Tarik Rhandour, a Field Epidemiology Training Program (FETP) graduate who had completed his residency last year. As part of his program requirements, he spent a few weeks during 2014 in Conakry, the capital city and largest in Guinea, where he gained hands-on experience with handling the Ebola epidemic. Following his return from Africa, he sat with us to tell his story.

How it Came to Be

I was still a resident at the National School of Public Health in Rabat, Morocco when we got a letter from the

Dr. Mohamed Elghazaly Shares his Experiences Fighting Ebola Outbreaks in Liberia

March 11, 2015

Dr. Mohamed Elghazaly MD, MPH is currently a Field Epidemiology Training Program resident in Egypt. He is working as a Zoonotic disease focal point at the Egyptian Ministry of Health and Population (MOHP-EGYPT). He is also one of the rapid response team members working at the central level, and now he is sharing with us his experience working on the Ebola outbreak in West Africa.

How this Story Came to Be

The Field Epidemiology training Program (FETP) coordinator Dr. Sibar received a request from the Global
Promote using Innovative tools

- Enforcement of functionality and effectiveness of Event Based Surveillance System (EBS),
- Use of a web-based electronic platform for real time surveillance in district health information system
- Using Mobile Short Messages on the Routine immunization for reminding Parents on Vaccination Dates
- Use of automated Online Quality Checker Implementation for Surveillance system
- Laboratory based surveillance using for District Health Information System
- Real time data visualization to improve response to outbreak
- Health Electronic Surveillance Network for communicable disease surveillance
MG defined as “... the number of people attending is sufficient to strain the planning and response resources of the community, state, or nation hosting the event.”
Iraq Arba'een MG, November 2016, Overall Surveillance Findings, n=41,689

- Acute/Infectious Conditions: 58.5%
- Chronic Conditions: 33.1%
- Traumas and Injuries: 23.9%
- Joint Pain: 28.2%
- Dermatologic Conditions: 0.3%
Sixth EMPHNET Regional Conference
March 27-29, 2018
Conference Components

- Pre-Conference Workshops
- Roundtable Discussions
- Informal Social opportunities for knowledge sharing
- Oral and Poster Presentations
This year we are providing all updates about our conference on our conference website:

http://conferences.emphnet.net/Sixth

Conference Email: conference@emphnet.net
Thank you