End of 2022 Newsletter

Welcome....

to our end of 2022 news update. CORDS is a program of Ending Pandemics, comprised of six regional networks:

APEIR - the Asia Partnership on Emerging Infectious Disease Research
EAIDSNet - the East African Integrated Disease Surveillance Network
MBDS - the Mekong Basin Disease Surveillance Foundation
MECIDS - the Middle East Consortium on Infectious Disease Surveillance
SACIDS - SACIDS Foundation for One Health
SECID - (website under maintenance)

The CORDS networks work to reduce and prevent the spread of diseases by exchanging information and best practice. Our vision is a world united against infectious diseases. Early detection of outbreaks helps keep disease transmission to its area of origin, which, in our increasingly mobile world, is vital to stopping life threatening diseases such as COVID-19, Zika, Ebola and Yellow Fever. The collective expertise of the CORDS networks and their close relationships with local communities facilitates timely detection and response to outbreaks.

Read on to discover:

- How our Middle East Consortium, MECIDS, has managed to not only maintain but strengthen its unique offering of cross-border collaboration to enhance surveillance and response to infectious diseases, despite the challenges of the COVID-19 pandemic.

- The future plans of our Mekong Basin network, MBDS, who share their future plans in public health security including improving capacity in prevention and detection through the adoption of digital technologies, awareness raising activities and multi-stakeholder engagement.

- How our South East European Network, SECID, is working to strengthen surveillance and Causality Assessment of Adverse Events Following Immunization in their region.
A Unique Mechanism for Infectious Diseases Cross-Border Collaboration in the Middle East

The **Middle East Consortium for Infectious Disease Surveillance** (MECIDS) was established in 2003 by health professionals from the Ministries of Health and academia of Jordan, the Palestinian Authority and Israel to fulfill the goal of facilitating cross-border cooperation in response to disease outbreaks. With Israel on the one hand, and Jordan and the Palestinian Authority, on the other belonging to different WHO administrative regions, MECIDS emerged as a unique and pragmatic mechanism for cross-border collaboration to enhance surveillance and response to infectious diseases of regional and global importance.

MECIDS has been instrumental in addressing regional emergencies such as H5N1 avian flu (2005), H1N1 pandemic influenza (2009), transmission of foodborne diseases (e.g. salmonellosis) transmission of vector-borne diseases (e.g. West Nile Fever and leishmaniasis), and Middle East Respiratory Syndrome –Corona Virus (MERS-CoV). Throughout the past 19 years, since the establishment of MECIDS, there has been substantial instability and violence in the region, which sometimes hindered collaboration between the Palestinians, Jordanian and Israeli institutions. Despite these forces, the vision of MECIDS has been maintained, and core ongoing MECIDS activities of training and education have been preserved.

MECIDS has offered its vision and platform to enhance regional collaboration in facing the COVID-19 pandemic, with emphasis on the needs of all partners. Among the many activities the network conducted were: the exchange of knowledge and data sharing of COVID-19 surveillance and laboratory detection methods among public health experts from Jordan, the Palestinian Authority and Israel, ongoing professional updates on the epidemiological situation in each MECIDS country, exchange of experience related to COVID-19 vaccination, the training of health professionals in COVID-19 related epidemiology and laboratory aspects and the education of the general public regarding SARS-CoV-2, its transmission and preventive measures during the pre and actual vaccination times.

During the years preceding the COVID-19 pandemic, MECIDS partners usually undertook personal meetings and on the ground training sessions in the region or in neutral countries such as Turkey or Cyprus. However, the pandemic forced different circumstances, with imposed lockdowns and travel restrictions in each of the MECIDS countries. Therefore, to address MECIDS's goals, alternative virtual paths were created such as webinars, online trainings and meetings, which eventually resulted in increasing the outreach to the general population in Israel, Jordan and Palestinian Authority and enabled more frequent and intensive expert meetings and trainings.

MECIDS was also intensively involved in the frequent exchange of information and COVID-19-related lessons learned through the CORDS network partnership. These included monthly joint meetings, reporting, and discussions held by network principals and supported by Ending Pandemics and by a series of topical CORDS webinars such as those organized by MECIDS, APEIR, SACIDS and SECIDS. These webinars turned out to
be extraordinary means of exchange of in-depth expertise acquired during the pandemic by the networks located in different continents, and this was only possible thanks to the CORDS vision, structure, and modus operandi.

In parallel with the significant engagement in addressing the COVID-19 pandemic, MECIDS was intensively involved with other CORDS networks in a multi-region Antimicrobial Resistance (AMR) surveillance assessment. Furthermore, MECIDS participated through Tel Aviv University, in the design and piloting of an AMR, one-health-oriented surveillance protocol, in Ghana.

MECIDS is currently seeking financial support to maintain the precious trilateral collaboration and even expand the network to other countries in the region, with the knowledge that the power and impact of working together are greater than working as individual countries. MECIDS expressed its willingness to continue the invaluable partnership within CORDS and is working together with the other networks to find the most feasible and effective way of collaboration toward the common goal of addressing the emerging infectious diseases threats to come.

To find out more about MECIDS, visit: www.mecidsnetwork.org

MBDS Current and Future Agenda

The Mekong Basin Disease Surveillance Foundation (MBDS), a member of CORDS network of networks, operates based on its core values of mutual respect and trust[1], and works to progressively build local capacity, share information, and cooperate in regional cross-border collaboration[2]. This cooperation focuses on collaborative cross-border public health threat surveillance and response activities while recognizing the requirements of the 2005 International Health Regulations. Best practice and the lessons learned among MBDS countries[3] are important to continue to strengthen national and sub-regional capabilities in order to rapidly and effectively control Public Health Emergencies of International Concern.

Based on the MBDS roadmap above, the following potential collaborative activities are included in the future plan to strengthen public health security by improving capacities in prevention and detection and through the adoption of digital technologies, awareness-raising activities, promoting resilient health system and multi-stakeholder engagement:

1. **Strengthening real-time biothreat surveillance, knowledge sharing and technology transfer**
   - To strengthen and expand real-time reporting of EBS Regional Collaborative App to other MBDS cross-borders and beyond

2. **Laboratory quality improvement for biothreat surveillance**
   - To strengthen the laboratory quality management, bio risk management, and capacity to effectively control and respond to public health threats

3. **Strengthening biosafety awareness in public**
   - To promote public awareness of biosafety and biosecurity, including best practices during disease outbreaks, pandemics, and disasters

4. **Multi-sectoral joint risk assessment and response for public health threats**
   - To enhance capacity & knowledge sharing on joint risk assessment for public health threats
   - To evaluate and manage shared risks for capacity building and coordinated responses
   - To review the early warning, alert, and response system implementation in cross-border areas

In line with ASEAN Post-2015 Health Development Agenda[1], Initiative for ASEAN Integration (IAI) Work Plan IV (2021-2025)[2], ASCC Blueprint 2025[3], and Sustainable Development Goals[4] MBDS collaborative activities are expected to contribute to early detection and response to potential hazards and emerging threats (i.e., strengthening disease prevention and control, regional preparedness and response to PHE, laboratory
capacity, AMR containment, and disaster health management) as well as to contribute to strengthening health systems (i.e., human resources for health and digital health information systems) and raising awareness of disease outbreaks, pandemics and disasters. These activities will be implemented in the MBDS countries, then potentially scaled up to other South-East Asia and Asian countries, especially those with significant lower- and middle-income earners.

To find out more about MBDS, visit:
www.mbdsnet.org

[1] ASEAN Post-2015 Health Development Agenda No. 8,9,10,11,13,17,19 & 20
[2] Strategic Area No. 5 (Health and Well-being) in promoting a more effective and responsive health system
[3] ASEAN Socio-Cultural Community (ASCC) Blueprint 2025 on fostering a resilient health community
[4] Sustainable Development Goals (SDGs) No.1,2,3,4,5,6,8,12, 16 and 17

Advanced Training Workshop: Strengthening Surveillance and Causality Assessment of Adverse Events Following Immunization in South-Eastern European Countries

The South East European Centre for Surveillance and Control of Infectious Diseases (SECID), in collaboration with the World Health Organization European Region, the Centers of Disease Control, USA and Task Force for Global Health convened an advanced
training workshop on surveillance and causality assessment of adverse events following immunization (AEFI), in Tirana, Albania from 30 November to 2 December 2022.

Lecturers from the WHO Regional Offices of Canada, Estonia, Europe, Germany and Serbia, as well as US Centers of Disease Control and Prevention and the Uppsala Monitoring Centre participated in person and remotely, enjoying both interesting and fruitful discussions.

The aim of the workshop was to provide guidance and technical advice to national experts from the Southern-Eastern Europe Health Network (SEEHN) countries by updating the national policy procedures and tools on surveillance of AEFI’s to further strengthen the national mechanisms to detect, respond, assess causality, and communicate effectively. The workshop was attended by 50 participants including national experts involved in surveillance and review of AEFI cases representing national immunization programs; members of pharmacovigilance units of national drug regulatory authorities; representatives of the national expert committee involved in assessing the causes and classification of AEFIs; representatives of medical universities, and those responsible for graduate and post-graduate educational programs on pharmacovigilance and AEFI surveillance in the country. Attendees learned about the guidance, best practice, and resources available, and reviewed opportunities to improve the organization and functioning of their national AEFI surveillance systems.

By the conclusion each country present had drafted an action plan including engaging drug regulators, immunization programs and other national stakeholders. Multiple cross-cutting issues were identified that can be addressed by regional approaches.