

Summary report on the

Side session of public health institutes from the Eastern Mediterranean Region

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Marrakech, Morocco
3 November 2014



**World Health
Organization**

Regional Office for the Eastern Mediterranean

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1. Introduction

During the ninth annual meeting of the International Association of National Public Health Institutes (IANPHI), the WHO Regional Office for the Eastern Mediterranean held a regional side meeting for public health institutes from the Eastern Mediterranean Region on 3 November 2014. The objectives of the side meeting were to:

- Promote capacity and enhance networking among regional public health institutes in addition to increasing representation of the Region in IANPHI;
- Agree on a plan of action and road map for specific activities to be carried out by the regional network of public health institutes for the next two years based on the challenges and recommendations of the last regional meeting on public health;
- Discuss strategies for increasing networking between public health institutions.

The participants of the meeting were directors of selected institutes of public health in the Region, representatives of public health associations in the Region, representatives of the Eastern Mediterranean Region Academic Institutions Network (EMRAIN), the President of IANPHI and WHO staff from the Regional Office and Morocco country office.

The meeting was inaugurated by Dr AlaAlwan, WHO Regional Director for the Eastern Mediterranean, who stressed the importance of encouraging the establishment of public health institutes in the Region and strengthening those that already existed as an effective way to strengthen public health in the Region. This should be complemented by functional networking among the institutes to address the gaps that existed in the Region. He highlighted the five

public health priorities which had been identified and the consensus on the vision to address the priorities through concrete roadmaps. In this context, the new phase of WHO's work with Member States included developing concrete guidance on addressing public health challenges and how to implement recommendations. A leadership for health programme would be launched soon, and it was hoped that the leaders who completed the programme would not only help to address the national public health problems that directly impacted population health but would also play an active role in the sphere of global public health for the health and socioeconomic well-being of populations.

He concluded by noting that although EMRAIN was currently leading in the dissemination of knowledge, there was need to move to a higher level of implementation to address the existing gaps in Member States. EMRAIN might lead this initiative through evolving to a functional network of public health institutes in the Region.

Dr Pekka Puska, President of IANPHI, commended the initiative of the Regional Director to bring together public health institutes from the Region to discuss their contribution to strengthening public health in the Region. He outlined the main tasks of public health institutes as: maintaining public health laboratories, surveillance and monitoring, building capacity to respond to challenges, conducting research in priority areas, and providing evidence-informed policy advice. Public health institutes may come together in global and regional networks to share experiences and to support weaker institutes to develop.

2. Summary of discussions

The purpose of the Leadership for Health programme is to prepare capacities in the Region to: a) influence national health policies,

strategies, plans and programmes and their implementation; b) play a proactive role in global public health for the health and socioeconomic wellbeing of populations. The programme was developed in collaboration with leading international institutions; and is targeting mid- and senior level managers in ministries of health (80% of participants) and leading staff from academic institutions, and civil society organizations (20% of participants). It is anticipated that the programme will result in enhanced leadership capabilities of nationals and their influence on national policies and strategies as well as improved skills, visibility and impact of public health leaders on the global public health agenda. Additionally, the programme will gradually be transferred to regional institution with proven capacity to organize and deliver such a programme, with continued support from WHO.

The Eastern Mediterranean Region is currently home to six of the most challenging countries in the world with either humanitarian crisis or complex emergency (Iraq, occupied Palestinian territory, Pakistan, Somalia, Sudan and Syrian Arab Republic). Approximately 76 million people in the Region live in countries with humanitarian crisis or complex emergencies, over 10 million of whom are internally displaced. Current gaps in the Region in relation to public health capacity for outbreaks and emergencies include: limited participation of national public health institutes in international outbreak response; absence of any networking of institutes for outbreak alert and response; and limited engagement of national public health institutes in institutional capacity building for prevention and control of acute and emerging health threats.

The role of WHO in outbreak and emergency response is to: coordinate international outbreak response; formulate evidence-driven

recommendations, guidelines and standards; promote best public health practices (e.g. early warning surveillance system for early outbreak detection); strengthen international surveillance networks to detect, control, and reduce emerging health threats; improve the international public health infrastructure (e.g. laboratories, research facilities, technology, and communications links); and enhance international capabilities to respond to disease outbreaks with adequate public health and scientific resources and expertise. Public health institutes may play a role in supporting WHO to address these gaps.

The participants highlighted that despite the different functions their institutions currently conduct; the main role of a national public health institute is a “technical arm” for the ministry of health. In other words, the particular task of national public health institutes is to develop and implement evidence-based policies to address gaps and challenges.

With regard to the Leadership for Health programme, the participants welcomed the initiative and highlighted the need to ensure careful selection of the participants, as this will play a major role in determining the success of the programme. One of the recommendations was to pedagogically continue with the first cohort as proposed, followed by an evaluation of the content and delivery; and then consider expanding the programme to a training-of trainers.

Retention of capacity is an issue that was mentioned repeatedly – the goal is to build capacity of people from the Region for the Region. The uniqueness of the programme is that it couples classic training with practical application through engaging the participants in the 10-day programme at the WHO Executive Board meetings. This is at the

heart of national development issues and the engagement with WHO technical departments supports the hands-on training.

The current Ebola outbreak has exposed deficiencies in the health systems of countries. In majority of cases, countries tend to run vertical systems; whereas the need is for a comprehensive public health system. But in the same time Ebola has provided a “window of opportunity” to further develop and strengthen public health in the Region through assessments, IHR commitment, etc. Here is where the role of public health institutes comes in to support the strengthening of public health. This calls for clearly identifying the “mandate” of public health institutes in the Region and within countries.

In conclusion, there are a number of areas where public health institutes may contribute to and assist WHO in supporting Member States: Ebola preparedness assessment, noncommunicable disease surveillance, strengthening health information systems, health financing to achieve universal health coverage (namely health insurance programmes), etc. This represents a mutually beneficial opportunity for: public health institutes to benefit from being engaged in activities at national level; Member States to benefit from the expertise available; and WHO to rely on regional capacities and institutes to support its Member States in addressing public health challenges.

The Regional Director concluded the meeting with emphasizing the need to operationalize and translate commitment to action in addressing public health challenges. Addressing health development in the Region is an enormous challenge, and consequently coordination of efforts and collaboration is needed. Areas where collaboration may benefit include: capacity building, training and research, specifically

implementation research in key priority areas. He acknowledged the partners that have been gained through the meeting, who are vital in addressing the challenging agenda of the Region. Working together, he said, is the only way to achieve leadership and strengthen public health in the Region.

3. Points for action

- Support the work initiated with EMRAIN, through wider engagement of regional institutes and moving beyond knowledge dissemination only to more of an active role.
- Update a directory of public health experts in the Region with areas of expertise (WHO in collaboration with public health institutes from the Region).
- Update a database of public health institutes in the Region and include mandate, strengths and interest.



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