

Summary report on the

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# **Intercountry meeting on the strategic framework for prevention and control of emerging and epidemic-prone diseases in the Eastern Mediterranean Region**

Amman, Jordan  
16–19 December 2018



REGIONAL OFFICE FOR THE

**World Health  
Organization**

**Eastern Mediterranean**

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## 1. Introduction

The countries in the WHO Eastern Mediterranean Region continue to be hotspots for emerging and re-emerging diseases, including infectious disease outbreaks, which have a significant impact on health and economic development in the Region. Over the past decade, the public health landscape of the Region has rapidly changed, as is evident from its vulnerability to repeated outbreaks from emerging infectious diseases. At least 11 of the 22 countries in the Region have reported major epidemics from emerging infectious disease with the potential for global spread. These include outbreaks of yellow fever in Sudan (2005 and 2012), Rift Valley fever in Sudan (2007), monkeypox in Sudan (2005), Crimean–Congo haemorrhagic fever in Afghanistan (2010, 2016, 2017) and Pakistan (2010, 2016, 2017), dengue fever in Yemen, Sudan and Pakistan (2012–2017), chikungunya fever in Yemen (2010–2011) and Pakistan (2017), and cholera in Iraq (2007, 2008, 2012, 2015), Somalia (2007, 2010, 2015, 2016, 2017–2018) and Yemen (2016–2018). In addition, the emergence of Middle East respiratory syndrome coronavirus (MERS-CoV), and its continuing transmission (since 2012) in Bahrain, Kuwait, Oman, Saudi Arabia, Qatar, and United Arab Emirates, and avian influenza A(H5N1) human infections in Egypt, a novel influenza virus with pandemic potential, currently pose two of the biggest threats to global health security.

As a result of these recurring epidemic threats, WHO has taken steps to strengthen regional and national capacity to detect, verify and control emerging infectious diseases with epidemic and pandemic potential through the development of an integrated strategic framework for prevention and control of emerging and epidemic-prone diseases. The development and roll out of the framework is part of the implementation of the roadmap of WHO's work in the Region (2017–2021) and WHO's regional Vision 2023. The framework outlines a roadmap for enhancing

the capacity of the Member States to prevent, forecast, early detect and respond to epidemics and other emerging health threats by promoting evidence-based interventions, guidance and best practices for control and elimination of infectious diseases. With this aim in mind, WHO has completed a systematic review of all prevailing health threats in the Region, risk factors for propagating disease transmission, and inhibiting factors for disease control and elimination.

To ensure support for the framework and obtain feedback from key stakeholders, WHO held a meeting in Amman, Jordan, from 16 to 19 December 2018. The meeting's objectives were to:

- review and finalize the strategic framework for prevention and control of emerging and epidemic-prone diseases in the Eastern Mediterranean Region;
- assess and map current and past threats from emerging and re-emerging diseases with epidemic potential that are prevalent in the Region;
- better understand the underlying reasons and risk factors for commonly prevalent emerging and epidemic-prone diseases that are specific to the Region;
- discuss and agree on the disease-specific elimination and control programme through understanding evidence-informed interventions and their effectiveness for the control and elimination of epidemic-prone diseases targeted for control or elimination;
- review and finalize the principles and strategic directions for prevention and control of emerging and re-emerging diseases that are specific to the Region; and
- agree on an implementation plan for the framework, including a monitoring mechanism to assess progress over time.

The meeting was attended by representatives of the ministries of health from 21 countries of the Region.

## **2. Summary of discussions**

### *Situation of emerging and epidemic-prone diseases in the Region*

Thematic sessions and presentations, led by global experts on different topics, provided an overview of the situation of emerging and epidemic-prone diseases in the Region, the context and background to the strategic framework, and global strategies for control of emerging and re-emerging diseases, including cholera, influenza, yellow fever, and rabies.

The Region has been experiencing major complex emergencies, and infectious diseases continue to remain major causes of high morbidity and mortality among vulnerable populations. The major risk factors for the transmission of communicable diseases include population movement, disruption of routine public health services, impeded access to health care, damage to safe water and sanitation infrastructure, overcrowding, and disrupted surveillance systems.

In addition to protracted emergencies in the Region, other environmental factors affect the survival, reproduction and distribution of high threat pathogens, as well as their vectors and hosts. These factors coupled with human population movements and rapid urbanization, especially in poor urban slum areas, contribute to the increased frequency and severity of outbreaks in the Region. Gaps in preparedness and response are exacerbated by knowledge gaps, for example on the transmission mechanisms of pathogens, genetic diversity and its impact, and the causes of under- and non-reporting.

The recent Ending Cholera global roadmap, details measures that will help eliminate 90% of cholera infections by 2030. By using existing and proven measures to prevent and treat cholera, and by focusing on so-called cholera hotspots, the Global Task Force on Cholera Control is confident this is a realistic goal – and full elimination is aimed for in up to 20 countries.

Influenza is a major cause of morbidity and mortality worldwide, especially in high-risk groups, annually causing approximately 1 billion cases of seasonal influenza, 3–5 million severe cases, and 290 000–650 000 influenza-related respiratory deaths. The economic cost of seasonal and pandemic influenza is equally high: in the past century, four pandemics have each caused the loss of 0.5–4.8% of global GDP. A global influenza strategy for 2019–2030 has been developed that will improve coordination of global research and build country capacity. The WHO Global Influenza Surveillance and Response System (GISRS) was also discussed, particularly how to avoid overload of the system.

The Global Strategy to Eliminate Yellow Fever Epidemics aims to build a global coalition of countries and partners to address the increased risk of yellow fever epidemics, focusing on the 40 countries which are most vulnerable to yellow fever outbreaks (27 of which are in the WHO African Region). The strategy includes three key strategic objectives to protect at-risk populations, prevent international spread, and contain outbreaks rapidly.

Rabies causes the death of 59 000 people annually, the vast majority from dog-mediated rabies. The economic burden of the disease is another cause for concern, especially in Asia where it is estimated at US\$ 1.5 billion per year. A One Health approach is the key to addressing this threat effectively and efficiently. At the global level, Food and Agriculture Organization of the United Nations (FAO),



World Organisation for Animal Health (OIE) and WHO have developed a tripartite zoonoses guide and a guide for joint risk assessment. A global strategic plan has been developed to end human deaths from dog-mediated rabies by 2030.

A presentation on MERS-CoV and other emerging zoonotic respiratory pathogens focused on the current global and regional epidemiological situation, and on public health priorities for improved preparedness and readiness. A list of priority public health strategies and best practices, knowledge gaps and research agenda, and opportunities to prevent or control MERS and other emerging respiratory pathogens in the Region was presented.

Emerging zoonotic diseases in the Region, including Crimean–Congo haemorrhagic fever, brucellosis, anthrax, and others, were discussed, introducing the regional epidemiological situation, available public health interventions, opportunities to prevent or control zoonotic diseases and the way forward.

The strategic direction for universal health coverage in the Region in the context of emergencies was discussed, and the elements of health system resilience in complex emergencies, the linkage between universal health coverage and the Sustainable Development Goals, and ways to strengthen universal health coverage outlined.

A presentation on control of vector-borne diseases, discussed the Global Vector Control Response, available tools and strategies for the prevention and control of arboviral diseases, and opportunities to reduce the burden and threat of arboviral diseases.

Finally, the role of the health workforce in the prevention and control of emerging and epidemic-prone diseases was discussed.

During the plenary discussion that followed the presentations, participants spoke about various issues of concern, including a need for stronger preparedness and surveillance, enhanced vaccination and water, sanitation and hygiene (WASH) programming, greater overall health investment, attention to antimicrobial resistance, and the importance of political will and funding support.

The outcomes of a recent meeting on the One Health framework for action for the Region were introduced, along with the components of the framework for action, linkages between regional and national One Health strategic plans, and collaboration with other agencies.

*Strategic framework for prevention and control of emerging and epidemic-prone diseases in the Eastern Mediterranean Region*

During the meeting, the draft strategic framework was reviewed and validated through expert review. Additionally, participants technically reviewed the framework for their endorsement and drafted implementation plan activities, to practically roll out the framework, including a monitoring plan to follow up on the progress of implementation.

The strategic framework was introduced, including the process of its development, enablers and barriers to implementation, strategic priorities and components, the mechanism for measuring progress and impact, and the activity matrix.

Three group work sessions reviewed the framework, focusing on its vision, mission, goals, outcome, strategic priorities and components, and progress and impact measurement. Participants expressed the need to keep the vision short but broad, while connecting each activity back to it, and to make the entire document 20–30 pages in length. It

was suggested that sections on the biosafety aspects of the International Health Regulations and on economic impact, and a costing for the measures in the strategy, be added. Other suggestions included harmonizing and clearly defining terminology in a glossary, removing mention of GPW13 from the document, addressing private sector engagement, including baseline and target values for indicators, producing progress reports, including outcome and impact indicators, and clearly defining all indicator periods. It was decided to make the strategic framework valid for five years.

Participants identified challenges for implementation of the framework, including the need to secure political commitment, and financial and expert human resources, a lack of high-level advocacy, unclear ownership, the need for coordination and collaboration, the lack of private sector involvement, and the security challenges in the Region.

Participants agreed that monitoring the framework's implementation would depend, in large part, on WHO. Therefore, the meeting agreed that WHO should write to ministries of health to nominate focal points for coordination and progress monitoring, and to provide these focal points with the tools for progress assessment that are to be developed. WHO should support annual progress evaluation meetings and external progress evaluations, develop monitoring and evaluation plans, and establish an electronic platform for the monitoring of activities.

The framework, reviewed according to the country and regional context, and endorsed by country representatives, will cover all emerging and re-emerging diseases with epidemic potential that are prevalent in the Region or have been reported in the Region in the past. The document contains a set of evidence-informed best practices and disease-specific interventions for prevention and control of priority emerging diseases in the Region through strengthening inter-

and intra-sectoral coordination mechanisms, disease surveillance, laboratory diagnostic capacities, case management, infection control, social mobilization, and other key components required for the prevention and control of transmission risk of epidemic diseases.

At the end of the meeting, a list of focal points from each country for communication for the finalization of the framework was agreed upon.

### **3. Conclusions**

Each year, emerging and epidemic-prone diseases cause a substantial burden of loss of health, life, and economic growth and production throughout the world. Epidemics and pandemics of different pathogens are unpredictable but unavoidable events.

During the meeting, several important steps were taken to address the challenges. Referring back to the meeting's objectives, the participants' understanding of underlying causes and risk factors for common pathogens in the Region was improved, based on the latest scientific and operational research, and the expertise that was shared. Two key documents were reviewed, finalized and adopted: the One Health framework for action and the strategic framework for prevention and control of emerging and epidemic-prone diseases in the Eastern Mediterranean Region.

The newly-adopted strategic framework will be instrumental in moving the Region towards a future in which all Member States are equipped to prevent, prepare for, control, and respond to any and all outbreaks of epidemic- and pandemic-prone diseases. However, as was noted during the meeting, a good plan is not worth much without good implementation and evaluation. Having adopted the strategic framework, Member States now face the challenging task of adapting,

operationalizing, implementing and evaluating the actions included in the document, to deliver on its promise of a Region where no pathogen is a threat to public health anymore.

#### **4. Recommendations**

##### *To Member States*

1. Adapt and operationalize the strategic framework to the national level and context, including by adding country-specific outcome and impact indicators.
2. Draft and share a list of national activities requiring WHO support.
3. Officially endorse the nominated focal points for reporting and follow-up on the roll out of the strategic framework.
4. Monitor, evaluate and regularly report to WHO on the implementation status of the strategic framework using a feasible time frame.

##### *To WHO*

5. Finalize the strategic framework based on the comments provided by the participants of the intercountry meeting, along with a built-in monitoring framework for measuring progress of implementation of the framework over time.
6. Develop a baseline and targets for each of the indicators set for monitoring the progress of implementation of the strategic framework in consultation with Member States, and embed these in the framework.
7. Cost WHO's technical support activities included in the strategic framework.
8. Share best practices, data and analysis on outbreaks, response and control activities.

9. Communicate to ministries of health the names of nominated focal points and the need to monitor, evaluate and report on implementation progress of the strategic framework.
10. Develop standardized tools for the implementation of self-assessment by Member States.
11. Support Member States with regular progress review and evaluation meetings.
12. Support Member States with external evaluations of the implementation status of the strategic framework.
13. Implement and regularly update the electronic platform for country activities in implementing the strategic framework.

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