

DCD Bulletin

Division of Communicable Disease Control

DCD Bulletin

This quarterly bulletin presents important news, events and announcements from programmes of Division of Communicable Disease Control in the World Health Organization (WHO) Regional Office for the Eastern Mediterranean. For details, please contact dcd@emro.who.int inserting "DCD Bulletin" in the subject line.

Issue highlights

Hajj preparedness review

Global Fund cancels Round 11; announces new funding mechanism

Vaccination Week 2012 planned

WHO and partners release new reports on global progress in malaria, TB and HIV/AIDS



National ambassadors of the Stop TB programme from countries around the world gather in Geneva in December to reiterate their commitment to fight tuberculosis.

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Is this the end of the Global Fund to fight AIDS, TB and Malaria?

Since the November 2011 board meeting of the Global Fund, rumours abound about its demise and the dangers being faced by HIV/AIDS, tuberculosis and malaria programmes globally. The Global Fund today is one of the largest financiers of public and private sector-run interventions to stop AIDS, tuberculosis and malaria and saves millions of lives around the world. In the Eastern Mediterranean Region alone approximately US\$ 2 billion have been committed, disbursed and utilized. No doubt this is by far the biggest investment ever made to deal with the three diseases.

With a slowing global economy and reluctance of donors to commit and contribute to development and health care in low-resource and low-income countries; it is understandable that the Global Fund and other financing mechanisms (e.g. GAVI) are facing difficulties. This indeed is going to affect low-income countries harder than middle-income or upper middle-income countries, however, the situation is not as bad as is being portrayed in the media. The Chair of the Global Fund's Board recently commented that the Fund was not going to end, it would disburse US\$ 10 billion in 2012-2013, but while "acting responsibly and with a more strategic approach". Donors have also made pledges to "keep their promises". Acting responsibly and more strategically would mean no new funding opportunities until 2014 when replenishment arrangements are made by donors of the Global Fund. Current grant renewals will be tougher and tougher, and grants in danger of ending and disrupting essential services (e.g. medicines) will be sustained through a transitional funding mechanism, and more emphasis on value for money through strict

monitoring of expenditure and reduction of unnecessary or non-essential goods and services.

While the Global Fund management and Board have repeatedly reassured stakeholders, countries need to realize that the Global Fund will change. Countries need to reduce their over-reliance on Global Fund monies and increase domestic resources to fight AIDS, tuberculosis and malaria. They need to return to bilateral donors and ask for more assistance and enhanced cost efficiency. This may not be the end of the Global Fund but it is the end of the Global Fund as we currently know it.

Asmaa



In connection with World AIDS Day 2011 celebrations; the AIDS and sexually transmitted diseases programme organized a screening of the Egyptian movie "Asmaa", starring the well-known film star Hind Sabry. The film highlights the issue of stigma and

discrimination against people living with HIV/AIDS and is based on the true story of an Egyptian woman. The film was watched by a large number of WHO staff accompanied by Dr Hussein A. Gezairy, WHO Regional Director for the Eastern Mediterranean.

Programme news

AIDS and sexually transmitted diseases

World AIDS Day 2011

Stop stigma and discrimination in health care settings

For a third year, the World AIDS campaign focuses on human rights – the right to health is a core value in delivering health services. This year, World AIDS Day was commemorated with a regional theme "stigma and discrimination in health-care settings". In the Eastern Mediterranean Re-

gion, the 2011 World AIDS Day campaign has prompted discussions among health care providers about the injustices that remain and ways to improve conditions. The campaign asserts that upholding shared human rights is the best way to bring about HIV prevention, treatment and care for all. The rights-based approach for HIV/AIDS care reinforces the principle that individuals should not be tested for HIV against their will or denied equal health services because of their HIV status.

20th Intercountry meeting of national AIDS programme managers

The AIDS and sexually transmitted disease programme organized the 20th intercountry meeting of national AIDS programme managers in Beirut, from 26 to 29 September 2011. The meeting identified priority actions to be taken by ministries of health and UN partner agencies towards achieving the objectives and targets of the "Regional strategy for health sector response to HIV, 2011–2015". Participants were oriented on methodologies for estimating sizes of populations at increased risk of HIV and shared experiences with their application in the Region. The meeting was attended by national AIDS programme managers, regional focal points for HIV, members of civil society and representatives of organizations for people living with HIV and regional expert groups on HIV treatment and HIV surveillance from UNAIDS MENA, UNDP, UNFPA, UNODC, Islamic Development Bank, World Bank, Global Fund and UNICEF.

Control of tropical disease and zoonosis

Training workshop for national leprosy programme managers

The control of tropical diseases and zoonosis programme organized a training workshop for national leprosy programme managers from low-endemic countries of the Eastern Mediterranean and African regions from 5 to 8 December in Cairo. The workshop introduced the Enhanced Global Strategy for Further Reducing the Burden Due to Leprosy (2010–2015); introduced practical training on leprosy diagnosis, treatment, management of complications, prevention of disability and rehabilitation; and provided training on managing leprosy control programmes with emphasis on case detection, reporting and monitoring, integration and establishing an effective referral system. National leprosy control programme managers, focal points from low- or non-endemic countries from Bahrain, Djibouti, Egypt, Jordan, Libya, Saudi Arabia, Somalia, Sudan, Tunisia, Angola, Eritrea, Sierra Leone, Namibia and attended, and facilitators from the Netherlands and Uganda also participated in the workshop.

Annual review of Guinea worm eradication programme held in South Sudan

The annual review meeting of the Guinea worm eradication programme took place from 8 to 9 December in Juba, and was organized by the Ministry of Health of South Sudan, supported by WHO and the Carter Centre. Participants included key Ministry of Health officials led by the Minister of Health. The meeting was held in the context that tremendous progress had been made in previous years on eradication of Guinea worm disease. The total number of new cases reported globally this year had dropped to 1054 cases (November 2011), compared to 1797 cases reported in 2010.

Of the 1054 cases reported globally in 2011, only 28 cases were reported outside South Sudan.

Surveillance, Forecasting and Response

WHO participates in a public health preparedness mission for hajj 1432: no major communicable disease crisis reported

Following an invitation from the Government of Saudi Arabia, a team from the WHO Regional Office participated in a mission to observe the public health measures undertaken by Saudi Arabia for the annual Muslim hajj pilgrimage. The team visited field hospitals set up at selected points of entry to see the curative, preventive and promotive health services provided for millions of pilgrims. They also reviewed the public surveillance systems for early detection of, and response to, infectious disease outbreaks and assessed the risk communication messages given to the pilgrims. The WHO team noted with appreciation the high level of health care services made available to the pilgrims, which facilitated the performance of their religious duties free from ill-health, in comfort and with peace of mind.

Viral haemorrhagic fever on the increase in the Region: subregional meeting calls for strengthening national preparedness and response for large-scale outbreaks

The occurrence of viral haemorrhagic fevers has been on the increase in the Region due to a number of ecological, environmental and climatic factors. The recurrent threats of viral haemorrhagic fevers pose a major public health concern. In view of this growing problem a subregional meeting was held in Tehran, Islamic Republic of Iran, from 27 to 30 November to address a number of key issues, including surveillance for early detection of an outbreak, laboratory capacity-building and partnerships with veterinary and entomological services. In compliance with Regional Committee resolution EM/RC54/R.05, the subregional meeting concluded with strategic guidance for prevention and control of viral haemorrhagic fevers in the Region. The guidance



WHO contributes to the multisectoral response to the visceral leishmaniasis outbreak in South Sudan



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Surveillance, forecasting and response (cont.)

will also assist countries at risk to strengthen their national epidemic preparedness and response plan for control of viral haemorrhagic fevers. Public health officials from Afghanistan, Egypt, Islamic Republic of Iran, Iraq, Pakistan, Somalia, South Sudan, Sudan and Yemen participated in this meeting.

Pandemic and seasonal influenza activities

Knowledge, attitudes and practices regarding pandemic (H1N1) vaccine

Four knowledge, attitudes and practices studies regarding the uptake of the vaccine among health care workers as a priority group and university students as a non-priority group for vaccination were carried out by the Regional Office in Egypt, Islamic Republic of Iran, Jordan and Morocco. The results of these studies revealed the level of knowledge among the two groups under study and their beliefs regarding certain attitudes. Vaccine uptake among these groups and the factors behind it were revealed as part of the results.

The studies concluded that more effort needs to be paid to increase the level of knowledge and confidence about pandemic (H1N1) and the vaccine among the population, in general, and among health care workers, in particular, by having a comprehensive social mobilization and mass communication strategy ready to be used before, during and after future pandemics. The strategy should be designed to target subgroups of the population separately, with a focus on health care workers. For more details on the results of each study, contact: sam-hourid@emro.who.int.

Consultative meeting on the regulations of the pandemic (H1N1) vaccines

The Division of Communicable Diseases at the Regional Office, in collaboration with Division of Health Systems and Services, conducted a consultative meeting on the regulations of the pandemic vaccines, in October. The objectives of the meeting were to share experiences on the regulation of pandemic (H1N1) vaccine; to present updates on regulatory evaluation of vaccines: quality, safety and efficacy; and to identify a regulatory pathway for the evaluation of pandemic influenza vaccine that could be applied to any newly-produced vaccine to be used under emergency situations. A consensus on the outline of a guidance document for registration of vaccines for emergency use that could be applied to pandemic influenza and other vaccines that may be required in the future to respond to a public health emergency situation was the outcome of the meeting.

Guidance for developing national deployment and vaccination plan using a pandemic influenza vaccine

WHO has developed guidance to assist countries to develop, assess and update their national deployment and vaccination plans. The initial draft was completed and field-tested shortly before pandemic i(H1N1) was declared in June 2009 and was used to guide countries in developing their pandemic national deployment and vaccination plans. It was revised in 2010–2011, incorporating experience and lessons learned from the pandemic at global, regional and country levels, as well as key recommendations from global and regional workshops. The updated guidance includes 10 chapters, covering all the processes and structures that need to be functional before and during a pandemic in the areas of defining vaccination strategies, management and organization, legal and regulatory issues, communication and information, human resources and security, public communication, logistics and supply chain management, managing wastes, post-marketing surveillance and management of adverse events following immunization and termination of deployment and vaccination operations.



WHO participates in public health preparedness for hajj

International Health Regulations (IHR 2005)

Regional workshop on IHR implementation and monitoring of core capacities in the Eastern Mediterranean Region

A regional workshop on IHR implementation and monitoring of core capacities in the Region was conducted from 5 to 7 December. The workshop aimed to assist countries in completing all the information requested and information presented in the WHO tools for monitoring implementation of IHR core capacities; and to provide training on the mechanisms for collaboration in sharing information and implementing appropriate interventions during potential public health emergencies of international concern. National IHR focal points from all countries of the Region participated in the workshop, in addition to representatives from the United States Naval Medical Research Unit (NAMRU-3) and the Global Disease Detection and Response Program of the Centers for Disease Control (CDC).

Malaria Control and Elimination

Regional workshop on strengthening quality management systems (QMS) for parasitological diagnosis of malaria

Malaria diagnosis is important for case management and malaria surveillance. Absence and/or poor quality of parasitological diagnosis represents a big challenge for malaria surveillance in high-burden countries of the Region. It is a major obstacle that hinders the collection of reliable malaria incidence data for proper evaluation of interventions. In light of the importance of this, the malaria elimination and control programme organized a workshop on strengthening quality management systems for parasitological diagnosis of malaria. The workshop reviewed the status of access to parasitological diagnosis; shared country experiences on quality assurance for the microscopy and rapid diagnostic tests; updated countries on the news of WHO manual for quality assurance, guidelines on procurement and supply chain management, rapid diagnostic tests and discussed current experiences on microscopy accreditation programme and development of a regional system for external competency assessment of malaria. At the end of the workshop, participants recognized the need to accelerate universal access to malaria diagnostic testing as a key component of national efforts to ensure quality of care, reduce pressure on antimalarial medicines, improve efficiency and strengthen the malaria surveillance system. The regional workshop was followed by a meeting of the two malaria networks in the Region – HANAMT and PIAMNET.



Participants of the consultation on new diagnostics and their effective use, November 2011

Regional consultation on pesticide management

The malaria control and elimination programme organized a regional consultation on pesticide management in Muscat, Oman, from 5 to 7 December. The consultation made several recommendations including the need for WHO to provide technical support in review, needs assessment and legislation development and in the development of a web-based system for information exchange on pesticide management issues. Participants also urged WHO to provide technical support to countries in strengthening capacity of registration of public health pesticides. Consensus was also reached on facilitation of subregional/regional collaboration on pesticide registration, information exchange and mutual acceptance of data.

Stop Tuberculosis

Regional workshop on strengthening recording and reporting of multidrug-resistant tuberculosis (MDR-TB) cases

The Stop TB programme organized a regional workshop on strengthening recording and reporting of multidrug-resistant tuberculosis cases in Cairo from 13 to 15 September. The purpose of the meeting was to train participants on WHO standardized patient registration and case definitions for notification; explain cohort analysis of registered MDR-TB patients on treatment and their outcomes; and develop familiarization with electronic means of data registration and reporting. Surveillance officers working on MDR-TB and clinicians who are involved in the management of drug-resistant tuberculosis cases at national and provincial levels from Afghanistan, Djibouti, Egypt, Islamic Republic of Iran, Iraq, Jordan, Lebanon, Morocco, Pakistan, occupied Palestinian territory, Somalia, Sudan, South Sudan, Syrian Arab Republic, Tunisia and Yemen were invited to the workshop.

Consultation on scaling up the utilization of new tuberculosis diagnostics in the Region

The Stop TB programme organized a consultation on scaling up the utilization of the new tuberculosis diagnostics, including (Gene Xpert MTB/RIF) from 29 November–1 December 2011. The consultation studied costs, cost-effectiveness and user feasibility of new diagnostics; adapted the global road map to the regional situation to provide guidance to countries and developed a plan for the implementation of the recommended global policy based on the results of consultations with countries. Tuberculosis experts in the Region and members of the Task Force Committee attended the consultation.

Global Fund to fight AIDS, TB and Malaria cancels Round 11 and announces transitional funding mechanism for essential services

The Global Fund Board has cancelled Round 11 in light of the Global Fund's financial difficulties. This difficult decision was made at a two-day Board meeting in Accra, Ghana in November.

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Stop Tuberculosis (cont.)

Instead of Round 11; the Global Fund has established a transitional funding mechanism to cover the costs of "essential prevention, treatment and/or care" services in countries that have grants that will be expiring and that face a serious disruption of services between 1 January 2012 and 31 March 2014. Disruptions are likely to occur because of the cancellation of Round 11 and because there will be delays in the Global Fund providing a new funding opportunity. The deadline to apply to the transitional funding mechanism is 31 March 2012. Essentially, this mechanism is for countries that would have been expected to apply for Round 11.

Details can be accessed at: www.theglobalfund.org/en/application.

Operation research in tropical and other diseases

Intercountry workshop on proposal development and research methodology

An intercountry proposal development and research methodology workshop was held in Sharm El-Sheikh, Egypt, from 8 to 13 October. The objective of the workshop was to develop protocols to address the challenges facing disease control, while strengthening research capacity of national disease control programmes in the Region. The ultimate goal is to improve programme performance. The workshop consisted of several modules. Each module was related to a methodological topic that was presented in a plenary session followed by a practical application of the topic in different groups. During the developmental process of the protocol, each section was presented and peer-reviewed by a panel of experts and participants for further improvement until the first draft was developed at the end of the workshop. 12 protocols were developed from 11 countries of the Region. These were in the following areas: tuberculosis (Egypt, Pakistan, Iraq); malaria (Islamic Republic of Iran, Afghanistan, Sudan, Yemen); HIV/AIDS (South Sudan); leishmaniasis (Syrian Arab Republic, Afghanistan); and integrated communicable diseases (Morocco).

Vaccine preventable diseases and immunization

Vaccination Week 2012

In line with the global and regional visions and priorities, and in response to remarkable opportunities and daunting challenges, WHO Regional Office and partners are launching the third Vaccination Week in the Eastern Mediterranean during the week of 24–30 April 2012, which will coincide with Vaccination Week events in five other WHO regions. Vaccination Week is an annual initiative celebrating and promoting immunization through advocacy, education and communication activities. For Vaccination Week in 2012, it has been proposed that the Region and countries adopt the theme of "reaching every community". This event can be leveraged to bridge immunization gaps, introduce and expand the use of new vaccines, prevent and respond to vaccine-preventable diseases in outbreaks and humanitarian crises, and achieve regional and national goals for accelerated disease control, elimination and eradication.

Meeting on evaluating Vaccination Week 2011

A meeting on the evaluation of Vaccination Week 2011 in the Region and preparations for a similar Week in 2012 was organized by the WHO Regional Office in Dubai, United Arab Emirates, on 20 October 2011. The meeting discussed the theme of Vaccination Week 2012, and shared experiences and lessons learned from the 2010 and 2011 campaigns. The meeting also provided an opportunity to enhance the capacity of participants on the design of health communication campaigns and evaluation. Approximately 80 participants representing countries of the Region and key partners, including UNICEF, participated in the meeting.

Publications

World Malaria Report 2011: malaria deaths are down but progress remains fragile

Malaria mortality rates have fallen by more than 25% globally since 2000 according to the *World malaria report 2011*, issued recently by WHO. This is the result of a significant scaling-up of malaria prevention and control measures in the last decade. However, WHO has warned that a projected shortfall in funding threatens fragile gains and that the double challenge of emerging drug and insecticide resistance needs to be proactively addressed. For details, go to: http://www.who.int/mediacentre/news/releases/2011/malaria_report_20111213/en/index.html.

Global tuberculosis control report 2011: WHO warns of consequences of underfunding tuberculosis

WHO has reported for the first time that the number of people falling ill with tuberculosis each year is declining. New data, published in the *WHO 2011 global tuberculosis control report*, also show that the number of people dying from the disease fell to its lowest level in a decade. For details, go to: http://www.who.int/mediacentre/news/releases/2011/tb_20111011/en/index.html.

Report on the global HIV/AIDS response: unparalleled global progress in HIV response but sustained investment vital

The recently launched *Report on the global HIV/AIDS response* shows that increased access to HIV services resulted in a 15% reduction of new infections over the past decade and a 22% decline in AIDS-related deaths in the last five years. While there is still much to be done, 2011 was a game changing year, in terms of current progress and innovations creating hope for substantial future advances. For details, go to: <http://www.who.int/mediacentre/news/>