



**BUILDING ACADEMIC CAPACITY
IN GLOBAL HEALTH IN THE EASTERN
EUROPE - CENTRAL ASIA REGION**



Eurasian Academic Alliance for Global Health



**Co-funded by
the European Union**

Quarterly Bulletin of the Eurasian Academic Alliance for Global Health Quarter 4, 2022

The Eurasian Academic Alliance for Global Health was established under the auspices of the project - *Building Academic Capacity in Global Health in the Eastern Europe & Central Asia Regions (BACE)* - supported by the European Commission's Erasmus+ programme. In the context of the Alliance - *Eurasia* is defined as a group of countries located in the Baltic Sea, Eastern Mediterranean, Black Sea, Caspian Sea and the Central Asia regions.

BACE is implemented by a partnership of eleven academic institutions:

- Heidelberg Institute of Global Health, Germany (Coordinator)
- Al-Farabi Kazakh National University, Kazakhstan
- Astana Medical University, Kazakhstan
- Batumi State University, Georgia
- Bergen University, Norway
- National University of Kyiv-Mohyla Academy, Ukraine
- Tbilisi, Institute of Global Health, Georgia
- Tbilisi State University, Georgia
- Ternopil National Medical University, Ukraine
- University of Georgia
- University of Tromsø, Norway

BACE is aimed at achieving the following objectives:

- Developing curricula and delivering new courses on priority global health topics with specific focus on countries in the Eurasia region;
- Developing curricula and delivering new courses on global health research methods at BACE beneficiary universities;
- Establishing the Eurasian Academic Alliance for Global Health.

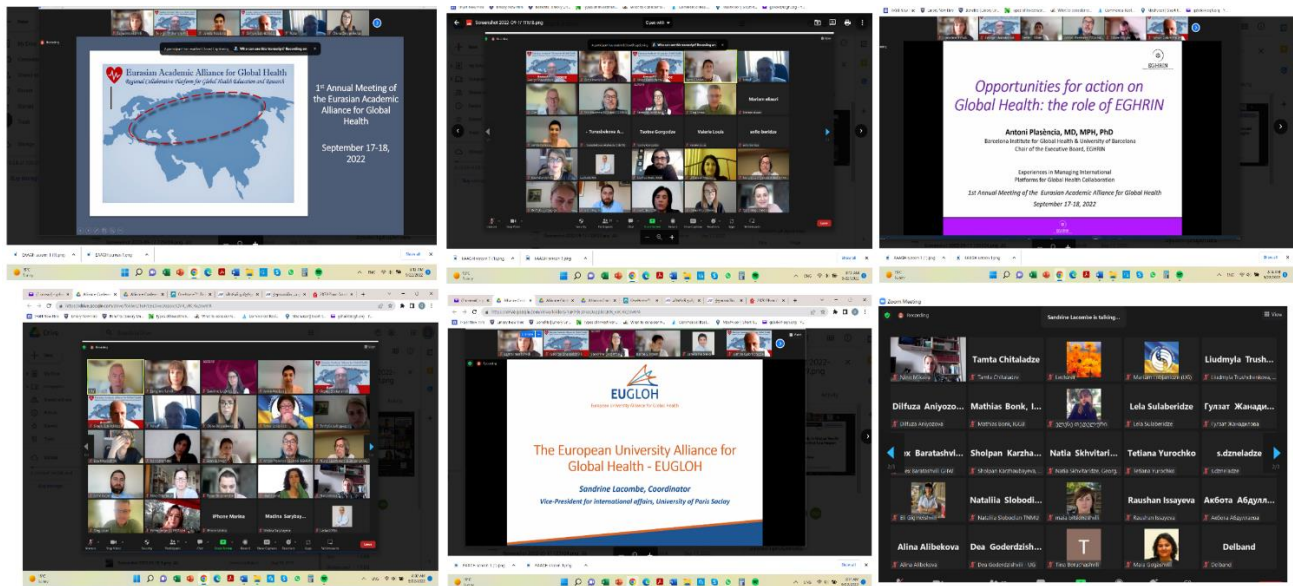
The Alliance serves as a collaborative platform on global health education and research among academic institutions of the Eurasian region. Academic institutions from and outside the region, interested in expanding collaboration on global health education and research, are encouraged to join the Alliance. Information is available on the Alliance's web-page:

www.allianceforglobalhealth.net

The Quarterly Bulletin is a dissemination instrument for updates on the Alliance's activities and BACE implementation, as well as various developments in the area of global health.

The Alliance looks forward to welcoming new members and to establishing productive collaboration with interested partners.

Updates from the Alliance



On September 17-18, 2022 Eurasian Academic Alliance in Global Health convened its first annual conference. The objectives were to introduce the Alliance to partner institutions, overview on-going global health challenges in the region and to discuss about opportunities for expanding academic collaboration on global health issues across the region. About 100 participants from 19 countries contributed to discussions on the following topics (to view the agenda please [click here](#)):

- Experiences in managing regional platforms for public health/global health collaboration: What can EAAGH learn from other networks?
- Preparedness for pandemic outbreaks: what did we learn from managing COVID19?
- Addressing public health and healthcare challenges during large scale emergencies: the case of Ukraine
- What does it take to establish a new academic program in global health?

The Alliance is pleased to welcome new members who joined us in September 2023:

- Center for International Health, Ludwig-Maximilians-University, Munich, Germany
- School of Public Health, Chisinau, Moldova
- David Tvildiani Medical University, Tbilisi, Georgia
- Berlin Institute of Global Health, Germany

International Partnerships in Global Health



WFPHA

World Federation
of Public Health
Associations

In this issue of the Bulletin we present World Federation of Public Health Associations (WFPHA) <https://www.wfpha.org/>

WFPHA was founded in May 1967 during the 20th World Health Assembly by delegates representing 32 national public health associations. Its foundation represented a milestone in creating a non-governmental civil society voice for public health. WFPHA mission is to protect people, prevent diseases and promote health & well-being. Currently, it includes 130 member associations, 5 million public health professionals represented 104 countries. WFPHA has 5 broad goals:

- Goal 1: Advocate for health equity and global policies to improve the health of populations;
- Goal 2: Promote, support and strengthen member associations;
- Goal 3: Develop and advance public health practice, education, training and research;
- Goal 4: Grow new and strengthen existing partnerships with groups or individuals who share our values;
- Goal 5: Build an effective, efficient, responsive and sustainable WFPHA.

To achieve its mission the following working groups are operational under WFPHA: oral health; environmental health; tobacco control; global health equity and digital technology, public health professionals' education and training; women, adolescents and children's health; public health in emergency and disasters; students and young professionals; indigenous; NCDs prevention and health promotion.

Health Challenges of Global Importance



Diabetes is one of the fastest growing global health emergencies of the 21st century. It is a major health issue that has reached alarming levels. Today, more than half a billion people are living with diabetes worldwide and more than 6 million deaths are attributable to diabetes worldwide. Only in Europe, death cases have almost doubled during the last decade reaching 1,111,201 in 2021. The situation has further exacerbated due to Covid-19 pandemic. Data from many countries have consistently shown that people with diabetes with COVID-19 have an

excess risk of hospital admission, increased disease severity, and increased mortality. At the same time, several studies have suggested that adults face an increased risk of diabetes diagnosis after contracting COVID-19. Youth younger than 18 years old with COVID-19 were shown to be at higher risk of developing diabetes more than 30 days after their COVID-19 infection. The publications below overview interrelationships between Covid-19 and diabetes:

The effect of Covid-19 on routine diabetes care and mortality in people with diabetes

[https://www.thelancet.com/journals/landia/article/PIIS2213-8587\(22\)00162-0/fulltext](https://www.thelancet.com/journals/landia/article/PIIS2213-8587(22)00162-0/fulltext)

COVID-19 infection may increase risk of type 1 diabetes, suggests nationwide study of 1.2 million children in Norway

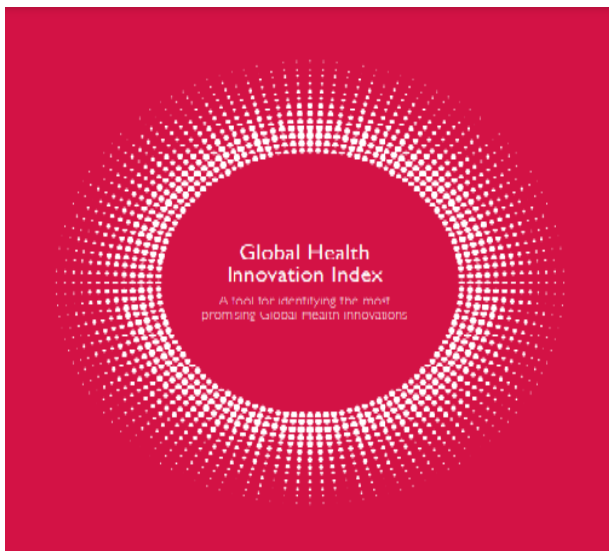
<https://www.eurekalert.org/news-releases/965465>

Association of SARS-CoV-2 Infection With New-Onset Type 1 Diabetes Among Pediatric Patients From 2020 to 2021

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2796649>

***14 November is World Diabetes Day. Established in 1991 by the International Diabetes Federation with support from WHO in response to growing concerns about the health and economic threat posed by diabetes, World Diabetes Day became an official UN day in 2006.**

Innovation in Global Health



CENTER FOR
INNOVATION
AND IMPACT
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The **Global Health Innovation Index** is a tool intended to assess global health innovations and identify those with the greatest potential for global health impact – both in the short and long term. The Index examines products, practices, and services, but does not cover drugs or vaccines because of their unique regulatory requirements and pathways to scale. This tool was created to compare early stage and scaling innovations across the entire USAID and Saving Lives at Birth (SL@B) global health innovation portfolio, irrespective of the health challenge they are addressing. The Index has two main goals: 1) Provide a versatile tool to evaluate a diverse range of health innovations at every stage of development to assess which ones are the most promising and should be considered for further support – for example, funding, technical assistance, and connections with partners; 2) Highlight some of the most promising near-term innovations to support greater adoption and incorporation in ongoing health programming.

The tool uses four core criteria to evaluate the most promising innovations:

- 1) Health impact: Does this innovation improve health outcomes relative to the status quo? Does it relate to an important driver of morbidity or mortality?
- 2) Demand & sustainability: Are health workers and other stakeholders willing to use this innovation and able to do so affordably? Is there a sustainable way to pay for the innovation?
- 3) Organizational and/or partner capacity: Can this organization and/or their partners reliably produce and distribute this innovation at scale?
- 4) Progression on scale: Has this innovation cleared regulatory and technology hurdles to scale? Has it proven ability to scale successfully?

Global Health Innovation Index: A tool for identifying the most promising Global Health Innovation

https://www.usaid.gov/sites/default/files/documents/CII_Global_Health_Innovation_Index.pdf