
October 2020 ASPHER Newsletter



Archangel Michael sheathing his sword to signal the end of the Plague | Castel Sant'Angelo, Rome
Source: Ptra, Pixabay

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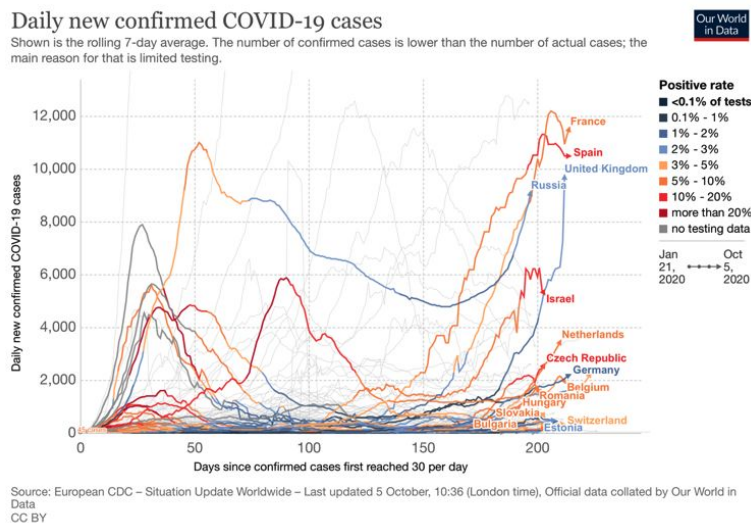
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[SHARE THE ASPHER NEWSLETTER!](#)

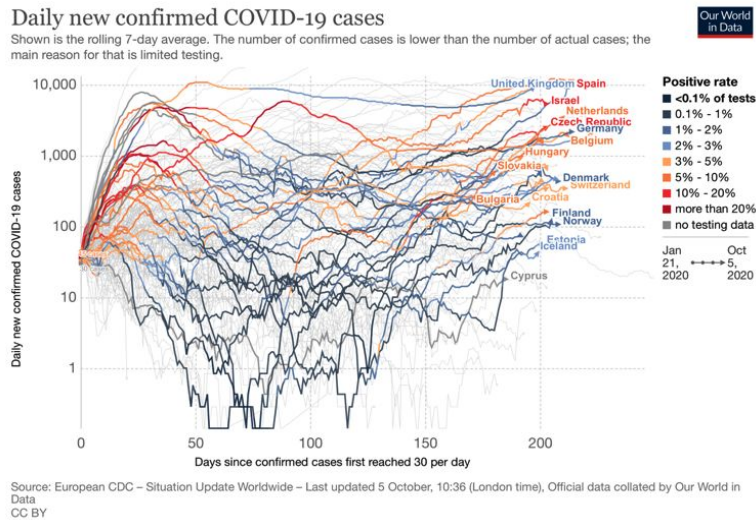
MESSAGE FROM THE PRESIDENT



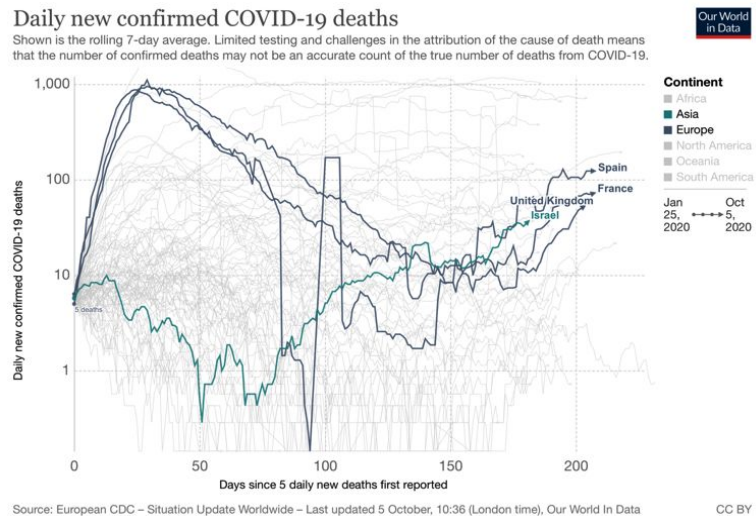
September has been a busy month for ASPHER and its members, and for COVID-19. The virus continues to rise in familiar u-shaped curves that some call [‘second wave’](#) and some call [‘the continuation of the first wave...’](#) In some countries it appears like there is even a third wave. So while epidemiologists like to debate these things, it seems, to me, we just have to describe what we see in the epicurves – they look like waves to me!



They do look a bit less wavy in log scale though, as Henrique Barros showed us for Portugal at the ASPHER COVID-19 Task Force recently But as a US scientist was quoted, [‘when you are underwater it doesn’t matter how many waves are going over you’](#).



The summertime observation of a younger group being ill with mild infections and less need for hospitalisation is giving way to a rise in intensive care admissions and deaths, especially in [France](#), [Spain](#), [UK](#) and [Israel](#).



In [some countries which managed well](#) earlier in the year, there is a surge. You can never believe you have this virus beaten – as the New Zealanders discovered two days after their [100 days-COVID free national celebration](#), and the Czechs are now finding after their [Charles Bridge street party](#).

Everyone is getting excited by the [US President’s COVID-19 and conspiracy theories](#), and media management. The reality of the President’s condition may never be known. But for me, it is clear the whole era of fake news, digital disruption and manipulation and [surveillance capitalism](#) is something we must address as a major threat to the public’s health. We are looking to develop an ASPHER team to look at mass communication – how to make it work for health in the era of fake news and social media. If you have that knowledge join us. But will we believe you?

The real bombshell study of the month is the [Laxminarayan, et al. study](#) published in Science which will make us all reappraise our assessment of testing and tracing strategies and the resources we commit to them - the most intensive contact tracing programme on the planet - in Tamil Nadu and Andhra Pradesh in Southern India has confirmed the importance of super-spreading events and also the potential of children to spread the infection. Our Task Force subgroup led by Henrique Lopes (Catholic University of Portugal) and Severine Deguen (EHESP) are rapidly re-assessing cross-country policies on mask use in the classroom.

We are also repeating our survey of our [Member Schools' policies](#) through our young professionals group led by Ines Siepmann (ScHARR, Sheffield University). This is a vital survey to help our members judge their own policies. Many are now observing that universities have put monetary considerations ahead of student wellbeing - forcing students to return to campus only to have them ['imprisoned' in their halls of residence](#). There is widespread concern about universities as [potential sources of infection](#) in their local communities. On the other hand, a recent global study has shown young people are only slightly less concerned about staying safe and protecting people around them, than over 45 year olds. The UK Independent SAGE group have proposed actions for [COVID safe universities](#). And not to be outdone - the [official UK SAGE group](#) has also published guidance. All our members need to be actively involved in this vital area of public health protection. Please respond to our surveys when you get them.

In September, ASPHER activities included the [General Assembly](#), at which we welcomed ten new Member Programmes, reported and celebrated the achievements of our Member Schools, our COVID-19 Task Force and our young professionals, reported improvements in governance and financial management and agreed our [Strategy to 2025](#). Professor Carlo Signorelli from University Vita-Salute San Raffaele, Milan, Italy was acclaimed as our new President-elect from May 2021. Nadav Davidovitch (Ben-Gurion University of the Negev, Be'er Sheva, Israel) and Carla Lopes (ISPUP, Porto, Portugal) were also acclaimed as new ASPHER Executive Board members to serve from May 2021. Congratulations to you all - you are already major assets for ASPHER and I look forward to working with you.

The following day we held a successful webinar with WHO Europe colleagues, progressing the [WHO-ASPHER Competency Framework for the Public Health Workforce in the European Region](#). I am most grateful to Natasha Azzopardi-Muscat, Anna Cichowska and Martin Krayner von Krauss from WHO Europe and ASPHER Vice President Kasia Czabanowska from Maastricht University for making this happen. There is much to be done on competencies and this was just one step further down the road. A related activity is the ASPHER-ECDC project - Updating Core Competencies for Applied Infectious Disease Epidemiology (UCCAIDE), announced in the [September Newsletter](#), which is being led for us by Mary Codd and her team at University College Dublin.

It was a great pleasure to join colleagues at the National School of Public Health (ENSP) and Nova University, Lisbon for their [52-25 Years Celebration](#) last week. Thank you to Carla Nunes for the invitation. It was also great to be part of a [celebration of nursing and midwifery in Slovenia](#) with Angela Boškin Faculty of Health Care and to share some of my

thoughts on how nursing disciplines are such a crucial part of public health systems and services. Thank you to Sanela Pivač and colleagues for this invitation.

To round off the month was the most virtually [excellent European Health Forum Gastein](#) at which I was part of a high level dialogue on the proposed European Health Union – never more necessary. I have said from the start that [Ursula Von der Leyen’s European Commission President’s manifesto](#) ‘A Europe that strives for more’ [is a public health agenda](#). We need to see that it is delivered and becomes a reality. Likewise the [EU4Health programme](#) is vital as well – health problems do not respect borders – international cooperation and action is needed. Countries can also pool their resources for example, in procurement of vaccines and medical equipment as in the current COVID-19 pandemic.

My thanks again to you all for your interest and enthusiasm. Thanks particularly to Robert Otok and Lore Leighton for all their hard work this month.

If you need some more to read, try these publications new this month:

Middleton J, Lopes H, Michelsen K, Reid J. Planning for a second wave pandemic of COVID-19 and planning for winter. Int J Public Health (2020).

DOI: <https://doi.org/10.1007/s00038-020-01455-7>

McDonald E, Middleton J, Lalloo D, Greenhalgh T. Safely returning clinically vulnerable people to work. BMJ 2020; 370.

DOI: <https://doi.org/10.1136/bmj.m3600>

Martin-Moreno J, Laham S, Dhonkal R , Green M, Middleton J. vaccines for COVID-19, reasons for hope- but first, for concern. BMJ Opinion, September 30th 2020.

<https://blogs.bmj.com/bmj/2020/09/30/vaccines-for-covid-19-reasons-for-hope-but-first-for-concern/>

Yours in health,

John Middleton, President, ASPHER

August 28th 2020

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MESSAGE FROM THE SECRETARIAT

As noted by our most unflappable President in his [message](#), early Autumn is always a busy time for Schools and as a Schools’ Association, ASPHER is no different!

The Secretariat was most pleased with the smooth and successful running of the [2020 General Assembly](#). Such great spirit was on display with 60 Member Schools in attendance representing programmes from 36 countries. The progress made during the GA strengthens the standing of the organisation and we were delighted to welcome 10 new Members! Please watch the newsletters and aspher.org for updates as we advance with the

newly adopted [ASPHER 2025 Strategic Plan](#) with some important improvements on governance and routine operations.

First and foremost in this October Newsletter, we urge you to review the [World Congress on Public Health 2020](#) events for this week. We have [highlighted selected events](#) each day, but make sure you do not miss: [ASPHER-led Plenary #6: Revolutionizing the Public Health Workforce as Agents of Change](#), [TIPH Europe and Andrija Stampar Medal Celebrations](#), and the [World Leadership Dialog #27 with the Global Network for Academic Public Health](#).

This edition of the newsletter includes our two Feature articles. The first is the [country spotlight on COVID-19, focusing on Israel](#), which has experienced an early resurgence of cases this season and is in a new lockdown. The second is a 'double' feature of the two [Italian This is Public Health Campaigns: Northern Italy](#) and [Bologna](#).

The [Inequalities and Vulnerable Populations subgroup](#) of the ASPHER COVID-19 Task Force has just released their e-booklet of basic terms: '[What is Inequality? Basic Health Inequality Concepts for Understanding the COVID-19 Pandemic](#)'. We have had positive feedback from Member Schools who are already putting it to use in classrooms – it should become a great training resource for our Members enriching ASPHER's library. It is great to see the Task Force sustaining its performance and productivity – [we recently called for interest from new members and it's never too late to get involved](#) – drop us a message if you wish to join!

The Secretariat is continuing to look for ways to improve the newsletter – making it better and more useful for our readers. New this month, we have added a section on important [Staff Appointments and Awards](#) with special congratulations to Iwona Kowalska-Bobko, Anna Odone, Lukasz Balwicki, and Ranjit Khutan. Do be sure to send us your Faculty and Student news so that we can highlight them in the future.

Although most of us are focused on WCPH2020 for this week there are other exciting [events](#) coming up from ASPHER Members and Partners. Make sure you don't miss them!



Thank you to all our Members for your support; let's make ASPHER even stronger! Be sure to impress the world with the voices of European SPHs at the World Congress!

Best Wishes from the ASPHER Secretariat,
Robert Otok, Lore Leighton, Naomi Nathan - ASPHER Secretariat

Please don't forget to share your news, publications and announcements with lore.leighton@aspher.org to be included in the next regular issue of the Newsletter and on the [ASPHER website activity log](#). **We are now publishing more regular monthly newsletter reports which will better ensure timely release of your announcements to the ASPHER Membership!** Finally, we always appreciate any comments and/or suggestions for improvements for us to consider for the newsletter - let us know!

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16TH WORLD CONGRESS ON PUBLIC HEALTH



Schedule of ASPHER Highlights

Tuesday 13 October

7:00-8:00 (G) 1.G. - Oral presentations: Curriculum development and core competences

Featuring **Alena Petráková, Palacký University Olomouc**, Czech Republic on Strengthening core competences and skills of medical and public health students for digital health; and for public health emergencies.

12:15-13:15 (B) 4.B. - Skills building seminar: Participatory action research: sharing power to improve public health research outcomes | Maastricht University (Netherlands)

12:15-13:15 (G) 4.G. - Oral presentations: Continuing education and leadership

Featuring **Silvia Declich, Istituto Superiore di Sanità, Rome (ISS)** on Turning constraints into resources: the experience of **TRAIN4M&H training programme** on migrants' health.

13:30-14:30 (Auditorium) OC - Opening ceremony WCPH 2020

Chairpersons: **Carlo Signorelli (Italy), Walter Ricciardi (Italy)**

14:45-15:45 (K) 5.K. - Workshop: Unleashing the power of large routinely collected data for the benefit of public health | EHESP (France)

20:00-21:00 (A) 8.A. - Oral presentations: Preparedness and surveillance of Covid-19

Featuring **Natia Skhvitaridze, University of Georgia** on Characteristics of discharged patients from hospitals - Georgian descriptive study

20:00-21:00 (G) 8.G. - Workshop: Public Health Systems Leadership and Capacity Building in Changing Times | UK Faculty of Public Health (United Kingdom)

Wednesday 14 October

9:45-10:45 (C) 10.C. - Round table: European public health week: how to unite a continent to celebrate healthy populations | EUPHA

12:15-13:15 (G) 12.G. - Workshop: Support4Global Health and SDGs in health workforce education: advocacy and action | EUPHA-HWR, EUPHAnxt, ASPHER

15:45-16:45 (G) 14.G. - Workshop: Teaching Ethics in Public Health and Medicine – International Experiences, Concepts, Challenges | UK Faculty of Public Health (United Kingdom), EUPHA-ETH, DGPH WG PublicHealthEthik, SESPAS WG Ethics in Public Health

15:45-16:45 (I) 14.I. - Workshop: Strengthening the impact of national health information systems in policy and practice | InfAct

15:45-16:45 (M) 14.M. - Workshop: Health policy responses to the European “refugee crisis” | European Observatory on Health Systems and Policies

Thursday 15 October

7:00-8:00 (E) 17.E. - Workshop: Returning disease prevention and health promotion back to the table: from the 1980ies to the 2050ies | Euro Health Group - Denmark, School of Public Health and Health Management - University of Belgrade (Serbia)

13:15-14:15 (Auditorium) SAT008 - This is Public Health Europe! A Celebration of the 2019-2020 TIPH Campaigns and Honours for the 2020 Andrija Štampar Medalist for Excellence in Public Health | ASPHER

[See More Below](#)

17:00-18:00 (Auditorium) WLD002 - Leadership in Public Health: From Knowledge to Practice to Policy | CUNY Graduate School of Public Health & Health Policy; ASPPH; APHA

18:00-19:00 (Auditorium) PL6 - Revolutionizing the Public Health Workforce as Agents of Change | Chairpersons: Kasia Czabanowska, ASPHER (Netherlands), Luís Eugênio de Souza (Brazil) and Barbara Buerkin (CH)

[See More Below](#)

Friday 16 October

7:00-8:00 (G) 25.G. - Round table: Public Health Codes of Ethical Professional Conduct for Effective Practice | UK Faculty of Public Health (United Kingdom), EUPHA-ETH

11:00-12:00 (Auditorium) WLD012 - Health systems and climate change - is health professions education preparing the health sector for the challenge? | The University of Notre Dame Australia, The Lancet Countdown, APACPH

13:15-14:15 (Auditorium) WLD027 - Transforming public health education: collaborating globally to act for the future of humanity | Global Network for Academic Public Health
[See More Below](#)

19:45-20:45 (H) 32.H. - Round table: Emergency preparedness: Core competencies for medical students as part of public health workforce | Palacký University (Czechia)

21:00-22:00 (Auditorium) CS - Closing ceremony WCPH2020
Chairpersons: Carlo Signorelli (Italy) and Walter Ricciardi (Italy)

ASPHER WCPH2020 Features

PLENARY #6: Revolutionizing the Public Health Workforce as Agents of Change

18:00-19:00 Thursday 15 October (Auditorium)

Chairpersons: Kasia Czabanowska, ASPHER Past-President (Netherlands), Luís Eugênio de Souza, Federal University Bahia (Brazil), and Barbara Buerkin, Swiss Tropical and Public Health Institute (Switzerland).

Speakers/panellists: Laura Magaña, ASPPH (Mexico), Philip Baba Adongo, ASPHA (Ghana), John Middleton, ASPHER (United Kingdom), Naomar de Almeida-Filho (Brazil), Pete Milos Venticich (Australia)

The wider public health workforce consists of professions that have the opportunity or ability to positively impact the health and wellbeing of the public through their work, and are not always employed directly in a public health role. These professions can make an impact. Appropriate education and training in public health is key to make public health workforce an agent of change from community to government. Are these professionals aware and ready for this task? How should education and training in public health be updated and integrated in the different curricula? Which professions should be educated and how? What actions should be taken to build knowledge and capacity in public health horizontally?

LATE BREAKER SESSION: This is Public Health Europe! A Celebration of the 2019-2020 TIPH Campaigns and Honours for the 2020 Andrija Štampar Medalist for Excellence in Public Health

13:15-14:15 Thursday 15 October (Auditorium)

Join ASPHER to celebrate the highly successful **2019-2020 This is Public Health Europe Campaigns**. Participants from selected TIPH Campaigns will join us to share their highlights from the year as well as how they met the challenge to continue their campaigns in the face of COVID-19.

We are thrilled to have **Prof. Selma Šogorić** on hand to address the event and to receive the 2020 Andrija Štampar Medal for excellence in the field of public health.

WORLD LEADERSHIP DIALOG #27: Transforming public health education: collaborating globally to act for the future of humanity - Global Network for Academic Public Health

13:15-14:15 Friday 16 October (Auditorium)

Chairperson: Laura Magaña, President and CEO, Association of Schools and Programs of Public Health (ASPPH)

Panelists: John Middleton, President, ASPHER, Wah Yun Low, President, Asia-Pacific Academic Consortium for Public Health (APACPH), Philip Baba Adongo, President, Association of Schools of Public Health in Africa (ASPHA), Maria Rocio Saenz, President, Alianza Latinoamericana de Salud Global (ALASAG), Rajendra Surenthirakumaran, Executive Committee Member, South East Asia Public Health Education Institutions Network (SEAPHEIN)

Worldwide, there are a number of regional associations that represent academic public health institutions. Six regional associations have just launched the Global Network for Academic Public Health, an alliance that is jointly led by the leaders of those associations. The goal of the Global Network is to enhance academic public health worldwide through mutual learning and collaborations between academic public health institutions globally in order to improve and protect the health of people and the planet.

Together, these associations train the current public health workforce and educate the future public health workforce in all regions of the world. The graduates of the represented institutions will be responsible for ensuring the health of populations and the future of humanity. This panel will include representatives from regional academic public health associations to discuss the impacts and lessons learned from the current crises in relation to public health education, and the changes needed to prepare the next generation of public health professionals to confront the public health challenges of the future.

[See the full event description here.](#)

WCPH 2020 Short Courses Cancelled

Short Courses originally planned for WCPH 2020 pre-conferences have been cancelled. ASPHER and the Association of Schools and Programs of Public Health (ASPPH) intend to offer their short courses to you later this year: *Leading change in post-COVID times - Competencies for transformational leadership in LMIC* (ASPHER), and *From Competencies to Curriculum: Curriculum Development and Student Assessment for Public Health Education* (ASPPH).

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COVID-19 NEWS

ASPHER COVID-19 Initiatives from our Members and Partners

Each month over the coming months, ASPHER will be featuring a more in depth look at COVID-19 actions taken by selected Member Schools. **This month we hear from Nadav Davidovitch, Director of the Ben Gurion University SPH on the situation in Israel which is currently experiencing a resurgence and lockdown.** If your school has an interesting initiative related to COVID-19 let Lore know at lore.leighton@aspher.org.

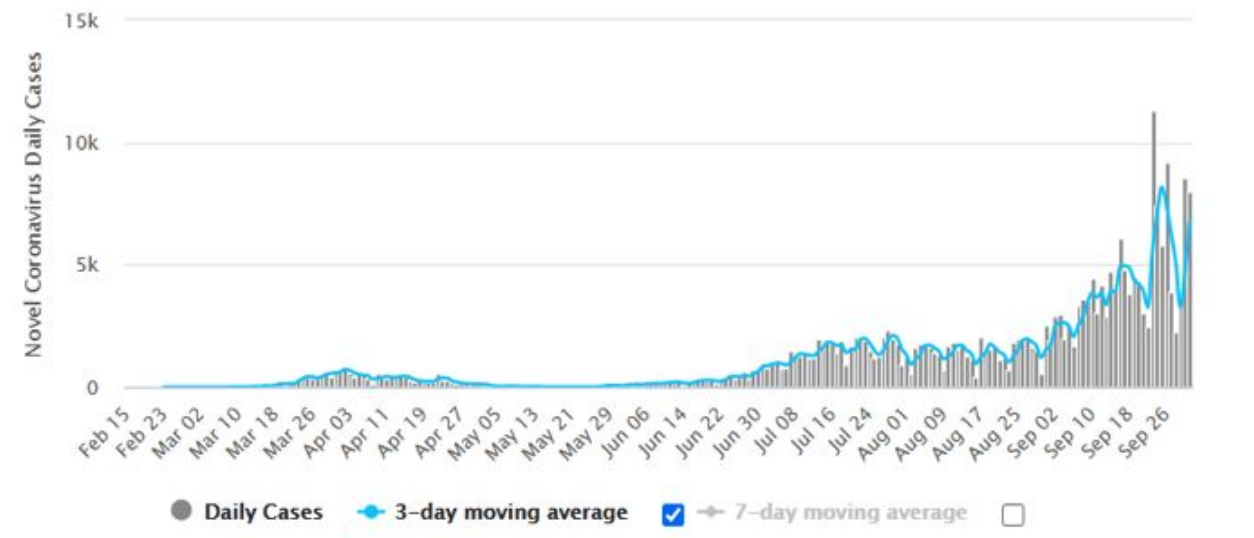
Call to join the ASPHER COVID-19 Task Force

The [ASPHER COVID-19 Task Force](#) is always open to new members and new ideas to help make a difference during the Pandemic. If you or a colleague at your School is interested to join the Task Force please let Robert know at robert.otok@aspher.org.

Feature: COVID-19 in Israel

Nadav Davidovitch, MD, MPH, PhD
 Director, School of Public Health, Ben Gurion University of the Negev
 Member, ASPHER COVID-19 Task Force

Figure 1: Daily New Cases in Israel



#	Country, Other	Total Cases	Total Deaths	Total Recovered	Active Cases	Serious, Critical	Tot Cases/ 1M pop	Deaths/ 1M pop	Tests/ 1M pop	Population
	Israel	255,771	1,622	183,488	70,661	807	27,808	176	387,331	9,197,590
	Total:	34,484,731	1,027,661	25,675,090	7,781,980	66,057	4,424.1	131.8		

Source: <https://www.worldometers.info/coronavirus/#countries> (October 2, 2020)

While Israel was considered a success story during the so-called "first wave" of COVID-19, it is now entering its third week of lockdown. The lockdown started just on the Eve of the Jewish New Year (Rosh HaShana) on Friday, September 18, 2020. Thus far, there are discussions on targets for examining the effectiveness of the lockdown, such as the reduction in R (the average number of people who become infected by an infectious person) below 0.8 and a drop in the daily number of new infections from several thousand to several hundred, making it possible to conduct "COVID-19 routine life" in accordance with the "traffic light" plan, a differential approach which classifies the local authorities in Israel in four groups – green, yellow, amber, and red, according to their morbidity indices. Currently the number of new patients per day on a weekly average continues to be the highest in the world per capita, and Israel recently surpassed the US in the number of coronavirus deaths per day per capita. In the past month, there has been a 70% increase in the number of serious patients. In terms of new confirmed cases per million people, the percentage of positive tests and the number of those dead in relation to population size, Israel is toward the top of the list globally, even after adjusting for the high number of tests that Israel carries out.

With the situation of widespread transmission in all sectors and the rise in severe cases and deaths, the implementation of the "traffic light system" suggested more than two months ago – using differential measures according to the local situation, while strengthening municipalities and creating an integrated approach – will be delayed, waiting for better indicators. While community transmission is widespread, and rates of positive tests are above 13% there are major differences among sectors, where Ultra-orthodox Jewish (about 25%) and Arab sectors (about 17%) are facing higher rates.

Figure 2: Confirmed cases according to age and gender



Source: Ministry of health (October 2, 2020)

On September 29th, the Health Ministry published that the number of serious patients in hospitals had topped 800, which was previously stated as the upper limit that would cause

extreme difficulty for hospitals. Many hospitals' directors announced that they are soon to reach their capacity in terms of their ability to take in more patients and handle the workload caused by the pandemic. This led to a national program for redirecting patients from overloaded hospitals, mainly in the North to other hospitals and strengthening of the system (adding beds, wards and number of healthcare workers). A recent report from the IDF Military Intelligence and the Health Ministry information center, evaluating the rate of coronavirus infection in Israel stressed that evaluation of the system should not address only the capacity of coronavirus units, but the general ability of hospitals to treat all kinds of patients.

Another interesting ongoing discussion is that of children. Although serious cases of COVID-19 remain relatively rare among Israeli children, pediatric wards across the country are reporting that children admitted to the hospital for reasons unrelated to the coronavirus, such as surgery, are increasingly testing positive for the virus. Up until a few weeks ago, coronavirus cases were a marginal phenomenon in pediatric wards. Within a month, since early September, the number of coronavirus patients aged 19 years or younger has risen from 35,000 to 75,000. The number of cases among children younger than 9 years old has doubled from 12,000 to 24,000. A mitigating factor has been the fact that children tend to have a lower risk of suffering a serious case of COVID-19, but even mild cases merit attention. A report published last week by the Medical Barometer team, a group of experts that tracks the situation in the hospitals, states: "The numbers of children testing positive who require hospitalization are increasing, and the inventory of beds for such children is small and not centrally organized. The small hospitals and those in outlying areas, which lack good solutions for hospitalizing children who test positive, have difficulty transferring such children for treatment in the large centers."

The decision to enter lockdown created a fierce debate among both the public health community and the general public. While most public health experts thought that Israel should take more measures to deal with the current situation, the need for stringent lockdown was questioned – both its efficiency and larger price of its implementation. The broader context is also the lack of trust by all stakeholders, within a fragile political situation taking place after three elections, demonstrations and lack of compliance by all parts of society, especially large social gatherings such as weddings and religious events during the Jewish High Holidays. Criticism is being raised on the broader context of social and health inequalities that existed before the pandemic, now being exacerbated with the current lockdown. While public and media discussions of the current situation is stressing the lack of trust leading to low compliance in several sectors, there are also local success stories, such as in Yerucham (small local council in the southern district of Israel) and Kafr Qassem (Arab village in the center of Israel, near the green line) – two examples where local leadership took initiatives to lower high rates of new cases, turning from "red" to "green" municipalities.

Apart from broader lockdown health consequences such as those related to mental health, nutrition and other non-COVID-19 related morbidity and mortality, economic consequences are a major aspect. The Bank of Israel reported that 17% of Israeli households previously having two employed persons (for example, a married couple with both partners

working) now report that one person is out of work. In 2% of households both workers were fired, bringing the total number of households disrupted by the crisis to 19%. These economic consequences are hitting the lower socio-economic parts of Israeli society harder. Families with wages of up to NIS 5,000 and NIS 10,000 reported a loss of income of 20.2% and 20.8%, respectively; those making up to NIS 15,000 reported a 16.4% loss. The average drop for all households has been 19.5%.

As in other countries the response to the COVID-19 pandemic and the public discourse surrounding it in Israel have been inadequate in addressing the special conditions and needs of low socio-economic and minority groups. Currently, vulnerable cultural minority groups became a focus of COVID-19 infection due to their unique socioeconomic and cultural characteristics and their previously existing low levels of access to healthcare services. This requires tailored measures first to respond to their needs and then also to mitigate the spread of the virus. In Israel, the ultra-Orthodox Jewish community and the Arab population are the most prominent and well-defined minority groups, representing 12% and 20% of the total population, respectively. Addressing the needs of these populations should be done together with the communities, with awareness that responses might unintentionally (and sometimes unfortunately intentionally) turn into stigma, mistrust and finally loss of control.

Further information including Israel testing, contact tracing and governance:

<https://www.covid19healthsystem.org/mainpage.aspx>

Information on policies and regulations from the Israeli Ministry of Health website:

<https://www.health.gov.il/English/Topics/Diseases/corona/Pages/default.aspx>

Daily epidemiological data updates (in Hebrew):

https://datadashboard.health.gov.il/COVID-19/general?utm_source=go.gov.il

Vaccines for COVID-19: reasons for hope, but first for concern

Chair of the ASPHER Honours Committee, Jose M Martin-Moreno, University of Valencia; ASPHER President John Middleton; ASPHER COVID-19 Task Force Member Manfred Green SPH, University of Haifa; and ASPHER Young Professionals: Sandy Laham École des Hautes Études en Santé Publique; and Ranjeet Dhonkal HAW, University of Applied Sciences, Hamburg have recently published a *BMJ Opinion* piece entitled ‘Vaccines for COVID-19: reasons for hope, but first for concern’.

Covid-19 has spread around the world causing fear and global economic disruption. The rate of transmission has not been reduced effectively and natural herd immunity is currently far from a reality. All hopes are being placed on the development of a vaccine. This process is happening remarkably quickly—there are [167 vaccine candidates, 30 of which are in clinical evaluation](#).

To minimise the problems and maximise the benefits associated with covid-19 vaccines, the authors believe Research and development, Access and surveillance, and Reliable

communication are essential. The evaluation of covid-19 vaccines should be objective, rigorous, transparent, equitable and appropriately communicated. This will be challenging, but the expected reward is worth it—to end this pandemic once and for all.

[Read the full text in the BMJ Opinion.](#)

Further reading on COVID-19 and Vaccines

Vaccine hesitancy in Italy: the challenge of COVID-19

Anna Odone and colleagues from Vita-Salute San Raffaele University and University of Parma have published an article on ‘Vaccine hesitancy in COVID-19 times: An update from Italy before flu season starts’ in Acta Biomedica. The authors note that COVID-19 pandemic and response caused a worrying decline in vaccine uptake around the world and the current public health emergency is likely to have negatively impacted on immunization, with the risk of re-occurrence of Vaccine-Preventable Diseases (VPDs) outbreaks.

Odone A, Bucci D, Croci R, Riccò M, Affanni P, Signorelli C. Vaccine hesitancy in COVID-19 times. An update from Italy before flu season starts. Acta Bio Med. 2020;91(3):e2020031.

DOI: <https://doi.org/10.23750/abm.v9i13.10549>

Meanwhile, Professor Stefania Boccia, Catholic University of the Sacred Heart Rome has contributed a piece about Vaccine Hesitancy in Italy for the [WCPH 2020 blog](#). She writes that ‘Engagement of citizens is needed to co-create collaborative agendas between the communities of citizens themselves and health professionals. I humbly believe these two non-mutually exclusive categories are both, now more than ever, called to reinforce the sense of belonging to the single community, that of the human being, that is called to support, protect, help one another and regain trust and connections one another.’

[Read the blog post here.](#)

WFPHA Statement on COVID-19 Immunization and Equitable Access to Vaccines

The World Federation of Public Health Associations has issued a Statement on COVID-19 Immunization and Equitable Access to Vaccines. Specific to COVID-19, almost everyone is at risk and may require vaccination if given the opportunity. Hence, it is likely that demand will surpass supply. The concern of the [WFPHA International Immunization Policy Task Force](#) is the tendency for the rich to acquire and pay for the limited supply of available efficacious vaccines to the detriment of the at-risk populations in low income settings.

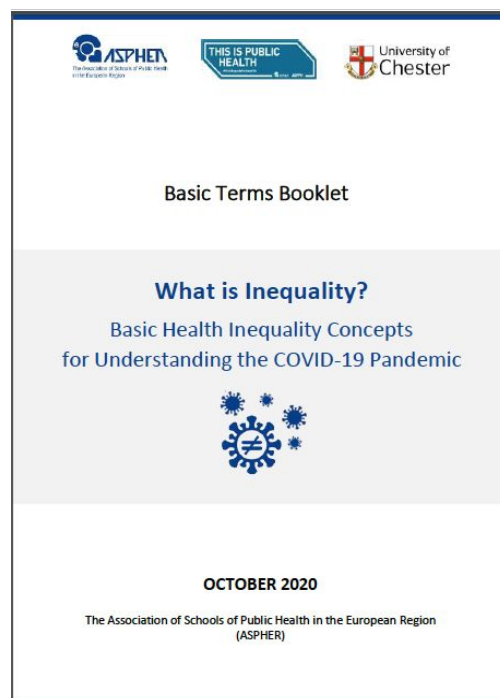
[Read the WFPHA Statement here.](#)

COVID-19 health inequalities and vulnerable populations

WHAT IS INEQUALITY? Basic Health Inequality Concepts for Understanding the COVID-19 Pandemic.

Our affiliated Young Professionals have led the development of 21 inequality concept explanations in the English language in the first version of the [‘What is Inequality?’ e-booklet](#). We hope that it will prove a useful teaching resource for use in our schools of public health and by our partner agencies.

We regard the first version content and format as an evolving document that can be improved in the coming months as scientific evidence accumulates. We would like your feedback on this booklet through to Robert at robert.otok@aspheer.org on the following questions: (i) Are there other basic terms or concepts that could be added? (ii) Are there additional vital evidence material/examples that you would recommend be used/referred to? (iii) Can you recommend any useful COVID-19 related graphical or visual representations that can assist in explaining the complexity of these matters?



Young Professionals' COVID-19 Review Projects

Our Young Professionals are reviewing available evidence from journal publications or other sources covering a variety of important and interesting topics. These include inequalities issues from: Prisons, Homelessness, Digital and telehealth tools and the digital divide, unmet needs in the pandemic, lockdown-induced illness, syndemics and how the voices of vulnerable groups are heard/unheard.

Winter Planning inequalities issues

There are many inequalities dimensions to [Winter Planning 2020](#). Clearly, we have been very focussed on excess mortality in our countries during the last six months. Most obviously driving this were excess deaths from COVID-19 infection. Epidemiologists within and across countries will need to collaborate to also distinguish excess deaths from missed prevention and care, plus deaths from wider determinants associated with social and economic disruption and social distancing PMIs and check on suicide rates and other harms.

Typical winter seasonal excess mortality is largely driven by two main hazards, cold weather and influenza. We don't know yet how far social distancing PMIs will reduce

seasonal influenza or other respiratory pathogens this year but it potentially might lessen their circulation.

However cold weather itself independently contributes to excess winter mortality. The already vulnerable, in poor housing stock and fuel poor are likely to be even more impacted this winter due to extra duration of exposure to cold hazards linked to greater time spent indoors and extra costs of heating. What will countries across Europe do to address this likelihood? We would like to know your country-level strategic responses – send them to Robert at robert.otok@aspher.org please!

Longitudinal COVID

There is a need for comprehensive follow-up care and support systems and for long-term inequalities epidemiology and multidisciplinary public health studies. We are becoming more aware of the ‘Long COVID’ concept. This recognises that long-term health effects will accrue for many individuals from having had COVID-19 infection, whether physical and/or mental health. In public health we should embrace the Longitudinal COVID approach. This would address the need for strong assessment systems where recovery is not full and a wide range of support and care for longer term. The impacts will be much wider for cases, their carers and families and for populations from the socio-economic downturns and extra costs. These financial and human health costs will need strong programmes to ensure that the extra pandemic burdens for those most vulnerable and already suffering inequalities are not forgotten, or overlooked in the hectic recovery period, or indeed marginalised.

ASPHER’s [first statement on vulnerable populations and COVID-19 in June 2020](#) highlighted our emerging concerns and three epidemic foci for the decade from Europe’s pandemic impacts in 2020 up to 2030.

Epidemic focus 1. There is a need to recognise not only the early illnesses but also the long-term health and social direct impacts of COVID-19 infection on often already vulnerable patients and their carers, many of whom will need long-term rehabilitation and support.

Epidemic focus 2. The indirect health impacts of the pandemic on those who are affected by the impacts of physical social distancing and other societal restrictions, and from aggravated socio-economic hardship, racism, stigmatisation, and exclusion.

Epidemic focus 3. It has been said to be a likely parallel epidemic in those people with pre-existing chronic diseases and longer-term physical and mental health conditions, that can arise from COVID-19 being the chief focus of healthcare. Normal health and social care is unable to continue sufficiently during a pandemic. Those with newly arising conditions also may not or cannot access help in the usual ways. The pandemic causes discontinuity, disruption and delay of usual health and social care. It can also affect public health prevention measures that were addressing both physical and mental health.

Longitudinal perspectives are at the heart of values of public health professionals and academics who will work for many years to help solve complex and difficult population health issues. It may be obvious to state the case for public health professionals to advocate for systematic long-term programmes of care and support and epidemiological and multi-disciplinary longitudinal studies or case/population registers. There is an urgency to get economies back to near normal and for the health and social care system to move on from treating COVID-19 infection to catch up. Our public health approach must be to maintain the interest and ensure the actions when acute responders wish or need to move on. The list of residual and enduring inequalities issues will be long and form a costly menu for investment in programmed support and study of impacts. Failing to invest will be unwise as those vulnerable people and groups most adversely affected will add further costs to society otherwise, while wishing to maximise their own opportunities for inclusion and participation.

Our health inequalities and vulnerable populations sub-group would be pleased to hear of relevant case studies or research programmes being initiated in European countries, please send materials to Robert at robert.otok@aspher.org.

Age-specific COVID-19 case-fatality rate: no evidence of changes over time

ASPHER President-Elect Carlo Signorelli, University Vita-Salute San Raffaele and Anna Odone, University Vita-Salute San Raffaele & University of Pavia have published a Letter to the Editor in the *International Journal of Public Health* entitled 'Age-specific COVID-19 case-fatality rate: no evidence of changes over time'.

Using National-level COVID-19 surveillance system data from Italy, Signorelli & Odone found that age-specific COVID-19 case-fatality rates seem not to vary over time, supporting the hypothesis that the less severe COVID-19 clinical outcomes (i.e. decreasing overall death rates) reported in recent times in Italy and Europe might be due to infection community transmission in younger populations.

[Read 'Age-specific COVID-19 case-fatality rate: no evidence of changes over time' here.](#)

Signorelli C, Odone A. Age-specific COVID-19 case-fatality rate: no evidence of changes over time. *Int J Public Health* (2020). DOI: <https://doi.org/10.1007/s00038-020-01486-0>

Selected ASPHER Member COVID-19 publications

Bonell C, Michie S, Reicher S, et al. Harnessing behavioural science in public health campaigns to maintain 'social distancing' in response to the COVID-19 pandemic: key principles. *J Epidemiol Community Health*. 2020;74:617-619.
<https://jech.bmj.com/content/74/8/617>

Han E, Tan MMJ, Turk E, Sridhar D, Leung GM, Shibuya K, et al. Lessons learnt from easing COVID-19 restrictions: an analysis of countries and regions in Asia Pacific and Europe. Lancet. 2020.

DOI: [https://doi.org/10.1016/S0140-6736\(20\)32007-9](https://doi.org/10.1016/S0140-6736(20)32007-9)

Hartnack S, Eusebi P, Kostoulas P. Bayesian latent class models to estimate diagnostic test accuracies of COVID-19 tests. J Med Virology. 2020.

DOI: <https://doi.org/10.1002/jmv.26405>

Lytras T, Tsiodras S. Lockdowns and the COVID-19 pandemic: What is the endgame? Scan J Public Health. 2020.

DOI: <https://doi.org/10.1177/1403494820961293>

Marmot M, Allen J. COVID-19: exposing and amplifying inequalities. J Epidemiol Community Health. 2020;74:681-682.

DOI: <http://dx.doi.org/10.1136/jech-2020-214720>

McDonald E, Middleton J, Lalloo D, Greenhalgh T. Safely returning clinically vulnerable people to work. BMJ 2020; 370.

DOI: <https://doi.org/10.1136/bmj.m3600>

Odone A, Bucci D, Croci R, Riccò M, Affanni P, Signorelli C. Vaccine hesitancy in COVID-19 times. An update from Italy before flu season starts. Acta Bio Med. 2020;91(3):e2020031.

DOI: <https://doi.org/10.23750/abm.v91i3.10549>

Wright L, Steptoe A, Fancourt D. Are we all in this together? Longitudinal assessment of cumulative adversities by socioeconomic position in the first 3 weeks of lockdown in the UK. J Epidemiol Community Health. 2020;74:683-688.

DOI: <http://dx.doi.org/10.1136/jech-2020-214475>

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THIS IS PUBLIC HEALTH (TIPH) EUROPE CAMPAIGN



Each month for the ASPHER newsletter we will be featuring one of the This is Public Health (TIPH) European Campaign winners. We hope these features will be an inspiration to all our Members to draw upon for how your schools can make use of the TIPH Campaign and contribute to the recognition and visibility to public health and the work of SPHs.

This month we have a double Campaign Feature from Italy, bringing you the activities from the Northern Italy and Bologna campaigns!

THIS IS PUBLIC HEALTH Italy Campaigns

TIPH Campaign from the Northern Italy Schools of Public Health



The Northern Italian team of the This Is Public Health Campaign was composed of prominent schools in the Northern Italy landscape of Public Health education: [Università Vita Salute San Raffaele](#) under the supervision of Professor Carlo Signorelli, [Università di Parma](#), [Università di Pavia](#), and [Politecnico di Milano](#).

The preliminary phase of the TIPH Campaign was dedicated to the project setup and was conducted by the Public Health Residents of the Vita-Salute “San Raffaele” University, with the coordination and supervision of the PI and the Schools’ Directors. The working group extensively discussed the need for an appropriate translation of the TIPH logo in Italian. The word “health” has a double meaning in Italian (“salute” and “sanità”); furthermore, people with limited English proficiency are a large part of the target population. Finally the team settled on a non-literal translation of *Per la salute di tutti*.

Aim of the TIPH Campaign and Launch Events

The general aim of the TIPH Campaign was to highlight the crucial role of public health for individuals and communities. The specific aim of the Italian Campaign was to raise awareness of Health in All Policies among the general population.



Figure. Promotional material for the Grand Lecture of Dr. Guerra, that launched the Italian This Is Public Health campaign

The Italian TIPH Campaign was launched in the context of an official event with participation from all the Schools of Public Health of Milan and Regional Health Authorities. We opened the TIPH Campaign with a Grand Lecture from Dr. Ranieri Guerra, Assistant DG WHO Geneva, on the theme: “The development of Public Health policies and actions in

the European Region in the vision of the World Health Organization”. The lecture was presented at the inauguration of the Academic Year of the School of Public Health of Università Vita Salute San Raffaele with the Residents, the Faculty and the Partners of the Campaign from Politecnico di Milano in attendance.

Tackling Sustainable Development Goals in Italian Regional Legislation: a Health in All Policies Comparative Analysis

Health in All Policies represents an approach to rules and regulations, and its application is increasing in the field of Public Health. We designed a Health in All Policies, Sustainable Development Goals-centered analysis of the legislation of two Regions in Northern Italy: Lombardy and Emilia Romagna. Two teams carried out separate analyses of laws retrieved from the official websites of the two Regional Councils. First, we excluded all healthcare-related laws from the analysis, then we labeled each law with the most representatives SDG engaged.

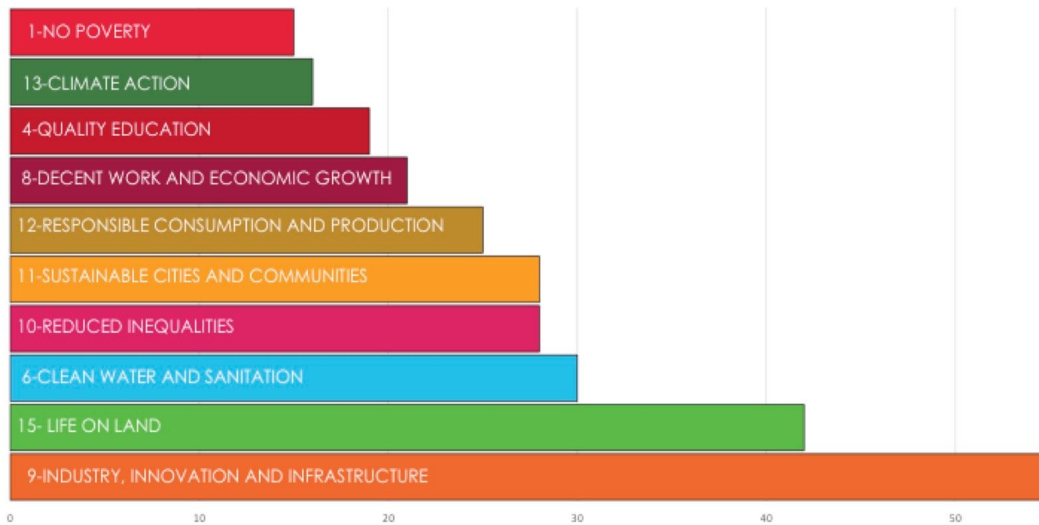


Figure. Results of the analysis Health in All Policies

In Emilia Romagna, out of 31 regional laws, 71% were attributable to SDGs, mostly to SDG n.8 *Decent work and economic growth*. In Lombardy, out of 26 regional laws, 42% were attributable to SDGs, mostly to n.15 *Life on land*.

Social Media Campaign and Promotion



Figures. The [Italian Twitter page](#) of the This Is Public Health Campaign

The TIPH Campaign set up a [social media team](#) self-managed by the Residents of Università Vita Salute San Raffaele, and the collaboration of the partners of the Campaign, to increase public health awareness among the population and improve the Campaign's visibility. The platforms used were [Facebook](#), [Twitter](#) and [Instagram](#).

The publication plan consisted of sharing weekly posts tackling individual SDGs, explaining its relevance, sharing data on the Italian situation in that context, and proposing examples of steps taken by the Italian Government to address the issue. In the example you can see the post that was shared for SDG 1 End poverty, with data regarding poverty in Italy.



Figure. Post on the Italian Facebook page of This Is Public Health for drunk driving prevention

A [Facebook page](#) was created with the intent of sharing posts to raise awareness on public health emergency issues. For example depicted in the figure, our post on alcohol abuse and drunk driving.

The TIPH Campaign participants were often featured in person to promote relevant campaigns, for example the figure shows the Professors of the School of Public Health of Università Vita Salute San Raffaele receiving the influenza vaccine from a Resident in our This Is Public Health frame. Most

importantly, the TIPH Campaign was employed to increase visibility of important public health interventions taken in our Region. In the example, the inauguration of a new helipad for health and fire emergencies.



Figures. The Università Vita Salute San Raffaele Professors receiving the flu vaccination from a Public Health Resident. The This Is Public Health Campaign to increase visibility of the inauguration of new helipad for health and fire emergencies

Aside from social media, the Team promoted the TIPH Campaign and its objectives in the scientific community. The TIPH Campaign was presented by Dr. Roberto Croci at the National Conference “Giornale della ricerca scientifica e delle esperienze professionali dei

giovani” held by SITI, the Italian society of Hygiene and Public Health in Rome. In addition, [an article was published on the rationale of the TIPH Campaign and its early activities](#). In the near future, the results of the Health In all Policies initiative will be presented at the [16th World Congress on Public Health](#) (Poster Display: DE.20 - Tackling Sustainable Development Goals in Italian Regional Legislation: a Health in All Policies comparative analysis. Giuseppe Stirparo).

Hospital Campaigns

The TIPH Campaign was not only aimed at the community, but it also had application in the Hospitals that are internship sites for the Residents involved in the Italian TIPH Campaign. The Residents of the University of Parma designed 5 posters to raise awareness on Public Health issues in the Hospitals. In particular the issues tackled were: antimicrobial resistance, tobacco smoke, bed falls, hand hygiene and the ban to admit pets in hospitals.



Figure. Posters designed to increase awareness about antimicrobial resistance, tobacco smoke, bed falls, hand hygiene and the ban to admit pets in hospitals.

At the same time, Residents of Università Vita-Salute San Raffaele designed a campaign against smoking inside and around the San Raffaele Hospital, and to encourage recycling in the hospital and the university.

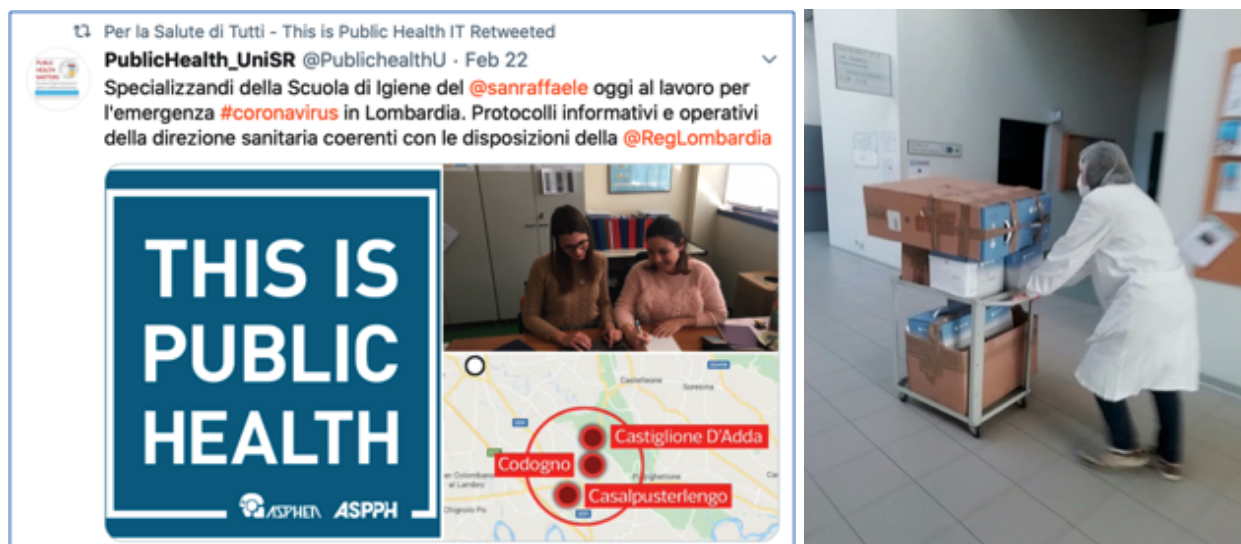


Figure. Promotion of public health interventions: smoking ban and recycling in San Raffaele Hospital

The Role of Public Health Residents during the Coronavirus Emergency

Despite what we had planned for the future of the TIPH Campaign, our Lombardy region was the first European Region to face the COVID-19 emergency. For this reason, the Italian TIPH Campaign had to adjust its focus and become much more operational.

The Residents involved in the TIPH Campaign quickly became active in the production, evaluation, interpretation and implementation of guidelines in hospital and community healthcare settings. In particular they were involved in the reallocation and creation of COVID-19 beds in specific wards and reorganization of emergency rooms. Many Residents played a role in the local Public Health Services, performing extensive contact-tracing activity. In Phase 2 of the COVID-19 emergency in Italy, Residents were in the first lines for the reconversion of COVID-19 wards to COVID-19-free wards in hospitals.



Figures. Residents of San Raffaele hospital at work for the implementation of new guidelines during the COVID-19 emergency, The COVID-19 referral laboratory in Parma

Remarkably, the University of Parma was in charge of the Coronavirus referral laboratory in Parma, where the Public Health Residents helped to process and analyze more than 16,500 nasopharyngeal swabs in the first three months.

Figure. Community masks with the This Is Public Health campaign logo

As the COVID-19 emergency was reaching its peak in Italy and wearing masks was deemed compulsory, we saw an opportunity to increase awareness of the TIPH Campaign. We organized the production and distribution of community masks featuring the This Is Public Health logo.



Educational Material

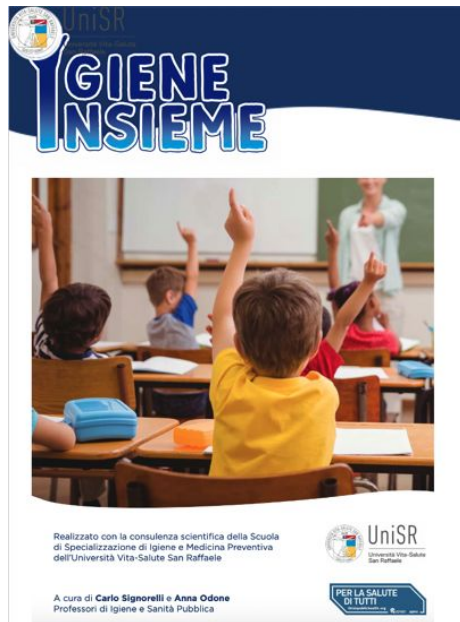


Figure. Educational pamphlet of school age children on preventive measures against the diffusion of the virus

As the community in lockdown was in need of information, the TIPH Team designed educational campaigns to shine a light on the preventive behaviours necessary to counteract the diffusion of the virus. The Professors of Public Health at the Università Vita Salute San Raffaele curated an educational pamphlet to teach simple hygiene measures to prevent contagion in schools. In addition, a cartoon was designed, produced and broadcasted on national TV, in collaboration with SITI, EUPHA and ASPHER. The cartoon called “Leo and Giulia” ([Italian version](#), [English version](#)) answered the most difficult questions of school age children on the virus, its contagion and life during the pandemic.

Figure. Photogram of the educational cartoon “Leo and Giulia”

Not to forget, “[How to count illness](#)”, a COVID-19 epidemiology booklet that stemmed from the ASPHER collaboration curated by Residents of Università Vita Salute San Raffaele, under the supervision of Professor Carlo Signorelli, and translated into 10 languages.



The University of Bologna TIPH Campaign: Impact of the Environment on Health



The School of Public Health of [Alma Mater Studiorum University of Bologna](#), directed by Professor Maria Pia Fantini, took on the environment branch of the TIPH Campaign, and decided to change the project name from “Environmental and Sustainability” to “Salute è Ambiente, Ambiente è Salute” in order to be more understandable and appealing in the Italian language.

The project aim was to raise awareness among students of the healthcare field (i.e. Medicine and Surgery, Healthcare degrees such as nursing, Environmental Engineering, Architecture) about the impact of the environment on people’s health. The project was included within the “[Multicampus Sostenibile](#)” programme of the University of Bologna, which is a multi-action strategic

programme to try to mitigate the environmental impact of the University of Bologna communities and campuses.

The preliminary phase consisted of consultations with experts in the field to set up the TIPH Campaign activities, in particular the Social Media Desk contact person and AlmaEngage Social Media Manager to better define the social media awareness campaign strategy and the Prevost for International Affairs and Department for Internationalization affairs) to discuss about the assessment strategies, among others.

[Twitter](#) and [Instagram](#) accounts were dedicated to the Project (“This is Public Health Bologna – Salute è Ambiente, Ambiente è Salute”); in addition the already existing [“Igiene e Medicina Preventiva – Università di Bologna” Facebook Page](#) was used in order to promote the TIPH Campaign and activities. [A series of articles were published in the University of Bologna \(UniBo\) Online Magazine](#) and shared on the four different UniBo social media accounts (Facebook, Instagram, Twitter, LinkedIn), in the This is Public Health kick off meeting and the Journal Club addressing Millennials’ health.

As a highlight, on the social media channels three "Ecological tips for the Winter Holidays" were published, in order to raise awareness of more sustainable behaviors during the holidays: on food waste, house heating and the environmental impact of the unbridled race for sales shopping.

Figure. Example of a TIPH holiday post in the social media campaign

The TIPH Campaign was interviewed on Radio Città del Capo, Bologna radio station, to share the project activities and specific questions regarding the scheduled event on Millennials’ health.



Three Journal Clubs were held on climate change impact, millennials' health, and antibiotics, environment and AMR.

In the context of “Nastro Verde”, the festival of sustainable cinema organized by UNIBO, two films were selected for the TIPH Campaign: "Contagion" directed by Steven Soderbergh, preceded by a speech from Prof. Maria Pia Fantini “SARS-CoV-2/COVID-19 ways of contagion and prevention measures. Let’s make the state of the art on the most recent knowledges” and "Un posto sicuro" directed by Francesco Ghiaccio, preceded by a speech from Prof. Stefano Nava, entitled: “Respiratory diseases: not only infectious agents but also driven by environmental pollutants”.

COVID-19 Activities

In the context of the COVID-19 emergency, educational material about the main prevention strategies for the community were prepared and shared, with instructions about the use of different types of masks and correct hand hygiene procedure. The flyers



were translated in four languages and handed out to homeless shelters, public kitchens and even directly to people with no fixed abode. The material was provided together with a package of alcoholic sanitizer solution and some surgical masks. Moreover, the volunteers made efforts to identify the health needs of people, providing information about access to healthcare services.

Figure. Volunteers at work distributing educational material on prevention strategies against COVID-19

Make use of the TIPH label for your COVID-19 Actions and beyond!

What and who makes up Public Health is often not well understood by people outside of the field. We at ASPHER believe that the COVID-19 crisis has presented us with a unique moment in time for public health to make itself more visible and show the world what Public Health is really about and how action is taken to protect the health of the population.

If Public Health is to emerge stronger from this crisis, we must be able to have influence with decision makers, advocate for better funding for education and training, and recruit the best and the brightest of our young people to careers in Public Health. But in order to do so our actions must be recognized!

We therefore encourage our Member Schools to label their COVID-19 actions with the This is Public Health (TIPH) Europe brand.

Official TIPH campaign logos are available [here](#). And don't forget to use the hashtags: #ThisIsPublicHealth, #TIPHEurope, #ASPHERcampaign, #ASPPHgoesglobal

REGULAR ASPHER BUSINESS

Global Network for Academic Public Health

The Network Statement on the Beirut Explosion

The [Global Network for Academic Public Health](#) (Global Network), is a convening body for academic public health leaders from around the world to share, learn, collaborate, to improve, and protect the health of the public and planet. The Global Network is committed to stand in solidarity with, reinforce, and coordinate the efforts of our members and member associations of public health worldwide as well as to make expertise available as requested.



Credit: Satellite image ©2020 Maxar Technologies

In the wake of the appalling explosion in Beirut of August 4th, 2020, the Global Network issued its Statement on the Beirut Explosion expressing the deep concern and solidarity of the public Health community with the people of Lebanon. The work of public health professionals is to protect and improve the populations' health. The current disaster highlights multiple problems contributing to a worsening health catastrophe in Lebanon, requiring urgent international support and solidarity.

To date, more than 170 victims have been declared dead, an unknown number are missing, roughly 6,000 have been wounded, and 300,000 have lost their homes. This tragic explosion has arisen at a time during which Lebanon has been facing a runaway economic collapse beginning in November of 2019, followed by the COVID-19 pandemic which reached Lebanese soil in February of 2020. Further to a shortage of foreign currencies in the Lebanese banking sector, the Lebanese pound has since lost around 80% of its value (inflation of 4.5%); this has resulted in a large and sudden increase in unemployment rates, business shutdowns, and prices of basic goods, medicine, and medical supplies that are imported in majority. With the damaged port put out of service until further notice, and the national wheat supply blown away or contaminated, unless Lebanon receives aid and international support, the economic situation is likely to worsen significantly over the near future.

[Read and download the full statement here.](#)

The Network Statement on the WHO's response to the COVID-19 Pandemic

The Statement from the Global Network for Academic Public Health statement on the World Health Organization's response to the COVID-19 pandemic is now published in the *International Journal of Public Health*.

Middleton, J., Adongo, P.B., Low, W. et al. Global Network for Academic Public Health statement on the World Health Organization's response to the COVID-19 pandemic. *Int J Public Health* (2020). DOI: <https://doi.org/10.1007/s00038-020-01461-9>



GLOBAL NETWORK
FOR ACADEMIC PUBLIC HEALTH

16th World Congress Statement on Public Health for the Future of Humanity

ASPHER has signed on to support the [16th World Congress Statement on Public Health for the Future of Humanity](#). The statement entitled 'Public Health for the Future of Humanity: One Planet, One People, One Health' calls for an investment in public health and care services and for collaboration together as citizens of one planet to deliver the 2030 sustainable development goals, all of which have implications for our health and wellbeing.

The 16th World Congress on Public Health is due to be held from 12 to 16 October 2020 as a fully online conference. The theme of the Congress "Public health for the future of humanity: analysis, advocacy and action" is even more relevant now than ever before.

[Read the 16th World Congress Statement here.](#)

ASPHER Member Staff Appointments and Awards

Medical University of Gdansk:

Lukasz Balwicki appointed Head of Dpt of Public Health and Social Medicine

Lukasz Balwicki, MD, PhD has been appointed as the Head of Department of Public Health and Social Medicine at the Medical University of Gdansk, Poland. Dr Balwicki has a long history of active cooperation with ASPHER. He was an organizer of a successful ASPHER meeting in Gdansk in 2014. He supported the Association presence in the European Health Forum Gastein. He involved his students in ASPHER's "This is Public Health" campaign, organizing European Public Health Week activities in Gdansk in 2019. Currently, he is engaged in supporting a revival of the ASPHER Undergraduate Training Network. In all these activities he proved to be a reliable and devoted partner. He has also worked well with other European partnerships, collaborating with Prof. Middleton and the European Observatory on the Organisation and Financing of Public Health in Europe report (2018).

University of Wolverhampton:

Ranjit Khutan receives Staff Award for Inspirational Team Member

Dr. Ranjit Khutan has been congratulated by the University of Wolverhampton for winning their Staff Award for Inspirational Team Member. Ranjit tweeted his thanks to Prof. Tony Stewart and the public health team for their support. #WLVStaffAwards

<https://twitter.com/DrKhutan/status/1311328440579231744?s=20>

Jagiellonian University:

Iwona Kowalska-Bobko appointed Director of the Institute of Public Health

Prof. Iwona Kowalska-Bobko has been appointed as the new director of the Institute of Public Health of the Medical College (IZP-CM) at Jagiellonian University, Krakow, Poland.

She has taken over the position from Prof. Christoph Sowada. Iwona is a political scientist who works on health care systems research. She is a member of the Health Systems Policy Network, European Observatory on Health Systems and Policies. She is the author of a book on the decentralisation in health care systems, and of Polish Health in Transition - HiT. ASPHER looks forward to continuing to work with the new Director, and IZP-CM Jagiellonian University.

University of Pavia:

Anna Odone appointed Director of the School of Public Health

Prof. Odone qualified in Medicine and specialized in Hygiene and Public Health at the University of Parma, Italy. She received an M.Sc. in Epidemiology from the London School of Hygiene and Tropical Medicine (London, UK) and an M.P.H. in Health Policy and Management as a Fulbright Scholar from the Harvard School of Public Health (Boston, US). She holds a PhD in Medical Sciences from the University of Parma. Since 2017 she has been Associate Professor of Public Health at the University Vita-Salute San Raffaele (Milan, Italy) and, from 2018, Director of its School of Public Health.

Selected ASPHER Member Publications

Civitelli, G., Tarsitani, G., Rinaldi, A. et al. Long-term impact of Global Health educational experiences in Rome: an attempt of measurement. Arch Public Health. 2020;78:90
DOI: <https://doi.org/10.1186/s13690-020-00478-z>

de Figueiredo A, Simas C, Karafillakis E Paterson P, Larson HJ. Mapping global trends in vaccine confidence and investigating barriers to vaccine uptake: a large-scale retrospective temporal modelling study. Lancet, Volume 396, Issue 10255, 898 - 908
DOI: [https://doi.org/10.1016/S0140-6736\(20\)31558-0](https://doi.org/10.1016/S0140-6736(20)31558-0)

Gore-Gorszewska, G. "Why not ask the doctor?" Barriers in help-seeking for sexual problems among older adults in Poland. Int J Public Health. 2020..
DOI: <https://doi.org/10.1007/s00038-020-01472-6>

Hermesh B, Rosenthal A, Davidovitch N. The cycle of distrust in health policy and behavior: Lessons learned from the Negev Bedouin. PLOS One. 2020.
DOI: <https://doi.org/10.1371/journal.pone.0237734>

Wabnitz KJ, Gabrysch S, Guinto R, Haines A, Herrmann M, Howard C, et al. A pledge for planetary health to unite health professionals in the Anthropocene. Lancet. 2020.
DOI: [https://doi.org/10.1016/S0140-6736\(20\)32039-0](https://doi.org/10.1016/S0140-6736(20)32039-0)

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MEMBER AND PARTNER EVENTS

Angela Boškin Faculty of Health Care: 13th International Scientific Conference 2020



ASPHER President John Middleton was pleased to join [Angela Boškin Faculty of Health Care](#) for the [13th International Scientific conference](#) on “Responsibilities of health policy-makers and managers for the retention and development of nurses and other healthcare professionals–2020: International year of the nurse and the midwife” on 24th September 2020. He welcomed the conference attendees with his reflections over the health workforce and healthcare for the health of the people through the perspective of current changes with Covid-19 and the new reality.

The 2020 Conference, placed in the context of the International Year of Nursing and Midwifery, presented current research and development activities of integrated prevention and health promotion in the field of health care.

National School of Public Health, Lisbon: Commemoration 52 | 25



On September 29, 2020, the [National School of Public Health \(ENSP-NOVA\)](#) organized the [Commemoration 52 | 25 - National School of Public Health](#), at the Rectory of NOVA University of Lisbon, which celebrates the institution's 52 years of existence and 25 years at NOVA University of Lisbon.

Carla Nunes, Director of ENSP-NOVA, explained that the ceremony was planned to honor all the people who made this institution what it is today, ENSP-NOVA's contribution to the country, and the role that the School plays today and in the future of global Public Health.

The ceremony included: (i) A lecture given by Professor Alexandre Quintanilha, President of the School Council of ENSP-NOVA, about the new challenges of Public Health; (ii) The launch of the commemorative book “52 | 25 National School of Public Health”, a work that recapitulates the 52 years of ENSP-NOVA's history and, at the same time, highlights the institution's current and future contributions to health, science and society. This book has the previous note of Hon. Mr. President of the Republic Dr. Jorge Sampaio; (iii) The launch of the Association of Former Students of ENSP-NOVA; and (iv) The presentation of the Public Health Knowledge Center, a global project for the development and diffusion of science, research and innovation in Public Health, open to the community.

The commemoration caps off a year that saw [ENSP-NOVA designated as a WHO Collaborating Center](#) for education, research and evaluation of safety and quality in healthcare. This distinction resulted from a long process of collaboration with the WHO and also from the recognition of the value and relevance of the activities developed by NOVA NSPH in Quality in Health and Patient Safety area.

United Arab Emirates University: This is Public Health Webinar Series



Inaugural Webinar: How our instincts to be healthy are making us sick Wednesday 21 October 2020 at 7 PM (Abu Dhabi), 5 PM CET (Brussels)

The Institute of Public Health, College of Medicine, United Arab Emirates University is organizing a series of This is Public Health Webinars. The UAEU TIPH Webinars will be held on the third Wednesday of every month.

The inaugural Webinar, entitled 'How our instincts to be healthy are making us sick' will be held on Wednesday, October 21st 2020 at 7 PM (Abu Dhabi time), 5 PM (Brussels time). The speakers will be Prof. Louis Hugo Francescutti and Prof. Robert S. Barrett from Canada.

Dr. Louis Hugo Francescutti is an emergency and preventive medicine physician, a university professor, and an international speaker. He was trained in preventive medicine at Johns Hopkins University in Baltimore and is Past-President of the Canadian Medical Association, and Past-President of the Royal College of Physicians and Surgeons of Canada. Dr. Francescutti has spent nearly three decades advocating one message: Live Smart.

Dr. Robert Barrett has spent much of his life studying behavior, group dynamics, and organizational culture. His primary focus is on why we do the things we do and how individuals and teams can reach top performance. He has traveled to rural Nigeria to interview recruiters and leaders of death squads on how they indoctrinate fighters, he helped build Canada's first ever Patient Safety Officer program for Canadian hospitals, lectured on intercultural negotiation for senior Canadian Forces officers deploying to Afghanistan, and was lead researcher on a unique program designed to investigate ways to mitigate astronaut crew conflict in space for future Mars missions.

For more information and to register contact iph@uaeu.ac.ae.

For the Zoom link to join the webinar click [here](#).

ASPCHA 2020 Virtual Conference

The Association of Schools of Public Health in Africa (ASPCHA) will hold its annual conference virtually from 29-30 October 2020.

Schools of Public Health and other Public Health training institutions in Africa will share experiences of their work and their innovations in addressing COVID-19 on the continent highlighting contributions of African Schools of Public Health in the current crisis, lessons learned and preparedness for future pandemics. For more information see www.asphaafrica.net.



IANPHI European Network virtual meeting 2020 webinars

The IANPHI European Network virtual meeting 2020 will include a series of three webinars aiming to tackle NPHI-specific topics, adapted to the European Region and the context of the COVID-19 pandemic:



- Public Health and Climate Change Challenges: Mobilising NPHIs into multi-sectoral alliance – Friday, October 9, 13:30 – 15:00 CEST
- Balancing investment for Wellbeing and Health Equity in the Context of COVID-19 – Thursday, October 22, 15:00 – 16:30 CEST
- Sharing Lessons Learned from NPHIs on responses to COVID-19 – Date to be defined

For more information on the sessions and speakers, please see the [meeting programme](#).

For any questions, please write to secretariat@ianphi.org.

'Public health ethics, law and human rights for the future of humanity' EUPHA and UK Faculty of Public Health Webinar series

The first session of the Public health ethics, law and human rights for the future of humanity webinar series, '[Justice, solidarity and public's health](#)' on 23rd September 2020 exceeded all expectations with more than 900 people registered, highlighting the importance of the issue and interest of colleagues to advance the discourse, scholarship and practice. You may still watch the recorded version [here](#).

Whether you attended this session or not, your ideas and feedback about this webinar series will be much appreciated. Please complete this [brief survey](#) by 19th October, to inform support and influence the process.

Second mid-term Conference: EUPHA section on Health Workforce Research - 10-11 June 2021, Lisbon, Portugal



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This second mid-term Conference seeks to critically reflect on the lessons to be learned from the COVID-19 situation and on how to build a future health workforce that is resilient, fit-for-practice and prepared for emergencies. The EUPHA section Health Workforce Research (HWR) and the **Institute of Hygiene and Tropical Medicine-Nova University of Lisbon (IHMT-UNL)**, in collaboration with partner organisations European Observatory on

Health Systems and Policies, WHO Regional Office for Europe and ASPHER – Association of Schools of Public Health in the European Region, will provide a forum for knowledge exchange across the European health workforce community and beyond.

Abstract submission will open on 15 January and close on 28 February 2021.

More details, including on conference fees, will follow soon at:

<https://eupha.org/health-workforce-research>.

LEPH 2021: The 6th Conference on Law Enforcement & Public Health - 22-24 March 2021, Philadelphia, USA



[LEPH2021](#) is calling for individuals and/or panels to contribute to the Virtual 6th International Law Enforcement and Public Health Conference scheduled for March 22-24, 2021.

All submitted presentations will undergo peer review and selection by the LEPH Program Committee. For LEPH2021, we will be partnering with Whova as the official conference app. All content will be available to conference participants online through the app.

[Submission details here](#). Deadline to submit: October 16, 2020.

OTHER COMMUNICATIONS

UKPHR Mapping of Undergraduate Courses in Public Health

The UK Public Health Register (UKPHR) has developed a mapping tool and is inviting Universities who offer BSc degree courses in public health to map their BSc courses against UKPHR's amended practitioner registration standards. This initiative comes out of the first review UKPHR conducted of practitioner registration. A task & finish group recommended to UKPHR that consideration should be given to adopting Approved Prior Learning. As a step towards addressing this recommendation, a project is underway to find out how Universities' BSc public health courses map to the current standards for practitioner registration.

Dr. Ranjit Khutan helped develop and pilot the tool at ASPHER Member School, Wolverhampton University as the first school to carry out the mapping.

[Click here for more information and to download the mapping tool](#).

If you are interested in internationalization of Bachelor programmes, please sign up for the ASPHER Undergraduate Programmes Network by contacting Kai Michelsen

(kai.michelsen@pg.hs-fulda.de), Jens Holst (jens.holst@pg.hs-fulda.de) and ASPHER at office@aspher.org. We look forward to having you on board!

EuroHealthNet:

A health recovery through strong social protection systems

In [Making the link: Improving Health and Health Equity through Strong Social Protection Systems](#),

EuroHealthNet explores the European initiatives that are shaping national changes in social protection. It gives examples from Finland, Scotland, and Slovakia showing how changes to social systems are affecting health. It shows what else can be done to support a fair and sustainable economic recovery, where decent and healthy work and social investments are central.



COVID-19 has further highlighted the ways in which health is linked to social protection schemes. National governments have scrambled to find new ways to protect those unable to work due to the pandemic, and all governments are trying to minimise the long-term economic impacts. Meanwhile, there is a concern to build new systems which are fairer and able to cope with demographic change.

This new publication from the EuroHealthNet Policy Précis series provides examples of EU policies and programmes, such as the European Pillar of Social Rights, the EU Child Guarantee, the European Social Fund plus, and pathways to progress following the principles of an 'economy of wellbeing'.

Call for Case Studies on Responses to COVID-19 aimed at Improving and Sustaining Health Equity | Submission deadline: 31 October 2020



As the global fight against the SARS-CoV-2 virus continues, it is clear that the virus is affecting different sectors of society in different ways. Very often it is the poor, disenfranchised and minority populations that are affected by a disproportional amount of suffering.

While universal healthcare, along with other policy responses such as temporary financial support, have sought to address these issues, the underlying social determinants of health often remain – and will continue to do so unless specific action is taken.



In this regard, WHO – in collaboration with the Sustainable Health Equity Movement (SHEM) initiative – is now seeking submissions of case studies that illustrate attempts to reduce inequities caused by

COVID-19. The best/most impactful studies from around the world (about 20-30) will be published in a special collection.

For more information, [download the submission instructions here](#).

World Evaluation Case Competition (WECC) Registration deadline: 16 October 2020

The World Evaluation Case Competition (WECC) is a synchronized effort to bring together the winners of country national competitions and provide an opportunity for those who do not have a national competition to compete against each other on the international level.

Program evaluation is an integral part of public health. It is a valuable tool to strengthen the quality of programs and improve outcomes. Through the use of real-world programs and cases, students are invited to form their own teams (3-5 students) to respond to a request for proposals over a limited time period. They can be graduate or undergraduate level. Foreign students may also apply (on the basis they are competing for the country that their university is located in). A coach (typically a professor) is required to help guide the students to prepare for the case prior to the competition. The competition is online-based. Students receive the case at an appropriate time (based on their home country) on competition day and they have a limited amount of hours to complete the task (time varies based on first language). Our judges are leaders in the evaluation field, chosen based on diversity and experience. Feedback will also be provided to each team. The winning team will be shared with national evaluation societies around the world.

For more information, please visit our website: <http://www.worldcasecomp.one/>.

Share the ASPHER newsletter!



[READ MORE ON OUR WEBSITE](#)

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