



Effective partnerships to address public health priorities

Source: Awale J, Choudhary M, Solomon R, Chaturvedi A. [Effective Partnership Mechanisms: A Legacy of the Polio Eradication Initiative in India and Their Potential for Addressing Other Public Health Priorities](https://doi.org/10.4269/ajtmh.18-0938). *Am J Trop Med Hyg*. 2019 Oct;101(4_Suppl):21-32. <https://doi.org/10.4269/ajtmh.18-0938>

While many factors contributed to the successful elimination of polio from India, partnership and coordination mechanisms at multiple levels that have evolved over the years have been an important element. The lessons learned from these partnership and coordination mechanisms among various stakeholders involved in service delivery, surveillance, community mobilization, and governance deserve documentation as a legacy of the program. This article discusses the various processes and techniques adopted to build strong partnerships and coordination mechanisms among stakeholders by optimizing their strengths and using opportunities that lead toward the eradication of polio from India. Secondary data and literature review of relevant reports, papers and documents were adopted as the methodology for developing this research article. The article provides a model conceptual framework for partnerships and applies that framework to the CORE Group Polio Project (CGPP) partnerships in India and the partnerships among stakeholders for polio eradication in India. The learnings and expertise of the CGPP in developing, managing, and nurturing partnerships can be adapted and replicated for elimination or controlling other diseases (especially those that are vaccine-preventable as well as tuberculosis and vector-borne diseases) and for ending preventable child and maternal deaths.

The impact of medical legal partnerships to improve health outcome

Source: Muñoz-Laboy M, Martinez O, Davison R, Fernandez I. [Examining the impact of medical legal partnerships in improving outcomes on the HIV care continuum: rationale, design and methods](https://doi.org/10.1186/s12913-019-4632-x). *BMC Health Serv Res*. 2019 Nov 20;19(1):849. <https://doi.org/10.1186/s12913-019-4632-x>

Background: Over the past two decades, we have seen a nationwide increase in the use of medical-legal partnerships (MLPs) to address health disparities affecting vulnerable populations. These partnerships increase medical teams' capacity to address social and environmental threats to patients' health, such as unsafe housing conditions, through partnership with legal professionals. Despite expansions in the use of MLP care models in health care settings, the health outcomes efficacy of MLPs has yet to be examined, particularly for complex chronic conditions such as HIV.

Methods: This on-going mixed-methods study utilizes institutional case study and intervention mapping methodologies to develop an HIV-specific medical legal partnership logic model. Up-to-date, the organizational qualitative data has been collected. The next steps of this study consists of: 1) recruitment of 100 MLP providers through a national survey of clinics, community-based organizations, and hospitals; 2) in-depth interviewing of 50 dyads of MLP service providers and clients living with HIV to gauge the potential large-scale impact of legal partnerships on addressing the unmet needs of this population; and, 3) the development of an MLP intervention model to improve HIV care continuum outcomes using intervention mapping.

Discussion: The proposed study is highly significant because it targets a vulnerable population, PLWHA, and consists of formative and developmental work to investigate the impact of MLPs on health, legal, and psychosocial outcomes within this population. MLPs offer an integrated approach to healthcare delivery that seems promising for meeting the needs of PLWHA, but has yet to be rigorously assessed within this population.



2019 novel coronavirus: Outbreak update

Source: Government of Canada. [2019 novel coronavirus: Outbreak update](https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html); 2020 Feb 04. <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>

How Canada is monitoring the 2019 novel coronavirus

The Public Health Agency of Canada (PHAC) is working with provinces, territories and international partners, including the World Health Organization, to actively monitor the situation.

Canada's Chief Public Health Officer of Canada is in close contact with provincial and territorial Chief Medical Officers of Health to ensure that any cases of 2019-nCoV occurring in Canada continue to be rapidly identified and managed in order to protect the health of Canadians.

For more information, visit Canada's response page.

Risk to Canadians

PHAC has assessed the public health risk associated with 2019-nCoV as low for Canada.

Overall, the risk to Canadian travellers abroad is low. The risk to Canadian travellers to China is assessed as high. The Government of Canada recommends avoiding:

- **all non-essential** travel to China
- **all travel** to Hubei Province, China, including Wuhan city

Public health risk is continually reassessed as new information becomes available.

History

On December 31, 2019, the World Health Organization was alerted to several cases of pneumonia in Wuhan, China. The virus did not match any other known virus. On January 7, 2020, China confirmed 2019-nCoV.

See the [travel health notice](https://travel.gc.ca/travelling/health-safety/travel-health-notice/210) (<https://travel.gc.ca/travelling/health-safety/travel-health-notice/210>) for more information if you are considering travelling to China.