Global Health Newsletter

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Americas

A Trans Woman Travels from El-Salvador to the United States

27 year old, Fernanda Levin left her entire family in El Salvador to travel to the United States. Fernanda faced discrimination in her early transition and in 2019 her employer at a fast food company fired her for dyeing her hair bright colors. Fernanda's family also received hate messages. The situation became more dangerous and she realized she needed to relocate to another country. In September 2020 she decided to undertake the journey with her entire savings of \$200 to the US.

Central America is one of the most dangerous regions for women and LGBTQ+ people. The life expectance for a trans woman in El Salvador is 33 years (the population average is 71 years).

Title 42 is a clause of the 1944 Public Health Services Law that allows the US government to block individuals entering the US



during certain public health emergencies. The clause was rarely used until the Trump presidency when the COVID-19 pandemic was used to expulse migrants without the ability to apply for asylum. Under federal law, any non-citizen within the US can make a claim of asylum and therefore this use of title 42 is illegal. Under president Biden this clause has still remained in affect; however, the Department of Homeland Security is preparing to end this clause and to return to processing all noncitizens under the Department's Title 8 immigration authorities.

The result of title 42 is that many asylum seekers have been stuck on Mexican border cities where they face many risks including human trafficking, violence, housing and food insecurity. Fernanda was one of these people who got stuck at the border. As a response to the violence Fernanda faced she, along with 7 other trans women created a LGBTQ+ shelter, Casa de Colores, after she was denied access to other shelters in September 2020. Casa de Colores is located in an abandon building and has hosted a total of 43 mostly trans women. The International Rescue Committee (IRC) has provided cash assistance and other support.

Fernanda was eventually able to enter the US.

Further Reading

https://www.rescue.org/article/trans-womans-journey-el-salvador-united-states https://www.dhs.gov/news/2023/01/05/dhs-continues-prepare-end-title-42-announces-new-border-enforcement-measures-and

Middle East/Northern Africa

<u>Turkey putting to End to Male Pattern Baldness, One Plug at a Time</u>

Men returning from Turkey with bandages on their heads leaking with blood is not uncommon in Turkey and even has a nickname, "Turkish Hairlines." Thousands of men from all over the world, including the United States, travel every year to Turkey to fight their baldness. Turkey sees between 1.5 to 2 million medical tourists per year (mostly for hair transplants, plastic surgery, dental work and weight loss surgeries). Most clinics have package deals which include flights, luxury accommodations, the procedure, aftercare and even sightseeing activities. One popular procedure is called Follicular Unit Excision where they take individual



https://www.gq.com/story/how-istanbul-became-the-global-capital-of-the-hair-transplant

follicles from the sides and back of a patient's head where there is still hair and relocate them to bald areas. The results look real and are supposed to last for life. In the US these transplants cost between \$10,000-\$20,000 but in Turkey are much more affordable and approximately cost between \$4,000-\$6,000.

Further reading

https://www.middleeasteye.net/discover/turkey-medical-tourism-why-cosmetic-surgery-hub https://www.gq.com/story/how-istanbul-became-the-global-capital-of-the-hair-transplant

Asia/Pacific

Asian Super Mosquitoes

A new study done at the National Institute of Infectious Diseases in Japan has discovered that mosquitoes in Vietnam and Cambodia have mutations that give them resistance to commonly used insecticides. In the specimens of Aedes aegypti (the species that carry yellow fever, dengue and Zika) 78% were found to have mutations. Insecticides are imperative for disease control as there are no vaccines for dengue or Zika. The mutations appear to target a gene that encodes the molecular target of pyrethroids which is a main ingredient in insecticides. In the past 50 years dengue cases have increased 30 fold and the CDC estimates 400 million people every year are infected with dengue. This study only analyzed mosquitoes in Vietnam and Cambodia; however, the concern is that these mutations may spread to



other parts of Asia. One study also found that female mosquitoes learned to avoid pesticides after only one single non-lethal exposure.

Further reading

https://www.scmp.com/news/asia/southeast-asia/article/3206358/asias-super-resistant-mutant-mosquitoes-trigger-alarm-we-have-think-solution

https://www.smithsonianmag.com/smart-news/super-resistant-mosquitoes-can-survive-insecticides-in-southeast-asia-180981357/

Sub-Saharan Africa

Trauma Care Services in Somalia

The World Heath Organization (WHO) Country Office in Somalia worked with the Federal Ministry of Health to create a plan to strengthen critical trauma care within the country. The output goal is to decreased preventable injuries within the "golden hour" of a mass casualty event. This comes as a response to the deadly twin-blasts in October 2022 which injured more than 300 and killed more than 100.

The plan is to provide medical care and supplies as well as create a team to complete a rapid assessment of trauma capacities and ability to manage mass casualty events in public hospitals. This trauma operational advisory team (TOpAT) created by the Federal Ministry of Health helped the WHO country team develop a short and long term plan to build the capacities of both prehospital health care workers (ambulance drivers, nurses, paramedics) as well as capacities within the hospitals.



ttps://www.emro.who.int/somalia/news/who-rolls-out-capacity-building-plan-for-strengthening-trauma-care-services-in-somalia.htm

A customized 4-day community first air responders (CFAR) was created and 40 prehospital care workers across Mogadishu were selected to attend this course. Another 4-day course was created focusing on mass casualty management for hospital directors and managers was created and 22 people enrolled from 5 public hospitals. The goal of the management course was to help educate senior managers plan, implement, monitor and prepare the hospital and staff to care for a mass casualty event with a large increase in potential patient volume.

These pilot trainings went well and now these trainings will be rolled out and completed at the larger state level with 800 prehospital care staff to be trained in the first quarter of 2023.

Further reading

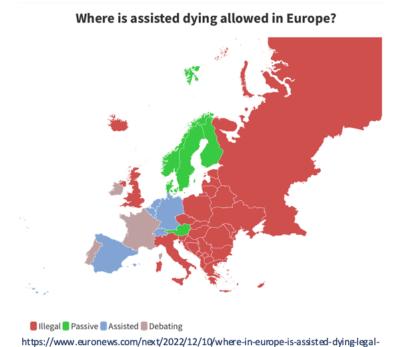
https://www.emro.who.int/somalia/news/who-rolls-out-capacity-building-plan-for-strengthening-trauma-care-services-in-somalia.html

Europe

Portugal Passes Bill Allowing Assisted Dying

Portugal's parliament approves legislation allowing medically assisted suicide in those who are "in a situation of great intense suffering, with definitive injury of extreme gravity or serious and incurable disease." This is the third time Portugal has attempted to legalize Euthanasia and in order to pass it must be approved by the president. The president can immediately pass it or can send it to Constitutional Court. The other two attempts were sent to Constitutional Court and then rejected. The president is currently deliberating this and will are awaiting his decision. Opinion polls indicated that about half of voters are in favor despite that Portugal is a strongly Catholic country with the Church strongly opposing it.

Assisted dying refers to both active and passive euthanasia. Active euthanasia includes euthanasia



which involves a physician playing an active role in the death of a patient, usually by supplying an IV lethal substance and physician-assisted euthanasia which implies that the physician provides the patient with the medications required to die but the physician is not the individual who injects them. Passive euthanasia is the withdrawal of life- preserving treatments. Of note, passive euthanasia is not the same as withdrawal of care which is often part of palliative care.

Euthanasia is legal in five European countries: Belgium, Luxembourg, German, Spain and the Netherlands. However passive euthanasia of various types are legal in many additional countries such as Austria, Finland and Norway. Switzerland has allowed assisted suicide since 1942.

Further reading

https://www.euronews.com/next/2022/12/10/where-in-europe-is-assisted-dying-legal-https://jme.bmj.com/content/31/2/64

Upcoming Lectures/Conferences

Series: Diaspora Engagement in Humanitarian Assistance

Diasporas are key actors in transnational humanitarian assistance and can assist with communication among local, national, regional and international actors. Diasporas have attachments to their home countries which motivate them to create alliances with stakeholders and navigate complex humanitarian systems to help protect their home communities from abroad.

Between October 2021 and February 2022 the United Nations agency, International Organization for Migration (IOM), Shabaka and Africa-Europe Diaspora Development Platform (ADEPT) organized a series of three webinars to explore different perspectives on diaspora engagement in humanitarian assistance.

Read the summaries and watch informative videos: https://unitedkingdom.iom.int/diaspora-engagement-humanitarian-assistance-webinar-series

Toward Local Humanitarian Engagement: The Role and Experience of National Actors in Negotiation

Most professional development initiatives have mirror inequities o the sector itself, despite advancements in capacity building. It has prioritized access to trainings for international humanitarian practitioners working with large in international NGOs.

This webinar sought to answer the following questions:

- How does the humanitarian system contribute to or hinder support to local actors? What have been the driving factors in this support and what has undermined these approaches?
- How have local actors supported agency negotiations for access to populations in need?
- Where is the localization debate going and what are the implications for national staff?

Webinar link: https://youtu.be/KCOdSGfpmhY

London School of Hygiene & Tropical Medicine

Free Massive Open Courses (MOOCs) offered by the London School of Hygiene & Tropical medicine

- Glaucoma: a public health approach to preventing blindness
- Improving the health of women, children and adolescents
- Diagnostics for AMR: Building back better from the COVID-19 Pandemic
- Retinopathy of Prematurity: Practical approaches to prevent blindness
- Drug Use and Harm Reduction
- Diabetic Eye Disease: Strengthening services
- Global Disability Research and Evidence
- Eliminating Trachoma
- Controlling Vector-Borne Diseases
- Global Blindness: planning and management eye care services
- A History of Public Health in Post War Britain
- Integrated Healthcare for Children with Developmental Disabilities
- The Role of Diagnostics in the AMR response
- Disease Outbreaks in Low & Middle Income Countries
- Global Health and Disability

Website: https://www.lshtm.ac.uk/study/courses/short-courses/free-online-courses

Online Humanitarian Courses with Certificates

- Public Health in Humanitarian Crises
- International Humanitarian Law
- Humanitarian Response to Conflict and Disaster
- International Humanitarian Law in Theory and Practice
- Humanitarian communication: Addressing key challenges
- Protecting Children in Humanitarian Settings
- Non-Communicable Diseases in Humanitarian Settings
- Introduction to Humanitarian Aid
- Global Health and Humanitarianism
- Health in Complex Humanitarian Emergencies

Website: https://www.humanrightscareers.com/magazine/online-humanitarian-courses-with-certificates/