

EMERGENCY PREPAREDNESS PLAN FOR HIV & HARM REDUCTION SERVICE PROVIDERS — . . .

MOROCCO



INTRODUCTION

The harms inflicted by the COVID-19 pandemic on the availability of HIV and harm reduction services have threatened the sustainability of prior development efforts in controlling the HIV prevalence at the global level.

According to a recent modelling exercise carried out by WHO and UNAIDS “a six-month disruption to treatment could lead to half a million extra deaths from AIDS-related causes in sub-Saharan Africa, while a 6 months disruption in outreach and condom programming is predicted to lead to a 25% increase in new infections over one year”.¹

The immense ramifications of the pandemic on key populations and the health systems difficulty to sustain HIV and harm reduction services during the pandemic has necessitated a unified call of action from UN and International development agencies to safeguard the rights of marginalized populations and ensure the continuity of harm reduction services while fighting the COVID-19 pandemic.²

The situation in the Middle East and North Africa (MENA) region was even more critical. A study conducted by UNAIDS in five countries of the MENA region showed that harm reduction programmes in these countries have experienced major challenges in sustaining their services, maintaining an adequate supply of antiretroviral medicines (ARVs), and have suspended HIV preventive, testing and treatment services in response to the pandemic restriction and lockdown policies.³ The unprecedented aftermath of the Ebola outbreak in West Africa (2013-2016) and the most recent crisis of the COVID-19 pandemic has triggered increased global interest in strengthening public health systems resilience and emergency preparedness to prevent future health crisis.

Resilient public health systems have been defined as: “those that rapidly acquire information about their environments, quickly adapt their behaviors and structures to changing circumstances, communicate easily and thoroughly with others, and broadly mobilize networks of expertise and material support”.⁴



To that end several Public Health Emergency preparedness frameworks were developed by UN agencies to guide countries around the globe in developing their emergency preparedness plans to ultimately enhance readiness, improve response and reduce the impacts of emergency events. Examples of such frameworks, include the World Health Organization (WHO) strategic framework for emergency preparedness (EPP).⁵ This framework identifies the principles and elements of effective emergency preparedness and lays out the planning process by which countries can determine their priorities and develop or strengthen their operational capacities in all hazards emergency events.⁵

Following global trends, MENAHRA in collaboration with the Global Fund aimed at supporting the development of the emergency preparedness plans for harm reduction services for four countries of the MENA region, including Egypt, Jordan, Morocco, and Tunisia to improve access to quality HIV and harm reduction services for Key Populations- specifically PLHIV and PWUD, and enhance harm reduction service providers' resilience and preparedness for emergency response in the context of health emergencies.

The purpose of this report is to present an emergency preparedness plan, developed for harm reduction services providers in the Kingdom of Morocco, so as to enhance the country response to all hazard's emergencies in the future.



**THOSE THAT RAPIDLY ACQUIRE
INFORMATION ABOUT THEIR
ENVIRONMENTS, QUICKLY ADAPT THEIR
BEHAVIORS AND STRUCTURES TO
CHANGING CIRCUMSTANCES**

• 1 WHO.(2020). The cost of inaction: COVID-19-related service disruptions could cause hundreds of thousands of extra deaths from HIV [website]. <https://www.who.int/news/item/-2020-05-11-the-cost-of-inaction-covid-19-related-service-disruptions-could-cause-hundreds-of-thousands-of-extra-deaths-from-hiv>

• 2 UNDP. (2020). COVID19-: Ensuring access to quality, safe, and nondiscriminatory services for HIV key populations and migrants. UNDP press release. Retrieved from: <https://www.undp.org/press-releases/covid-19-ensuring-access-quality-safe-and-non-discriminatory-services-hiv-key>

• 3 WHO, (2020). Resilience of HIV services during the COVID19- pandemic. Voices of people living with HIV. <https://applications.emro.who.int/docs/WHOEMSTD207E-eng.pdf?ua=1>

• 4 Khan, Y., O'Sullivan, T., Brown, A. et al. (2018). Public health emergency preparedness: a framework to promote resilience. BMC Public Health 2018) 1344,18). <https://doi.org/10.1186/s-12889-7-6250-018>

• 5 WHO. (2016). A strategic framework for emergency preparedness. Geneva: World Health Organization; 2016. License: CC BY-NC-SA 3.0 IGO. Retrieved from: <http://www.who.int/ihr/publications/9789241511827/en/>.

WHAT IS THE PURPOSE OF THE EPP FOR HIV AND HARM REDUCTION SERVICES IN MOROCCO?

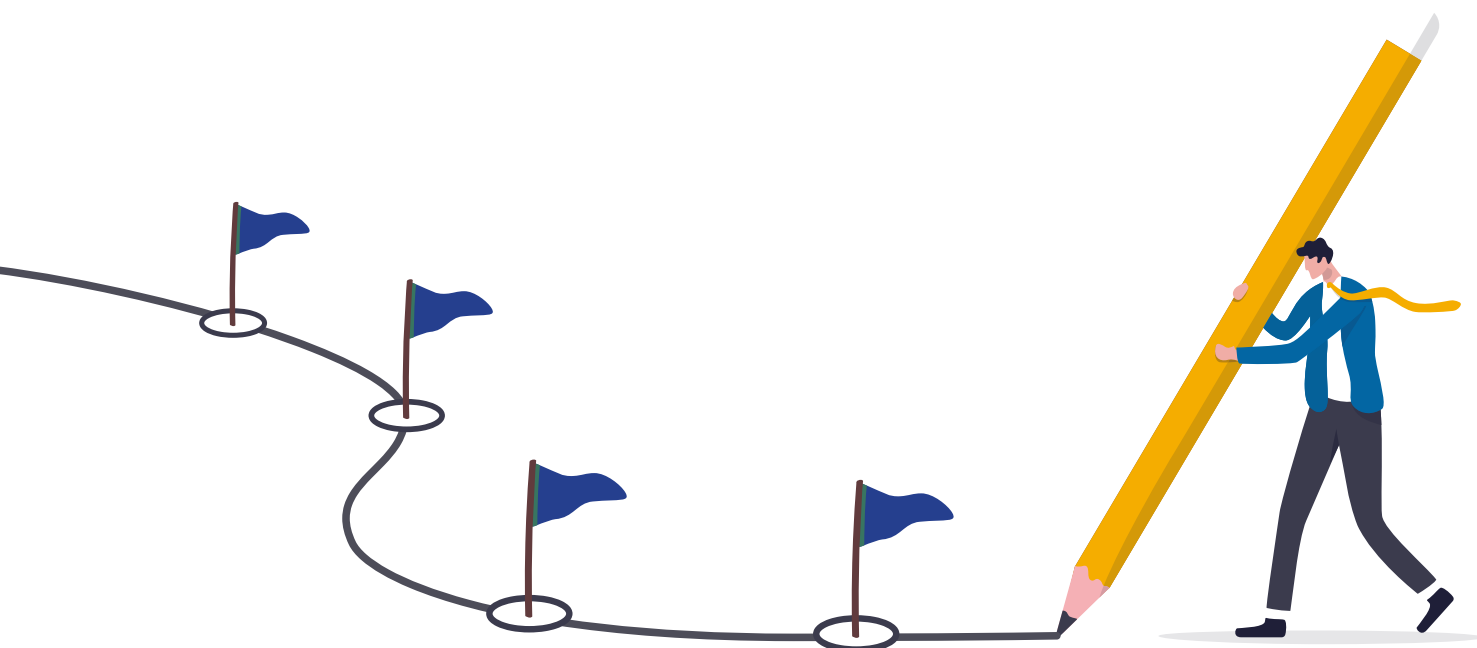
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The Emergency Preparedness (EPP) for HIV and harm reduction services was designed to guide the preparedness and the initial response of HIV and harm reduction service providers to ensure readiness and timely response in emergency situations.

WHO IS THIS PLAN INTENDED FOR?

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The EPP is intended for HIV and harm reduction service providers in Morocco, including the MOH, the National Aids Program (NAP), other public health facilities and civil society organizations working with PLHIV and PWUD.



WHAT IS THE SCOPE OF THE PLAN?

Emergency preparedness is defined as “the knowledge and capacities and organizational systems developed by governments, response and recovery organizations, communities and individuals to effectively anticipate, respond to, and recover from the impacts of likely, imminent, emerging, or current emergencies”.⁶

Accordingly, the proposed EPP scope is limited to the pre-emergency actions of harm reduction CSOs and other stakeholders in preparation for the initial response to mitigate the impacts of adverse emergency situations. Thus, the proposed plan doesn't cover/ include the actions needed for the comprehensive response and the recovery phase of the emergency planning cycle.

HOW HAS THE PLAN BEEN DEVELOPED?

The EPP for HIV and harm reduction services for Morocco comes as the second phase of a two-phase project that was carried out in May 2022. The first phase of the project involved identifying the impacts of the COVID-19 pandemic on the lives of KPs, and the repercussions of the pandemic on essential harm reduction/ health services in the country. The situation assessment revealed that the COVID-19 strict precaution measures that were imposed by the government to contain the pandemic had an unfavorable impact on the wellbeing and live hood of KPs in the country and on HIV and harm reduction service providers.

The insights provided through the situational assessment were used to identify the key actions that are recommended for HIV and harm reduction service providers to strengthen their readiness by using the WHO strategic framework for emergency preparedness⁷ as a tool to guide the development of the EPP that is relevant to the Moroccan public health system. The selection of the WHO strategic framework for emergency preparedness to guide the development of the EPP for HIV and harm reduction services in Morocco was based on two main reasons, including the framework relevance to all healthcare systems, and its applicability to all - hazards emergency preparedness.⁸

As such, the EPP presented in this report provides an orientation to the findings of the situational assessment study on KPs needs in the context of the COVID-19 pandemic and the recommendations brought forward by key stakeholders working in the field of harm reduction services in the country.

• 7 WHO (2016). A strategic framework for emergency preparedness. Geneva: World Health Organization; 2016. License: CC BY -NC-SA 3.0 IGO. Retrieved from: <http://www.who.int/ihr/publications/9789241511827/en/>.

• 8 Khan, Y., O'Sullivan, T., Brown, A. et al. (2018). Public health emergency preparedness: a framework to promote resilience. BMC Public Health 2018) 1344, 18). <https://doi.org/10.1186/s7-6250-018-12889>

PROPOSED EMERGENCY PREPAREDNESS PLAN FOR HIV AND HARM REDUCTION SERVICE PROVIDERS IN MOROCCO

The WHO strategic framework for emergency preparedness (EPP), emphasizes the recommended actions to strengthen public health systems preparedness and response to emergency situations under the following core themes : (1) **Determining a multi-sectoral governance structure that can lead the development and the execution of emergency preparedness, response, and recovery plans ;** (2) **Strengthening the capacities of Public health care systems to ensure fast response;** and (3) **the availability of adequate financial, human and physical resources to support the execution of the emergency response.**

The section below illustrates the main challenges that were found to impact HIV and harm reduction services providers' response to the COVID-19 pandemic under each of the three core themes of the WHO strategic framework for emergency preparedness, and elaborates the actions recommended to strengthen HIV and harm reduction services readiness to future crises that are of relevance to HIV and harm reduction healthcare systems in the Kingdom of Morocco:



Governance

At the governance level, to strengthen preparedness, efforts are recommended in defining a multi-sectoral governance structure with identified roles and responsibilities that can lead the development and execution of the Emergency preparedness, response and recovery plans for HIV and harm reduction services in Morocco as well as strengthening collaboration and coordination between all HIV and harm reduction stakeholders in the country.

This structure can be developed by the MOH which already encompasses several departments and collaborates with different entities specializing in PLHIV and PWUD and would include membership from both health and non-health sectors, including but not limited to all MOH units specific to PLHIV and PWUD, pharmacies, representatives from both, private and public health centers and drug addiction treatment facilities, internal security forces, CSOs, KPs and international development agencies. The main responsibilities of this structure /committee include:

- Lead the development and execution of HIV and harm reduction services emergency response and recovery plans
- Reinforce strong networks/ partnerships with key stakeholders with identified roles and responsibilities
- Strengthen the digital platforms that can enhance coordination, communication and sharing of essential information among PC and partners including CSOs and other key players such as the internal security forces
- Reinforce integration of HIV and harm reduction preparedness plan in existing health coordination systems
- Strengthen advocacy for modification of existing national policies and legislations that can be harmful to KPs/ HIV and harm reduction services in times of crisis

HIV and harm reduction service providers' capacities

To be more prepared for an emergency situation, HIV and harm reduction organizational and technical capacities includes the strengthening of the following areas:

1. To strengthen facilities risk communication capacities to avoid treatment and services disruptions
2. To enhance institution capacities in generating, sharing, and disseminating essential information related to risks, KPs and harm reductions services for decision making
3. To reinforce institutions operational capacities to enhance KPs access to essential HIV and harm reduction services in the context of emergencies
4. To enhance KPs access to Basic and safe health and emergency services
5. To strengthen KPs engagement in the development of emergency response to be able to mobilize them in times of emergency

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**TO BE MORE PREPARED, THERE IS AN
URGENT NEED TO STRENGTHEN THE HIV
AND HARM REDUCTION ORGANIZATIONAL
AND TECHNICAL CAPACITIES**

Resources

The WHO strategic framework for EPP emphasizes the importance of ensuring the availability of sufficient human, physical and financial resources for timely response. Recommendations include, but not limited to:

1. Elaborating protocols for human resources management during crisis
2. Strengthening community volunteer programs to allow them to work during emergencies especially when there is a shortage of staff
3. Reinforcing the engagement of all stakeholders in identifying and approaching funding opportunities
4. Conducting mapping of essential medical supplies and commodities that need to be stocked in case of emergency

In conclusion, the proposed EPP for HIV and harm reduction services (Table 1) elaborates the critical actions to enhance preparedness in the context of emergencies, under the main three themes of the WHO strategic emergency preparedness framework.



Table 1
Proposed EPP for HIV and Harm reduction service providers for Morocco

Theme 1: Governance	
Strategic objectives	Recommended Actions
Establish a high-level national multi-sectoral emergency preparedness, response and recovery plan for HIV and harm reduction services for Morocco that supports collaboration and coordination among stakeholders (stakeholders include community, local, national, regional and global stakeholders)	<ul style="list-style-type: none"> • Determine a local governance structure that can develop, lead, and implement a multi-sectoral emergency preparedness and response plan for harm reduction services • Identify Key Stakeholders • Define and map the mandate and strengths of each stakeholder to identify each organization's areas strengths, so that each can lead in its area of expertise • Enhance coordination mechanisms and plans for emergency preparedness of all relevant sectors, including public, private and civil society in public health, emergency services, water (droughts), and migration • Use technical assistance and guidance from international stakeholders for preparedness, response, and recovery planning (applying international frameworks) • Elaborate memoranda of understanding with clear roles and responsibilities for each partner • Identify the focal point to lead the coordination and collaboration among key stakeholders • Elaborate a multi-sectoral all-hazard emergency response plan that sets out the responsibilities to all partners • Carry out community simulation sessions (capacity building) to evaluate planning for emergency preparedness, response, and recovery
Ensure that HIV and harm reduction multi-sectoral EPP is aligned with and well integrated within the government emergency national plan	<ul style="list-style-type: none"> • Advocate for integrating HIV and harm reduction EPP within the government emergency plan (National Strategy) with continuity plans for each population -PLHIV and PWUD, including foreigners, migrants, displaced persons, women, and women with children • Advocate for reforms and modification of existing government policies and legislations based on assessment and analysis of needs and risks • Increase the awareness of decision makers on the needs of KPs and the policies that are harmful to KPs/ harm reduction CSOs in times of the pandemic. • Lead and advocate for actions that reduce stigma and discrimination against PLHIV and PWUD

Theme 2: Capacity

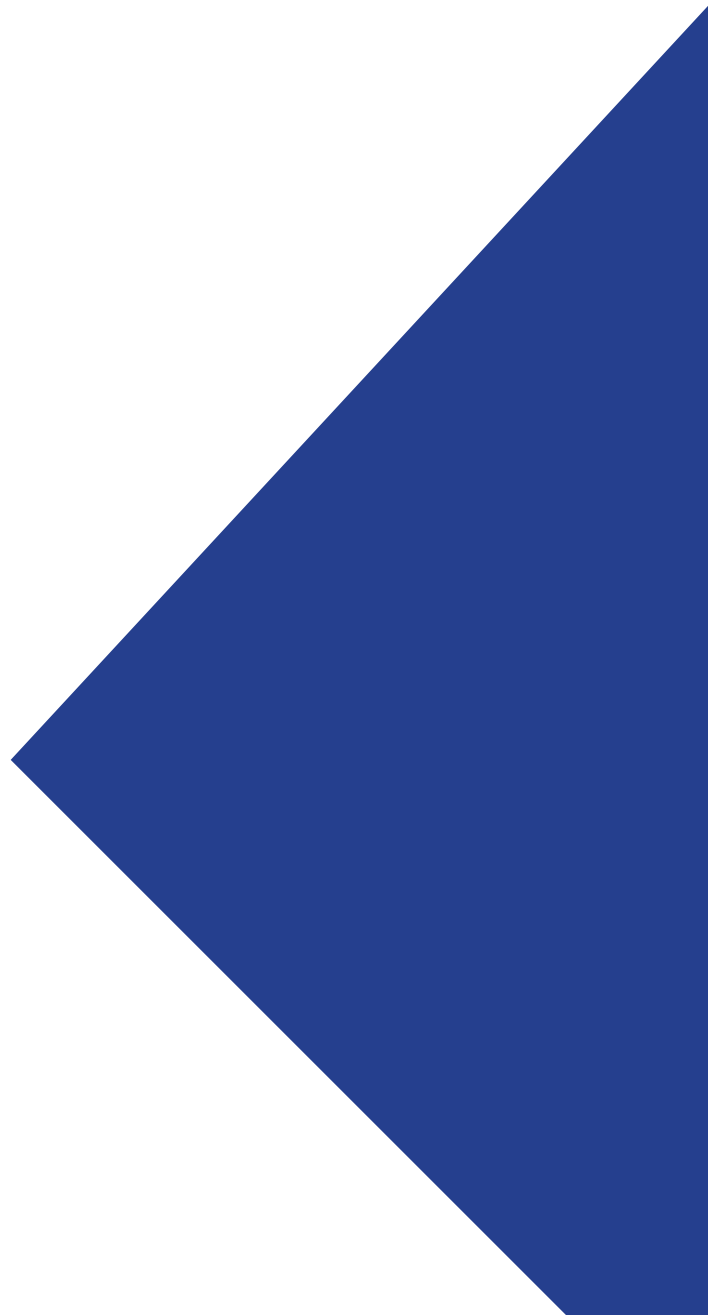
Strategic objectives	Recommended Actions
Strengthen facilities communication capacities to avoid treatment and services disruptions	<ul style="list-style-type: none"> • Elaborate a risk communication plan which uses on-line and offline communication channels to relay important messages to KPs in emergency situations. • Strengthen institutions websites and digital presence to facilitate KPs access to essential information • Engage all concerned parties, including KPs in the development of enhanced communication programs for PLHIV and PWUD • Strengthen public health messages/ material to reach KPs • Further train designated communication staff on risk communication • Improve communication between CSOs and PLHIV/PWUD • Enhance the capacities of the MOH to improve communication targeting PLHIV and PWUD
Enhance institution capacities in generating, sharing, and disseminating essential information related to risks, KPs and harm reductions services for decision making	<ul style="list-style-type: none"> • Augment risk and vulnerability analysis assessments to determine priority interventions in times of emergencies and to understand KPs needs • Enhance HIV and harm reduction capacity assessment processes to identify capabilities/strengths/ assets that are relevant to emergency response • Update the national surveillance system for PLHIV and PWUD to accelerate emergency preparedness surveillance and early warning information specific to KPs • Activate the central management information system for PLHIV and PWUD to enhance information sharing and reporting between all concerned parties • Enhance CSOs research, and evaluation skills to be able to generate supporting evidence on the effectiveness of their programs. • Elaborate protocols and/or processes to ensure information sharing/ reporting among stakeholders

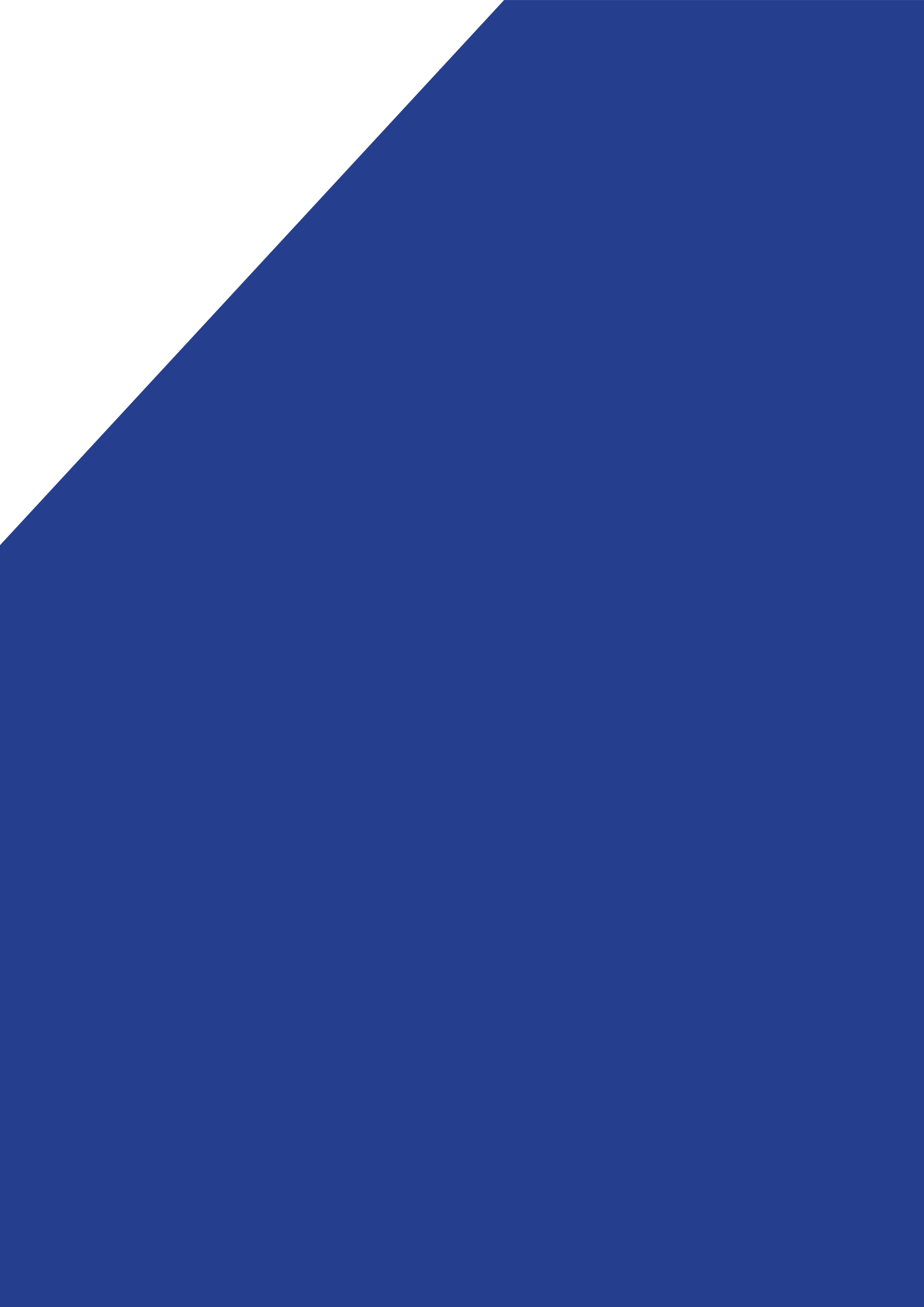
Theme 2: Capacity

Strategic objectives	Recommended Actions
Strengthen institutions operational capacities to enhance KPs access to essential HIV and harm reduction services in the context of emergencies	<ul style="list-style-type: none"> Establish alternative ways to deliver services due to forced closure of fixed sites in-times of crises Advocate to integrate HIV and harm reduction services within primary health care to expand the availability of services across all areas of Morocco Advocate to expand HIV testing and access to diagnostic testing with inclusion of treatment/medication during emergency situation Implement HCV integrated programs Reinforce CSOs mobile clinics/ out- reach programs to reach KPs Elaborate plans specific to emergency situation to ensure availability of medications for ARV and OST (stock management at all levels) with innovative approach and involvement of all sectors (including private sector and medical professionals) Provide PLHIV and PWUD with ID cards that can facilitate KPs mobility and their access to essential health services including OST and painkillers for PWUD Strengthen digital solutions to support information sharing platforms, and on-line delivery of psychosocial, legal assistance and counselling services for KPs and personnel working with KPs Enhance peer support programs to reduce stress and anxiety due to isolation for KPs and staff working with KPs
Enhance KPs access to Basic and safe health and emergency services	<ul style="list-style-type: none"> Reinforce competences of health and community workers for enhancement of services of PLHIV and PWUD, during emergency situation Adapt health facilities policies to create a more supportive environment for PLHIV and PWUD seeking care- especially in rehabilitation treatment centers Train police officers on the laws pertaining to KPs and code of conduct in law enforcement to improve their conduct with KPs Adapt scope of services delivered based on KPs needs, such as financial and social assistance programs (i.e. cash assistance, food provisions, medication, basic needs and housing accommodations for PLHIV and PWUD, and women living with HIV- with kids, and women injecting drugs) Promote shelters for PLHIV and PWUD (especially women with children)
Strengthen KPs engagement in the development of emergency response to be able to mobilize them in times of emergency	<ul style="list-style-type: none"> Enhance strong networks of KPs all over the country Strengthen training of stakeholders to facilitate KPs participation and engagement in emergency response

Theme 3: Resources

Strategic objectives	Recommended Actions
Ensure the availability of sufficient and trained human resources for the execution of any emergency response plan	<ul style="list-style-type: none"> • Elaborate protocols for human resources management during crisis • Hire and train health professionals in all regions of Morocco i.e. psychologists, psychiatrist, infectious disease specialists • Address stigma and discrimination in trainings and awareness campaigns to create a supportive environment for PLHIV and PWUD • Emphasize human rights and gender rights approaches for PLHIV and PWUD during trainings • Establish and maintain specialized teams (e.g. emergency medical team, rapid response team, experts) • Strengthen CSOs community volunteer programs to allow them to participate/work during emergencies especially if shortage of staff
Ensure the availability of financial resources	<ul style="list-style-type: none"> • Advocate for establishing emergency funds for HIV and harm reduction emergency response plan at governmental, and CSO levels • Reinforce the engagement of all stakeholders in identifying and approaching funding opportunities • Reinforce work with international donor agencies to advocate for faster funding for HIV and harm reduction services during an emergency
Ensure the availability of adequate material and medical supplies for the execution of any emergency response plan	<ul style="list-style-type: none"> • Use predictive systems to forecast demand of essential medicines and preventive commodities relevant to the emergency context • Conduct mapping of essential medical supplies and commodities that need to be stocked in case of emergency (i.e. hygiene kits, PPE, ARV, agents for HIV test and viral load screening, Naloxone) • Agree with international stakeholders on global and regional preparedness, prioritization and distribution of key supplies during an emergency.







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