

Welcome

This publication provides updates for colleagues and partners across UKHSA, OHID and the Overseas Territories.

If you have any queries, feedback or contributions please contact: UKOTs.Programme@ukhsa.gov.uk

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Health Needs Assessment in Informal Settlements of the Turks and Caicos Islands

Public Health Specialty Registrar, Amoolya Vusirikala; Epidemiologist, Allegra Chatterjee; and Programme Management Lead, Annabel Grieve, visited the Turks and Caicos Islands (TCI) in February to conduct a health needs assessment (HNA). The aim of the project was to develop a systematic understanding of the health needs of communities living in informal settlements in TCI. The HNA was conducted by the programme in close collaboration with a local working group from TCI led by Chief Medical Officer, Dr Astwood. Ahead of the deployment, significant effort was dedicated to building and fostering relationships with a wide array of stakeholders, particularly community leaders, to facilitate effective community engagement.

While on deployment, the team engaged with over 90 stakeholders, conducting semi-structured interviews and focus groups across public and private health sectors, education and community members. Community engagement took place in a range of diverse settings such as churches, clinics and food outreach events.



This extensive engagement brought to light both the strengths and challenges that exist to improve health at the individual and health system levels, along with the broader social determinants at play. The assessment reinforced the importance of community engagement strategies, that embrace partnerships with local leaders and work alongside community members for effective health improvement.

Following analysis of the findings, a final report with recommendations will be produced and a dissemination and consultation strategy developed to inform an action plan addressing the health needs of these communities.

Covid-19 After Action Review in St Helena

In January, the EPRR (Emergency Preparedness, Resilience and Response) team travelled to St Helena with Natalie Wright, Health Protection Lead for the UKOTs programme, to undertake a formal AAR; a collective debriefing for the island's response to COVID-19, as well as to train colleagues on AAR methodology and facilitation. The results of the formal sessions will be synthesised into a formal report to be shared with key colleagues in Health and Social Care, St Helena.

The sessions were well received with colleagues across SHG, with a high level of engagement observed in both training and debriefing sessions.

The deployment was an excellent opportunity for the EPRR team to engage and build relationships with both Health and Emergency Planning counterparts. Future collaboration will include the provision of peer support and guidance in updating National Major Incident Response Plan and the Mass Casualty Hospital Plan.



International Women's Day with Dr Aisha Andrewin

International Women's Day, celebrated annually on March 8th, is a global event honouring the achievements of women. It is a day to advocate for gender equality and raise awareness about the challenges women continue to face worldwide. In the realm of public health, women bring unique perspectives, experiences, and skills. However, just 25% of senior health leadership positions are held by women despite being 90% of the frontline health workforce. Here we are showcasing leadership in the UKOTs through a brief interview with Dr Aisha Andrewin, CMO in Anguilla.



Dr Aisha Andrewin now and then (4 years old)

Can you briefly introduce yourself and describe your role?

I am Dr. Aisha Nicole Andrewin. I am originally from Belize. I am currently the Chief Medical Officer (and Epidemiologist) with the Ministry of Health in Anguilla, a post I've held since August of 2014.

Which woman inspires you the most?

That would be my mother (sadly departed in 2016). She was a chemistry teacher from Trinidad. She was the kindest, most loving human being I've ever known. Among things she taught us, she taught us humility and to do good for the sake of "doing good" and not for the expectation of gaining something in return. Her love was unconditional, and she was very positive about absolutely everything. She is still the voice in my head and my main source of inspiration.

What do you think is the biggest challenge you face in your role today?

I believe the work-life balance is always a challenge as well as seeking avenues for continuing personal development and contributing to something positive.

Have you faced any barriers in your career due to being a woman?

Perhaps this was the case in medical school and as a medical practitioner where males were definitely groomed for certain specializations like the surgical fields. I haven't really sensed this as much in my public health life.

If so how did you overcome them?

In the first instance, because I was never interested in those areas of medicine, there was no real impact and nothing to overcome practically speaking, in the greater scheme of things. To be honest, in my professional life, I actually don't tend to think of myself or my role with a gendered lens - as a woman or even a feminist - or any other lenses such as race in fact. I've been raised to always put my best foot forward and prove my worth. So far, as a public health practitioner, even when I've been in situations that may have tended to be sexist, or male-dominated, I've always felt to be have been judged fairly based on my abilities. So that whatever threats there may have been based on the fact that I am female, I'm not aware of having actually experienced them as a barrier that has actually come into being.

What message do you think is important for young women thinking about their careers in public health?

Public Health is a vast field with the lofty overarching goal of doing the greatest good for the greatest number of people. So, it's an inherently noble profession and that's always a good start. However, real positive changes often occur over a long time, so one has to be vigilant against boredom and cynicism. Further to that, I would say stay humble and stay positive; always move towards the light.

Network Spotlight: UKOTs IPC & AMR Network

The Infection Prevention Control (IPC) and Antimicrobial Resistance (AMR) Network meet virtually every 6 weeks, and is a hub for collaborative learning, sharing challenges and professional development. It is open to all IPC and AMR focal points, leads and practitioners across the UKOTs.

The meeting in January included a presentation on measles – recognising the increasing number of cases globally, primarily in Europe at this time; and the risk of further outbreaks linked to declining immunisation levels. Measles is almost a forgotten disease as successful vaccination programmes had led to elimination in many countries, so up-to-date preparedness for this incredibly infectious and harmful disease is key. Other topics have included an HPV prevalence study, MRSA screening, decolonisation plans and sharing of the learning gained from delegates who attended the Infection Prevention Society Conference. Along with this, successful activities and resources for World Antimicrobial Awareness week have been shared.

All in all, a great opportunity to collaborate and share with others working across the IPC and AMR fields. For further information on the UKOTs IPC & AMR Network, please contact Janice.toplass@ukhsa.gov.uk.

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