

Annual Report 2021

MED
BOX

 THE AID LIBRARY

INTRODUCTION

MEDBOX – The Aid Library is an open-access online library aiming to increase the quality of health care worldwide.

Quality assurance and accountability are important values in humanitarian action as well as healthcare settings, which receive growing attention by affected populations, health care workers, humanitarian actors, donors and the public. The easy-to-use structure of MEDBOX facilitates the application of common health standards increasing the impact as well as the quality of the different interventions carried out by health workers.

EXECUTIVE SUMMARY

Unfortunately, the hopes of scientists, politicians, and the population were not fulfilled in 2021, and COVID-19 is still keeping the world on tenterhooks. Despite the ground-breaking rapid development of a vaccine, the pandemic could not be ended. The **MEDBOX** team tried to stay up to date and keep the COVID-19 toolbox current. The flood of information was almost unmanageable and it was one of the biggest challenges so far to fight against this “infodemic” and to keep the **MEDBOX** users up to date with the most important; scientific and trustworthy information, filtering out fake news, countering myths, and misinformation and building trust in vaccines, keeping track of updates from all countries, keeping track of all scientific papers, was our daily routine.

A central theme in 2021 was to provide fair access to vaccines for all people worldwide. All initiatives to suspend the patent rights on vaccine products in the fight against COVID-19 for the duration of the pandemic are important because they greatly accelerate the willingness to find relevant solutions and compromises. This has become clear since the USA, Spain, Canada, and other states have abandoned their blockade attitude. Germany, unfortunately, belongs to the ever-shrinking group of rich states that threaten to block constructive solutions for the universal common good.

Another obstacle to fighting the pandemic is the vaccination hesitancy worldwide. There are many rumours, myths and misinformation circulating. Therefore, we published several issue briefs on this topic in 2021 to give health workers, community health workers, public health administrators, or journalists the tools to educate people and allay their fears. Here we received a report by Dr Matovu from Uganda, who impressively describes how education about COVID-19 is carried out on the ground.

Another report by our colleague Waltraud Seitz describes how vaccination education of refugees of different nationalities in the community shelters in Germany was successfully carried out with the help of materials and videos from the **MEDBOX** in different languages.

We received a request to support an online training of Syrian health workers by providing Arabic information in our COVID-19 toolbox. With the support of a native speaker, we were able to make this possible and to produce a COVID-19 Issue brief in Arabic. The platform was also made available in Arabic to provide low-threshold access to the **MEDBOX** for people from this context.

We are pleased that we were able to publish a new toolbox again in 2021: The CAREGIVER TOOLBOX offers health care workers the opportunity for ongoing education to improve patient and psychosocial care by providing an overview of critical topics related to caring. The toolbox is also a helpful guide for national and international students and co-workers in nursing to keep up to date with the most recent care information. Especially in low and middle-income countries, the need for guidelines, protocols, and training programs around care is significant. Here community health workers and nurses at the primary level are often the first access to the health care system. To care for patients in the best way and according to the latest standards, it is vital to have quick and easy access to the correct and latest information. Have a look at this new CAREGIVER TOOLBOX: www.caregiverbox.org.

CURRENT STATUS IN NUMBERS AND FACTS

Since its launch in October 2013, **MEDBOX** has achieved a remarkable reputation. The growing numbers of views, downloads, and increased users are an excellent testament to our work in terms of quality and utility. **MEDBOX** has collated more than 24,500 documents in various languages in more than 1,000 categories and subcategories. As we had technical difficulties with the database in the backend, we were forced to change the programming company in 2021. Unfortunately, due to this very short-term change, detailed data analytics for the whole year 2021 is not possible, as the web analytics tool Matomo was set up from July 2021. We hope you will understand and forgive us for this year.

Therefore, in this annual report, we have focused on the content-related contributions and think that these parts of the annual report will also be of great interest to you and will provide you with an excellent overview of the work and the benefits of **MEDBOX**.



Figure 1: Highlights of key statistics

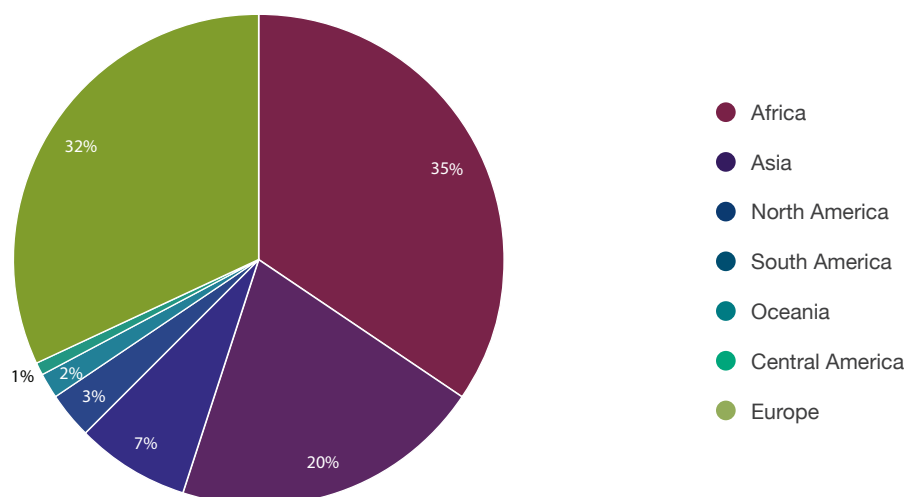


Figure 2: Visitor split by region for July- Dec 2021

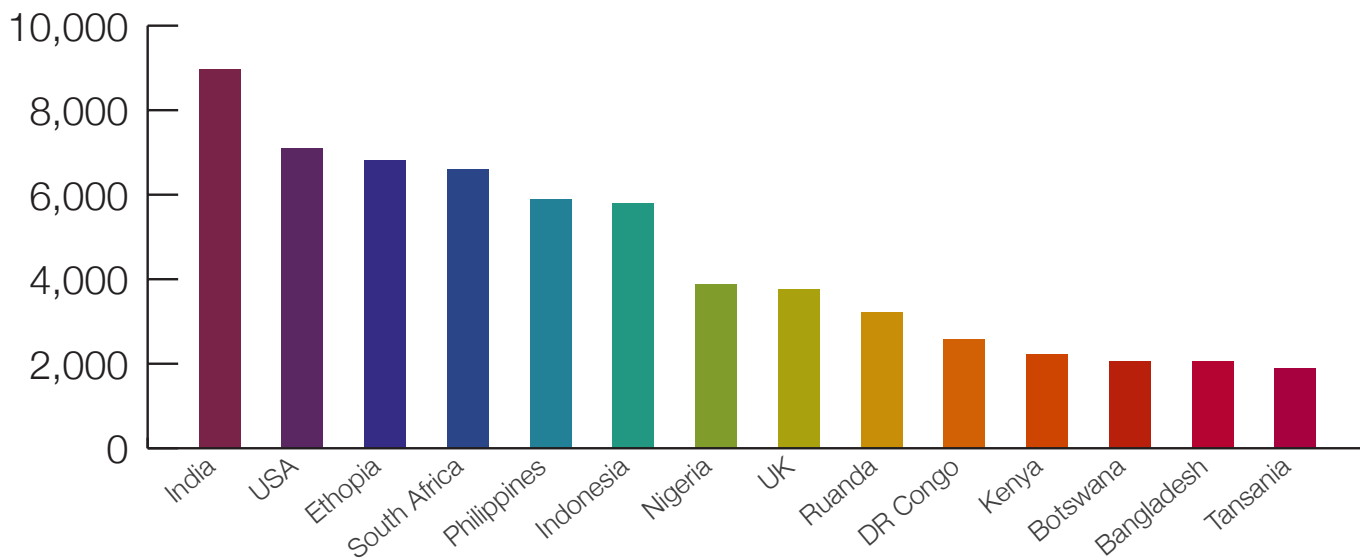


Figure 3: Visitor split by country (excluding Europe) for July-Dec 2021

MEDBOX proved itself again in 2021 as an important platform for quality resources in humanitarian aid and health interventions worldwide. Staying up to date and always responding immediately to new crises and challenges has undoubtedly contributed to **MEDBOX**'s success story. Our **MEDBOX** team is continuously keeping all categories and toolboxes up to date and integrating feedback from users and partners.

Looking back to 2021, we can see that although we achieved a lot, we could not realize all our goals due to the Corona pandemic, as the flood of information around COVID-19 shaped the focus of our work. The technical problems and reprogramming also tied up time and human resources. Fortunately, the thematic issue briefs have become an important information tool for our partners, and the feedback from **MEDBOX** users has been consistently positive.

Much of what we have achieved has only been possible with the great help of our partners and users worldwide. Thanks a lot!

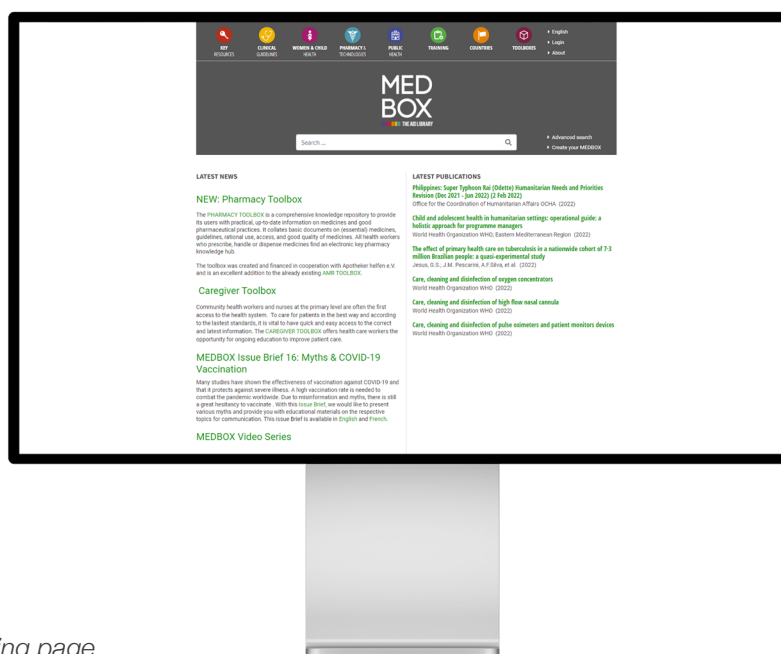


Image 1: MEDBOX landing page

RANKING OF CATEGORIES

As in the last years, the **MEDBOX** Team revised the existing categories, reorganized some subcategories, and deleted outdated information to maintain the high quality. Since we have deleted many documents, the absolute download numbers have not increased as much as in previous years.

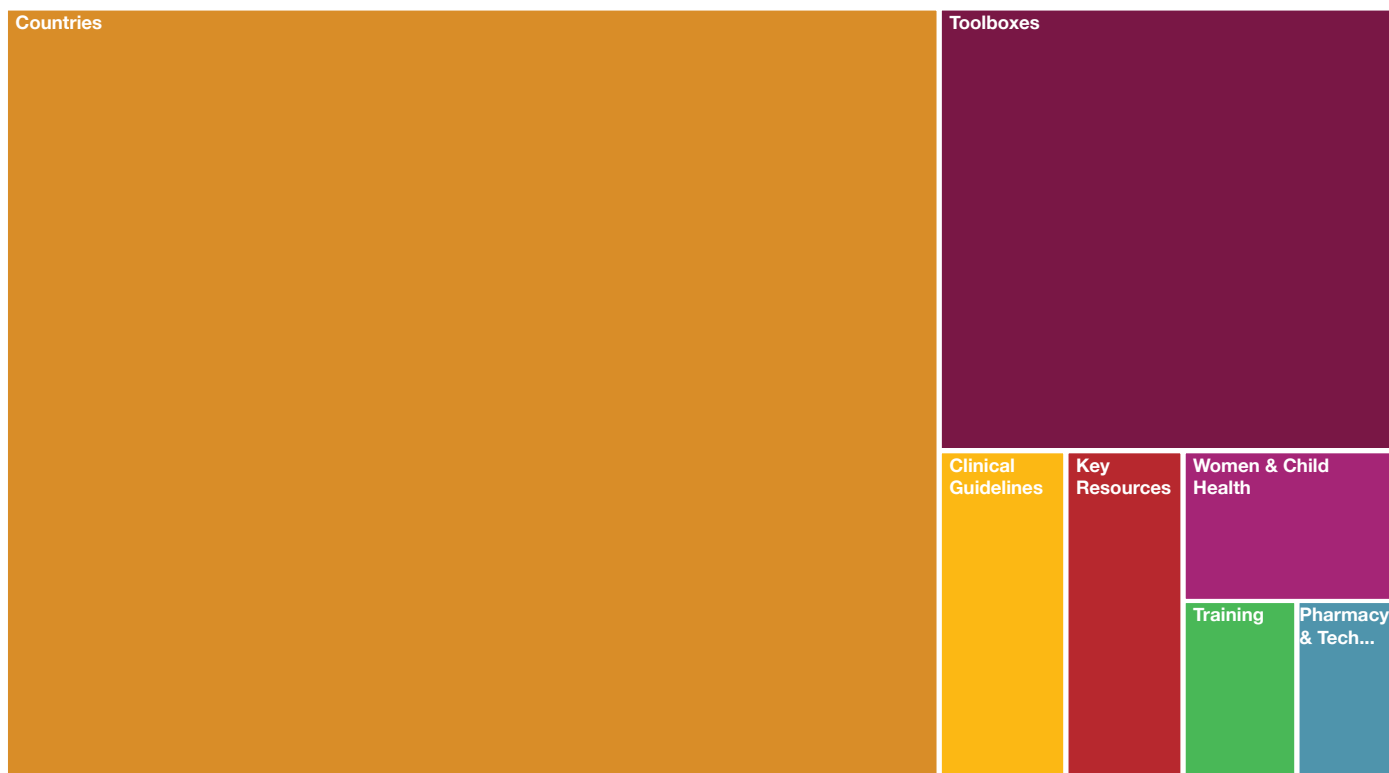


Figure 4: Seize of categories by number of downloads in 2021

1. COUNTRIES

The COUNTRIES section is among the **MEDBOX** top categories in the last years. In the COUNTRIES category, there are more than 9,300 documents included for almost all countries in the world that have been viewed more than 4.9 million times and downloaded more than 4.1 million times. We have tried to update the existing countries and to expand the francophone and Spanish-speaking countries. **MEDBOX** offers country-specific information from almost all countries in the world – some countries in more detail – others with only a few documents available.

Since the launch of **MEDBOX** 2.0 in March 2020, you have now different ways to select a country:

- Click directly on the world map and choose a country or a region
- Select a country from the drop-down list
- Type in directly the desired country in the search field
- Open the individual sitemap with click on this navigation arrow

2. TOOLBOXES

The TOOLBOXES are the unique feature of the **MEDBOX** online library. The TOOLBOXES contain practical, up-to-date information on select topics on a single page. This enables users to quickly overview and access different documents ranging from clinical guidelines, community health work papers, disabled people information, IEC material to policy papers. Currently, the 19 TOOLBOXES cover epidemic outbreaks, disasters, diseases, and other aspects such as: COVID-19, GLOBAL HEALTH EDUCATION, MENTAL HEALTH, EBOLA, NATURAL HAZARDS, CONFLICT, ZIKA, TB, CHOLERA, HIV, LEPROSY, POLIO, RAPID RESPONSE, REFUGEE, DISABILITY, SPECIFIC HAZARDS, AMR (Antimicrobial Resistance) and SOCIAL ETHICS.

In 2021, we had revised the TB TOOLBOX and expanded the countries from Latin America, i.e. Brazil, Chile, Colombia, Ecuador, and Peru. More countries will be added in 2022. We were able to realize this extension with the financial support of the “Stiftung Tuberkulosehilfe e.V”. We launched a new TOOLBOX in mid-November: The CAREGIVER TOOLBOX. In February 2022, we will launch the PHARMACY TOOLBOX, which we, unfortunately, could not publish this year due to time constraints. The idea and implementation of this toolbox came about through cooperation and funding with “Apotheker Helfen e.V”.

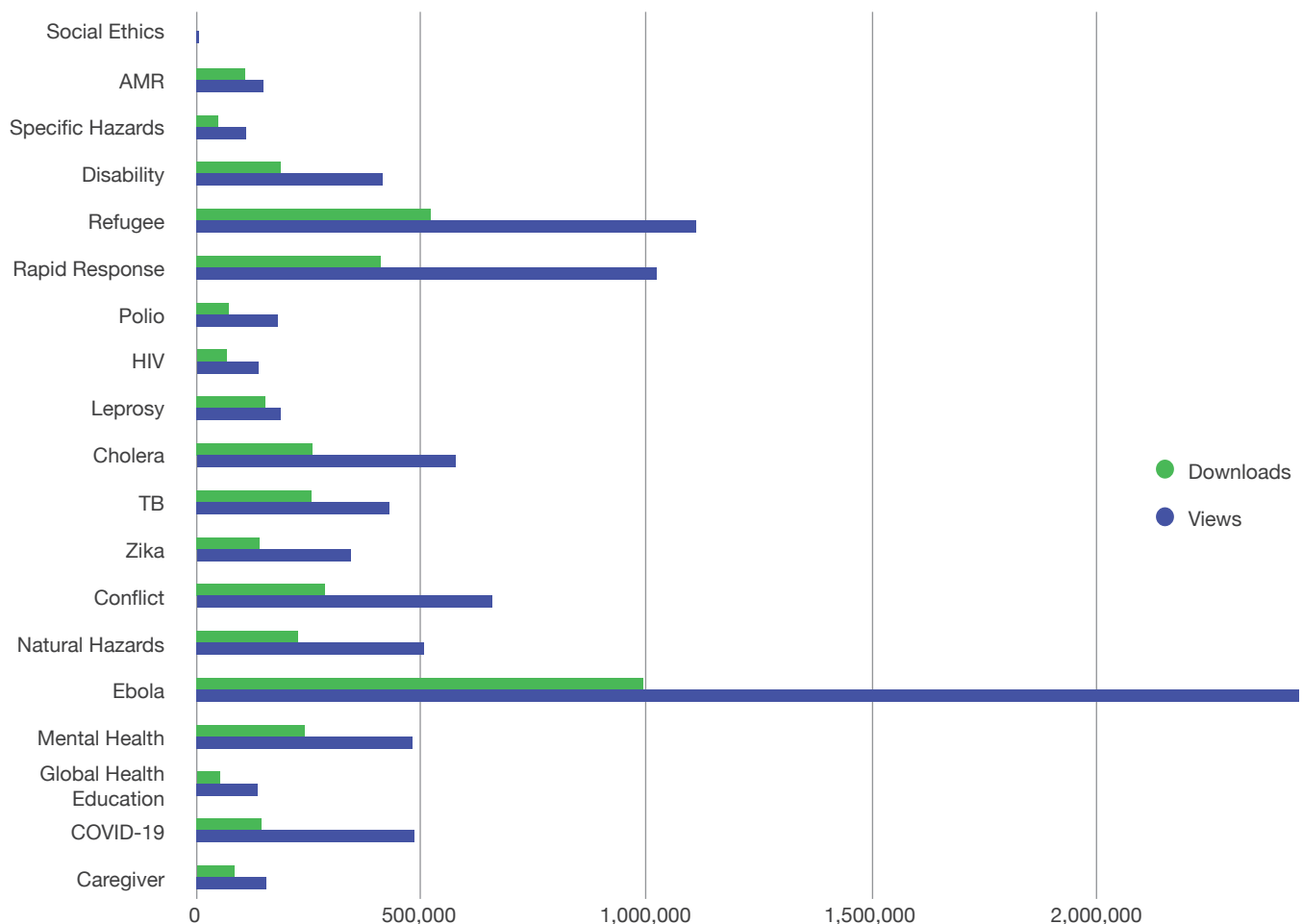


Figure 5: Views and downloads of the different Toolboxes since their launch

MEDBOX ISSUE BRIEF

The flood of information made it difficult for both the **MEDBOX** team and the users to keep up-to-date on a specific COVID-19 topic. New guidelines for treatment, infection control, immunization, clinical aspects, communication, etc., were constantly being published or updated every day. The **MEDBOX** team decided to publish Issue Briefs on various topics around COVID-19, which summarizes the most important documents.

In 2021 we published 12 Issue Briefs in different languages.

Numerous issue briefs have revolved around the topic of COVID-19 vaccinations: what kind of vaccines are available; how were they developed; what myths and misinformation are spread in social media; how can I argue against them; what educational materials are available in different languages:

ISSUE BRIEF NO.7: [Impfung & COVID-19 \(German\)](#):

Vaccination against the spread of the SARS-CoV-2 virus is a milestone in the fight against the pandemic. Good communication and education of the population are essential for the success of the vaccination. This issue brief includes some information on the vaccination strategy, implementation of the vaccination, ethical considerations, and educational materials in German and English.

ISSUE BRIEF NO. 8: [COVID & Vaccination](#):

This issue brief has the same context as issue brief no. 7, but focuses on English-, French- and Spanish-language materials.

ISSUE BRIEF NO. 9: [Fair global distribution of COVID-19 vaccines](#):

Fair access to vaccines is an important concern of **MEDBOX** and the Mission Medical Institute. We have advocated that everyone in the world must have access to vaccines. Together with other NGOs and church organizations, we have campaigned for the temporary suspension of patent protection. The temporary suspension of patent rights on medical products in the fight against COVID-19 for the duration of the pandemic is significant because it greatly accelerates the willingness to find relevant solutions and compromises.

Everyone, everywhere who could benefit from safe and effective COVID-19 vaccines should have access as quickly as possible, starting with those at the highest risk of severe disease or death. The fastest way to end the pandemic is to ensure that everyone has access to vaccines. At the moment, however, only a few countries have universal access to vaccines, which means that the virus will continue to mutate, cross borders, and wreak havoc around the world, which we are now seeing daily. The Delta variant already showed us how quickly the virus could spread, but Omicron seems to be surpassing this.

ISSUE BRIEF NO. 11: [COVID-19 Vaccination & Communication](#)

ISSUE BRIEF NO. 12: [Vaccine hesitancy](#)

ISSUE BRIEF NO. 16: [Myths & COVID-19 Vaccinations](#) (in English and French)

In Issue Briefs no. 11,12 and 16, we focused on different ways to educate people about vaccination and the development of vaccines, strongly counter rumors and fake news with arguments, and educate people with proofed and high-quality materials increase the willingness to vaccinate.

Other Issues on different topics or languages were published:

ISSUE BRIEF NO. 15: [Long COVID](#):

Here we focused on long-term effects of coronavirus infection: Long COVID (also known as long-haul COVID, post-acute COVID-19, long-term effects of COVID, or chronic COVID. Long COVID is

a complicated mix of various symptoms, i.e. extreme tiredness (fatigue); Shortness of breath; chest pain or tightness; problems with memory and concentration (“brain fog”); difficulty sleeping (insomnia); heart palpitations; dizziness; depression and anxiety; tinnitus; a high temperature, cough, headaches, sore throat, changes to sense of smell or taste.

ISSUE BRIEF NO. 13: [Краткий обзор COVID-19:](#)

A collection of guidelines, vaccine information, education material on COVID-19 in Russian.

ISSUE BRIEF NO.14: [Earthquake Haiti: Guidelines and Resources:](#)

On August 14, 2021, the earthquake was almost as strong as the severe quake in 2010, which killed about 300,000 people. At least 2,248 people were confirmed killed as of September 1, 2021, and above 12,200 have been injured. More than 52,000 houses were destroyed and more than 77,000 damaged.

MEDBOX has already created the Natural Hazard Toolbox after the severe earthquake in 2010 and has collected many essential materials on health care, shelter & reconstruction after an earthquake in English, French, and Kreyol there. In this issue brief, we provided a quick overview of the most important information

ISSUE BRIEF NO. 17: [Women Cancer:](#)

According to the World Health Organisation, nearly three million women are diagnosed with breast or cervical cancer every year. The risk of cervical cancer increases six-fold for women living with HIV, but many have not had access to vaccination or screenings. On November 17, 2021, WHO joined advocates worldwide to commemorate a landmark Day of Action for Cervical Cancer Elimination and welcome groundbreaking new initiatives to end this devastating disease, which claims the lives of over 300 000 women each year. This special day will help raise awareness and mobilize action to eliminate cervical cancer.

“Cervical cancer causes immense suffering, but ‘ it’s almost completely preventable and, if diagnosed early enough, one of the most successfully treatable cancers,” said Dr.Tedros Adhanom Ghebreyesus. With this issue brief, we would like to give a short overview of ‘ women’s cancer, particularly breast and cervical cancer.

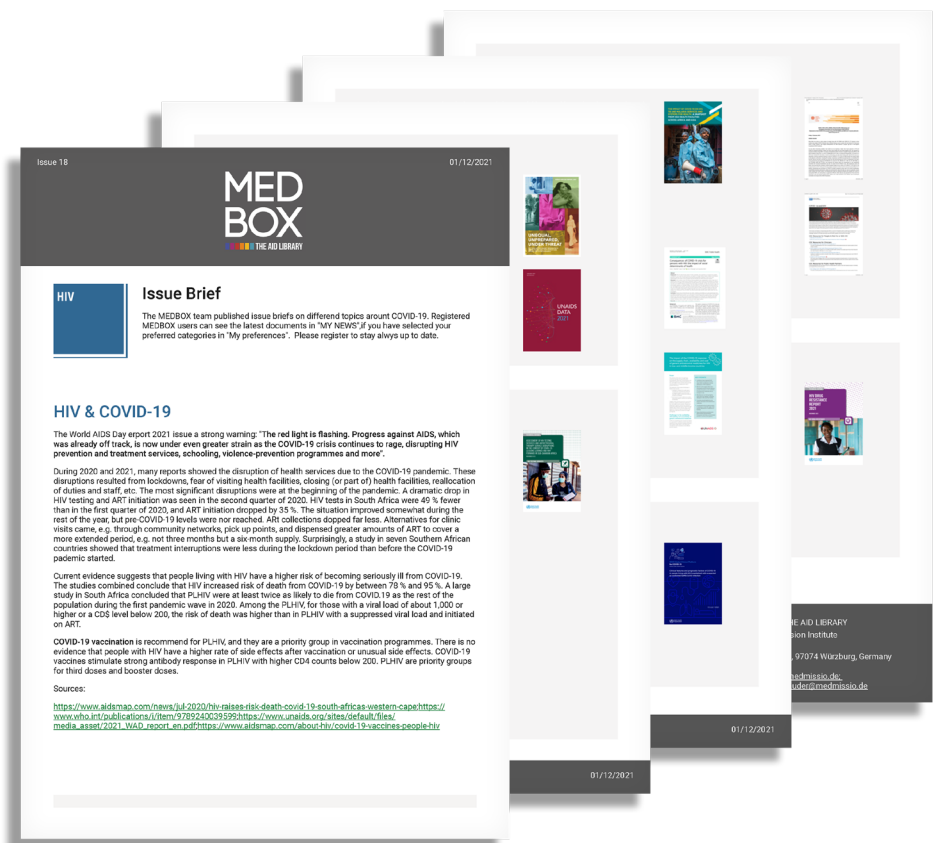


Image 2: Medbox Issue Brief No. 18: HIV & COVID-19 published in December 2021

ISSUE BRIEF NO. 18: [HIV & COVID-19](#):

The report for World AIDS Day 2021 contains a stark warning: “The red light is flashing. Progress on the AIDS response, already off track, is now under even greater strain as the COVID-19 crisis rages on, disrupting HIV prevention and treatment services, schooling, violence prevention programs, and more.”

The **MEDBOX** Team has compiled this issue brief on the impact of COVID-19 on PLHIV, HIV prevention programs, and HIV treatment for this ‘year’s World AIDS Day on December 1, 2021

ISSUE BRIEF: [COVID-19 in Arabic](#):

In this issue brief, we have summarized important documents related to COVID-19, such as clinical guidelines, infection and prevention guidelines, policy & strategies, educational materials such as posters and videos in Arabic. These materials have also been used in our webinars with Syrian health workers. The materials can be used directly and shared with other health workers.

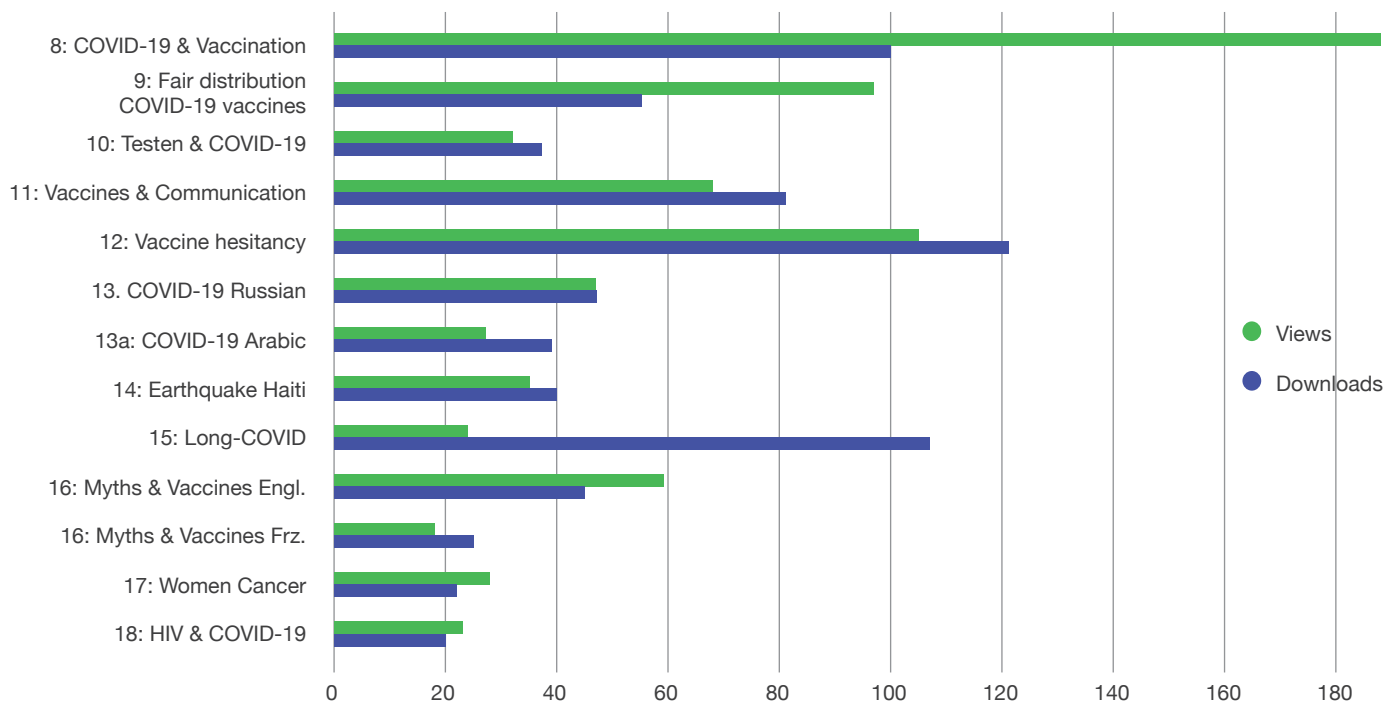


Figure 6: Views and downloads per Issue Brief

We distributed the issue briefs to our partners, donors, and more than 3.600 registered users. We got very positive feedback, here are some examples:

- “Thank you for sharing the report. It is an important issue to address, I also notice great challenges here in Uganda with lockdowns, transport access and utilization of health services.” (Uganda)
- “This information is very useful to combat misleading and disinformation myths” (Tanzania)
- “Thank you very much for sharing with me this useful information related to covid-19 the vaccines update.” (Somaliland)
- “Grateful for information and support” (Ghana)
- “These are very useful resources. Thank you for all the work behind it.” (Ecuador)

COVID-19 TOOLBOX

By Piet Reijer, medmissio – Institute for Global Health

The COVID-19 Toolbox was launched in 2020. It has been the fastest growing toolbox in **MEDBOX**. **MEDBOX** contains approximately 25,000 documents, and 16% are in the COVID-19 Toolbox. With the steady flow of new developments, we can expect a further increase of new documents. On the other hand, we have to see whether or not all documents are still up to date.

The year 2021 can be remembered for many events, but it was undoubtedly the year of the COVID-19 vaccinations. Never before was the introduction of a vaccine so much discussed and disputed. Several sections of the COVID-19 Toolbox are dedicated to issues around the COVID-19 vaccines. Some of these are dealing with issues like:

- Vaccination hesitancy
- Fair Allocation & Ethical Aspects
- Vaccination fake news and misinformation

The unfair distribution of vaccines has shown that a condition that affects all corners of the world has not resulted in a comprehensive approach based on solidarity. The contrary has happened. The High-Income Countries “snatched” the available vaccines, while the Low- and Middle-Income Countries were left behind with the crumbs of the cake. In Portugal, over 86% of the total population is fully vaccinated (with 98% of the people over 70), while in the Democratic Republic of Congo, only 0.1% of the population is fully protected.

Fake news and myths were commonly heard in 2020, in particular concerning (assumed) therapy. In 2021 this was fewer, and far more therapeutic possibilities became available. These are mentioned in the COVID-19 Toolbox in the chapter “Clinical Aspects”.

Thanks to the funding from Adveniat, we were able to expand the COVID-19 toolbox on the focus to countries from Latin America. Since the coronavirus first spread in Latin America in March 2020, the region had developed into the global hotspot of the pandemic. No other region of the world suffered from such dramatic infection rates and fatal courses of the Covid-19 epidemic. According to the Pan American Health Organization (PAHO), there have been 99,573,615 infected and 2,384,011 dead in the American Region since the beginning of the pandemic (PAHO Daily Update December 17, 2021); 46% of countries in the Americas continuing to report disruptions in health service delivery due to the pandemic.

A year ago, Mexico became the first country in Latin America to roll out COVID-19 immunizations. Meanwhile, 838 million vaccine doses of at least ten different vaccines have been given out in Latin America. With over 29 million doses, Cuba was the Latin American country with the highest COVID-19 vaccination rate. The vaccination coverage in other countries range from 85,4 % coverage in Chile, 71,3 % in Argentina, 66,8 % in Brazil to 38,8% in Bolivia. (Source: https://ais.paho.org/imm/IM_DosisAdmin-Vacunacion.asp accessed January 3 2022; <https://www.as-coa.org/articles/timeline-tracking-latin-americas-road-vaccination>). The latest PAHO data show that COVID-19 cases increased 50 % and deaths 11 % in the region of the Americas in one week. The Omicron Variant of Concern has been reported in 27 countries and territories of the Americas (Source: PAHO Update December 29, 2021)

A wide range of Issue Briefs on COVID-19 was produced (see Chapter “Issue Brief”). These issue briefs are widely distributed to people registered with **MEDBOX** and to many partner organizations and all sponsors.

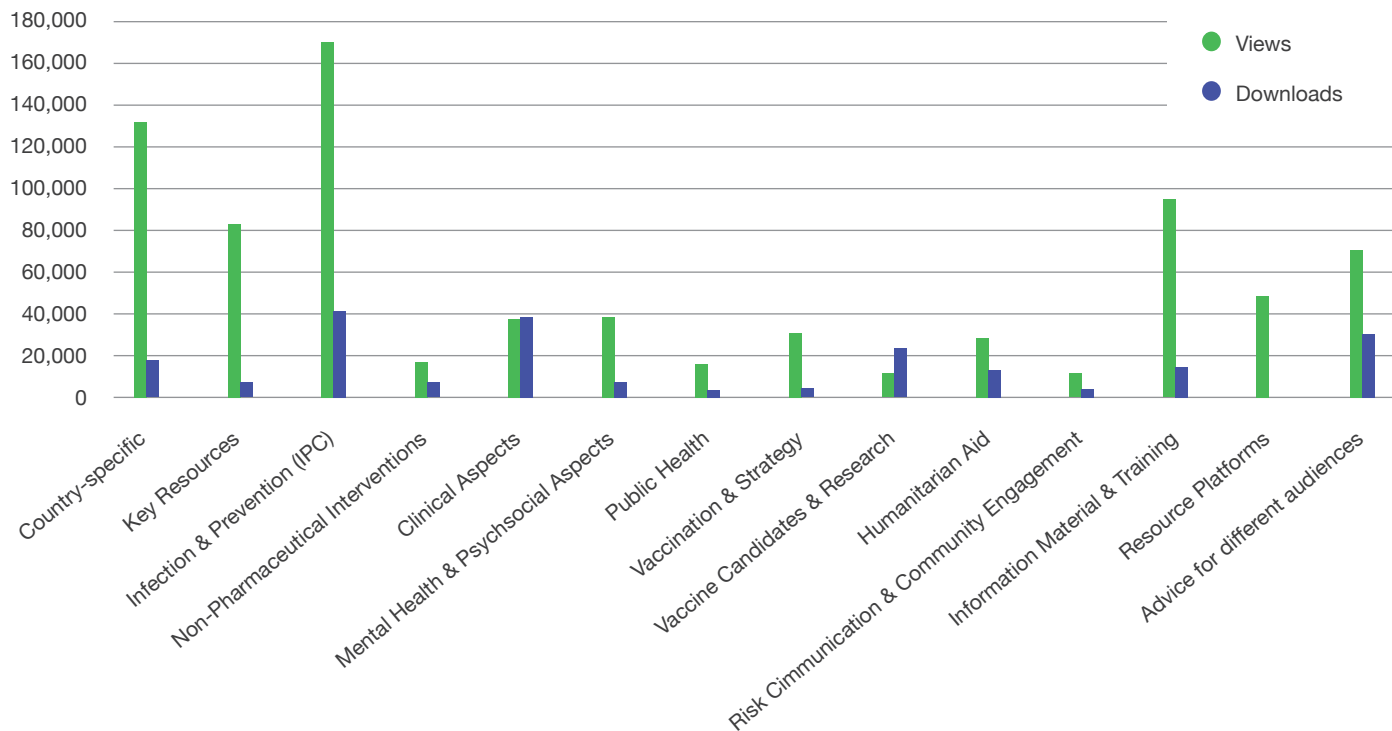


Figure 7: COVID-19 Toolbox document views & downloads by topic

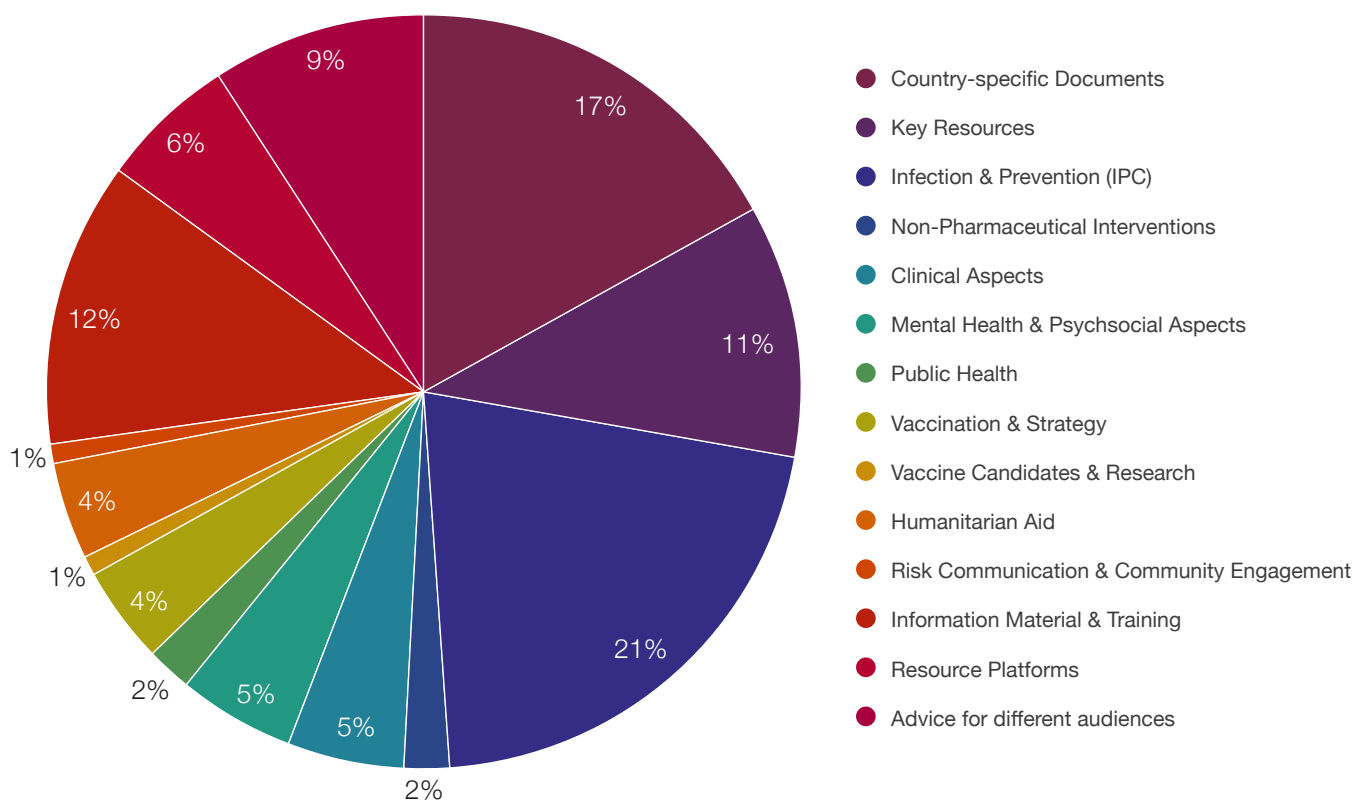


Figure 8: Views by topic of COVID-19 Toolbox documents

MEDBOX was able to realize the COVID-19 TOOLBOX thanks to the generous support of our various partners, i.e. Misereor, Plan:g Partnership for Global Health, Renovabis, Adveniat, two Dutch foundations, and private sponsor.

We are delighted to publish a report in this annual report from Dr Matovu (Uganda), who used the information of MEDBOX and the COVID-19 Toolbox in his workshops and training activities on COVID-19. This report shows how important the MEDBOX and its toolboxes are as a resource on the ground and how the materials can be included in the training. Many thanks to Dr Matovu for this impressive report and his commitment.

COVID 19 VACCINATION AND PERCEPTIONS AMONG SOME PEOPLE IN UGANDA

by Dr Matovu Alphonsus, Senior Consultant General Surgeon, Member of the Medical Mission Volunteers Overseas.

COVID19 is a new disease that broke out in 2019. It has now spread globally and still causing havoc around the world. Uganda first recognized the first case of COVID19 in March 2020. The international scientific community quickly recognized that vaccination would be a game-changer to overcome this problem. The vaccination drive has not been equitable worldwide. The high-income countries have had a more significant share of the vaccines available, while the low-income countries struggle for portions. Most low-income countries have so far depended on donations from different high-income countries. The donations come in doses; therefore, only bits of the population can be vaccinated depending on the vaccine availability. In addition, there are also inbuilt perceptions in the public about vaccinations which may promote or limit access. On the other hand, we are seeing new emergent spikes of COVID 19 even in countries where vaccinations have been high among the population. A new mutation the Omicron is also spreading, and we are already witnessing restrictions to prevent the spread of this variant.

COVID 19 SITUATION IN UGANDA TODAY.

Uganda has had two waves of COVID19 infections. As of December 2021, the country has registered 127,775 positive cases and 3258 deaths. By the middle of November 2021, 3,838,439(8.4%) of the population had received the first dose. Those fully vaccinated were 912,983(2.0%) of the population. As of now, vaccinations are going on, but coverage is still low.

TYPES OF COVID 19 VACCINES AVAILABLE.

According to the WHO, several COVID19 vaccines have been approved for emergency use by several countries. In Uganda, we have had Astra Zeneca, Pfizer BioNTech, Moderna, Johnson and Johnson, and Sinovac. Most of these are donations from different high-income countries. Different posters have been pinned at the health facilities to show the different types of vaccines in use in Uganda, and once available, they are used concurrently.

PUBLIC PERCEPTIONS ABOUT THE VACCINE.

When the vaccines were introduced for the first time, most people were hesitant to receive the vaccines. This was when blood clots were reported as a complication of the AstraZeneca vaccine. Despite the worldwide reports of this complication, the government imported the Astra Zeneca vaccine for use in Uganda. It was primarily considered safe compared to the reported complications, but the public had fear in addition to other myths associated with vaccines. Some of the views from the public about vaccines are as follows.

Many people I have interacted with consider the vaccine good and protective. You will find expressions like “got both doses of the vaccine and I have no problem”.

However, some have negative views like the following:

1. I do not like the vaccine; I do not have a reason, though.
2. The vaccine is said to be magnetic. When you apply a phone on the immunized side, it sticks. When you apply it on the non-immunized side, it does not stick. The vaccine may therefore affect my life.
3. I got the first dose, but I cannot get the second dose. I may reduce my immunity.
4. The vaccine may make me impotent
5. This vaccine may kill all Africans in two years.
6. Most vaccinated people also die of covid, so it is not helpful.
7. My wife is pregnant. What if it affects her?
8. COVID is not real, the government is looking for ways of eating money.
9. We do not have COVID. It is just politics.
10. I do not want to talk about COVID.
11. COVID causes infertility. I may not bear children.
12. One dose of the vaccine should be enough; why get a second one?
13. I had a bad reaction on the first dose, and I cannot get a second dose.
14. I prefer the Johnson and Johnson since it is a single shot.

After the second wave in which the country experienced a high number of COVID 19 infections and fatalities, there has been a little change in the perceptions. More people have yielded to the call to receive the vaccine. The limitation will be availability. In addition, the vaccination centres are still limited, inhibiting access to the vaccine among the rural populations. Vaccinations are conducted in health facilities at the hospital level and organized outreach posts within the community.

It is also eminent that vaccinated people feel more secure. There is a relief that you feel when you are vaccinated. But also, some of the vaccinated do not feel the obligation to observe the Standard Operating Procedures. It is good to inform the public that the vaccine protects people from severe illness and hospitalization. You can still get infected when you are vaccinated and can infect others who can subsequently get severe disease and hospitalization.

As we struggle to have several people receive the first dose, I am aware of recommendations to give booster doses because of the waning immunity. This is still far-fetched for Uganda. The focus now is to administer at least one dose of the vaccine to the eligible population.

My observation in Uganda is that whenever a wave declines, lockdowns are lifted, and the public resumes normal life, observing the Standard Operating Procedures is dropped. No masks, no social distancing, no washing hands, overloading of public vehicles, and the public is caught off guard in case of the resurgence of COVID 19.

These are my views on the strategies for the present and future pandemics:

1. Prevent new emerging diseases. There is a need to prevent new emerging diseases. The world needs to strengthen environmental protection and other factors that initiate disease transmission. Suppose many more diseases of this kind keep attacking the human population now and again, there will be a lot of continuous destabilizations to the normalcy of human life, social order, and economic growth. Pandemics can also be a precursor for the decimation of human populations.
2. Disease detection. We need to develop mechanisms of disease detection, more so for the new emerging diseases. Disease detection needs systems set up that are directed to disease detection. The principle that I advise on always is always to have a high sense of suspicion maybe something is occurring differently for the first time. It also requires building strong systems that can cope with new health-related challenges.
3. Strategic control. Covid19 has exposed loopholes in disease prevention and control worldwide. Maybe something could have been done in the initial stages of the pandemic if there had been

international strategies to manage such a situation. We need to continuously practice Infection Prevention and Control as a routine, for the health facilities, and the community.

4. Equity in disease management. The inequalities faced with the vaccine distribution show that inequalities still exist between low-income and high-income countries. Countries with strong economies, money, lobby, and power could easily access the vaccines than countries with weak economies like in Sub-Saharan Africa.
5. Investments in health. Low-income countries need to increase investments in health to prepare for emergent diseases. As of now, despite poverty, there are few investments in research and health. Most budgets in low-income countries are less than 15% of the GDP as recommended in the Abuja Declaration. Failure to fulfill the recommendations of this declaration will leave health sectors in low-income countries struggling. A strong health sector is important to allow for prevention, detection, and control principles for pandemics.
6. Address vaccine-related myths. There is a need to address the myths associated with the COVID19 vaccines continuously. Every time myths come up, limit utilizations of the vaccines. Myths have to be counteracted with credible information, for example, the information on **MEDBOX**.
7. Living with COVID19. I also think the world needs to be prepared to live with COVID 19 for a very long time. New approaches have to be proposed on how to live with the virus. In Uganda, schools have been closed for nearly two years. For how long can this go on? Many children have dropped out of school with a significant rise in teenage pregnancies. This has a big bearing on the generations to come. Other sectors of the economy have been closed for two years; you wonder how people in these sectors cope with making a living. We need systems to cope with the virus so that life is not disrupted.

My mission is to continue supporting infection prevention and control as a key intervention in epidemic control. I acknowledge the Medical Mission Institute for the vaccine advocacy and supporting me in Infection Prevention and Control interventions. I acknowledge **MEDBOX**, a product of the Medical Mission Institute, for making scarce information available. This is a good help for us as educators.



Image 3: COVID-19 communication and education in Uganda (Photos: Dr. Matovu)

COVID-19 WEBINARS FOR HEALTH WORKERS IN NORTHEASTERN SYRIA

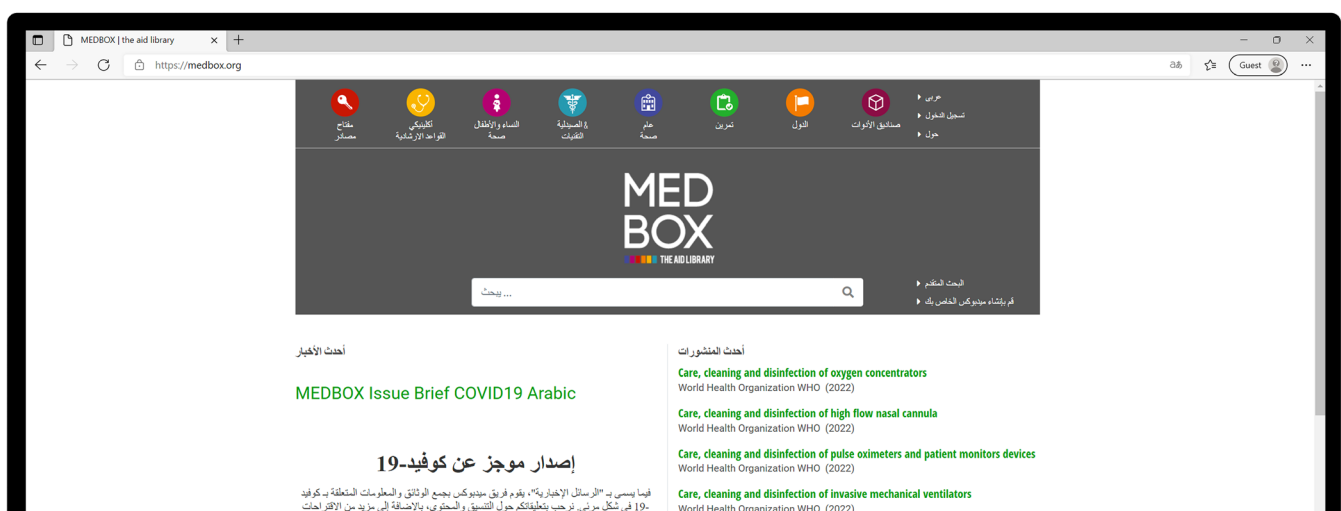
By Hussein Ahmed, medmissio – Institute for Global Health

Syria is one of the countries affected by the current COVID 19 pandemic; even though the WHO Syrian dashboard claims that there have been 50.502 cases so far, this number is still relatively low compared to the neighbouring countries. There may be several reasons for this, including a weak health system overwhelmed by the war for nearly a decade, as well as the difficulty of collecting data and performing COVID tests for all suspected cases.

During the COVID-19 response webinars for more than 100 health workers in northeastern Syria, we noticed that trainees needed reliable sources of information and references they could rely on for their daily work, so we included a lecture about the **MEDBOX** and explained the concept of **MEDBOX** as an online library containing useful information for health workers that anyone from anywhere at any time can access. We also explained the idea behind the **MEDBOX** and how it can help humanitarians and health care workers who are working under resource constraints and have limited access to basic information. As a result of this session, several trainees have registered on the website as members, and many public health workers among the trainees expressed excitement about the website and praised it, and informed us they wanted such a resource for a long time.

The language barrier is one of the biggest challenges and obstacles for us as well as for those in the health sector and public health who do not speak English, so we have published the **MEDBOX** Arabic version, and we have also provided Arabic references and sources so many health workers in Syria and other Arabic countries can benefit from it. Issue brief of COVID-19 was issued. We shared this brief with the health workers in northeast Syria and noticed it was viewed, and downloaded dozens of times. Several resources are included in this issue brief concerning the clinical treatment of COVID-19 disease, and references and sources on preventing and combatting COVID infection, such as vaccinations and non-pharmaceutical interventions and how to manage the workforce during the response to the COVID pandemic and some educational publications. More than 800 documents in Arabic are now included in different categories.

We are eager to continue translating the site into other languages and adding references written in Arabic or other languages and we believe that a short session about the **MEDBOX** library should be included in all training that MMI will conduct. Linking the participants during any training with the **MEDBOX** helps them to understand the structure of the library and make it easier to be used.



CAREGIVER TOOLBOX

By Antje Henke, medmissio – Institute for Global Health

Over the past fifty years, caregivers such as nurses and community health workers (CHWs) have played an increasingly important role in stabilizing health care and improving the health status of populations. Research and evaluation provide compelling indications that caregivers are critical for helping health systems achieve their potential, regardless of a country's level of development. In low- and middle-income countries (LMICs) in particular, caregivers can achieve significant improvements in priority health areas, including reducing child malnutrition, improving maternal and child health, providing palliative care, expanding access to family planning services, and helping to combat infectious and noncommunicable diseases. Caregivers are key members of the health team and are essential for providing primary health care and health promotion.

Caregivers may contribute to reducing the burden of disease by participating in the treatment of hypertension, in the reduction of cardiovascular risk factors, in control of diabetes, in the management of HIV infection, in cancer prevention, and palliative care, especially among hard-to-reach populations if they have easy access to timely and relevant health information. The **MEDBOX** team has recognized this lack in providing the latest and most essential health information to caregivers and is now seeking to address this target group.

Free online publications on key health information, guidelines for management and patient care, good practice reports, standard operating procedures (SOPs) and training material relevant to caregivers have increased significantly in the last decades. However, the focus here is more on health information in Western countries. More intensive research and selection of articles are needed to address the target groups in LMICs, as they often operate in environments with different working conditions, training standards and, lack of resources.

For the **MEDBOX** team, it was challenging to precisely screen and evaluate this information and decide whether it is also relevant to the practice of caregivers in LMICs. However, with the help of our colleagues in Tanzania, Kenya, and India, we have succeeded in creating this target-group-oriented toolbox.

Another challenge is evaluating well-being and self-care documents, as they are also commonly not targeted to caregivers in LMICs. However, this was not a reason for the **MEDBOX** team not to include this information into our toolbox collection, as it is generally crucial to all caregivers and could provide an incentive for nurses and community health care workers in LMICs to think about self-care more often in the years to come.

The Launch of the CAREGIVER TOOLBOX was on November 15, 2021. This toolbox differs from the other toolboxes published on **MEDBOX** in that the topics selected are specifically targeted to caregivers in LMICs. In these countries, caregivers are the first contact on health and the link between daily life and health systems. Consequently, the **MEDBOX** team must focus on key issues and provide targeted support to adapt and strengthen their work at the community level to better standards of care. The CAREGIVER TOOLBOX provides the target groups with an easy and cost-free guide to the most relevant topics in nursing and care.

Presently, the CAREGIVER TOOLBOX holds more than 452 documents. Some of the documents included are additionally linked to appropriate categories in the **MEDBOX**. Since its launch in November 2021, caregiver-related documents have been viewed more than 156,150 times and downloaded more than 85,430 times. The most selected categories are patient care, standard

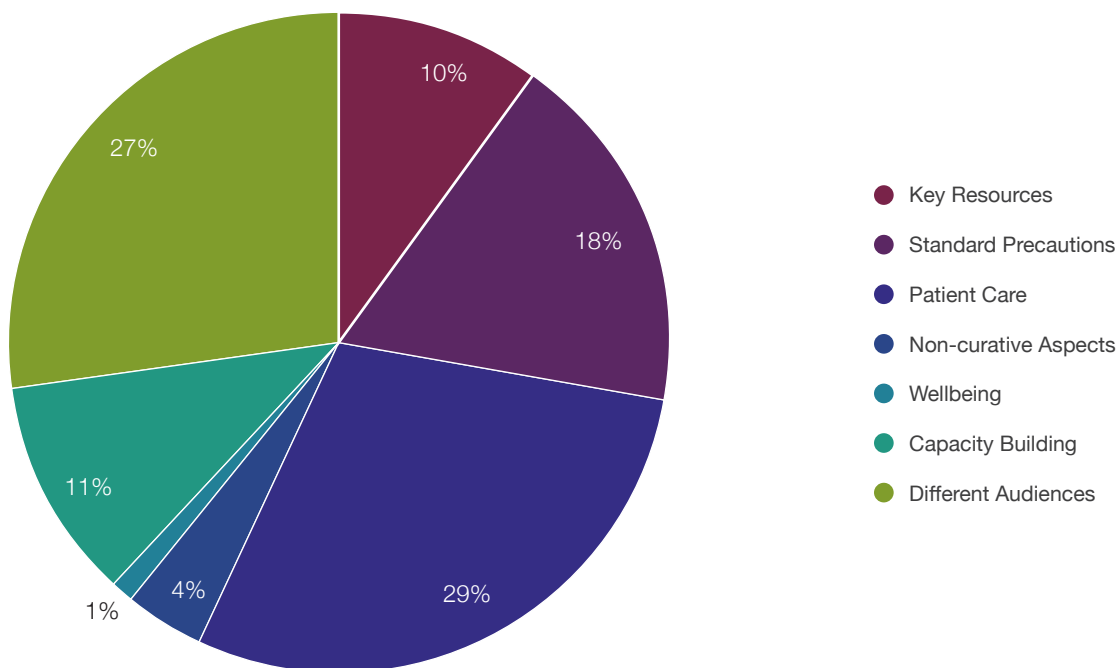


Figure 9: Caregiver Toolbox document views by category.

precautions, followed key resources.

This toolbox is the first to focus on patient care. The patient care category includes the latest information on intensive care, wound management, triage, and palliative care, among other features. In addition, target groups can improve their standard precautions with 25 online training courses and 16 videos. Over 35 documents provide information on stress reduction, extreme situations, and mindfulness in the well-being category.

To create this toolbox, our team was financially supported by the Deichmann Foundation and a private donation. Furthermore, the MEDBOX team works directly with nursing professionals from the Catholic Health Association of India (CHAI), Tanzania, and Kenya to supply the information in a target group-oriented way. A big thank you goes to Bianca Henninger, a trained nurse who is currently studying for a Master's degree in Nursing and Health at the University of Applied Sciences in Germany, who supported us with identifying the sitemap and categories and research of relevant documents.

The CAREGIVER TOOLBOX (www.caregiverbox.org) is now the 19th toolbox to provide up-to-date specific expertise quickly and easily accessible to healthcare professionals worldwide.

REFUGEE TOOLBOX

By Nadja Rupp, medmissio – Institute for Global Health

Covid-19 continued to have a major effect on the daily lives and quality of life of refugees, especially children and their families, last year. The hope that things would return to “normality” was largely disappointed.

The project “Health Care for Refugee Children in Lower Franconia”, which was started in 2020 in cooperation with the Medical Mission Institute Würzburg and the government of Lower Franconia and supported by Bavarian State Ministry for Family, Labor, and Social Affairs was continued to improve the health of refugee children and their families in accordance with the UN Convention on the Rights of the Child.

Last year, the focus was on collecting data on children’s health and health care. In the 46 largest shelters in Lower Franconia, vaccination records and examination books were examined and interviews with families were conducted. It turned out that one region, in particular, has major deficits and gaps and that families here face major challenges when it comes to basic health care for their children. A lack of paediatricians, sometimes long journeys to doctors by public transport, a lack of kindergarten and day-care places with very long waiting lists, or extremely high hurdles when dealing with the authorities make everyday life difficult for the refugees here.

The follow-up project aimed to establish a regular presence in the shelters of the selected region to offer low-threshold help with health issues and to support children and their parents in coping with medical problems. The approximately 550 residents spread over four shelters accepted the implementation of the twice-weekly consultation hours very well and they were quickly well attended. Making appointments with paediatricians, family doctors or specialists, minor medical treatments, organizing medication, organizing arrangements with authorities and welfare organizations, or even talking about mental health or everyday problems are some of the tasks that were done during the consultation hours.

To not only improve the medical situation of children but also to enable a child-friendly development, both psychologically and socially, a new project was started in close cooperation with the violence prevention coordinator. A child-friendly room was found and colourfully and attractively designed by a refugee artist who lives in one of the shelters. Volunteers were recruited to look after the children regularly.

For many children, a visit to the doctor or hospital is a scary situation. Completely understandable - adults in white coats speak in an incomprehensible language, there are syringes, bandages, and bad-tasting medicines. Yet a visit there is supposed to help the little patient get well again and not to stir up fear or panic. This was the reason, why we started a new small initiative: the Teddy Clinic: in a playful way, the children are supposed to perform a role reversal with us and go to the hospital themselves as healthy “teddy parents” with their soft toys.

Through this experience, here in the role of the non-affected, we hope to take away the horror and threat of the situation and link it to positive memories; at the same time, the children should learn through the teddy clinic that a visit to the doctor or hospital does not always have to be associated with unpleasant things.

The children were fascinated and had a lot of fun treating their “teddies”, therefore we have planned further events in 2022.

The Refugee Toolbox continues to be a great enrichment for the work with refugees. With the expansion to German and Arabic, even more refugees, volunteers, and other actors in refugee assistance now have access to the relevant information and materials. Especially because the focus of the project is on children and their families, the category “Children” in the Refugee Toolbox has been further expanded and is very important for daily practice, both for refugee families and for volunteers and experts.



Image 4: Teddy Clinic & COVID-19 Vaccination Information in a German Shelter

COVID-19 VACCINATIONS AMONG REFUGEES IN COMMUNITY SHELTERS IN LOWER FRANCONIA

By W. Seitz, medmissio – Institute for Global Health

Since the beginning of the year, the Missionary Medical Institute has been involved in COVID-19 vaccination education for asylum seekers in collective accommodation. As for everyone, the COVID-19 pandemic has a major impact on the daily lives of asylum seekers: they live in close quarters, often in twos or threes, have left their families behind in the war in Syria or Afghanistan and are very concerned about the pandemic situation in their home countries. In case of a COVID-19 outbreak in their accommodation, usually either a whole building or even the whole accommodation is quarantined - this affects very many people at the same time.

As far as vaccination is concerned, it quickly became clear that people living or working in asylum shelters are at high priority due to their precarious living conditions. But before people can decide for or against voluntary vaccination, they need adequate information. And preferably in a language they can understand - which is not always easy for refugees from Afghanistan, Somalia, or a former Russian republic.

Thanks to funding from the Würzburg Tuberculosis Aid Foundation, I was able to visit most of the 46 largest shelters in Lower Franconia and hold more than 1,000 discussions about the pros and cons of COVID-19 vaccination. In the process, I worked with two shelter residents, both of whom studied medicine, who helped translate into languages such as Arabic, Russian, French, and Somali. Especially with undecided people, simple information is very important and leads to a better decision. The materials and videos in the Refugee Toolbox on vaccination education in different languages were enormously helpful.

The acceptance of vaccination depends very much on one's background, education, and the community in which one moves. Misinformation and myths spread on social media had to be dispelled in long conversations before anyone could decide to vaccinate. Vaccine hesitancy is a huge problem in all countries and cultures worldwide. The **MEDBOX** team created issue briefs on the topic of "Vaccination & COVID-19" and "Myths & COVID-19 Vaccination" with educational materials and background information for refugees and volunteers.

Another problem was that due to the jurisdiction of the different health departments, the implementation of the vaccination campaigns was very heterogeneous: preparation, documentation, type of vaccine used, etc. - all this varied from region to region.

And last but not least, it took some time before mobile teams were sent to the shelters because of known difficulties such as vaccine shortages and distribution problems. From May to July, however, most residents of asylum shelters had the opportunity to be vaccinated.

Finally, many of the initially hesitant people decided to get vaccinated by their family doctor in the second half of 2021 on the basis of the personal vaccination education we provided.

PHARMACY TOOLBOX

SUPPORTING THE KEY RESOURCES FOR KNOWLEDGE AROUND MEDICINES

By Wiegand, A.; Apotheker helfen e.V.

The World Health Assembly approved the concept of Essential Medicines at the end of the 70ies last century. They laid the basis of standardized medicines lists in many countries adapted towards the main occurring diseases reflected in national treatment guidelines. The medicines procurement and whole supply changes improved based on the standardized approach covering around 90% of the most common health issues.

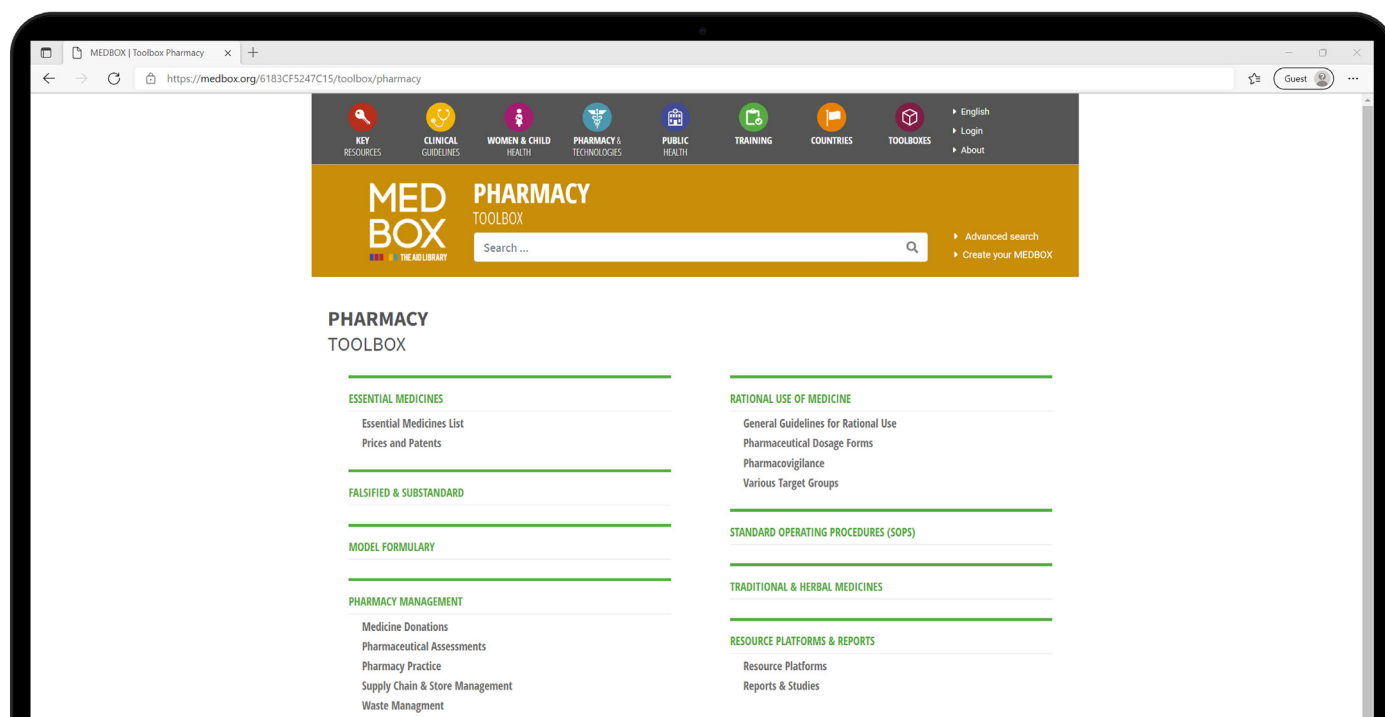
Many health workers in low-income countries still lack vocational pharmaceutical training. Pharmaceutical literature, formularies, and databases on medicines are not available as books or as costly electronic sources requiring stable internet access.

MEDBOX and the soon extended content on medicines and pharmacy is a gateway to key resources. National Essential Medicines Lists, Treatment Guidelines, formularies, tools and guidelines on rational use of medicines, information of substandard and falsified medicines are some of the main categories accessible.

Although the worldwide pharmaceutical industry offers a lot of manufactured finished dosage forms, medicines need to be prepared for specific patient groups as preparation individually prepared at best by a pharmacist. Only reliable data should be utilized to guide the so-called extemporaneous preparations. The Pharmacy Toolbox leads to serious scientific databases to prepare good quality preparations.

Volunteers from the NGO APOTHEKER HELFEN e.V./German 'Pharmacists' Aid are supporting the content of the Toolbox. Knowledge sharing is a gift for the recipient, but it will never reduce it on the donor side.

Almost all medical interventions today depend on the use of medicines. The key pharmaceutical knowledge is the key for a rational use for the patient's benefit. The toolbox is expected to be ready for launch in February 2022.



OUTREACH ACTIVITIES

Unfortunately, we couldn't attend congresses in person in 2021, but we tried to present the **MEDBOX** as far as possible at virtual conferences and workshops.

We published translations for our **MEDBOX** video clips in French, Spanish, Portuguese, Russian, and Arabic. These translations can be viewed as subtitles in the videos on our [YouTube Channel](#).

We launched our **MEDBOX** video clips with four videos on **MEDBOX** and how to use them in December 2020:

1. [MEDBOX – The idea behind](#)
2. [MEDBOX – How to find documents](#)
3. [MEDBOX – My MEDBOX Features](#)
4. [MEDBOX – Toolboxes](#)

The videos have been viewed more than 750 times.



Image 5: Screenshot of the MEDBOX YouTube Channel.

The videos are created to promote the **MEDBOX** and guide our users on the usage of the different features.

Besides the videos, the **MEDBOX** team participated in several online conferences and events to promote the **MEDBOX**. The major target group was students, i.e. Humanitarian Symposium in Munich; Foring- Forum für Internationale Gesundheit e.V. or the outgoing professionals from the NGO German Doctors.

Another target group was the Medical Mission Institute and the GIZ partners during the webinars on COVID-19 for health care workers in Northern Syria in 2021.

OUTLOOK

In 2022, we plan to improve the technical handling of our website, including advanced search, filtering, and faceting search results. We also want to expand the topics of our issue briefs to include more specific content and restructure some of the older categories. We have already published Issue Briefs beyond COVID-19 this year, e.g. on Women Cancer, and would like to tackle this more in 2022. We would also like to start a newsletter or publish the “TOP 10” documents of the month.

Of course, we will launch new Toolboxes in 2022! Besides the already mentioned Pharmacy Toolbox, we are still working on a Planetary Health Toolbox.

The interrelationship between human life and livelihood and the environment has become increasingly important in recent years. Anthropogenic activities have become the main cause of global environmental change. The emerging concept of Planetary Health offers a holistic perspective to understand the challenges and provide solutions for sustainable living and the development of all people on this planet.

“Planetary Health” works in an interdisciplinary way and addresses the interconnections between human health, the economic and social systems, and the natural habitat of our planet. Thus, the concept examines, among other things, population growth, poverty, life expectancy, energy consumption, water consumption, settlement areas, loss of tropical forests, water scarcity, ocean acidification, carbon dioxide emissions, temperature changes, and the loss of biodiversity.

Given the diversity and broad spectrum of aspects of planetary health, it will be increasingly important in the future to raise awareness of this interdisciplinary approach at the scientific, political, civil society, and ultimately the entire public level. We will try to implement this with the new Planetary Health Toolbox.

In addition, we hope to participate again in 2022 in a series of conferences, not only virtually but also in person, to promote **MEDBOX** to all those who need access to quality health information. We would like to include short sessions about **MEDBOX** in all training activities conducted by medmissio. Linking the participants during any training with the **MEDBOX** helps them to understand the structure of the library and make it easier to be used and will expand our daily users and hopefully also the registered users.

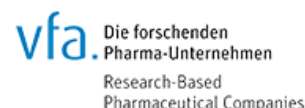
We look forward to receiving feedback from users and partners on our implemented and planned activities.

PARTNERSHIPS

The **MEDBOX** Team would like to thank all our partners who have supported **MEDBOX** since the beginning. We always like to welcome new partners who would like to support us with their expertise or financially.



Bayerisches Staatsministerium für Familie, Arbeit und Soziales



SOCIAL MEDIA

Please visit our homepage at www.medbox.org.

Additionally, you can follow latest developments of the **MEDBOX** project on Facebook or Twitter.



CONTACT

MEDBOX is brought to you by medmissio – Institute for Global Health (Formerly: Medical Mission Institute). Feel free to contact us for further information at info@medbox.org.

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MEDBOX — The Aid Library

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