

## Responding to 'Countries in Need'



Professor Lai-Meng Looi Chair, Countries in Need Programme World Association of Societies of Pathology & Laboratory Medicine (WASPaLM)

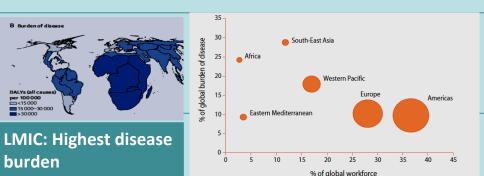


## International Pathology Day 2016 Roundtable

#### **About WASPaLM**

- Global network of Societies of Pathology and Laboratory Medicine (1947-)
  - 45 Societies in all WHO regions
  - Mission: Promote global health by promoting the teaching and practice of all aspects of Pathology/Laboratory Medicine
  - Acts through collaboration with Member Societies and cooperation with other international organisations (e.g, WHO, CIMOS, IFCC, APFCB, ISO TC212., Labs-are-vital)
  - Activity focus: (1) Global issues evolving roles and practices of the profession (2) Inequalities of health - challenges in countries-in-need

#### 'Countries in Need': What are the facts?





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Shortage of pathologists: SSA - 1 AP:1 million; Laos - 1 AP:5 million; Cambodia - 8 pathologists to 14 million; Vietnam 1: 250,000; Myanmar 1:170,000; China needs another 100,000 pathologists.

Variable standards. Lab accreditation: India (1%); Africa (10%); Myanmar, Laos, Cambodia (none). EQA not a standard practice.

**10/90 Gap:** Only 10% of global spending on health research is devoted to diseases or conditions that account for 90% of the global disease burden.



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### Addressing the challenges: WASPaLM's approach

## Capacity-Building

- Education for countries-in-need
  - Intensive seminars and workshops in South-East Asia, Sri Lanka, India, Middle-East and Africa
- World Pathology Foundation Gordon Signy Fellowships (1975-)
  - 52 beneficiaries from 22 countries (LMIC)
- Support of WASPaLM Societies
  - RCPath (UK) initiative in Myanmar
  - · Value add to National Conferences (LMIC)

## Collaborations

- WHO collaborative work-plan on essential pathology services for LMICs
- Disease Control Priorities-3
- WASPaLM-APFCB: Education & Lab Accreditation
- WASPaLM-IFCC: Young Scientists

## The impact of our work





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World Health Organization

## An Essential Pathology Package for Low- and Middle-Income Countries

Kenneth A. Fleming, MBChB, <sup>1,2</sup> Mahendra Naidoo, MBChB, <sup>1</sup> Michael Wilson, MD, <sup>4,5</sup> John Flanigan, MD, <sup>1</sup> Susan Horton, PhD, <sup>6</sup> Modupe Kuti, MBBS, <sup>7</sup> Lai Meng Looi, MBBS, <sup>8</sup> Chris Price, PhD, <sup>3</sup> Kun Ru, MD, <sup>9</sup> Abdul Ghafur, MD, <sup>11</sup> Jianxiang Wang, MD, <sup>10</sup> and Nestor Lago, MD<sup>12</sup>

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## **Key lessons**

## Activities so far focussed largely on

- Capacity-building in middle-income countries
- Mainly enhancing expertise

## Many needs still not met

- Quality, Accreditation, Management, Leadership
- Low-income countries in Asia, Africa,
   South America
  - Needs different strategy
  - Lack national training programmes
  - Needs critical mass to spin home-grown programmes
  - · Needs advocacy to policy makers

### Replication & sustainability?

## Sustainability depends on....

- Larger panel of contributors
  - Involvement of stronger Societies,
     Collaborative partners; Gordon-Signy
     Fellows



Build up web-based educational materials and archives

- Better use of IT, telepathology, digital pathology
- Development of stronger global voice
  - Collaboration for evidence-based advice to policy makers
    - WHO
    - Projects, guidelines, statements



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