

GHSA STEERING GROUP MEETING MINUTES
“TAKE ACTION: ACE FOR GHSA”
21 May 2017
Salle D, WHO Headquarters, Geneva, Switzerland

□ Summary

The second GHSA Steering Group Meeting in 2017 was chaired by Dr. Ganglip Kim from the Ministry of Health and Welfare in the Republic of Korea. After the opening and the adoption of the Agenda, Dr. Ok Park from Republic of Korea highlighted and summarized last GHSA Steering Group Meeting which as happened in January 2017 and, at the same time, announced list of countries that have shown interests in participating GHSA. The second Steering Group meeting covered announcement of New Troika for 2017, updates from the Advisors of GHSA, updates on JEE review, model action package approach, update on the Alliance for country assessment, partnership with Non-Government Stakeholders, such as, Private Sector Round Table (PSRT), Program for the Introduction and Adaptation of Contraceptive Technology (PATH), OPEN Philanthropy Project (OPEN) and Nuclear Threat Initiative (NTI).

GHSA Steering Group members and representatives from other organizations have committed to support this year’s GHSA High-Level Meeting in Uganda and finding ways to encourage Uganda to join future meetings and participate various GHSA activities. Also, members have agreed that 2017 should be a year where they should focus on “multi-sector cooperation and financial support” to those who needed. The meeting was dismissed with several assignments to be discussed before the next GHSA Steering Group Meeting, which will be held in July, 2017 in Seoul, Republic of Korea.

□ Participants

Chair: Republic of Korea

Members: Canada, Finland, India, Indonesia, Italy, Saudi Arabia and the United States

Advisors: FAO, OIE, WHO, World Bank

NSG: NTI, OPEN, PATH, PSRT

Other: KOICA

□ **GHSA Steering Group Meeting Minutes¹**

1. Summary and updates since the First Steering Group Meeting in 2017

Dr. Ok Park (Rep. of Korea) addressed last meeting's achievements and outcomes as the Chair country for GHSA. Some of the highlights were that Republic of Korea has proposed a new theme for GHSA 2017, which is "Take Action: ACE for GHSA". Also, announced previous GHSA history and future events of Steering Group meeting. During the First Steering Group GHSA Meeting, Steering Group Members have discussed that we need to keep tracking progress of 11 Action Packages, especially those with action packages that are low-index. In addition, some members pointed out that GHSA Action Packages needed to be standardized.

The Republic of Korea raised an issue on conceptualizing "Track Progress on Commitments." GHSA Members have committed various strategies to achieve GHSA goals. Strategies usually focus on financial support and building capacities. Thus, Republic of Korea stated that it would be a good idea to track these commitments to see how the progress is implementing. In near future, a framework which can track commitments should be established and record these commitments. Participants also commented during this session to utilize regional cooperation under multisectoral cooperation.

WHO gave a presentation on overall picture of JEE, present progress on JEE and

¹ The Minutes is written chronologically according to the Agenda. Please refer to Final GHSA Steering Group Meeting Agenda and Concept Note on GHSA official website

country case studies. As of 2017 January, 28 countries have implemented JEE and 31 countries will take JEE this year. WHO is planning to utilize JEE's results and reflect them into one's national plan. Additionally, they will share experience on country case studies to GHSA members. Lastly, they are planning to build more cooperative framework and financial support program.

Chile requested JEE to be translated into Spanish so that Spanish-speaking member countries could use it and to cooperate with WHO-PAHO on publishing a Spanish version. GHSA members informed that JEE is very important but what is more important is "Post-JEE". Hence, it will be a good idea to upload every JEE documents on internet and, at some point, GHSA members should discuss on Post-JEE Plan/Framework. Participants wanted to be informed about the GHSA High-Level meeting preparation from hosting country and participants have expressed that JEE should harness the outcome to update their national plans. We need to find the best way to reflect the JEE results into the revised national plans, so that we need to find feasible financial aids to GHSA members.

Lastly, Emails from four countries wishing to join GHSA: two from Asia (Afghanistan, Laos), two from Africa (Cameroon, DR Congo). NGS such as PSRT, Next Generation, Elizabeth Griffin Foundation participated and reported their achievements and network on GHSA.

2. Announcement of New Troika 2017

The current Chair appointed next GHSA Steering Group Chair to be Italy. Representative from Italy expressed that they will be fully supporting with GHSA activities and they will utilize their experience from G7. For next year. However, they still need few more steps to be done; such as creating official documents and internal clearance.

3. Update from the Advisors of GHSA

GHSA's Permanent Advisors (FAO, OIE, WHO, World Bank) covered issues on coordination of action packages, risk communication, funding the response to public health crisis, developing funds for developing countries, global preparedness, surveillance, biothreats, one health approach, IHR Core capacities & OIE critical competencies and JEEs and OIE PVS pathway evaluations.

Dr. Ahmed Eldrissi (FAO) mentioned that FAO will cooperate closely with GHSA activities in order to strengthen GHSA Action Packages outcomes and at the same time there is already high-level commitments. They have also highlighted that food security and health security should be inter-related. In addition, he emphasized that strengthening the surveillance capacity on environment sector, which affects the animal and human health, is also important.

Dr. Susan Corning (FAO) expressed global health security is unachievable if national veterinary services don't meet international standards. OIE PVS pathway Think Tank Forum was held in April, 2017 to accelerate compliance to international standards OIE's guidelines in relation to and in support of WHO's IHR Monitoring and Evaluation. Completion of over 350 PVS pathway mission was timely to consider major challenges and appropriately address these in order to ensure the continued success of this OIE flagship programme. Outcomes under 4 themes, aligned with the 4 stakeholder groupings; OIE Governance, support and use of staff, Enhanced PVS pathway engagement options for members, technical support and training for experts' advocacy and resourcing for partners. OIE and WHO is collaborating on joint publications, national IHR/PVS pathway bridging workshops, contribution to WHO JEE and related national health security planning programmes and coordinating PVS missions and JEE. They have mentioned that to need to accelerate and support funding for PVS mission in line with GHSA goals and to support and improve processes with WHO.

Representative from Indonesia expressed that integration and collaboration among WHO, OIE, FAO is critical. In addition, the United States wanted to know how

OIE has been encouraging and extracting commitments from high-level.

Dr. Mukesh Chawala (World Bank) gave presentation on Response and Preparedness Overview. They have strongly emphasized the importance of pandemic emergency financing system. This system is very important in order to sustainable health security and currently World Bank is developing instruments such as IDA 18, IDA Crisis Response Window and Catastrophe Deferred Drawdown Option. In addition, there are ongoing Pandemic Preparedness Operations going on such as East Africa Public Health Laboratory Networking Project, Regional Disease Surveillance Systems Enhancement, Ebola Crisis Response and Recover, Zika Response and Global Financing Facility, coalition for epidemics Preparedness Innovations and Health Security Financing Assessment Tool and working with GAVI. In bottom line, World Bank strongly expressed that in order to achieve GHSA goals it is time to tackle issues regarding financial part.

Dr. Guenael Rodier (WHO) gave presentation on current JEE status where 42 countries have completed JEE and 29 countries are in pipeline for this year and next year. WHO is bringing a regional capacity building by sharing experience of JEE from same region. Also, they are enforcing member countries to utilize JEE's result on revision national action plan.

Representatives from the United States highlighted the importance of pulling budget for JEE and, if possible, establishing a funding for those who needs support.

Representatives from Canada, Finland and Indonesia commented that multilateral collaboration and integrated process of JEE is critical for building one's capacity. Also, it should be linked with other regional members and with IHR.

Representative from Tanzania shared their JEE experience by emphasizing that funding for implementing JEE was very important and it took long time of period to gather sources.

World Bank mentioned that there should be an integrated annual report on JEE to help countries to understand better with pros and cons organizing JEE.

4. Model Action Package Approach

Dr. Jose Fernandez (the United States) explained the intent of the action packages where it should be focusing specific coordinated actions in support of the GHSA and highlighting measurable approaches countries can adopt to accelerate, monitor and report progresses. Action packages should also provide a mechanism by which countries can make specific commitments and take leadership in GHSA. In order to make Action Plan to work a multilateral collaboration (regional and global level) should be take into consideration and in order to do so, a national commitment should be committed. In general, AMR, Biosafety and Biosecurity, Laboratory is areas where the outcomes are outstanding, however, there are certain Action Plans where we need to keep our eyes on and focus. Steering Group should be fully engaged to increase the level of Action Level and at the same time to achieve GHSA Action Plan's goals.

The next steps for GHSA Action Plan are to establish a better assessment for Action Package progress. Steering Group should also facilitate a better understanding of the Action Packages and encourage leading countries to stimulate Action Packages.

5. Update on the Alliance for Country Assessment

Dr. Paivi Sillanaukee (Finland) updated on the status of Alliance for Country Assessment where 59 members have raised their hand to work together. Also, there are subgroups of the JEE Alliance who plays important role for JEE Alliance. For example, the United States and Finland is in charge of advocacy and funding for external evaluation and development of national plans, Georgia and Senegal is responsible for enhancing multisector collaboration, Saudi Arabia is for financing of national plans and lastly Indonesia and Pakistan's' roles are to harness regional capacities. JEE Alliance is planning to give presentation during the FAO General Assembly in Rome, Italy (July, 2017). There also going to be an Advisory Group meeting in July and October of this year.

Representatives from the United States and Finland commented that JEE and

Action Plan should be coherence. At the same time, not only success stories but also unsuccessful stories should be shared so that other members could take into consideration for their own JEE and national action plan.

(Dr. Youngmee Jee from Republic of Korea, who is in charge of overall JEE assessment in Republic of Korea, has chaired the meeting for this session temporarily.)

6. Partnership with Non-Government Stakeholders: NTI, OPEN, PATH, PSRT

Nuclear Threat Initiative (NTI. Speaker: Dr. Beth Cameron) is working with regional partners, cross-sectoral convening approach, implement measurable and impactful assessment and encourage world's field leaders to support GHSA to achieve highest level of health security. They have introduced their own Global Health Security Index which indicates a country's technical, financial, economic/socioeconomic and political capabilities to prevent, detect and rapidly respond to epidemic threats with international implications whether naturally occurring, deliberate or accidental. In addition, Global Health Security Index draws from internationally-accepted technical assessments including the JEE and PVS, but it also incorporates other important factors, such as countries' overall health system strengthen, commitment to global norms and risk environments.

Program for the Introduction and Adaptation of Contraceptive Technology (PATH. Speaker: Carolyn Reynolds) expressed the importance of distributing affordable vaccines when outbreak happens in certain region. Therefore, from private sector to Government, we should work closely to prevent outbreaks to expand from local to global by creating mechanism on distributing vaccines properly.

OPEN Philanthropy Project (OPEN. Speaker: Dr. Jamie Yassif) stated that they are focusing areas on Biosecurity Pandemic Preparedness and other catastrophic outbreaks. OPEN is interested in supporting strengthening of disease surveillance, the governance of dual use research, policy development or other activities that could

reduce the threat of major global disruption. They approach more of philanthropic support in these areas and they believe that it plays important role distinct from that of Government.

Private Sector Roundtable's (PSRT. Speaker: Tina Flores) mission was to mobilize industry to help countries prevent, detect and respond to health-related crises and strengthen systems for health security. They foster relationships with governments and other stakeholders seeking to advance the goals of the GHSA and SDGs. They also engage companies across a broad array of industry sectors, such as health care, communication, energy and extraction, finance, technology, transportation, logistics, food & beverage and insurance around health security.

Mr. Jim Welch (Elizabeth R. Griffin Research Foundation) introduced Global Health Security Agenda Consortium which is a group of non-government stakeholders associated with over 100 non-government entities working across the prevent, detect and respond spectrum. Their vision is to strive to be the primary communication conduit between government sectors and non-government sectors in matters related to GHSA and seeking to foster achieve GHSA goals.

7. Work Plan for GHSA High-Level Meeting in 2017

Jane Aceng (Minister of Health of Uganda) gave her presentation on Uganda's current status and roadmap for GHSA meeting in October. Which included progress of preparation, possible topics to discuss and financial issues related to GHSA.

She expressed that this year's theme will be "Health for All" therefore, Uganda wanted a whole-of-society approach not such multilateral approach among Government branches. She mentioned that official invitation letter and concept note will be shared soon and wanted keep Tele-Conference go on so that they know if they are going to the right direction or not. In addition, Uganda is taking JEE in this July and hopefully, they are willing to shared their experience during the GHSA High-Level Meeting.

Representatives from the United States and Finland expressed their full

support for hosting successful meeting in Uganda.

8. Taking Action, Tracking Commitments for Global Health Security

Dr. Chaeshin Chu (ROK) expressed that GHSA many countries, international organizations and representatives from the non-governmental sector have made commitments in support of GHSA to advance implementation of IHR and other multisectoral health security efforts since the launch of GHSA. Thus, tracking these commitments were crucial to strengthen the capacities to prevent, detect and response to infectious disease and other acute health threats. During this meeting, he has introduced 3 types of commitments (national commitments, assistance commitments and global/regional leadership commitments) that should be tracked.

Under the Steering Group Chair's direction and direction these commitments should be collected and compiled by sub-group of the GHSA Steering Group or a third party and integrated with annual report.

Regarding with tracking commitments, as an example, Korea International Cooperation Agency (KOICA. Speaker: John-Hyun Moon) introduced projects related with GHSA. Some of the highlights were that KOICA is focusing on Immunization, National Laboratory System and Workforce Development and their approaches were country-specific solutions, health system strengthening approach and partnership and coordinating with other members and organizations. Also, KOICA is closely working with USAID, USCDC, WHO and UNICEF.

□ Agendas to be discussed

1. Next GHSA Steering Group Meeting: Next GHSA Steering Group Meeting will be held right after WHO Global Health Security Meeting in Seoul, Republic of Korea on July 28th. Draft Agenda and Concept Note will be announced later and shared.

[Upcoming GHSA related Meetings]

Date	Venue
July 28 th 2017	3rd GHSA Steering Group Meeting After the WHO Global Health Meeting (July 26-27), Seoul
October 25 th -27 th 2017	3rd GHSA High-Level Meeting (October 25-27), Kampala
TBA	4th GHSA Steering Group Meeting During the FAO Meeting, Rome

[Key topics mentioned during the meeting]

- Financial area to be discussed in more detail during the July Steering Group Meeting and Uganda High-Level Meeting
- Support Uganda on planning High-Level via various approach. (e.g. Tele-Conference, information sharing etc.)
- Integration among JEE, Action Plan and National Action Plan
- Discussion on Post-GHSA