

## **GHSA STEERING GROUP MEETING MINUTES**

### **“TAKE ACTION: ACE FOR GHSA”**

**21 January 2017**

**Salle D, WHO Headquarters, Geneva, Switzerland**

#### **□ Summary**

The first GHSA Steering Group Meeting in 2017 was chaired by Ganglip Kim from the Ministry of Health and Welfare in the Republic of Korea. After the opening and the adoption of the Agenda, Indonesia officially handed-over the chairmanship to the Republic of Korea by the Minister of Health of Indonesia and, at the same time, highlighted last year’s achievements and announcement. This meeting covered Work Plan for 2017, final report on 2016 GHSA High-Level Meeting in Rotterdam, report on Joint External Evaluation, progress on Action Packages, report on JEE Alliance, Non-Governmental Stakeholder’s presentations, plan for Troika 2017 and other issues such as newly proposed “tracking commitments”.

GHSA Steering Group members and representatives from other organizations have committed to support this year’s GHSA High-Level Meeting in Uganda and find 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 May, 2017 during the World Health Assembly in Geneva.

#### **□ Participants**

**Chair:** Republic of Korea

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

**Advisors:** European Union, WHO, FAO, OIE, World Bank

**NSG:** GHSA Next Generation, Private Sector Round Table, Elizabeth Griffin Foundation

## □ **GHSA Steering Group Meeting Minutes<sup>1</sup>**

### **1. Handover of Chairmanship from Indonesia to the Republic of Korea**

Dr. Nila Farid Moeloek (Indonesia) addressed last year's achievements, outcomes and successes as the 2016 Chair country for GHSA. Some of the highlights were that Indonesia has proactively contributed on developing the WHO's Joint External Evaluation Tool and, as an outcome, they have done 28 JEEs last year. Also, shared their experience and good practices on better ways to coordinate Action Packages. Dr. Nila mentioned that five new countries have joined the GHSA last year and she promised that Indonesia will always strongly support GHSA activities.

Dr. Paivi Sillanaukee (Finland) committed to support this year's GHSA activities and expressed that they welcomed the Republic of Korea's assistance with managing Troika. Mr. Jose Fernandez (USA) promised that they will support Republic of Korea on chairing 2017 GHSA and help as much as possible to enhance IHR capacities. Afterwards, the Chair has expressed gratitude to Indonesia for their great contributions and hopes to continue to work closely in the future.

### **2. Work Plan for 2017**

The Chair outlined Republic of Korea's Work Plan for 2017 as the Chair country which included number and venues of meetings, possible topics including reflecting the JEE's outcome on revising GHSA members' national plan and making Action Packages into real action.

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<sup>1</sup> 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.

The next GHSA Steering Group meeting will be held during the World Health Assembly in May, 2017. By this time, the chair is expecting concrete concept of frameworks that are going to be discussed in this meeting. In addition, there will be a joint meeting with WHO-GHSA in Seoul on “Global Health Security” which will be discussed more in detail during the WHA.

The Chair has pointed out that it is very important to reflect the Joint External Evaluation results to one’s country’s national plan. Simply just implementing Joint External Evaluation may appear GHSA to be “on-track and on-going”, however, if the results do not reflect on national plan then the Joint External Evaluation may end up ineffective. Along with the same context, the Chair has also expressed that the Action Packages should be translated into a real action. All the GHSA members have agreed on the Work Plan for 2017 Framework and there were no other comments and objections to the agenda.

### **3. Update from the Advisors of GHSA**

GHSA’s Permanent Advisors (WHO, FAO, OIE, World Bank) covered issues on linking Action Packages, explaining the concept of risk management, funding the response to public health crisis, developing funds for developing countries, strengthening surveillance and IHR & PVS core and reviewing current JEE’s progress.

Dr. Hemk Jan Ormel (FAO) mentioned that they utilized “Good Emergency Management Practice” in order to strengthen regional capacity and supported assessing GHSA Action Packages’ outcomes. They have also highlighted that they have been cooperating with OIE and WHO on risk analysis in regional, national and international level. 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 (OIE) addressed that OIE is mainly working on AMR response, bio-risk reduction and OIE’s PVS outcomes. As well as gave a presentation on WAHIS (World Animal Health Information Database System).

Especially, she stressed that WAHIS is very crucial for achieving GHSA Action Package's Zoonotic goals. WAHIS a system which requires OIE members and non-members to report immediately on infectious disease outbreaks on animals. Since OIE's works are similar to GHSA's Zoonotic area, thus, they are willing to work closely with GHSA Steering Group.

Dr. Tim Evans (World Bank) informed that they have been working with health security financial areas by establishing individual task force unit inside the World Bank and utilizing health financing tool that they have developed. According to analyzed data, they will search for areas where the financial support is mostly needed and also aid with any other financial matters. He also expressed that the World Bank will publish guidelines and models related to financial tool.

Dr. Chaeshin Chu (Republic of Korea) expressed that 2015 ROK's MERS incident was very critical and ROK confronted other side of "risk". For example, risk analysis should not just focus on analyzing diseases but also communicate with the public to reduce "risk awareness" which affects directly on their behavior and creates unnecessary rumor and fear in the society.

Ms. Sarah Lawley (Canada) questioned GHSA members and Permanent Advisors on "how to link Advisors' work with GHSA goals in effective way".

Dr. Naif Alraihan (Saudi Arabia) mentioned that when Public Health Emergency Crisis happens, it is very hard to cooperate among different sectors in national level. Therefore, every sectors that are involved in health areas should seek a way to work together and reconsider about the true concept of "One Health".

Representatives from OIE, WHO and the World Bank responded that OIE (Dr. Susan Corning) will think possible ways to implement multi-sector cooperation by hosting "Joint Workshop" in order to plan a Strategic Partnership Portal. FAO (Dr. Hemk Jan Ormel) commented that the concept of "Risk Analysis" was focused on individual national capacity on detecting and analyzing infectious disease but not on the risk communication area. WHO (Dr. Guenael Rodier) explained that JEE is already a multi-sector assessment. For example JEE covers,

food and agricultural area too. World Bank (Dr. Tim Evans) expressed that they will provide detailed documents on financial support soon.

#### **4. Update on JEE and Country Planning Post-JEE**

Dr. Guenael Rodier (WHO) gave a presentation on overall picture of JEE, present progress on JEE and country case studies. Joint External Evaluation (JEE) was established in order to link IHR and GHSA so that it could enhance IHR capacities. 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.

Ms. Rosalia Framil (Chile) expressed that they support JEE. However, they want it to be translated into Spanish so that Spanish-speaking member countries could use it. Therefore they have requested GHSA Steering Group to provide a Spanish version of JEE.

Mr. Jose Fernandez (USA) 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.

Dr. Nila Farid (Indonesia) expressed that JEE should also focus on assessing multi-sector area.

Ms. Sarah Lawley (Canada) questioned why there were some countries in JEE Pipeline that were fixed with date and some were still not confirmed for 2017.

Regarding with Chile's point, WHO (Dr. Guenael Rodier ) responded that WHO will work with PAHO on publishing Spanish JEE and take into consideration on what the US and Indonesia have mentioned. In addition, WHO told Ms. Sarah Lawley (Canada) that some countries are still discussing on possible JEE date. Thus, they did not fixed the dates but just left on the chart because they have raised their hand to take JEE this year.

## **5. Action Packages Progress**

Mr. Jose Fernandez (USA) informed that they are, at present, developing an Action Package Logic Model along with guidelines which will be published to public soon or later. He also highlighted that there are some good Action Packages and, at the same time, bad Action Packages. In other words, GHSA Steering Group should consider on how to accelerate Action Packages in more effective ways. Rather than separately measuring Action Packages, he advised that “working in regional level could foster a lot with implementing Action Packages”. Thus, GHSA members should communicate more with each other.

Ms. Rosalia Framil (Chile) mentioned that cooperating regionally was very helpful to them on enhancing Work Force Development. However, in South America Region, countries are not much aware of the concept of GHSA.

Ms. Sarah Lawley (Canada) expressed that when developing “Logic Model” it is important to consider Action Package Leading Country’s perspectives. Additionally, she emphasized that regarding Action Packages, Leading Countries should be invited to participate and take more responsibilities should be in the Steering Group.

Dr. Naif Alraihan (Saudi Arabia) mentioned that documents related to Action Packages should be more precisely standardized and same personnel/staff should be contacted with IHR and JEE for efficiency.

Mr. Jose Fernandez (USA) responded that they will consider comments and they also thought “Tracking Action Plan” was needed.

## **6. Update on the Alliance for Country Assessment**

Dr. Paivi Sillanaukee (Finland) gave an overall presentation on “JEE Alliance<sup>2</sup>” and they are currently working with strengthening member countries health security capacities and not limiting on health sector but also including other sectors that may needed to be considered. JEE Alliance has been supporting and revising member states national plan after the JEE assessments. Some of the findings were that they need to, first, search for a possible financial support; second, more multi-sector cooperation was needed and third, building capacity through regional cooperation was effective.

## **7. Partnerships with Non-Governmental Stakeholders**

Elizabeth R. Griffin Foundation mentioned that there is an association composed of non-profit and non-governmental group called “GHSA Consortium” and they have been working closely with GHSA on achieving GHSA goals. Elizabeth R. Griffin for example are contributing their works on Biological Risk and Bio Security area.

Private Sector Roundtable is an organization which fosters to enhance health security related institutions and organizations in order to support GHSA on achieving GHSA goals. Some of the working areas are emergency transportation, health security policy, work force development, multi-sector cooperation, other technical support and AMR that are related to GHSA Action Package areas.

GHSA Next Generation is a group of young professionals who are interested with GHSA Action Package areas and interested in participating GHSA activities. Since the establishment of GHSA Next Generation in 2014, over 150 members have joined the network and this year they are planning to recruit more members from various regions. In addition, they are searching a way to

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<sup>2</sup> Alliance for Country Assessment was established to enhance GHSA capacities and to support JEE assessment, GHSA-WHO JEE cooperation, financial support and work force development.

make Next Generation member from Uganda to constantly join the future meetings and activities.

## **8. Track Progress on Commitments**

Dr. Chaeshin Chu (Republic of Korea) expressed that GHSA Members have committed various strategies to achieve GHSA goals. Strategies usually focus on financial support and building capacities. Thus, 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.

Ms. Sarah Lawley (Canada) stressed that the concept of “Track Progress on Commitments” is still vague. Therefore, clear picture should be provided to the GHSA members on what outcomes we are trying to measure.

Dr. Nila Farid Moeloek (Indonesia) wondered if these commitments are going to be assessed in qualitative or quantitative manner.

Mr. Jose Fernandez (USA) highlighted that these concept will be more clarified in the future and, at the same time, they think it gives GHSA members more transparency on managing the organization. However, they think putting more works that may overlap with Action Package progress could be inefficient.

Dr. Paivi Sillanaukee (Finland) gave thought that GHSA members could track commitments and record them similar to the ones that were published in 2016 GHSA High-Level Meeting.

Dr. Hemk Jan Ormel (FAO) mentioned that the documents and records should also include limitations.

## **□ Agendas to be discussed**

**1. Next GHSA Steering Group Meeting:** Next GHSA Steering Group Meeting will be held during the World Health Assembly in May, 2017. Exact time and venue will be announced later.

[Upcoming GHSA Meetings]

| Date           | Venue   |
|----------------|---|
| May 2017       | WHA, Geneva                                       |
| July 2017      | WHO Global Health Security, Seoul                 |
| September 2017 | 3 <sup>rd</sup> GHSA High-Level Meeting, Kampala, |
| November 2017  | TBA   |

**2. 3<sup>rd</sup> GHSA High-Level Meeting:** Uganda will be hosting 3<sup>rd</sup> GHSA High-Level Meeting in September 2017. Therefore, Steering Group needs to encourage and support Uganda to join future GHSA meetings. In addition, starting February 2017, the Steering Group needs to proactively discuss on programs and agendas.

**3. Concrete concept of “Track Progress on Commitments”:** Due to the ambiguousness of the concept, this concept needs to be clarified to GHSA members by the next GHSA Steering Group meeting.

**4. Other issues:** Republic of Korea (2017 GHSA Steering Group Chairing Country) and the Steering Group will discuss on following issues that were mentioned during the first GHSA Steering Group Meeting. Possibly, provide draft agenda with feedbacks before the next GHSA Steering Group Meeting.

[Key topics mentioned during the meeting]

- Encouraging Uganda’s participation with Steering Group meeting.
- Tracking progress on Action Packages. Especially, those with Action Packages that are “low engagement”. In addition, some Action Packages need to be standardized.
- Conceptualizing “Track Progress on Commitments”.
- Utilizing regional cooperation and multi-sector framework to strengthen GHSA/IHR capacities.
- More precise “Post-JEE Plan” needed to be discussed and for adopting JEE’s results to one’s national plan.

- Increasing Non-Governmental Stakeholders participation and networking.
- Posting JEE related documents on GHSA official website.
- Providing Spanish version of JEE for Spanish-speaking GHSA members.
- The Steering Group needs to accelerate and promote a possible way to aid with financial support to GHSA members and to perform JEE.