



# THE GLOBAL HEALTH SECURITY AGENDA (GHSA)

AMBASSADOR BONNIE JENKINS

COORDINATOR, THREAT REDUCTION PROGRAMS

JUNE 6, 2016

# WHY IS GLOBAL HEALTH SECURITY AN IMPORTANT ISSUE?

- EMERGENCE AND SPREAD OF NEW MICROBES
- MAJORITY OF COUNTRIES ARE NOT FULFILLING THEIR IHR REQUIREMENTS
- WEAK HEALTH SYSTEMS IN THE VAST MAJORITY OF COUNTRIES
- GLOBALIZATION OF TRAVEL AND TRADE
- INFECTIOUS DISEASE IS A PERMANENT PHENOMENON
- CAUSES LOSS OF LIFE, INTERRUPTS TRANSPORTATION, EXTREMELY EXPENSIVE TO ADDRESS
- RISE IN ANTI-MICROBIAL DRUG RESISTANCE
- A GLOBAL PROBLEM FROM EVERY ANGLE AND REQUIRES A GLOBAL FOCUS EFFORT THAT SPANS ALL PARTS OF THE GOVERNMENT...EVERY SECTOR
- DIFFERENT DEPARTMENTS/MINISTRIES, ONE HEALTH, NONGOVERNMENTAL SECTOR

# THE VISION OF THE GHSA

*“TO ATTAIN A WORLD SAFE AND SECURE FROM GLOBAL HEALTH THREATS POSED BY INFECTIOUS DISEASES”*

- INFECTIOUS DISEASE EPIDEMICS POSE NOT ONLY A LOCAL HEALTH THREAT BUT ALSO AN INTERNATIONAL HEALTH SECURITY THREAT
- NATIONAL MULTISECTORAL COOPERATION AND PREPAREDNESS ARE AT THE CORE OF EFFECTIVE CONTROL OF INFECTIOUS DISEASES THROUGH STRENGTHENED HEALTH SYSTEMS AND PREPAREDNESS
- OPERATIONALIZATION OF “ONE HEALTH” CONCEPT AT NATIONAL AND INTERNATIONAL LEVELS

# BENEFITS FROM STRENGTHENING GLOBAL HEALTH SECURITY

- PROTECT POOREST COUNTRIES AND MOST NEGLECTED POPULATIONS; HEALTH AND ECONOMIC BENEFITS
- STRENGTHEN COUNTRY CAPACITY TO FOCUS AND IMPLEMENT HEALTH PROGRAMS MORE EFFECTIVELY
- CREATE SUSTAINABLE SYSTEMS TO INCREASE VACCINATION COVERAGE AND ADDRESS ANTIMICROBIAL RESISTANCE
- STRENGTHEN COUNTRY ORGANIZATIONS' CAPACITY AND RESILIENCE TO ADDRESS ANY HEALTH THREAT
- STRENGTHEN ALL SEGMENTS OF SOCIETY BY TAKING A HOLISTIC APPROACH TO HEALTH AND SECURITY

# GHSA ACTION PACKAGES

- PREVENT 1 – ANTIMICROBIAL RESISTANCE
- PREVENT 2 – ZOONOTIC DISEASE
- PREVENT 3 – BIOSAFETY AND BIOSECURITY
- PREVENT 4 - IMMUNIZATION
- DETECT 1 – NATIONAL LABORATORY SYSTEMS
- DETECT 2/3 – REAL TIME SURVEILLANCE
- DETECT 4 – REPORTING
- DETECT 5 - WORKFORCE DEVELOPMENT
- RESPOND 1 – EMERGENCY OPERATIONS CENTERS
- RESPOND 2 – MULTISECTORAL RAPID RESPONSE
- RESPOND 3 – MEDICAL COUNTERMEASURES



SEOUL DECLARATION  
GLOBAL HEALTH SECURITY AGENDA  
2015 HIGH-LEVEL MEETING IN SEOUL

# GHSA TODAY

## COUNTRY COMMITMENTS & MANAGEMENT

- 11 GHSA TARGETS, ACTION PACKAGES; JOINT EXTERNAL EVALUATION TOOL (JEE)
- U.S. 31-COUNTRY COMMITMENT; G-7 COLLECTIVE 76-COUNTRY COMMITMENT
- 10 COUNTRY *STEERING GROUP* (SG)
  - CHAIRED BY FINLAND IN 2015 (TROIKA MODEL)
  - CHAIRED BY INDONESIA IN 2016
  - CHAIRED BY REPUBLIC OF KOREA IN 2017
- EMPHASIS ON CROSS-SECTORAL COOPERATION
- NON-GOVERNMENTAL INVOLVEMENT
- ADVISORY PARTNERS: WHO, OIE, FAO, WORLD BANK, INTERPOL, EUROPEAN COMMISSION, AU, ECOWAS, UNIDSR

## 50 Country Partners

*Australia, Azerbaijan, Bangladesh, Canada, Chile, China, Colombia, Denmark, Ethiopia, Finland, France, Georgia, Germany, Ghana, Guinea, Guinea-Bissau, India, Indonesia, Israel, Italy, Japan, Jordan, Kenya, Liberia, Malaysia, Mexico, the Netherlands, Norway, Pakistan, Peru, Portugal, the Republic of Korea, the Kingdom of Saudi Arabia, Sierra Leone, Singapore, South Africa, Spain, Sweden, Switzerland, Tanzania, Thailand, Turkey, Uganda, Ukraine, United Arab Emirates, United Kingdom, United States, Vietnam, Yemen, and Zimbabwe*

A 10x10 grid of colored squares (red, yellow, green) with the text "HOW DO WE GET THERE?" overlaid in the center. The grid is composed of 100 squares. The colors are distributed as follows: Row 1: Red, Red, Yellow, Yellow, Yellow, Red, Red, Yellow, Yellow, Red, Red. Row 2: Green, Green, Yellow, Green, Green, Yellow, Yellow, Green, Green, Green, Yellow. Row 3: Yellow, Red, Red, Red, Red, Red, Green, Yellow, Yellow, Red, Yellow. Row 4: Red, Red, Yellow, Yellow, Red, Red, Green, Yellow, Yellow, Red, Red. Row 5: Green, Yellow, Yellow, Yellow, Green, Yellow, Green, Green, Green, Green, Yellow. Row 6: Red, Red, Red, Yellow, Green, Green, Yellow, Green, Green, Yellow, Green. Row 7: Green, Red, Yellow, Yellow, Yellow, Yellow, Red, Green, Green, Yellow, Yellow. Row 8: Green, Red, Yellow, Yellow, Yellow, Yellow, Red, Green, Green, Yellow, Yellow. Row 9: Red, Red, Yellow, Yellow, Yellow, Yellow, Red, Green, Green, Yellow, Yellow. Row 10: Red, Red, Yellow, Yellow, Yellow, Yellow, Red, Green, Green, Yellow, Yellow. The text "HOW DO WE GET THERE?" is written in bold black capital letters across the center of the grid.

**HOW DO WE GET THERE?**

# **VOLUNTARY GHSA EXTERNAL ASSESSMENTS**

- OBJECTIVE IDENTIFICATION OF GAPS IN HEALTH SECURITY RELATED TO 11 ACTION PACKAGES
- BASELINE AND PROGRESS ASSESSMENT
- PEERS-ASSESSING-PEERS, LEARNING OPPORTUNITY
- BENEFITS TO COUNTRY AND DEVELOPMENT PARTNERS, COUNTRY PLANS
- SUPPORT AND ACCELERATE WHO IHR, OIE STANDARDS AND OTHER HEALTH SECURITY CAPACITY BUILDING PROCESSES
- TRANSPARENCY OF PROCESS AND RESULTS



# JOINT EXTERNAL EVALUATION TOOL

- GHSA ASSESSMENTS +
- NATIONAL LEGISLATION POLICY AND PLANNING
- COORDINATION, COMMUNICATION AND ADVOCACY
- FOOD SAFETY
- CHEMICAL EVENT
- RADIATION EMERGENCIES

## JEE EXAMPLE COUNTRIES

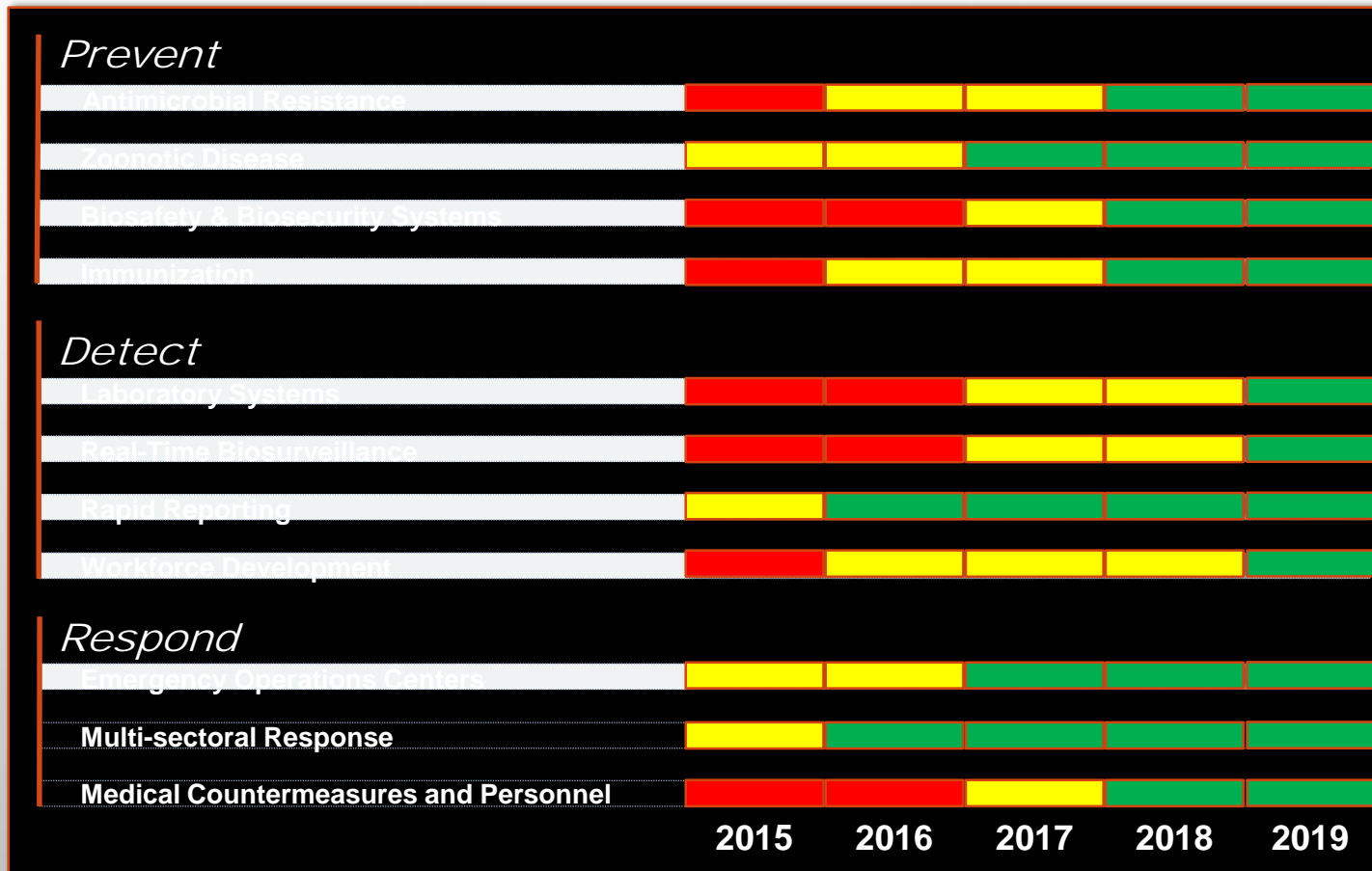
	Country 1			Country 2		
	Score Assessed	Score Possible	%	Score Assessed	Score Possible	%
<b>Overall summary</b>	<b>54</b>	<b>96</b>	<b>56%</b>	<b>84</b>	<b>96</b>	<b>88%</b>
<b>Prevent</b>	<b>14</b>	<b>32</b>	<b>44%</b>	<b>28</b>	<b>32</b>	<b>88%</b>
<i>Antimicrobial Resistance</i>	2	8	25%	8	8	100%
<i>Zoonotic Disease</i>	3	8	38%	8	8	100%
<i>Biosafety and Biosecurity</i>	3	8	38%	4	8	50%
<i>Immunization</i>	6	8	75%	8	8	100%
<b>Detect</b>	<b>30</b>	<b>40</b>	<b>75%</b>	<b>32</b>	<b>40</b>	<b>80%</b>
<i>National Laboratory System</i>	8	12	67%	12	12	100%
<i>Real Time Surveillance</i>	6	8	75%	6	8	75%
<i>Reporting</i>	8	8	100%	6	8	75%
<i>Workforce Development</i>	8	12	67%	8	12	67%
<b>Respond</b>	<b>10</b>	<b>24</b>	<b>42%</b>	<b>24</b>	<b>24</b>	<b>100%</b>
<i>Emergency Operations Centers</i>	6	12	50%	12	12	100%
<i>Linking Public Health and Law Enforcement</i>	2	4	50%	4	4	100%
<i>Medical Countermeasures and Personnel Deployment</i>	2	8	25%	8	8	100%

# GHSA FIVE YEAR ROADMAP

- ROADMAP FOR ONGOING AND PLANNED GHSA ACTIVITIES IN SUPPORT OF THE GHSA GOALS
- WILL ENSURE COORDINATION AND PARTNERSHIP ACROSS ALL ORGANIZATIONS TO SO THAT GHSA TARGETS ARE MET AND SUSTAINABLE SYSTEMS AND NETWORKS ARE ESTABLISHED
- ORGANIZED BY SPECIFIC CAPACITIES UNDER THE PREVENT, DETECT AND RESPOND FRAMEWORK.
- MEANT FOR PLANNING AND DISCUSSION PURPOSES BETWEEN THE HOST GOVERNMENT AND OTHER GHSA PARTNERS.

# GHSA IMPACT OVER 5 YEARS

## POTENTIAL ASSESSMENT PROGRESS, SAMPLE COUNTRY



# GHSA Tools Must Be Accessible by All



# DETECT1 LABORATORY SYSTEMS MILESTONES - EXAMPLES

	Key Milestones	US Government Activity	Host Government Activity	Other Activity (e.g. NGO, other governments, multilaterals)
Year 1	<ol style="list-style-type: none"> <li>1. Mapping of multi-sectoral laboratory capacity including pathogen testing completed</li> <li>2. Consultative Lab Technical Working Group (LTWG) established</li> <li>3. Priority pathogens and diseases identified (including zoonotic diseases)</li> <li>4. Multi-sectoral nation-wide Laboratory strategic plan and policy established;</li> <li>5. Plans to reinforce quality assurance are incorporated into plans</li> <li>6. Strengthen Liberia's laboratory capacity to conduct Ebola diagnostics. (DTRA)</li> <li>7. Improve Liberia's ability to rapidly test suspected Ebola samples by recommending the most efficient routes for transporting samples to Ebola testing laboratories. (DTRA)</li> </ol>	<p>CDC – Technical Assistance with partners funded through cooperative agreements</p> <p>USAID – Technical Assistance</p> <p>DTRA - Provide laboratory equipment, reagents, and supplies to support Ebola diagnostics during the West Africa Ebola outbreak.</p>	<p>Ministries of Health, Agriculture and Universities</p> <p>Provide laboratory space in which to conduct Ebola diagnostics.</p>	<p>Other activity to be determined</p> <p>Note: World Bank and UNOPS have stated they intend to provide infrastructure renovations and upgrades to the LIBR facility soon (likely before the USG-funded design/master plan noted in year 2 would be finished).</p>
Year 2	<ol style="list-style-type: none"> <li>1. Nationwide tiered laboratory network needs identified (animal and human health labs)</li> <li>2. National laboratory strategic plan and policy reviewed/updated with action items for broad-based capacity building</li> <li>3. Working towards lab quality management system (QMS) and Quality Assurance towards certification of the NPHL system</li> <li>4. Diagnostic testing implemented and optimized for viral pathogens in wildlife, livestock, and humans</li> <li>5. Strengthen the Liberian Institute of Biomedical Research (LIBR) and Liberia's National Reference Laboratory</li> <li>6. Strengthen Liberia's regional reference laboratory system</li> </ol>	<p>CDC – Technical Assistance with partners funded through cooperative agreements</p> <p>DTRA – technical assistance</p> <p>USAID – Technical Assistance</p> <p>Provide design for laboratory upgrades of Liberian Institute of Biomedical Research (LIBR) facility and National Reference Lab and a campus master plan for the LIBR campus</p> <p>Provide infrastructure support to establish a regional reference lab at Phebe Hospital in Bong County</p>	<p>Ministries of Health, Agriculture and Universities</p> <p>Actively participate in collaborative design and planning processes.</p> <p>Provide timely feedback to the USG on questions required to inform development of a design and master plan that will meet Liberia's needs in a sustainable manner.</p>	<p>ACCEL – technical assistance and integration of clinical lab and public health labs.</p> <p>Other activity to be determined</p>

# DETECT1 MILESTONES (CONTINUED)

Year 3	<ol style="list-style-type: none"> <li>1. Nationwide laboratory network formalized and established;</li> <li>2. National Public Health Laboratory (NPHL) capacity at all levels for coordination and specimen collection, handling, shipment and referral established</li> <li>3. National laboratory strategic plan and policy operationalized</li> <li>4. Laboratory information management system (LIMS) selected and implemented at NPHL</li> </ol>	<p>CDC – Technical Assistance with partners funded through cooperative agreements</p> <p>USAID – Technical Assistance</p>	Ministries of Health, Agriculture and Universities	Other activity to be determined
Year 4	<ol style="list-style-type: none"> <li>1. National Public Health Laboratory (NPHL) operationalized and functional</li> <li>2. Accreditation/certification of NPHL process launched</li> </ol>	<p>CDC – Technical Assistance with partners funded through cooperative agreements</p> <p>USAID – Technical Assistance</p>	Ministry of Health, National Laboratory Network, Ministry of Agriculture and Universities	Other activity to be determined
Year 5	<ol style="list-style-type: none"> <li>1. Accreditation/certification of Regional laboratories in-process</li> <li>2. Evidence of increased capacity in laboratory staff in risk characterization and bioinformatics</li> </ol>	<p>CDC – Technical Assistance with partners funded through cooperative agreements</p> <p>USAID – Technical Assistance</p>	Ministry of Health, National Laboratory Network, Ministry of Agriculture and Universities	Other activity to be determined

The background of the slide is a light gray gradient. It is decorated with several realistic water droplets of various sizes, scattered primarily in the top-left and bottom-right corners. The droplets have highlights and shadows, giving them a three-dimensional appearance.

# **GHSA Assistance Efforts**





# U.S. Commitment

THE WHITE HOUSE  
Office of the Press Secretary

FOR IMMEDIATE RELEASE  
November 16, 2015

When the GHSA was launched, the United States made a commitment to partner with least 30 countries over five years to achieve the GHSA targets. In July 2015, the U.S. Government announced its **intent to invest more than \$1 billion in resources to expand the GHSA** to prevent, detect, and respond to future infectious disease outbreaks in 17 countries. Today, we are announcing an additional 13 countries, with which the United States will partner to achieve the targets of the GHSA.

## **30 countries:**

Bangladesh, Burkina Faso, Cambodia, Cameroon, Cote d'Ivoire, Democratic Republic of Congo, Ethiopia, Georgia, Ghana, Guinea, Haiti, India, Indonesia, Jordan, Kazakhstan, Kenya, Laos, Liberia, Mali, Mozambique, Pakistan, Peru, Rwanda, Senegal, Sierra Leone, Tanzania, Thailand, Uganda, Ukraine, and Vietnam.

*In addition, we plan to partner with the Caribbean Community (CARICOM) to strengthen regional capacity.*

\*Malaysia has since become the 31<sup>st</sup> country

# G7 GHSA COMMITMENT

- 2015: “WE COMMIT TO PREVENTING FUTURE OUTBREAKS FROM BECOMING EPIDEMICS BY ASSISTING COUNTRIES TO IMPLEMENT THE WORLD HEALTH ORGANIZATION’S INTERNATIONAL HEALTH REGULATIONS (IHR), INCLUDING THROUGH GLOBAL HEALTH SECURITY AGENDA AND ITS COMMON TARGETS AND OTHER MULTILATERAL INITIATIVES. **IN ORDER TO ACHIEVE THIS WE WILL OFFER TO ASSIST AT LEAST 60 COUNTRIES, INCLUDING THE COUNTRIES OF WEST AFRICA, OVER THE NEXT FIVE YEARS.**”
- **COMMITMENT IS TO 76 COUNTRIES!**

# GLOBAL PARTNERSHIP MEMBERSHIP

- MEMBERS: AUSTRALIA, BELGIUM, CANADA, CZECH REPUBLIC, CHILE, EUROPEAN UNION, DENMARK, FINLAND, FRANCE, GERMANY, HUNGARY, IRELAND, ITALY, JAPAN, KAZAKHSTAN, MEXICO, NETHERLANDS, NEW ZEALAND, NORWAY, THE PHILIPPINES, POLAND, PORTUGAL, REPUBLIC OF KOREA, SPAIN, SWEDEN, SWITZERLAND, UKRAINE, UNITED KINGDOM, UNITED STATES
- 21 OF 29 GP MEMBERS ARE GHSA PARTNERS
- OBSERVING RELEVANT INTERNATIONAL ORGANIZATIONS:
  - WHO, FAO, OIE, INTERPOL, BWC-ISU, UNSCR 1540



# GP / GHSA PROGRAMS FUNDED BY GLOBAL PARTNERSHIP MEMBERS

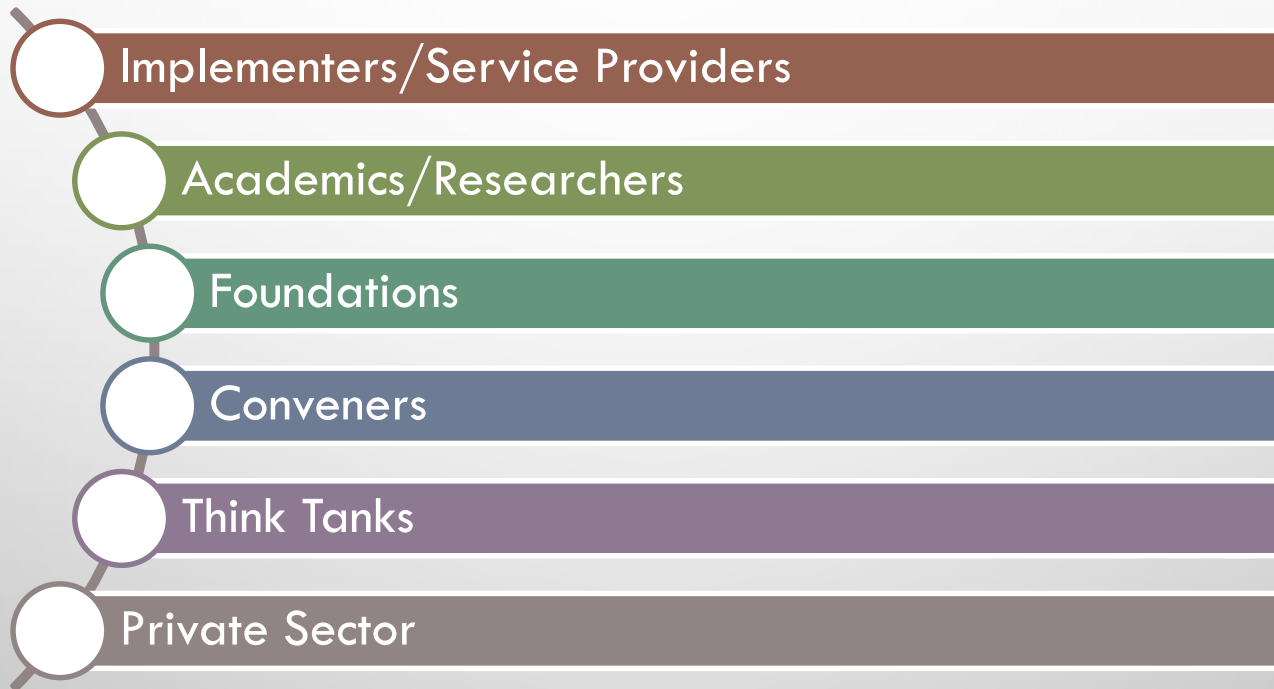
- FINLAND SUPPORTING BIOSECURITY PROJECTS IN TANZANIA
- CANADA GLOBAL PARTNERSHIP PROGRAM FUNDING BIOSAFETY AND BIOSECURITY PROJECTS IN NIGERIA
- DENMARK FUNDING BIOSECURITY PROJECTS IN KENYA
- EUROPEAN UNION: SPAIN, AND ITALY – LABORATORY STRENGTHENING PROJECTS AND TRAINING OF PERSONNEL IN SOUTH EAST ASIA





# The Role of Nongovernmental Stakeholders in the Global Health Security Agenda

# THE NGS COMMUNITY SUPPORTING GHSA



# GHSA NGS Consortium and Consortium Working Groups



# GLOBAL HEALTH SECURITY AGENDA NGS CONSORTIUM (GHSAC)

- GHSAC WORKS WITH INTERESTED GOVERNMENTS IN SUPPORT OF THE GHSA
- SEEKS TO EFFICIENTLY AND EFFECTIVELY APPLY THE RESOURCES AND GLOBAL EXPERTISE THEY HAVE WITH THE VAST GOVERNMENTAL NEEDS IN ACHIEVING THE GOALS OF GHSA
- PRIMARY COMMUNICATION CONDUIT BETWEEN NGS AND GOVERNMENT STAKEHOLDERS IN MATTERS RELATED TO GHSA
- LED BY A STEERING GROUP OF GHSA STAKEHOLDERS



# GHSA NEXT GENERATION LEADERS

- LAUNCHED AT THE NGS EVENT ON SEPTEMBER 25<sup>TH</sup>, 2014
- U.S. DEPARTMENT OF STATE HOSTED THE NEXT GENERATION EVENT, SEPTEMBER 26, 2014 ON THE MARGINS OF THE WHITE HOUSE EVENT
- 36 NEXT GENERATION LEADERS PARTICIPATED AND MET WITH INTERNATIONAL OFFICIALS
- GOAL: ESTABLISH AN INTERNATIONAL COMMUNITY OF YOUNG PROFESSIONALS AND STUDENTS INTERESTED IN CONTRIBUTING TO GLOBAL HEALTH SECURITY
- GHSA INTERNATIONAL VISITOR LEADERSHIP PROGRAM (IVLP), FEBRUARY 2016

# PRIVATE SECTOR ROUNDTABLE (PSRT)

- LED BY JOHNSON & JOHNSON AND GENERAL ELECTRIC FOUNDATION
- MISSION: MOBILIZE INDUSTRY TO HELP COUNTRIES PREPARE FOR AND RESPOND TO HEALTH-RELATED CRISIS, AND STRENGTHEN SYSTEMS FOR HEALTH SECURITY
- ALIGNS PUBLIC HEALTH NEEDS WITH OVERARCHING BUSINESS OBJECTIVES
- CENTRAL TOUCHPOINT FOR COMPANIES SEEKING TO CONTRIBUTE TO THE AIMS OF THE GHSA AND COORDINATE ITS EFFORTS TO PROMOTE GHSA

# GLOBAL HEALTH SECURITY AGENDA CONSORTIUM MEETING FEBRUARY 25, 2016

- U.S. Department of State Marshall Center
- Over 60 attendees
- Breakout sessions to discuss individual Working Group priorities and coordinate plans for 2016
- Next meeting in early July



The background features a light gray gradient with several realistic water droplets of various sizes scattered in the corners. The droplets have highlights and shadows, giving them a three-dimensional appearance.

**GHSAgenda.org**