ASEAN Health Cluster 2 Work Programme for 2016 to 2020

ASEAN HEALTH CLUSTER 2: RESPONDING TO ALL HAZARDS and EMERGING THREATS

A.1	ALIGNMENT with ASEAN ASCC BLUEPRINT		res: A.1.i & ii / A.2.i, iii, iv & vi / B.1.ii & v /B.2 iv & xii/ B.3 i/ C.1 iv & vii/ C.2. ii, iii 0.2 I, ii, & iii / D.3 i/ D.5 iii / E.1.iv & viii / E.2.i,iii,vii & ix/ E.3.iii
A.2	ALIGNMENT WITH SUSTAINABLE DEVELOPMENT GOALS (SDGs)	SDG Goal #3:	Ensure healthy lives and promote well-being for all at all ages (Targets 3.3, 3.d)
	,	SDG Goal #6:	Ensure availability and sustainable management of water and sanitation for all (Target 6.2)
		SDG Goal # 11:	Make cities and human settlements inclusive, safe, resilient and sustainable (indirectly)
		SDG Goal # 17:	Strengthen the means of implementation and revitalize the global partnership for sustainable development (Targets 17.9, 17.16, 17.18)
A.3	ASEAN Post 2015 Health Development Agenda GOALS		resilient health system in response to communicable diseases, emerging seases, and neglected tropical diseases
	for 2020		to environmental health threats, hazards, disasters, and to ensure effective s for disaster health management in the region
A.4	HEALTH CLUSTER 2 STRATEGY	capacity, and ad communicable d diseases, and; s	e, efficient, and resilient health system including strengthening capability, vocacy to prepare, detect, prevent, respond, and mitigate all hazards including iseases, neglected tropical diseases, emerging and re-emerging infectious trengthening laboratory capacity; addressing issues on anti-microbial resistance; on environmental health and health impact assessment; and disaster health
A.4.1	HEALTH CLUSTER 2 PRIORITY STRATEGIES	and manage	h level of capability, collaboration, and capacity to detect, investigate, contain communicable diseases including outbreaks of emerging and re-emerging seases, neglected tropical diseases, and strengthening laboratory capacity as

		 well as preparedness for pandemics and other public health emergencies including disasters in line with Sustainable Development Goals (SDGs); Advocacy to slow down the occurrence and spread of Antimicrobial Resistance (AMR) by improving infection prevention and control, strengthening regulation and optimizing use of antimicrobial, increasing awareness, and developing and strengthening surveillance system for AMR and rational antimicrobial use; and Strengthen capacity to manage ASEAN priorities on environmental health risks and issues, and health impact assessment (HIA) 	
A.5	HEALTH CLUSTER 2 KEY PERFORMANCE INDICATORS	(OUTCOME INDICATORS)	(TARGETS)
A.5.1	PRIORITY 8: Prevention and control of communicable diseases, emerging infectious diseases and neglected tropical diseases [The ASEAN Health Cooperation will focus on the following diseases:] a. Dengue b. Rabies c. HIV and AIDS d. Health security e.g. EOC e. NTD (Lymphatic Filariasis) f. Tuberculosis	 Reduce/eliminate/ identified major diseases including EID and NTD in the region: Dengue: reduce dengue morbidity median by at least 25% for the period of 2016 – 2020 compared to the median of the past 5 years (2011-2015) Rabies: Elimination of rabies by 2020 HIV/AIDS: Percentage of key populations, who received an HIV test in the past 12 months and know their results. IHR 2005: Achieve all national core capacities as per IHR Framework Standard by 2020 Elimination of Lymphatic Filariasis as a public health problem by 2020 TB: 20% reduction in tuberculosis incidence rate comparing to baseline in 2013 	 a. 25% reduction for 5 years historical median b. Elimination of rabies c. 90% of key population received HIV test in the past 12 months and know their results d. ASEAN EOC Network functioning by 2020; and All AMS have achieved and strengthened all national core capacities per IHR Framework Standard by 2020 e. Lymphatic Filariasis as a public health problem eliminated by 2020 f. 10% reduction in tuberculosis incidence rate comparing to baseline in 2013

A.5.2	PRIORITY 9: Strengthening laboratory capacity		Establishment of ASEAN Reference Laboratory Network for priority diseases i.e. emerging/re- emerging diseases, emerging and dangerous pathogens, diseases of PHEIC, and dengue.	1.	By 2020, ASEAN Reference Laboratory Network is established.
A.5.3	PRIORITY 10: Combating Antimicrobial Resistance (AMR)	1.	By 2020, the ASEAN framework, indicators and monitoring & evaluation system is established	1.	By 2020, the ASEAN framework, indicators, and monitoring & evaluation system is established
A.5.4	PRIORITY 11: Environmental health and health impact assessment (HIA)	2.	Establishment of ASEAN environmental health network. (Note: in order to strengthen the regional collaboration on environmental health threats and ensure sustainable development in the region. These includes surveillance, early warning, communication, and response systems from health risks or health impacts from regional priority issues e.g. trans-boundary haze, electronic waste, toxic chemicals pollution, safe and affordable drinking water and basic sanitation) Capacity Building on HIA for relevant sectors (Note: may include academia, business sectors, community, civil society organizations and government sector)		By 2020, establish ASEAN Environmental Health Network By 2020, regional HIA capacity building action plan for relevant sectors is developed
A.5.6	PRIORITY 12: Disaster Health Management	2.	Establish Disaster Medicine and Emergency Medical System Network (including capacity building for AMS) Strengthen ASEAN collaboration on Disaster Health Management	1.	Collaboration mechanism and network on Disaster Health Management established in 2020

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
HEALTH PRIORITY 8: PR NEGLECTED TROPICAL		JNICABLE DISEASES, EMERGING INFECTION	OUS DISEASES	S AND
1. Ensure a high level of capability and capacity to detect, investigate, contain and manage outbreaks of emerging and re-emerging infectious diseases as well as preparedness for pandemics and other public health emergencies in ASEAN (for example, through cooperation, collaboration and	1.1. Continue the observance of ASEAN Dengue Day and ASEAN Dengue Conference as a platform for sharing best practices and experiences among AMS in the prevention and control of Dengue	Expected Output (EO) 1: Annual ASEAN Dengue Day celebrations/activities at ASEAN and country levels Indicator 1: Number, kind of ASEAN and country level ADD activities conducted. EO 2: Annual Dengue Conference at the ASEAN level Indicator 2: Annual Dengue Conference conducted; and reports disseminated.	ASEAN Member States by rotation (2017 - Cambodia TBC) (2018 - Malaysia) (2019 - Singapore TBC) (2020 - Philippines)	AMS (Cost Sharing)
networking such as epidemiology, clinical or laboratory networks).	1.2. Develop a work plan for the elimination of Lymphatic Filariasis for ASEAN 1.3. Conduct experience sharing activities/study visits among AMS in the elimination of Lymphatic Filariasis	 EO: ASEAN Work Plan for the elimination of Lymphatic Filariasis developed Indicator: 1. Drafting of Workplan for the elimination of Lymphatic Filariasis in process 2. Workplan endorsed and disseminated. EO: Experience sharing/study visits on the elimination of Lymphatic Filariasis Indicator: Number of experience sharing/study visits conducted 	Philippines Co-Lead: Cambodia	
	1.4. Follow-up on the participation of ASEAN Member States to the ASEAN-Canada's GPP Project, covering as follows:	EO 1: Project proposals submitted to and supported by Canada's GPP for AMS capacity building in the area of a. Laboratory capacity to manage emerging		Canada's GPP

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
	a. Strengthening Laboratory Capacity for Emerging and Dangerous Pathogens in the ASEAN Region	and dangerous pathogens b. Biosafety and Biosecurity c. Public Health Emergency Operations Centre (EOC) d. Risk Assessment and Risk	1.4.a. Malaysia & Singapore	
	b. Strengthening Regional Disease Surveillance Networks; The Asian Partnership on Emerging Infectious Disease Research (APIER) and the Mekong Basin Disease Surveillance Network [NOTE: together with ASEAN Plus Three FETN)	Communication. Indicator: Number and kind/nature of proposals submitted to and supported by Canada's GPP	1.4.b. Thailand	
	c. Bio Diaspora: Strengthening ASEAN Preparedness and Response to Biological Threats by Enhancing Regional Capacity in Big Data Analytics and Visualization		1.4.c. Philippines	
	1.5. Regional mechanism to support AMS to meet supply shortfall in drugs/vaccines during outbreaks of rarely seen diseases.	EO: Regional mechanism supporting drugs/vaccines shortfall during outbreaks of rarely seen diseases endorsed by SOMHD.	Singapore	AMS (Cost Sharing)
	a. 2017: Determine needs and mechanism through e-consultation with AMS.	EO a: Consultation with AMS completed		
		EO b: The regional mechanism adopted at		

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
	 b. 2018: Present proposed regional mechanism for endorsement at Cluster 2 Meeting. c. 2019-2020: Conduct simulation exercises 	the Cluster 2 meeting. EO c: Simulation exercises conducted to test mechanisms. Indicator: Exercise report adopted		
	1.6. Operationalise the ASEAN Rabies Elimination Strategy (ARES) Plan of Action a. Review ARES Phase 1 based on established M&E system	EO: ARES Phase 1 reviewed Indicator: ARES Phase 1 Review Report	Viet Nam Co-lead: Indonesia	USAID
	b. Conduct ASEAN Rabies Conference to share good practices using ARES STOP pillars as a back to back meeting of International Conference on Zoonotic Disease Prevention and Control (ZDAP)	EO: ASEAN Rabies Conference conducted in 2017 EO: Good practices and new approaches in rabies elimination shared Indicator: Conference Report	modificala	AMS (Cost Sharing)
	1.7. Continue ASEAN+3 FETN as coordinating platform for multicountry training collaboration. The main activities under ASEAN+3 FETN Network proposed are stated below: a. Promote capacity building of field epidemiology in member states through multi-country and multi-sectoral joint training & FETP trainer/trainee exchange	EO: Annual Meeting of ASEAN+3 FETN conducted EO: One to two FETN trainer/trainee per AMS exchanged every year (if funding available) Indicators: Number of exchanges conducted; No of AMS involved in exchanges.	2016 - Indonesia 2017 - Singapore 2018 - Cambodia (TBC) 2019 - TBD 2020 - TBD Coordinating Country:	AMS (Cost Sharing)

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
	c. Enhance regional multi-country and multi-sectoral collaboration in field epidemiology training and researches through joint workshop, or field studies, researches	EO: Joint workshops and related activities to enhance collaboration. Indicator: No. of joint activities carried out	Thailand	
	d. Sharing experience and best practices among AMS and relevant ASEAN working groups through joint ASEAN +3 FETN VDO Conference and other publication channels.	EO: One to four joint FETN VDO Conference conducted every year Indicators: Number of videoconferences conducted; Number and type of experiences and best practices shared.		
	e. Collaborate with ASEAN Animal Health Sector and other Working Groups, in partnership with other development partners	EO: Joint Consultative Meeting with other sectors conducted at least once a year Indicator: Number of sectors and partners involved in consultation meeting.		
	1.8. Establish ASEAN-EOC Network among ASEAN Member States through the following:	EO: ASEAN EOC Network established in 2016-2017 Indicator: Network endorsed by SOMHD and AHMM	Malaysia	AMS
	a. Identify ASEAN EOC Network Contact Persons from AMS	EO: List of ASEAN EOC Network Contact Points Indicator: Number of AMS designated ASEAN OEC Network Contact Points	Malaysia	AMS
	b. Share timely information (within1-2 weeks) on public healthemergencies or public health risks	EO: Information on PHE and PH risks shared in a timely manner Indicator: Number and type of information	Malaysia (2016-2017) Future	AMS

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
Trogramme otrategies	through ASEAN-EOC Network based on the current event. This will be coordinated by Lead Country. c. Exchange of information (quarterly), sharing best practices and experiences related to emerging and re-emerging infectious diseases as well as preparedness for pandemics and other public health emergencies among ASEAN Member States.	shared to Network EO: Information exchange and sharing conducted at least quarterly Indicator: Number and type of information shared	leadership will be determined at the start of the EOC Network Malaysia (2016-2017) Rotation: Among AMS annually (2018 -2020)	AMS
	d. Conduct training or workshop related to Public Health EOC/event/pandemic or/and regional simulation exercise (esimulation or table top exercise or field simulation exercise etc.)	EO: Training or/and simulation exercise conducted annually Indicators: Number and type of capacity building activity conducted; Number of AMS participated	Malaysia: 2017 Rotation: Among AMS annually (2018 -2020)	Canada's GPP GHSA
	e. Facilitate compilation and documentation of good practices related to preparedness and response to emerging and reemerging infectious diseases, pandemics and other public health emergencies including border control among AMS. (E.g. On policy/protocols/SOPs)	EO: Good practices published in ASEAN website or ASEAN e-Health Bulletin once a year Indicator: Number and type of good practices published.	Malaysia (2016-2017) Rotation: Among AMS annually	ASEC
	1.9. Regional TB prevention and control activities			

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
Trogramme ouralogies	a. Development of ASEAN World TB Day (WTD) and ASEAN TB Conference as a platform for sharing best practices and experiences among AMS in the prevention and control of TB and Multiple Drug Resistance TB (MDR-TB)	EO: ASEAN WTD celebration every two years EO: TB Conference at the ASEAN level every 2 years	Chair of Health Cluster 2 on rotation	Stop TB Partnershi p
	b. Development of World TB Day Message c. To strengthen IHR on TB programme through referral system among National Tuberculosis Program (NTP) focal point of AMS through; c.1. Agreed referral guideline	EO: Message published in ASEAN e-Health Bulletin EO: Guidelines on referral of TB cases among AMS Indicator: Agreed ASEAN IHR on TB guidelines	Malaysia	
	1.10. Ending AIDS in ASEAN a. Response in Ending AIDS through high-level advocacy (development of a Declaration and follow up).	EO: Declaration endorsed by ASEAN Summit Indicator: Declaration on Ending AIDS endorsed, being followed up.	Lao PDR	UNAIDS
	b. Review AWP-IV and develop of AWP-V as part of Cluster 2 Work Programme	EO: AWP IV reviewed and AWP-V endorsed by SOMHD Indicator: AWP-V developed and endorsed	Thailand	UNAIDS / Thailand
	c. Implement ASEAN Cities Getting To Zero Phase III	EO: ACGTZ 3.0 implemented Indicator: Number of cities implementing ACGTZ 3.0	Indonesia	UNAIDS/ AMS

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
	 d. Advocacy in Preventing HIV among people who inject drugs (PWID). 	EOs: Advocacy brief developed; Advocacy workshop conducted Indicators: # of advocacy briefs developed for stakeholders; AMS participating in workshop	Malaysia	UNAIDS / UNODC / Internation al Alliance UNAIDS
	e. Produce/publish the 3rd ASEAN HIV and AIDS Regional Report	EO: Regional report published Indicator: Number of copies published and distributed to stakeholders and related agencies	Philippines Co-Lead: Malaysia	ASEC
	f. Continue to prepare articles for ASEAN E- Health Bulletin	EO: HIV and AIDS articles published in the ASEAN E- Health Bulletin Indicator: Number of articles published	Philippines	UNAIDS/ UNWOME N/UNICEF WHO/
	g. Share lessons learned/study visit on EMTCT	EO: Study visit/workshop conducted Indicator: Number of AMS participating in the study visit/workshop	Thailand	Thailand
	h. Publish World AIDS Day (WAD) Message	EO: Message published in ASEAN Website and ASEAN E-Health Bulletin Indicator: ASEAN WAD Message disseminated	Chair of Health Cluster 2	
	 i. Conduct training/workshop on HIV co-infections and ARV treatment 	EO: HIV Co-infections and ARV treatment training/workshop conducted Indicator: Number of AMS participating in the training/workshop.	Cambodia	China/ WHO/ UNAIDS

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
	1.11. Transform ASEAN RCRC to ASEAN Risk Assessment and Risk Communication (RARC) Centre: a. Submit draft/proposed ASEAN	EO: ASEAN RARC transformation paper	Malaysia	Malaysia
	RARC transformation paper for endorsement	submitted and reviewed Indicator: ASEAN RARC paper endorsed by SOMHD and AHMM		ASEC
	b. Train personnel from AMS MOH and relevant sectors on RARC	EOs: ASEAN Risk Communication Training Module (2nd Edition) adapted to ASEAN RARC Training Module; An average of 2 participants/AMS trained annually Indicators: ASEAN RARC training module; Number of AMS human resources trained annually.	Malaysia	Canada's GPP/ GHSA
	b. Conduct ASEAN RARC Conference for updates, sharing of best practices and lessons learnt on risk assessment and risk communication.	EO: Regional RARC Conference conducted at least every three years. Indicators: Conference report; Number of AMS human resources participating.	Malaysia	Canada's GPP
	c. Conduct development and applied on research RARC	EOs: Development and applied research on RARC conducted; Research summaries published via newsletter or online. Indicator:	Malaysia, 2016 -2017	AMS (Cost Sharing)
	d. Identify AMS contact persons for RARC	EO: AMS contact person identified Indicator:	Malaysia, 2016 - 2017	AMS (Cost Sharing)
HEALTH PRIORITY 9: ST	RENGTHENING LABORATORY CAPAC	CITY		

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
Enhance regional collaboration in addressing the recent and upcoming outbreak in AMS	1.1. Conduct capacity building activities on Biorisk Management in AMS once a year	EO: Capacity-building activities on bio-risk management conducted. Indicator: Number and kind of activities conducted.	Indonesia	WHO
	1.2. Continue implementation of Laboratory Capacity Strengthening initiatives:			
	a. Influenza Laboratory Surveillance	EO: Annual meeting/workshop conducted for sharing information among AMS: Information sharing through Cluster 2 Meeting	Indonesia	WHO
		Indicator: Annual meeting/workshop		
Establishment of ASEAN Reference laboratory network	2.1. Assess laboratory capacity and gaps in the region vis-à-vis Emerging Dangerous Pathogens:			
for priorities diseases	Share list reference laboratories of AMS	EO: Compilation of AMS reference laboratories Indicator: Number of AMS shared national list.	Thailand & Indonesia	GHSA
	b. Develop Referral System Guidelines among AMS	EO: Referral System Guidelines developed Indicator: Guideline adopted, referred to by AMS	Thailand & Indonesia	GHSA
	c. Share testing protocol for emerging diseases	EO: Compilation of testing protocols for emerging diseases Indicator: Number of AMS shared testing protocols	Thailand & Indonesia	GHSA
	d. Develop regional guidelines on specimen sharing within AMS, including Material Transfer/Data	EO 1: Regional guideline on specimen- sharing developed Indicator: Regional specimen-sharing	Thailand & Indonesia	GHSA

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
	Agreement (MTA)	guideline adopted EO 2: Regional MTA developed Indicator: MTA adopted		
	e. Develop regional guidelines on data/information-sharing on EDP	EO: Regional guidelines on EDP data/information-sharing developed Indicator: Guideline on EDP data-information sharing adopted	Thailand & Indonesia	GHSA
	f. Set up a mechanism for technical enhancement (hands on); e.g. on the job training	EO: Mechanism for AMS laboratory technical enhancement on EDP established. Indicator: Mechanism adopted and implemented.	Thailand & Indonesia	GHSA
	g. Determine the need for Bio- Banking services	EO: Report on the needs, gaps, and recommendations on the way forward of BioBanking in ASEAN after the 1 st consultation Indicator: BioBanking report adopted and circulated.	Singapore & Philippines	Canada's GPP
	2.2. Develop a mechanism of QA system for EDP at regional level	EO: Mechanism for EQA system for EDP at regional level developed (subject to reference labs capacities) Indicator: Mechanism adopted	Thailand	
HEALTH PRIORITY 10: COMBATING ANTIMICROBIAL RESISTANCE (AMR)				•
Initiatives to slow down the occurrence and spread of AMR	Develop Monitoring and Evaluation framework for AMR control in ASEAN	EO1: Monitoring and Evaluation framework established. Indicator: ASEAN Framework endorsed	Thailand & Singapore	US CDC/ WHO
	1.2. Share best practices on rationale	EO: Good practices on rational use of	Malaysia	TBC

Health Priorities and Programme Strategies	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
	use of antimicrobials through antimicrobial stewardship and antibiotics utilization surveillance programme	antimicrobials shared by 2018 Indicator: Number and kind of good practices produced and shared		
	Capacity building on antimicrobials stewardship and antibiotics utilization surveillance	EO: Antimicrobial stewardship and antibiotic utilization surveillance training conducted Indicator: Number of trainings conducted	Philippines	WHO (TBC) AMS Cost Sharing
	Continue the conduct of rapid assessment on regulatory measures in combating AMR both in animal and human health	EO: Final report by(TBC Malaysia & Philippines) Indicator: Number of rapid assessments conducted.	Malaysia Co-Lead: Philippines	
	3. Establish Human, Animal and Food platform to discuss on AMR at ASEAN level: a. Hold special meeting to discuss ASEAN AMR Surveillance Data	EO: Inter-sectoral platform on AMR formed. Indicator: Number of sectors involved in the platform. EO: Integrated human, animal and food surveillance data discussed in meeting. Indicator: Number of meetings held.	Malaysia & Indonesia	WHO
	b. Advocate fighting against AMR in the ASEAN through ASEAN Declaration on AMR.	EO: ASEAN Declaration on Combating AMR endorsed by ASEAN Summit in 2017 Indicator: Declaration adopted.	Philippines	WHO

HEALTH PRIORITY 11: ENVIRONMENTAL HEALTH AND HEALTH IMPACT ASSESSMENT (HIA)

Health Priorities and	Project and Activities from 2016 – 2020	Expected Outputs and Output Indicators	Lead Country	Source of Support
1. Strengthen environmental health capacity to manage ASEAN's priority environmental health risks and issues, including set up ASEAN environmental health knowledge	1.1 Conduct an ASEAN Training Needs Assessment on Environmental Health for AMS	EO: Training needs assessment conducted by end of 2017 Indicator: Needs assessment report submitted/adopted.	Malaysia	UNICEF (Related to WASH, and knowledge managem ent on WASH)
network (Risks and issues are for examples: water and sanitation, solid and hazardous waste, toxic chemicals, transboundary pollution, climate change)	Develop mechanism to strengthen capacity among AMS, including conduct of capacity building activities among AMS	EO: EH capacity strengthening mechanism established Indicator: National Environmental health Contact Person of AMS has been identified; and mechanism serves as basis for implementing capacity building activities EO: Capacity building activities conducted Indicator: Number and kind of capacity building activities	Thailand Co-lead Malaysia	UNICEF
	Share knowledge and practices among AMS	EO: Knowledge and practices on environmental health management shared. Indicator: Number and kind of knowledge sharing events	Thailand	UNICEF
2. Empowerment and capacity building of HIA application as "Health in All Policy" by integration into ASEAN universities curriculums for business sectors, community, civil	2.1. Joint capacity building for HIA as a key strategic for Health in All policies (HiAP) among AMS in collaboration with relevant partners through joint research, share experiences, advocate for having legislation or policy on HIA, integration into ASEAN Universities curriculums.	building activities on HIA carried out Indicators: Number and kind of joint/ collaborative activities; Number and kind of partners involved. EO 2: Capacity-building promote through HIA training center Indicators: # of HIA training courses/	Thailand	

Health Priorities and	Project and Activities	Expected Outputs	Lead	Source of
Programme Strategies	from 2016 – 2020	and Output Indicators	Country	Support
society organizations		curriculums		
and government				
sector		EO 3: AMS contact person on HIA		
		Indicators: List of identified AMS contact		
		person		
		EO4: Sharing knowledge and practices		
		conduct.		
		Indicators: # of and kind of knowledge		
		sharing events on HIA		
		EO 5: Training center establishment		
		Indicator: Training center established		
HEALTH DRIODITY 12: D	DISASTER HEALTH MANAGEMENT			
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Strengthen regional	1.1. Develop national and community	EO : Every AMS has PHEOC/Committee	Philippines	
prevention,	health emergency and disaster risk	accommodating all hazards by December	Co-Lead:	
preparedness and	reduction management through:	2017 (depending on Country mechanism)	Malaysia	
response through	a. Public Health Emergency	Indicator: No. of AMS with PHEOC or		
capacity building as	Operation Centre (PHEOC)/ Committee	Committee adopting all hazards approach		
well as enhancing operation system on	b. Public Health awareness and	EO: Public health awareness and		
disaster/health	preparedness	programmes implemented by AMS		
emergency medicine	Through -	programmes implemented by raive		
at national level and	- Advocacy	Indicators: No. of AMS implementing		
disaster medicine in	- Developing Guideline/TOR	programmes; Kind of programmes		
regional level by	- Capacity Building	implemented.		
advocacy on ASEAN	- Developing Network			
collaboration network	1.2. Develop Declaration/Joint	EO: ASEAN Leaders' Declaration/Joint	Thailand	
through strong focal	Statement on Disaster Health	Statement adopted in late 2017	Co-Lead:	
point in each AMS.	Management	Indicator: Adopted Declaration/Joint	Philippines	
		Statement.		

Health Priorities and	Project and Activities	Expected Outputs	Lead	Source of
Programme Strategies	from 2016 – 2020	and Output Indicators	Country	Support
	1.3. Implement the ASEAN-ARCH	EO: ASEAN-ARCH Project activities	Thailand	JICA
	project (2016-2019) with its	implemented, and outputs produced.	Viet Nam	
	regional activities, targets, output	Indicator: Extent of achievement of project	Philippines	
	and indicators.	objectives and targets as per project		
		review/evaluation.		