CHAPTER 2:

ASEAN Health Cluster 2 on Responding to All Hazards and Emerging Threats Work Programme 2026-2030

RESPONDING TO ALL HAZARDS AND EMERGING THREATS

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ASEAN HEALTH CLUSTER 2
ON RESPONDING TO ALL HAZARDS AND EMERGING THREATS
WORK PROGRAMME 2026-2030

ALIGNMENT WITH ASCC STRATEGIC PLAN

Strategic Measures:

- 4.1.1 / 4.1.2 / 4.1.9 / 4.2.1
- 6.1.1 / 6.1.6 / 6.1.11
- 11.2.1 / 11.2.2 / 11.2.4 / 11.2.5
- 12.2.3

ALIGNMENT WITH SUSTAINABLE DEVELOPMENT GOALS

GOALS

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)

CLUSTER GOALS

1 To promote resilient health system in response to communicable diseases, emerging infectious diseases, neglected tropical diseases and zoonotic diseases, including AMR, and through strengthening of One Health approach;

2 To enhance regional health security through integrated preparedness and response to public health emergencies, strengthened laboratory network and intensified effective disaster health management in the region.

3 To strengthen preparedness and response to environmental health threats, including contributing to addressing the health impacts of climate change in the region, through partnerships with other relevant sectoral bodies.

CLUSTER STRATEGIES

- To advance health security through strengthening institutional capacities, capabilities and cross-sectoral collaboration to prevent, prepare for, detect, respond to and mitigate all hazards including communicable diseases, neglected tropical diseases emerging and re-emerging infectious diseases, zoonotic diseases and antimicrobial resistance, including strengthening laboratory capacity.
- Strengthening and advancing regional mechanisms on preparedness and response for pandemics and other public health emergencies in line with International Health Regulations (IHR).
- Enhancing the engagement with all relevant stakeholders using a whole-of government and a whole-of-society approach to foster greater understanding and collaboration in preparedness and response to pandemics and other PHEs.
- Implement the regional action plans including AMR through One Health approach, promoting comprehensive multi-sectoral and multidisciplinary engagement and participation of all governments and relevant stakeholders.
- Strengthen capacities to manage environmental health risks, health impact assessment (HIA), and address health impacts of climate change.
- Expanding regional and national preparedness and response through targeted capacity building and knowledge sharing on emerging health challenges and enhancement of operation system on disaster health management.
- Promote One Health approach in ASEAN region.

PROGRAMME OBJECTIVES	
6. Prevention, Detection and Control of Infectious Diseases Threats, including Antimicrobial Resistance, through Strengthening One Health Approach	1. To support all AMS through policy advocacy, regional exchange of lessons and information, collaboration, and coordination initiatives in the following specific areas and other zoonotic diseases affecting AMS: a. Diseases for elimination: a. Rabies b. Malaria b. Diseases for prevention and control: a. TB b. HIV and AIDS c. Dengue c. Priority pathogens, including AMR organisms 2. To implement 2026-2030 work plan of the ASEAN Strategic Framework on Combating AMR through One Health Approach, through engagement with relevant sectors and stakeholders.
7. Strengthening Health Security towards Regional Preparedness and Response to Public Health Emergencies	1. To support the preparatory activities and operationalisation and strengthening of regional health emergency mechanisms, including the ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED), to enhance regional coordination and response to public health emergencies, as well as strengthening health-related regional cooperation and existing mechanisms. 2. To strengthen IHR 2005 core capacities and health security of ASEAN Member States through enhanced regional cooperation including information sharing, cross-border contact tracing, regional capacity-building initiatives, policy advocacy, and exchange of information, expertise and best practices among ASEAN Member States. 3. To enhance regional capacities in biosafety and biosecurity, including addressing dual-use research of concern, and strengthening multisectoral and multi-pillar collaboration at the health security interface with relevant sectors to address chemical, biological, radiological and nuclear (CBRN)-related threats. 4. To strengthen regional cooperation, workforce capacity, and partnerships in advancing health security, including through field epidemiology, biosafety and biosecurity, laboratory and surveillance systems strengthening, and engagement with ASEAN Dialogue and Development Partners to support sustainable preparedness and response capacities across ASEAN Member States.

PROGRAMME OBJECTIVES	
8. Strengthening Laboratory Capacity	1. To operationalise and strengthen the ASEAN laboratory-related network as a regional platform for collaboration, coordination, and capacity building among ASEAN Member States, including enhancing laboratory preparedness and response to public health emergencies. 2. To strengthen regional laboratory collaboration in pathogen detection and genomic surveillance, including the exchanging of information, expertise, and technologies to support early detection and response to emerging and re-emerging infectious diseases.
9. Environmental Health, Health Impact Assessment and Health Impact of Climate Change	1. To strengthen the capacity of the health sector and relevant stakeholders to conduct health impact assessments (HIA), manage environmental health risks, and enhance climate change adaptation and resilience to address the health impacts of climate change.
10. Disaster Health Management	1. To strengthen regional coordination and collaboration mechanisms for disaster health management by enhancing operational platforms, standardizing procedures, and institutionalizing a sustainable ecosystem for knowledge management and capacity-building at all levels

PROGRAMME KEY PERFORMANCE TARGETS

6. Prevention, Detection and Control of Infectious Diseases Threats, including AMR, through Strengthening One Health Approach	By 2030, ***Disease elimination:*** 1. mid-term progress and review has been conducted for 'rabies towards 2030 elimination' in all AMS. 2. mid-term progress and review has been conducted for 90% reduction in case incidence and mortality rates for malaria ***Disease prevention and control:*** 3. reduced dengue incidence rate by at least 25% for the period of 2026 - 2030 compared to the median incidence rate of the past 5 years (2021 to 2025). 4. 95% of people living with HIV (PLHIV) knowing their status; 95% of those who know their HIV status receive antiretroviral treatment; and 95% of PLHIV received treatment has success viral suppression <1000 copies/ml. 5. reduced tuberculosis incidence rate by 80%, and TB deaths by 90% compared to baseline in 2015. ***AMR:*** 6. 100% of AMS are enrolled in GLASS AMC and contributing national level data on AMC. 7. 100% of AMS have updated NAP on AMR with an established monitoring and evaluation system in place ***One Health*** 8. ASEAN One Health Network Secretariat is operationalized.
7. Strengthening Health Security towards Regional Preparedness and Response to Public Health Emergencies	By 2030, 1. establishment agreement of the ASEAN Public Health Emergency and Emerging Diseases (ACPHEED) has been signed, ratified, and its pillars and secretariat have been operationalised. 2. 70% of all Joint External Evaluation (JEE) indicators previously evaluated progressed with at least 1 level of implementation or maintained at level 4 or 5. 3. regional strategies, frameworks, protocols and mechanism in responding to Public Health Emergencies are operationalised and sustained.

PROGRAMME KEY PERFORMANCE TARGETS

8. Strengthening Laboratory Capacity	By 2030, 1. ASEAN Public Health Laboratory Network operationalised to enhance relevant capacity building initiatives among ASEAN Member States and support regional surveillance of public health emergencies and emerging diseases. 2. AMS have functional data-driven, sustainable, and resilient laboratory systems strengthened through interoperable data and genomic surveillance, a competent workforce, and surge capacity for emergency response
9. Environmental Health, Health Impact Assessment and Health Impact of Climate Change	By 2030, 1. Regional platforms for promoting the culture of sharing information, best practice, and knowledge on health impact assessment (HIA) is established. 2. Initiatives to support socially inclusive and gender responsive health vulnerability assessment and adaptation planning for climate-related health risks are promoted and strengthened, in accordance with national contexts and priorities. 3. 60% of AMS implement national guideline or standard on low carbon and climate resilient health facility, and at regional level ASEAN guideline is developed and updated
10. Disaster Health Management	By 2030, 1. ASEAN will have achieved an operational and resilient disaster health management system, driven by the implementation of the 2026-2030 Plan of Action, institutionalized regional mechanisms, and a unified framework for seamless coordination and collective response

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES							
HEALTH PRIORITY 6. PREVENTION, DETECTION AND CONTROL OF INFECTIOUS DISEASES THREATS, INCLUDING AMR THROUGH STRENGTHENING ONE HEALTH APPROACH							
1. To support all AMS through policy advocacy, regional exchange of lessons and information, collaboration, and coordination initiatives in the following specific areas and other zoonotic diseases affecting AMS: a. Diseases for elimination: a.1 Rabies b .2 Malaria b. Diseases for prevention and control: a. 1 TB b. 2 HIV and AIDS c. 3 Dengue c. Priority pathogens, including AMR organisms	By 2030, **Disease elimination:** 1. mid-term progress and review has been conducted for 'rabies towards 2030 elimination' in all AMS. 2. mid-term progress and review has been conducted for 90% reduction in case incidence and mortality rates for malaria **Disease prevention and control:** 3. reduced dengue incidence rate by at least 25% for the period of 2026 - 2030 compared to the median incidence rate of the past 5 years (2021 to 2025).	**1. Continue implementation of initiatives to sustain advocacy for TB prevention and control in the region**	a. AHC 2 messages on World TB Day are issued annually. b. ASEAN TB Conference conducted every two years, and its outcome document is adopted.	Incumbent AHC 2 Chair Thailand	2026 - 2030	To be articulated in concept note	WHO Stop TB Partnership
		2. Continue implementation of ASEAN Leaders' Declaration on Ending Inequalities and Getting Back on Track to End AIDS by 2030 *(Note: Please refer to **Annex 1** for the ASEAN Health Sector Work Plan for HIV and AIDS 2026-2030)*	a. ASEAN Health Sector Work Plan on HIV and AIDS 2026-2030 to end inequalities and get back on track to end AIDS implemented, monitored and reviewed. b. Regional advocacy initiatives, including issuance of World AIDS Day messages, conducted.	Lao PDR [Lead Countries of activities in work plan] Incumbent AHC 2 Chair	2026 - 2030	ASEAN OSHNET, SOMED, SOMY	UNAIDS WHO

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES							
	4. 95% of people living with HIV (PLHIV) knowing their status; 95% of those who know their HIV status receive antiretroviral treatment; and 95% of PLHIV received treatment has success viral suppression <1000 copies/ml. 5. reduced tuberculosis incidence rate by 80%, and TB deaths by 90% compared to baseline in 2015.	**3. Continue promotion of infection prevention and control through the ASEAN-United States Infection Prevention and Control Task Force** (Note: Please refer to Annex 2 for the ASEAN-US IPC TF Work Plan 2026-2030)	a. ASEAN-US IPC TF Work Plan 2026-2030 adopted and implemented	TF Member from AMS of incumbent AHC 2 Chair, as ASEAN Co-Chair of IPC TF [Lead Countries of activities in work plan]	2026 - 2030	ACP AMR, AOHN, ASEAN EOC Network, ASEAN+3 FETN	US CDC / HSP

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CORE ACTIVITIES							
	By 2030, 1. ASEAN One Health Network Secretariat is operationalized.	**4. Implementation of ASEAN Leaders' Declaration on One Health Initiatives to further strengthen regional coordination and cross-sectoral engagement in the prevention, detection and control of health threats with pandemic potential** *(Note: Please refer to **Annex 3** for the ASEAN Health Sector-led activities of the ASEAN OHJPA 2025-2030)*	a. ASEAN One Health Network (AOHN) operational guided by adopted Terms of Reference and supported by AOHN Secretariat b. ASEAN Health Sector-led initiatives in the ASEAN One Health Joint Plan of Action (OHJPA) 2025-2030 implemented and reviewed. c. Relevant ASEAN sectors, centres and entities are more engaged in OHI through support and cooperation with ASEAN Health Sector.	Indonesia SOMHD and AHC 2 CC from AMS serving as Lead and Co-Chairs of the AOHN Coordinating Committee [Lead Countries of activities in work plan]	2026 - 2030	SOM-AMAF, ASOEN, AOHN Members	Quadripartite Partners

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CORE ACTIVITIES							
2. To implement 2026-2030 Work Plan of the ASEAN Strategic Framework on Combating AMR through One Health Approach, through engagement with relevant sectors and stakeholders	By 2030, 1. 100% of AMS are enrolled in GLASS AMC and contributing national level data on AMC 2. 100% of AMS have updated NAP on AMR with an established monitoring and evaluation system in place	**5. Development and implementation of 2026-2030 Work Plan of the ASEAN Strategic Framework on Combating AMR through One Health Approach, in collaboration with ASEAN sectors and stakeholders.** *(Note: Please refer to* **Annex 4** *for the ASEAN Health Sector AMR Work Plan 2026-2030)*	a. Multisectoral regional consultation meeting conducted for the finalisation of work plan 2026-2030 of the ASF – AMR 2019-2030. b. ASEAN Health Sector-led activities in the work plan 2026-2030 work plan of ASF-AMR implemented and reviewed. c. Implementation of multi-sectoral work plan 2026-2030 of ASF-AMR regularly reviewed through the ASEAN Contact Points for AMR and AOHN.	Philippines [Lead Countries of activities in work plan]	2026 - 2030	AHC 4, AOHN, ACP-AMR from SOM-AMAF / ASWGL and ASWGFi, ASOEN, ACB, ARAC	Quadripartite Partners (WHO, WOAH, FAO, UNEP) United Kingdom (UKHSA)

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CORE ACTIVITIES							
HEALTH PRIORITY 7. STRENGTHENING HEALTH SECURITY TOWARDS REGIONAL PREPAREDNESS AND RESPONSE TO PUBLIC HEALTH EMERGENCIES							
1. To support the preparatory activities and operationalisation and strengthening of regional health emergency mechanisms, including the ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED), to enhance regional coordination and response to public health emergencies, as well as strengthening health-related regional cooperation and existing mechanisms.	By 2030, 1. establishment agreement of the ASEAN Public Health Emergency and Emerging Diseases (ACPHEED) has been signed, ratified, and its pillars and secretariat have been operationalised.	**6. Finalisation, endorsement and signing of ACPHEED establishment agreement, related instruments and documents**	a. Trilateral Meetings of Host Countries and Special SOMHD conducted to finalise and conclude consultations on EA/ ACPHEED b. EA/ACPHEED signing ceremony conducted c. Host Country Agreements signed between ACPHEED Pillars / Secretariat and Governments of Host Countries d. ACPHEED Governing Board convened, and Rules of Procedures, Strategic and Work Plans adopted	SOMHD Chair ACPHEED Host Countries	2027-2028; EA signing in 2027 HCA signing in 2028	ASEAN EOC Network, ASEAN Plus Three FETN, ABVC, ASEAN Biosafety and Biosecurity Network	WHO, Japan (JAIF, JICA), Australia (DFAT, A4AF), UK (UKHSA)

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CORE ACTIVITIES							
2. To strengthen IHR 2005 core capacities and health security of ASEAN Member States through enhanced regional cooperation including information sharing, cross-border contact tracing, regional capacity-building initiatives, policy advocacy, and exchange of information, expertise and best practices among ASEAN Member States.	By 2030, 2. 70% of all Joint External Evaluation (JEE) indicators previously evaluated progressed with at least 1 level of implementation or maintained at level 4 or 5	**7. Implementation of detailed design and preparatory support for the setting-up and operation of ACPHEED Pillars and Secretariat**	a. Regional consultations for the finalisation of strategic plans, operational procedures and mechanisms, infrastructure and technology standards, among others, are conducted. b. Experts are deployed and provide technical assistance to host countries of ACPHEED Pillar and Secretariat in preparatory work. c. Tailor-made training and knowledge sharing programmes designed and carried out for AMS officials who will be engaged in ACPHEED-related work d. ASEAN Point of Entry Contract Points, guided by terms of reference and supported by secretariat, is established and implement capacity building activities in support of ACPHEED DRA e. Surveillance roadmap/ framework is developed and implemented as facilitated ACPHEED	ACPHEED Host Countries	2026 -2027	ASEAN EOC Network ASEAN Plus Three FETN ABVC ASEAN Biosafety and Biosecurity Network	Japan (JAIF, JICA) Australia (DFAT, A4AF) UK (UKHSA) US (CDC) WHO

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES							
3. To enhance regional capacities in biosafety and biosecurity, including addressing dual-use research of concern, and strengthening multisectoral and multi-pillar collaboration at the health security interface with relevant sectors to address chemical, biological, radiological and nuclear (CBRN)-related threats.	By 2030, 3. regional strategies, frameworks, protocols and mechanism in responding to Public Health Emergencies are operationalised and sustained	**8. Operationalisation of the ASEAN Leaders' Declaration on Strengthening Regional Biosafety and Biosecurity through the ASEAN Biosafety and Biosecurity Network** *(Note: Please refer to **Annex 5** for the Plan of Action for the Operationalisation of the ASEAN Leaders' Declaration on Strengthening Regional Biosafety and Biosecurity)*	a. Plan of Action for the Operationalisation of the ASEAN Leaders' Declaration on Strengthening Regional Biosafety and Biosecurity, with its objectives, targets and project activities, is adopted, implemented, reviewed and evaluated. b. ASEAN Biosafety and Biosecurity Network is established and functional guided by adopted terms of reference.	Lao PDR [Lead Countries of activities in POA]	2026 - 2030	ASEAN Chemical, Biological and Radiological Defence Experts ASEAN SOM (MOFA)	Canada (WTRP) EU CBRN COE, WOAH, WHO, IFBA, IEGBBR, UK HSP, UKHSA
		9. Implementation of the Mitigation of Biological Threats Programme – Phase 3 to institutionalise mechanisms and platforms that strengthen regional health security *(Note: Please refer to **Annex 6** for project activities of MBT Programme – Phase 3 for the period 2026-2028 and the subsequent programme)*	a. MBT Programme – Phase 3 with project components on (i) strengthening biosafety and biosecurity, (ii) disease surveillance, (iii) public health preparedness and response, (iv) health security interface at national and regional levels, is implemented, reviewed and evaluated. b. New Health Security programming and activities that represent convergence between health sector, security and other relevant sectors to address emerging and complex health security threats, is identified and developed.	[Lead Countries of project components of MBT Programme Phase 3: Brunei Darussalam, Indonesia, Lao PDR, Malaysia, Philippines, Thailand]	2026 - 2028	ASEAN Chemical, Biological and Radiological Defence Experts ASEAN SOM (MOFA)	Canada's Weapons Threat Reduction Program

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES							
		10. Intensify ASEAN+3 FETN through strengthening multisectoral collaboration and capacity building activities *(Note: Please refer to **Annex 7** for project activities of ASEAN+3 FETN Work Plan 2026-2028)*	ASEAN+3 FETN Work Plan 2026 – 2030 project activities in the operationalisation of the three main strategies (i) Strengthening National FETP Workforce, (ii) Fostering sustainable multi-sectoral cooperation and One Health, and (iii) Strengthening regional mechanism and resources pools for enhanced support, is implemented, reviewed and evaluated.	Thailand (host of ASEAN+3 FETN Coordinating Secretariat) [Lead Countries of activities in work plan]	2026 - 2030	ASEAN Veterinary Epidemiological Group (AVEG)	Canada's WTRP, U.S. CDC, WHO, SAFETYNet, KDCA, ASEAN+ FETN Foundation
HEALTH PRIORITY 8. STRENGTHENING LABORATORY CAPACITY							
1. To operationalise and strengthen the ASEAN laboratory-related network as a regional platform for collaboration, coordination, and capacity building among ASEAN Member States, including enhancing laboratory preparedness and response to public health emergencies.	By 2030, 1. ASEAN Public Health Laboratory Network operationalised to enhance relevant capacity building initiatives among ASEAN Member States and support regional surveillance of public health emergencies and emerging diseases.	**11. Establishment and operationalisation of ASEAN Public Health Laboratory Network (ALN)**	a. ALN terms of reference developed and adopted b. the ASEAN Public Health Laboratory Network (ALN) Secretariat is established, facilitated and served by ACPHEED/ ACPHEED DRA host country during the preparatory phase c. ALN plan of action/specific project activities, identified, adopted, implemented and reviewed	Indonesia	2026-2027 (ALN establish-ment)	To be articulated in concept note	WHO, JICA, US-CDC, UK-HSA

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CORE ACTIVITIES							
2. To strengthen regional laboratory collaboration in pathogen detection and genomic surveillance, including the exchanging of information, expertise, and technologies to support early detection and response to emerging and re-emerging infectious diseases.	By 2030, 3. AMS have functional data-driven, sustainable, and resilient laboratory systems strengthened through interoperable data and genomic surveillance, a competent workforce, and surge capacity for emergency response	**12. Implementation of ASEAN Genomic Surveillance Initiative to enhance genomic surveillance capacity for early detection and control of priority pathogens**	a. National surveillance planning with pathogen genomics of AMS is enhanced b. Laboratory and bioinformatics capacity and quality assurance for pathogen genomics is strengthened c. Best practices, including standards and mechanisms, for secure sharing of pathogen genomic information and data, are identified and pilot-tested	Singapore Indonesia	*To be articulated in concept note*	*To be articulated in concept note*	WHO (SEARO, WPRO) Asia Pathogen Genomics Initiative (APGI) - Duke-NUS Centre for Outbreak Preparedness
HEALTH PRIORITY 9. ENVIRONMENTAL HEALTH, HEALTH IMPACT ASSESSMENT AND HEALTH IMPACTS OF CLIMATE CHANGE							
[No core activity identified under this Health Priority.]							

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES							
HEALTH PRIORITY 10. DISASTER HEALTH MANAGEMENT							
To strengthen regional coordination and collaboration mechanisms for disaster health management by enhancing operational platforms, standardizing procedures, and institutionalizing a sustainable ecosystem for knowledge management and capacity-building at all levels.	By 2030, ASEAN will have achieved an operational and resilient disaster health management system, driven by the implementation of the 2026-2030 Plan of Action, institutionalized regional mechanisms, and a unified framework for seamless coordination and collective response	**13. Implement the 2026-2030 Plan of Action for the ASEAN Leaders' Declaration on Disaster Health Management** *(Note: Please refer to **Annex 8** for the POA for ALD – DHM 2026-2030)*	a. POA for ALD – DHM 2026-2030 implemented through RCC-DHM, AIDHM and AANDHM	RCC-DHM Chair, with support from RCC-DHM Secretariat *[Lead Countries of project activities in work plan]*	2026 - 2030	AHC 1, 3 and 4 ACDM / WG PPR AHA Centre ADMM / ACMM ATWG CIMIC	WHO, JICA

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
ESSENTIAL ACTIVITIES							
HEALTH PRIORITY 6. PREVENTION, DETECTION AND CONTROL OF INFECTIOUS DISEASES THREATS, INCLUDING AMR THROUGH STRENGTHENING ONE HEALTH APPROACH							
1. To support all AMS through policy advocacy, regional exchange of lessons and information, collaboration, and coordination initiatives in the following specific areas and other zoonotic diseases affecting AMS: a. Diseases for elimination: a. 1 Rabies b. 2 Malaria b. Diseases for prevention and control: a. 1 TB b. 2 HIV and AIDS c. 4 Dengue c. Priority pathogens, including AMR organisms	By 2030, **Disease elimination:** 1. mid-term progress and review has been conducted for 'rabies towards 2030 elimination' in all AMS. 2. mid-term progress and review has been conducted for 90% reduction in case incidence and mortality rates for malaria **Disease prevention and control:** 3. reduced dengue incidence rate by at least 25% for the period of 2026 - 2030 compared to the median incidence rate of the past 5 years (2021 to 2025).	**1. Implementation of ASEAN Rabies Elimination Strategy (ARES) 2030 in cooperation with the ASEAN animal health sector** *(Note: Please refer to **Annex 9** for ASEAN Health Sector Work Plan for ARES 2026-2030)*	a. ASEAN Health Sector focal points for the ASEAN Rabies Coordination Group (ARCG) actively engage in ARES-related activities and initiatives. b. ASEAN Health Sector-led activities in the 2026-2030 work plan for ARES 2030 endorsed, implemented, monitored and evaluated.	Viet Nam Indonesia	2026 - 2030	SOM-AMAF / ASGWL	Quadripartite Partners: FAO, UNEP, WHO, WOAH
		2. Implementation of malaria work plan to sustain regional response and accelerate progress towards malaria elimination in the region *(Note: Please refer to **Annex 10** for the Work Plan for Malaria Control 2026-2030)*	a. Regional capacity to control, eliminate and prevent resurgence of malaria is enhanced b. Capacity for surveillance and cross-border collaboration is strengthened c. Capacity for sustainable resource mobilisation for malaria elimination is strengthened	Malaysia Philippines Indonesia	2026 - 2030	ASEAN EOC Network ASEAN BVC	WHO, APLMA/ APMEN

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
ESSENTIAL ACTIVITIES							
	4. 95% of people living with HIV (PLHIV) knowing their status; 95% of those who know their HIV status receive antiretroviral treatment; and 95% of PLHIV received treatment has success viral suppression <1000 copies/ml. 5. reduced tuberculosis incidence rate by 80%, and TB deaths by 90% compared to baseline in 2015.	**3. Sustain annual observance of ASEAN Dengue Day**	a. Advocacy and technical exchanges on the prevention and control of dengue through ASEAN Dengue Day conducted with regional and international partners b. Regional activity is conducted for technical exchanges on the prevention and control of dengue	Incumbent AHC 2 Chair Timor-Leste (co-lead)	2026 - 2030	*To be articulated in concept note*	WHO
HEALTH PRIORITY 7. STRENGTHENING HEALTH SECURITY TOWARDS REGIONAL PREPAREDNESS AND RESPONSE TO PUBLIC HEALTH EMERGENCIES							
[No essential activity identified under this Health Priority.]							
HEALTH PRIORITY 8. STRENGTHENING LABORATORY CAPACITY							
[No essential activity identified under this Health Priority.]							

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
ESSENTIAL ACTIVITIES							
HEALTH PRIORITY 9. ENVIRONMENTAL HEALTH, HEALTH IMPACT ASSESSMENT AND HEALTH IMPACTS OF CLIMATE CHANGE							
1. To strengthen the capacity of the health sector and relevant stakeholders to conduct health impact assessments (HIA), manage environmental health risks, and enhance climate change adaptation and resilience to address the health impacts of climate change.	By 2030, 1. Regional platforms for capacity building, training, and networking on environmental health and climate change are strengthened	**4. Convene the ASEAN HIA Forum for policy dialogue, technical exchange, and sharing of tools, methodologies, and case studies including on climate-sensitive diseases**	a. ASEAN HIA Forum established and regularly convened b. Training materials developed	Thailand	2026 - 2030	*To be articulated in concept note*	*To be articulated in concept note*
	By 2030, 2. Initiatives to support socially inclusive and gender responsive health vulnerability assessment and adaptation planning for climate-related health risks are promoted and strengthened, in accordance with national contexts and priorities	**5. Support AMS on HNAP through provision of technical guidance, tools, and peer learning platform**	a. Guidance and tools on HNAP available b. Documented case studies and good practices c. Increased AMS engagement	Thailand	2026 - 2030	*To be articulated in concept note*	*To be articulated in concept note*
HEALTH PRIORITY 10. DISASTER HEALTH MANAGEMENT							
[No essential activity identified under this Health Priority.]							

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
EXPANDED ACTIVITIES							
HEALTH PRIORITY 6. PREVENTION, DETECTION AND CONTROL OF INFECTIOUS DISEASES THREATS, INCLUDING AMR THROUGH STRENGTHENING ONE HEALTH APPROACH							
[No expanded activity under this Health Priority.]							
HEALTH PRIORITY 7. STRENGTHENING HEALTH SECURITY TOWARDS REGIONAL PREPAREDNESS AND RESPONSE TO PUBLIC HEALTH EMERGENCIES							
[No expanded activity identified under this Health Priority.]							
HEALTH PRIORITY 8. STRENGTHENING LABORATORY CAPACITY							
[No expanded activity identified under this Health Priority.]							

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

PROGRAMME OBJECTIVES	PROGRAMME KEY PERFORMANCE TARGETS	PROJECT ACTIVITIES	EXPECTED OUTPUTS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
EXPANDED ACTIVITIES							
HEALTH PRIORITY 9. ENVIRONMENTAL HEALTH, HEALTH IMPACT ASSESSMENT AND HEALTH IMPACTS OF CLIMATE CHANGE							
To strengthen the capacity of the health sector and relevant stakeholders to conduct health impact assessments (HIA), manage environmental health risks, and enhance climate change adaptation and resilience to address the health impacts of climate change.	By 2030, ASEAN Initiatives and good practices to promote low carbon and climate resilient healthcare, health infrastructure and reduce climate-related environmental health risks, including water-related health hazards, are promoted through WASH and risk communication, particularly for vulnerable populations	**1. Promote, facilitate, and implement the sharing of good practices and capacity building on climate-resilient and low-carbon healthcare systems integrated with risk communication to reduce environmental health risks across ASEAN**	a. Documented and disseminated ASEAN good practices on climate-resilient, low-carbon healthcare systems, b. Strengthened regional capacity in climate resilient, low carbon capacity, and risk communication to reduce climate-related environmental health risks	Malaysia	2026 – 2030	*To be articulated in concept note*	*To be articulated in concept note*
HEALTH PRIORITY 10. DISASTER HEALTH MANAGEMENT							
[No expanded activity under this Health Priority.]							

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

Annex 1.

ASEAN HEALTH SECTOR WORK PLAN ON HIV AND AIDS 2026 – 2030

Introduction

The *ASEAN Health Sector Work Plan on HIV and AIDS 2026-2030* aims to sustain the operationalisation of the *ASEAN Leaders' Declaration on Ending Inequalities and Getting on Track to End AIDS by 2030* which was adopted at the 40th and 41st ASEAN Summit in Phnom Penh, Cambodia, on 11 November 2022. The Declaration renews the commitment of ASEAN to end inequalities that continue to hinder the responses to HIV and AIDS and constitutes the region's alignment with the United Nations General Assembly *Political Declaration on HIV and AIDS: Ending Inequalities and Getting on Track to End AIDS by 2030*, adopted in the 74th Plenary Meeting on 8 June 2021.

The Work Plan was crafted as part of the development of the Work Programme 2026-2030 of ASEAN Health Cluster 2 on Responding to All Hazards and Emerging Threats, through virtual intersessional sessions between December 2025 – April 2026 and in-person consultations for the finalisation of the work programmes through the Collective Development Meeting and Workshop on 20-23 April 2026 and the Special Senior Officials Meeting on Health Development (SOMHD) on 6-8 May 2026. The Work Plan was finalised, endorsed and adopted as part of the broader process for the Work Programmes that took place between May – September 2026.

The Work Plan will be implemented, monitored and evaluated by Lead Countries together with ASEAN Contact Points for HIV and AIDS from all ASEAN Member States in cooperation with external partners, in the context of the overall internal monitoring and evaluation mechanism of the ASEAN Strategic Health Agenda 2026 – 2030 and Work Programme of ASEAN Health Cluster 2.

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES					
1. Get on Track					
1. Share lessons learned / study visit on the elimination of mother-to-child transmission	Study visits and workshops for sharing of EMTCT practices and lessons are conducted	Thailand	2026 - 2030	*To be articulated in concept note*	UNAIDS, WHO, UNFPA, UNICEF

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
ESSENTIAL ACTIVITIES					
2. End Inequalities					
1. Mapping of HIV-related laws	Mapping process to identify and analyse laws and policies that hinder HIV and AIDS responses is conducted and recommendations are developed	Lao PDR	2029	*To be articulated in concept note*	UNAIDS, UNDP, WHO
3. Further pursue ASEAN Getting to Zero City-based Network on Ending AIDS [implement the Nusa Dua Call for Action]					
2. Pilot project Sister Cities as acceleration strategy to achieve Ending AIDS by 2030	ASEAN sister cities are identified, established and supported	Indonesia Thailand (co-lead)	2026 - 2030	*To be articulated in concept note*	UNAIDS

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
EXPANDED ACTIVITIES					
4. Sustain Strategic Information, Communication and Advocacy					
1. Continue to conduct strategic information, communication and advocacy activities that address strategic HIV and AIDS concerns in the region	a. HIV and AIDS regional report is published and disseminated to stakeholders and related agencies, including key populations' access to services	Philippines	2026 – 2030	*To be articulated in concept note*	UNAIDS
	b. Good practices, lessons and experiences on HIV and AIDS investment cases and in sustaining domestic funding, including sustaining community-led responses are shared	Philippines / Viet Nam / Malaysia			
	c. ASEAN Health Cluster 2 message is published in ASEAN website and ASEAN E-Health Bulletin	Incumbent AHC 2 Chair			
	d. HIV and AIDS programmes and services are published in the ASEAN E-Health Bulletin	Philippines (as Editor)			

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

Annex 2.

ASEAN-U.S. INFECTION PREVENTION AND CONTROL TASK FORCE WORK PLAN 2026 - 2030

Background

The ASEAN Health Sector continues to place high priority on the promotion of resilient health systems in response to communicable diseases, emerging infectious diseases, neglected tropical diseases, and zoonotic diseases through the ASEAN Strategic Health Agenda 2026-2030 and the Work Programme 2026-2030 of ASEAN Health Cluster 2 (AHC 2) on Responding to All Hazards and Emerging Threats.

Effective infection prevention and control (IPC) programmes at national, sub-national, and facility levels can facilitate the detection of emerging and re-emerging threats in healthcare, prevent the transmission of pathogens in health facilities, detecting and preventing antimicrobial resistance (AMR), and rapidly respond to outbreaks in healthcare settings, preventing the amplification of outbreaks that can impact surrounding communities. The safest healthcare systems are those with robust IPC programmes that consist of elements including dedicated, trained staff, IPC guidelines and protocols, monitoring and surveillance activities, and administrative and political leadership that continually demands and supports excellence from all staff.

In order to strengthen IPC programmes in ASEAN Member States, the ASEAN Health Sector and the US Centres for Disease Control (US CDC) operationalized the ASEAN-US IPC Task Force to serve as a regional forum for experience sharing, cooperation and coordination around IPC capacity building, and development of regional resources to improve IPC and address emerging and re-emerging infectious diseases in health facilities in the ASEAN region and the ten ASEAN Member States. The terms of reference (TOR) for this Task Force was endorsed by the ASEAN Senior Officials Meeting on Health Development (SOMHD) on 2 May 2022 and adopted by the 15th ASEAN Health Ministers Meeting (AHMM) on 15 May 2022. A Task Force Secretariat (TSEC) was established to support Task Force operations and work plan implementation, with TOR endorsed by SOMHD on 28 November 2022.

With the above foundations in place, the Task Force was operationalised through the quarterly virtual coordination meetings, the annual in-person meetings in 2023 and 2024, as well as the implementation of four technical activities intended to understand the landscape of IPC in ASEAN Member States and generate resources of use to the region. Lead countries worked with the TSEC, activity core groups, and Task Force co-chairs to guide and complete the technical activities: “Landscape Assessment of National IPC Programmes in AMS” (Lead Country Cambodia), “Understanding The Capacity to Detect, Prevent, and Respond to Carbapenem-Resistant Organisms in ASEAN Member States” (Lead Country Singapore), “Develop Documents Describing Selected IPC Gaps in AMS and Opportunities to Address Them” (Lead Country Indonesia), and “Organise and Conduct Original Studies, Demonstration Projects, or Implementation Science Projects that Address IPC Challenges” (Lead Country Malaysia). Experiences from these activities informed content of the 2026–2030 work plan.

[1] ASEAN-U.S. Infection Prevention and Control Task Force Terms of Reference: https://drive.google.com/file/d/1j8UUWHKPMJUI22pmZm02SDizkCPP5i3E/view?usp=drive_link

The ASEAN-US IPC Task Force Work Plan 2026-2030 summarises the priority initiatives of the technical body that contributes to realising relevant objectives of the ASEAN Health Sector and Work Programme of ASEAN Health Cluster 2 for 2026-2030, including alignment with relevant initiatives such as the ASEAN Strategic Framework to Combat Antimicrobial Resistance 2019-2030, among others. The Work Plan, as one of the annexes of the Work Programme 2026-2030 of ASEAN Health Cluster 2, after review and endorsement from the IPC also underwent reviews of prioritisation of activities and endorsements from AHC 2 and SOMHD and was adopted at the 17th AHMM in September 2026.

The Work Plan will be implemented through Lead Countries with the support of core groups consisting of Task Force members, U.S. CDC together with HSP, additional resource persons as needed and facilitated and coordinated by TSEC. The Work Plan implementation will also be aligned with the Governance and Implementation Mechanism of the ASEAN Health Sector, and the Rules of Procedure in the Engagement of Entities with the ASEAN Health Sector. Efforts will be made to highlight the activities of the Task Force in ASEAN health meetings or other global forums, to bring the importance of IPC to a level similar to other health topics addressed within ASEAN.

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES					
1. Organise and conduct Task Force meetings for experience sharing information exchange and technical collaboration	a. Annual meetings of the Task Force are held b. Quarterly virtual meetings of the Task Force are held c. Ad hoc webinars or meetings focused on delivery of IPC and AMR technical information or practical exercises are conducted d. A monitoring and evaluation plan, with process indicators, is developed and utilised to assess progress of the Task Force and discussed at annual meetings.	IPC-TF Co-Chairs	2026 - 2030	ASEAN Contact Points on AMR (ACP-AMR) ASEAN One Health Network (AOHN) ASEAN EOC Network ASEAN+3 FETN	US CDC HSP
2. Generate and disseminate resources to communicate the work of AMS and Task Force, as well as for advocacy on IPC	a. Newsletter is developed and shared, informed by outputs from Task Force meetings and information shared by Task Force members b. A packet of practical materials for use by Task Force members when communicating and advocating with leadership, colleagues, health workers, patients, or carers, is developed. c. A shared folder (e.g., on Google Drive) is established. d. A group for Task Force members is formed on an electronic messaging platform. Member experiences with the messaging group are assessed annually to ensure interest in and acceptability of approach.	IPC-TF Co-Chairs	2026 - 2030	*To be articulated in concept note*	US CDC HSP
3. Examine and describe the barriers and facilitators to sustainable and impactful hospital HAI surveillance programmes and reporting processes; develop practical facility-focused resources	Resulting documents (e.g., practical guide) and other resources are developed and disseminated with Task Force	Indonesia	2026 - 2030	*To be articulated in concept note*	US CDC HSP

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

Annex 3.

ASEAN HEALTH CLUSTER 2 WORK PLAN FOR ONE HEALTH 2026 – 2030 IN SUPPORT TO THE IMPLEMENTATION OF THE ASEAN ONE HEALTH JOINT PLAN OF ACTION – MEDIUM TERM PLAN 2025-2030

Background

A multisectoral, multi-stakeholder ASEAN One Health Joint Plan of Action (OH JPA) 2023-2030 was developed as a direct response to the ASEAN Leaders' Declaration on One Health Initiative, which was adopted during the 42nd ASEAN Summit in May 2023, held in Indonesia. The Declaration reflects the collective commitment of ASEAN Member States (AMS) and ASEAN to enhance regional and national capacities in addressing the interface and interdependent health of humans, animals (domestic and wildlife), plants, and the environment, including issues related to food safety, and antimicrobial resistance (AMR) and climate change.

In line with its Terms of Reference (ToR), the ASEAN One Health Network (AOHN), consisting of ASEAN Sectoral Bodies centres, entities and partners responsible for public health, animal health and agriculture, and environment, was created with the mandate to identify, adapt to, and respond to emerging priorities that advance the One Health agenda in the region. This mandate is operationalised through the formulation, ownership, periodic review, and continuous updating of the ASEAN OH JPA to ensure its relevance, responsiveness, and strategic value.

Under the leadership of Indonesia as the initiating/lead country of ASEAN One Health Initiative, the short-term ASEAN OH JPA 2023-2024 was developed in 2023 by the AOHN, in close collaboration with strategic partners, including the Asia Pacific Quadripartite One Health Secretariat and the United Kingdom Health Security Agency (UKHSA). The Plan was endorsed by ASEAN Senior Officials on the Environment (ASOEN), Senior Officials Meeting of the ASEAN Ministers on Agriculture and Forestry (SOM-AMAF) and SOMHD, and adopted by the ASEAN Health Ministers Meeting (AHMM) on 2 September 2023. As a living and evolving document, the ASEAN OH JPA is designed to be regularly reviewed and updated based on implementation progress, stakeholder input, and the evolving regional and global One Health landscape.

The ASEAN OHJPA serves the following objectives:

1. Guide the AOHN in facilitating and streamlining the implementation and resource mobilisation for identified OH priorities
2. Serve as reference for the AMS in developing and operationalising their respective national OH JPAs or equivalent in line with the ASEAN OH JPA
3. Strengthen the health of humans, animals (domestic and wildlife), plants, and environment, as well as food safety, and antimicrobial resistance, through cross-sectoral collaboration between the relevant sectors, including bilateral and multilateral cooperation

The ASEAN OH JPA has taken into consideration all the action tracks in the Quadripartite OH JPA while accounting for the existing ASEAN initiatives (agreements, frameworks, strategies, policies, plans, and others) as well as the ASEAN Sectoral Bodies, centres, working groups, and entities associated with ASEAN. The pathways of change outlined in the Quadripartite OH JPA provide a structure to ensure an OH approach is adopted at the national level. Some aspects of the pathways (such as legislation) may not be directly applicable to the regional or ASEAN context. As a result, the pathways have been adapted (as per below) to ensure applicability to the ASEAN context.

Pathway 1		Pathway 2		Pathway 3	
Quadripartite OH JPA	**ASEAN OH JPA**	**Quadripartite OH JPA**	**ASEAN OH JPA**	**Quadripartite OH JPA**	**ASEAN OH JPA**
Governance	Networking of ASEAN Sectoral Bodies, centres, working groups and entities associated with ASEAN	Organisational development	ASEAN Workforce Development	Data and evidence	Data and evidence
Policy and legislation	ASEAN agreements, frameworks, strategies, policies and initiatives	Implementation	ASEAN Regional Implementation	Knowledge exchange	Knowledge exchange
Financing	Financing	Sectoral integration	ASEAN Sectoral Integration		
Advocacy	ASEAN Advocacy and communication				

This ASEAN Health Cluster 2 Work Plan for One Health 2026 - 2030 is a consolidation of project activities in the ASEAN OHJPA Medium - Term Plan 2025-2030 that are designated to be led by the ASEAN Health Sector and particularly the ASEAN Health Cluster 2 on Responding to All Hazards and Emerging Threats. The work plan is a result of further consultations within the ASEAN Health Sector at the level of ASEAN Health Cluster 2 and SOMHD as part of the collective development of the work programmes of the ASEAN Health Clusters and prioritisation of project activities.

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES					
1. Establish and operationalize the ASEAN One Health Network Secretariat	a. Project Proposal of AOHN Secretariat is conducted b. Relevant documents for the AOHN Secretariat establishment are developed	Indonesia	2026	SOM-AMAF, ASOEN	*To be articulated in concept note*
2. Develop policy and operational/ technical framework, including monitoring and evaluation, on One Health approach in ASEAN	a. Policy and operational/technical framework on One Health approach in ASEAN are developed b. Guidelines on monitoring and evaluation on One Health at regional level are developed based on comprehensive analysis	Thailand Indonesia	2026 - 2030	SOM-AMAF, ASOEN	*To be articulated in concept note*
3. Facilitate and promote the integration of One Health approaches into workforce training and education programmes at the human-animal-environment interface to build relevant and complementary skills, capacities and capabilities. [Note: Please refer to the workforce development section of the APT FETN Work Plan 2026-2030 for complementary activities.]	a. Information sharing and training programmes on OH for workforce at the human-animal-environment interface, including engagement with relevant communities such as One Health cadre initiative are conducted. b. Advocacy for the adoption of One Health Field Epidemiology curricula to the field epidemiology training at national level is conducted. c. Advocacy of One Health competencies as the countries may develop curricula applicable to local contexts based on the competencies is conducted. d. Continuous education programme on One Health, such as fellowship programme, is conducted	ASEAN Plus Three FETN	2026 - 2030	SOM-AMAF, ASOEN	*To be articulated in concept note*

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES					
4. Review the list of monitoring and evaluation indicators for 2026-2030 to track the progress of implementation of the ASEAN Strategic Framework to Combat Antimicrobial Resistance through One Health Approach (ASF-AMR)	List of M&E indicators are reviewed and updated if necessary	Singapore Thailand	2028	To be articulated in concept note	*To be articulated in concept note*
5. Undertake cross-border simulation exercise(s) on priority zoonotic diseases and other health threats at the environment, animal, human interface, such as pollution (air, water, river, chemical etc.)	a. Protocol for One Health Cross-border exercise is developed. b. Cross-border simulation exercise on zoonotic diseases and other health threats at the environment, animal, human interface is conducted, such as simulation exercise on Ebola as well as Joint Multisectoral Outbreak Investigation and Response (JMOIR) in collaboration with ASEAN Epidemiology Group by ASEAN+3 FETN and ASEAN EOC Network	Malaysia Thailand (co-lead)	2026 - 2028	SOM-AMAF, ASOEN	*To be articulated in concept note*
6. Undertake a regional consultative meeting to start defining priority health threats including zoonotic pathogens with outbreak or pandemic potential	Report of regional consultative meeting on priority health threats including zoonotic pathogens with outbreak or pandemic potential is developed	Indonesia	2026 - 2027	To be articulated in concept note	*To be articulated in concept note*

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
CORE ACTIVITIES					
7. Compare regional information tracking on risks, pathogens, and disease events against other sources of data (e.g., national, scientific, media reporting, and epidemic intelligence) to continually enhance early detection and response capabilities	a. Regional risk mapping, risk assessment, and risk management for emerging infectious disease threats is conducted b. Cross-border Joint Risk Assessment is conducted	Thailand	2026 - 2027	To be articulated in concept note	*To be articulated in concept note*
8. Conduct regular AOHN meetings, cross-sectoral information sharing and dialogues to promote mutual understanding, and collaboration	a. Annual AOHN meeting is organised to take stock of progress in the promotion of One Health coordination in ASEAN, as well as to agree on collective priorities in the coming period b. Policy dialogues, knowledge sharing events and webinars to promote cross-sectoral understanding and cooperation are organised and conducted	AOHN Lead Co-chair Thailand Indonesia	2026 - 2030	SOM-AMAF, ASOEN, AHC 4, ACPHEED, ACCAHZ, ARAC, ABVC, ACB	*To be articulated in concept note*

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
ESSENTIAL ACTIVITIES					
1. Build capacity on incorporating climate-sensitive disease modelling, resilient health systems, and climate-adaptive One Health responses. [Note: This activity will be complemented by a related activity on Environmental Health under the Work Programme of AHC 2 2026-2030]	a. Training on incorporating climate-sensitive disease modelling, resilient health systems, and climate-adaptive One Health responses is conducted.	Thailand	2026 - 2030	ASOEN	*To be articulated in concept note*
2. Implementation of ASEAN Strategic Framework to Combat Antimicrobial Resistance through One Health Approach [Note: Please refer to Annex 4 of the Work Programme of ASEAN Health Cluster 2 for the AHC 2-led activities to implement the ASF – AMR.]	Implementation of ASEAN Strategic Framework to Combat Antimicrobial Resistance through One Health Approach is updated	Philippines	2026 - 2030	SOM-AMAF, ASOEN	*To be articulated in concept note*

PROJECT ACTIVITIES	EXPECTED OUTPUTS, OUTPUT INDICATORS	LEAD COUNTRY	TIMELINE	INTERPILLAR, INTERSECTORAL, INTERCLUSTER COOPERATION	SOURCE OF SUPPORT
ESSENTIAL ACTIVITIES					
3. Promote research across ASEAN to explore drivers for spread, spill-over and risk factors for other public health, animal and environmental health emergencies in the region, and development of innovations for practical use	Multidisciplinary Research Agenda: A prioritized list of research topics is conducted, such as inter alia: • zoonotic diseases • emerging pathogens, • spill-over risks, • environmental degradation, • cross-sectoral vulnerabilities • ecological countermeasures • landscape resilience • evidence base for ecological countermeasures in ASEAN region • disease transmission pathways and interactions between animal and environmental health • development of innovations for practical use, including upstream prevention (e.g., vaccines, herbal medicine, other preventive measures)	Thailand, Malaysia (co-lead)	2026 - 2030	SOM-AMAF, ASOEN	*To be articulated in concept note*

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

Annex 5.

PLAN OF ACTION (2026 – 2030) FOR THE OPERATIONALISATION OF THE ASEAN LEADERS' DECLARATION ON STRENGTHENING REGIONAL BIOSAFETY AND BIOSECURITY

This is the Plan of Action (POA) for the operationalisation of the ASEAN Leaders' Declaration on Strengthening Regional Biosafety and Biosecurity, which was adopted at the 44th and 45th ASEAN Summit in 2024, Vientiane, Lao PDR.

The operationalisation of all project activities listed in this POA is guided by the Governance and Implementation Mechanism (GIM) of the ASEAN Health Sector and annexed to the Work Programme 2026-2030 of the ASEAN Health Cluster 2 "Responding to all Hazards and Emerging Threats".

Background

The existing regional health security architecture within the ASEAN Member States faces challenges and gaps in its biosafety and biosecurity measures, notably different levels of complexities as well as contexts among ASEAN Member States. These challenges can potentially compromise the region's ability to effectively respond to and mitigate the risks associated with biological threats, including infectious disease outbreaks and pandemics. This was evident during the unprecedented COVID-19 pandemic, which revealed different levels of response and capacities among ASEAN Member States.

Biosafety and biosecurity measures and standards are crucial to ensuring ASEAN Member States adhere to containment principles, technologies, and practices to prevent unintentional exposure to or accidental release of pathogens and toxins. Biosafety is containment principles, technologies and practices that are implemented to prevent unintentional exposure to biological agents or their inadvertent release. Biosecurity is the application of a combination of policies, principles, technologies and practices implemented for the protection and control of and accountability for biological material, technology and information or the equipment, methods, skills and data related to their handling. Biosecurity aims to prevent intentional or accidental unauthorized access to, and loss, theft, misuse, diversion or release or even weaponisation of such commodities.

Therefore, these regional efforts, leveraging the lessons from the COVID-19 pandemic, and other Public Health Emergency of International Concerns (PHEIC) from the past years, the ASEAN Health sector led by its Chair, Lao PDR, spearheaded the development of the ASEAN Leaders' Declaration on Strengthening Regional Biosafety and Biosecurity. This initiative will ensure the highest commitments from all ASEAN Leaders to ensure the achievement of health security and resilience in effectively addressing potential future threats, involving the human and animal health sectors and other relevant sectors. This declaration will be the cornerstone for ASEAN in achieving these goals, tailored to the context and needs of each member state.

The need to intensify biosafety and biosecurity initiatives has become paramount due to the evolving nature of global health challenges, increasing interconnectivity, and the potential for the accidental or deliberate release of dangerous pathogens. Addressing these vulnerabilities is critical to bolstering regional health security and safeguarding public health within ASEAN Member States.

Alignment with Global Goals

This ASEAN Leaders' Declaration contributes to supporting the region and complementing the efforts of ASEAN Member States in achieving relevant health-related global and regional initiatives and commitments, such as:

1. International Health Regulation (IHR) 2005.
2. Global Health Security Agenda.
3. Support and assist ASEAN Member States in enhancing the results of Joint External Evaluation (JEE).
4. World Health Assembly (WHA) 77.7

Alignment with ASEAN Priorities

This Plan of Action (PoA) serves as a strategic instrument to advance and complement the ASEAN Community Vision 2045 of a Resilient, Innovative, Dynamic, and People-Centred ASEAN. It underscores ASEAN's collective commitment to safeguarding the health, security, and well-being of its peoples by strengthening regional capacities and fostering deeper cooperation across sectors.

The PoA contributes directly to the ASEAN Socio-Cultural Community Strategic Plan, particularly in advancing strategic measures to strengthen resilient health systems for the prevention, preparedness, and response to health-related hazards, including chemical and biological threats. Concurrently, the PoA complements the realisation of the ASEAN Political-Security Community Strategic Plan by strengthening existing regional mechanisms, including the Network of ASEAN Chemical, Biological and Radiological Defence Experts. Through enhanced regional and international preparedness and cooperation, the PoA seeks to elevate ASEAN's collective capability to prevent, detect, and respond to chemical, biological, and radiological threats, thereby contributing to a safer, more secure, and resilient ASEAN Community.

CORE ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
OBJECTIVE 4: **UPHOLD THE COMMITMENT AROUND RESPONSIBLE AND ETHICAL RESEARCH USING HIGH-RISK PATHOGENS AND TOXINS AND RELATED DATA TO PREVENT ISSUES RELATED TO DUAL USE RESEARCH OF CONCERN (DURC)**				
TARGET: *By 2030, enhanced Regional Knowledge and Commitment on Dual Use Research of Concern (DURC)*				
CORE ACTIVITIES				
1. Development of Regional Recommendations and Best Practices on responsible and ethical research related to DURC through WHO pilot research in Malaysia for the global guidance framework for the responsible use of life sciences: mitigating bio risk and governing dual use research.	**Output:** Regional recommendation transpired/gathered from the Report of the WHO pilot research in Malaysia.	Malaysia, ASEAN Biosafety and Biosecurity Network	WHO	2026 – 2030
OBJECTIVE 5: **ENHANCE PROTOCOLS AND PROCEDURES FOR THE STORAGE AND TRANSPORT OF SAMPLES WITH HIGH-RISK PATHOGENS AND TOXINS TO ENSURE ADHERENCE TO INTERNATIONAL AND DOMESTIC REGULATIONS**				
TARGETS: 1. By 2026, survey / questionnaire for the training needs is completed by AMS. 2. By 2030, at least one certification program implemented. 3. By 2030, biosafety and biosecurity certified trainers available at the national and regional levels.				
CORE ACTIVITIES				
2. Landscape Analysis and Workshop of ASEAN Protocols and Procedures on Biospecimen Storage (Biobank) and Transport for High-Risk Pathogens and Toxins. Followed by Validation and Consultative Meetings for the Development of Regional Recommendations on domestic transportation to adhere with International Standards for Biospecimen Storage and Transport for High-Risk Pathogens and Toxins.	**Output:** 1. Landscape analysis and workshop report on the existing Protocols and Procedures on Biospecimen Storage and Transport for High-Risk Pathogens and Toxins in ASEAN Member States. 2. Draft Regional Recommendation on domestic transportation to adhere with International Standards for Biospecimen Storage and Transport for High-Risk Pathogens and Toxins.	Philippines Cambodia	Canada, WHO, IFBA, IEGBBR	2026 2027 – 2030

CORE ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
3. Capacity Building & Training Workshop related activities: a. Handling dangerous pathogens (certification program for personnel handling)	**Output 1:** Training and capacity building conducted on handling dangerous pathogens **Output 2:** Certification Program	Malaysia		
OBJECTIVE 6: **ENSURE THE PROVISION OF NECESSARY HUMAN RESOURCES FOR BIOSAFETY AND BIOSECURITY IN A SUSTAINABLE MANNER THROUGH TRAINING, EDUCATION AND CERTIFICATION FOR ALL RELEVANT PERSONNEL. FURTHER EXPLORE REGIONAL ENGAGEMENT THROUGH BILATERAL AND MULTILATERAL COOPERATION AMONG ASEAN MEMBER STATES, PARTNERS AND RELEVANT STAKEHOLDERS, WITH ASEAN AS THE DRIVING FORCE**				
TARGETS: 1. By 2026, survey/questionnaire for the training needs is completed by AMS. 2. By 2030, at least one certification program implemented. 3. By 2030, biosafety and biosecurity certified trainers available at the national and regional levels.				
CORE ACTIVITIES				
b. Conduct survey/questionnaire for the training needs, and mapping of certification programs and existing learning platforms in ASEAN and globally	**Output:** 1. Workshop, survey and video conference conducted 2. AMS informed the Network of the number of human resources trained in annual Network meetings	Cambodia Thailand Viet Nam	Canada IFBA	2026

CORE ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
c. Workshop for Development of ASEAN certification program based on the output from the questionnaires/ survey: i. Biosafety Cabinet Selection, Installation & Safe Use [Thailand, Cambodia, Lao PDR, Viet Nam] ii. Biorisk Management [Cambodia, Philippines, Thailand, Viet Nam] iii. Biological Risk Assessment [Indonesia, Cambodia, Viet Nam] iv. E-learning on Biorisk Management [Indonesia, Philippines] v. Biological Waste Management [Thailand, Viet Nam) vi. Infectious Substance Transport Certification Program vii. Biosecurity [Indonesia] viii. Emergency response [Cambodia]	**Output:** 1. Certification program on specific topic identified based on priority and established. 2. Curriculum for the Certification Programs	Cambodia Indonesia Lao PDR Philippines Thailand Viet Nam		2026–2030
d. Conduct the certification program based on the output from the questionnaires/ survey i. Biosafety Cabinet Selection, Installation & Safe Use [Thailand, Cambodia, Lao PDR] ii. E-learning on biorisk management and biorisk assessment [Philippines, Cambodia] iii. New certification program–Sample packaging and transport certification program [IATA]	**Output:** 1. Number of certified officers identified. 2. Community of Practice established	Cambodia Lao PDR Thailand Philippines	Canada IFBA UK HSP	2026 – 2030

CORE ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
OBJECTIVE 7: SUPPORT EFFORTS TO DEVELOP SUSTAINABLE LABORATORY INFRASTRUCTURE FOR OPERATION AND MAINTENANCE IN DIVERSE SETTINGS, THAT ADDRESS NATIONAL NEEDS AND ENSURE BIOSAFETY AND BIOSECURITY WITHIN AVAILABLE RESOURCE LEVELS				
TARGET: *By 2027, report and recommendations from the BioPREVAIL pilot project in ASEAN member states are completed.*				
CORE ACTIVITIES				
4. Participation of any ASEAN Member States as pilot country/ies in the global BioPREVAIL initiative: a. To generate innovative laboratory solutions tailored to distinct regional needs and conditions, with the overarching goal of sustainably strengthening global health security. b. Sharing on lessons learnt based on the BioPREVAIL initiative	**Output:** 1. Draft report and recommendations from the BioPREVAIL pilot project in ASEAN Member States are developed. 2. Documentation of Lessons Learnt	Lao PDR	Canada WOAH	2026 – 2027
5. Conduct a comprehensive assessment of existing laboratory infrastructure e.g. biosafety cabinets to verify their compliance with relevant requirements.	**Output:** Report on risk assessment each shared	Malaysia		2027

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

ESSENTIAL ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
OBJECTIVE 1: STRENGTHEN THE MULTI-SECTORAL AND MULTI-STAKEHOLDER COORDINATION AND COOPERATION ON BIOSAFETY AND BIOSECURITY AT THE NATIONAL LEVEL				
TARGET: By 2030, enhanced multisectoral and multi-stakeholder engagement in Biosafety and Biosecurity at National level				
ESSENTIAL ACTIVITIES				
1. Development of regional profile and landscaping on national multi-stakeholder and multi-sectoral coordination mechanism on biosafety and biosecurity	**Outputs:** 1. Assessment tools for the Country Profiling/Assessment (questionnaire/consultants) 2. ASEAN Member States Profile of respective national mechanism/instruments on biosafety and biosecurity 3. Regional Report on ASEAN Member States National Profile Coordination Multi-sectoral and Multi-stakeholder System on Biosafety and Biosecurity	Cambodia Indonesia Lao PDR		2026 – 2028
***OBJECTIVE 2*: ESTABLISH THE ASEAN BIOSAFETY AND BIOSECURITY NETWORK TO ENHANCE FUNCTIONS, ROLES, AND RESPONSIBILITIES IN FACILITATING KNOWLEDGE SHARING, COORDINATION, AND COOPERATION AMONG ASEAN MEMBER STATES, PARTNERS AND RELEVANT STAKEHOLDERS**				
TARGETS: *By 2026, the Terms of Reference (TOR) of the ASEAN Biosafety and Biosecurity Network adopted by the ASEAN Health Ministers and Reported in the relevant Leaders' Summit.*				
ESSENTIAL ACTIVITIES				
2. Development of Terms of Reference (TOR) for the ASEAN Biosafety and Biosecurity Network with specific details on the membership and governance of the ASEAN Biosafety and Biosecurity Network	**Output:** Finalised Terms of Reference by endorsement from SOMHD & AHMM	Lao PDR Malaysia	Canada's WTRP EU CBRN COE	2026

ESSENTIAL ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
ESSENTIAL ACTIVITIES				
3. Conduct Annual Meetings of the ASEAN Network on Biosafety and Biosecurity	**Output:** Annual meeting of the network is conducted, at least once a year, through physical or virtual platform	Network's Chair (AHC2 Chair)		2026 – 2030
OBJECTIVE 3: **ESTABLISH OR STRENGTHEN THE NATIONAL LEGAL FRAMEWORK FOR BIOSAFETY AND BIOSECURITY. FURTHER EXPLORE THE SETTING-UP OF MINIMUM STANDARDS TO REGULATE BIOSAFETY AND BIOSECURITY AT NATIONAL OR REGIONAL LEVELS, AS APPROPRIATE**				
TARGET: *By 2030, ASEAN Member States Initiated/ Reviewed/Developed a National Legal Framework for Biosafety and Biosecurity with Multi-Sectoral and Multi-Stakeholder Engagement*				
ESSENTIAL ACTIVITIES				
4. Development of Regional Recommendation on the development of minimum requirements for Biosafety and Biosecurity Legal Framework at National level.	**Output:** Regional recommendation on biosafety and biosecurity legal framework is produced and presented at the Network's Annual Meeting.	Philippines, Cambodia, Viet Nam, Brunei Darussalam, Indonesia		2026 – 2030

ESSENTIAL ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
OBJECTIVE 4: **UPHOLD THE COMMITMENT AROUND RESPONSIBLE AND ETHICAL RESEARCH USING HIGH-RISK PATHOGENS AND TOXINS AND RELATED DATA TO PREVENT ISSUES RELATED TO DUAL USE RESEARCH OF CONCERN (DURC)**				
TARGET: *By 2030, enhanced Regional Knowledge and Commitment on Dual Use Research of Concern (DURC)*				
ESSENTIAL ACTIVITIES				
5. Regional capacity building on biosafety and biosecurity for dual use research of concern (DURC)	**Output 1:** Training on WHO Global Guidance Framework for the Responsible Use of Life Science. **Output 2:** Regional Multi-sectoral Workshop/Training on specific thematic areas on biosafety and biosecurity for DURC.	Indonesia, Lao PDR, Myanmar	WHO	2026 – 2030

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

EXPANDED ACTIVITIES				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
OBJECTIVE 1: **STRENGTHEN THE MULTI-SECTORAL AND MULTI-STAKEHOLDER COORDINATION AND COOPERATION ON BIOSAFETY AND BIOSECURITY AT THE NATIONAL LEVEL**				
TARGET: *By 2030, enhanced multisectoral and multi-stakeholder engagement in Biosafety and Biosecurity at National level*				
EXPANDED ACTIVITIES				
1. ASEAN Regional Conference in Enhancing Multisectoral and Multi-stakeholder Engagement in Biosafety and Biosecurity	**Output:** Regional Recommendations as the output from conference conducted in ASEAN with the participation of multi-agencies in ASEAN Member States	Malaysia Indonesia		2028 - 2030
OBJECTIVE 3: **ESTABLISH OR STRENGTHEN THE NATIONAL LEGAL FRAMEWORK FOR BIOSAFETY AND BIOSECURITY. FURTHER EXPLORE THE SETTING-UP OF MINIMUM STANDARDS TO REGULATE BIOSAFETY AND BIOSECURITY AT NATIONAL OR REGIONAL LEVELS, AS APPROPRIATE**				
TARGET: *By 2030, ASEAN Member States Initiated/ Reviewed/Developed a National Legal Framework for Biosafety and Biosecurity with Multi-Sectoral and Multi-Stakeholder Engagement*				
EXPANDED ACTIVITIES				
2. Conduct peer-to-peer exchange or experience sharing on national legal framework for biosafety and biosecurity.	**Output:** Workshop on sharing of experiences on national legal framework for biosafety and biosecurity.	Thailand Singapore		2026 – 2030

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

Annex 6.

THE ASEAN HEALTH CLUSTER 2 WORK PROGRAMME 2026 – 2030
MITIGATION OF BIOLOGICAL THREATS (MBT) PROGRAMME PHASE 3

This Annex 6 of the ASEAN Health Cluster 2 on Responding to All Hazards and Emerging Threats Work Programme 2026 – 2030 is the articulation of endorsed project activities of Mitigation of Biological Threats (MBT) Programme Phase 3 (2024 – 2028) which are aligned and complement the ASEAN Health Cluster 2 Work Programme for Health Priority 7: Strengthening Health Security Towards Regional Preparedness and Response to Public Health Emergencies.

The operationalisation of all project activities listed in this Annex 6 is guided by the Governance and Implementation Mechanism (GIM) of the ASEAN Health Sector and has gone through the approval process by ASEAN Health Cluster 2 and ASEAN Senior Officials Meeting on Health Development (SOMHD). Funding and resource mobilisation for project implementation will be guided by the Contribution Arrangement (CA) between ASEAN and the Government of Canada. This is an ASEAN Health Sector initiative in strengthening health-security in ASEAN in cooperation with Canada's Weapons Threat Reduction Program (WTRP), which was institutionalised in 2014.

Background

The profound insights gained from unprecedented events such as the COVID-19 pandemic, which has exerted multidimensional impacts globally, serve as compelling evidence of the challenges in health security. These challenges encompass surveillance and data systems, surge capacity, regulatory preparedness, and the decision-making process during emergencies. Additionally, the pandemic has triggered extensive social and economic repercussions, causing setbacks in broader development gains and impeding progress towards national, regional, and global goals.

Since 2014, the ASEAN Health Sector, supported by Canada's Weapons Threat Reduction Program (WTRP) through the MBT Programme, has dedicated efforts to enhance health security. This commitment involves developing regional mechanisms, capacities, and capabilities to respond effectively to various hazards and emerging threats, particularly those of a biological nature. The established MBT-led mechanism and associated projects have demonstrated their effectiveness in supporting ASEAN and its Member States during the COVID-19 pandemic.

Therefore, drawing upon the insights and achievements of MBT Phase 1 and 2, and aligning with the updated governance of the ASEAN Health sector and the broader agenda of ASEAN Post-2025, this phase will focus on the continuity and institutionalization of current MBT initiatives within an ASEAN-driven framework. Moreover, MBT Phase 3 will persist in serving as a platform for capacity building, technical exchanges, and stakeholder engagement in advancing health security initiatives across the ASEAN region.

In addition, this Phase 3 will ensure the ownership and sustainability of all MBT-led projects, the MBT Phase 3 will also be driven and operationalised with the leadership from ASEAN Member States. It was designed based on the outcomes of MBT Phase II and aligns with ACPHEED's scope of work to further address critical vulnerabilities and strengthen essential capacities to prevent, detect and respond to a diverse range of biological challenges.

Overall MBT Programme Phase 3 Objectives

The ultimate goal of this project is to reduce biological threats whether natural, accidental or deliberate in origin to the ASEAN region through strengthening biosafety and biosecurity, diseases surveillance, public health preparedness and response, health-security interface at the national and regional level.

Progressively all the projects will work towards the institutionalisation of the initiatives/mechanism as part of the ASEAN Health sector agenda, priorities, and work programme. These include the attribution and complementary of all MBT Phase 3 projects' objectives and outputs to the endorsed scope of work and functions of the ACPHEED.

More specifically, the following are thematic areas of cooperation under the MBT Programme Phase 3:

a. **Theme 1:** Laboratory, Biosafety and Biosecurity Strengthening
b. **Theme 2:** Strengthening Regional Public Health Emergency Preparedness and Response
c. **Theme 3:** Diseases Surveillance, Epidemiology Strengthening, and Public Health Intelligence
d. **Theme 4:** Enhancing and sustaining the of Health - Security Interface Operation in ASEAN

Projects Development and Implementation Mechanism

1. All MBT projects are implemented under the ASEAN Health Cluster 2 Governance and Implementation Mechanism (GIM), endorsement by ASEAN Health Cluster 2 and ASEAN SOMHD are required prior to the project implementation. For resource mobilisation purposes, additional approval processes will be required in consultation with potential sources of support/partner.
2. Project activities listed in this Annex 6 are the ongoing MBT Phase 3 projects that are endorsed by the ASEAN SOMHD in 2024 and for its implementation from 2024 – 2028, with the possibility for inclusion additional new project to address any related emerging concerns and/or continuation of completed project activities, ASEAN Health sector approval process is required for this exercise.
3. At the project level, each ASEAN Member State has designated their technical unit or implementing agency to handle the day-to-day operations. The execution of activities and fund disbursement will be closely monitored in accordance with agreements signed by each country with the ASEAN Secretariat. These agreements are designed to ensure that all projects adhere to the prescribed ASEAN Secretariat processes and regulations, encompassing financial protocols to guarantee compliance.
4. Financial contribution from partners for specific project implementation, will be managed by the Lead Country in coordination with the ASEAN Secretariat as the conduit of the current MBT Phase 3 financial contribution of Canada to ASEAN.

Annotations

1. This 2026 – 2030 MBT Work Plan represents a continuation of, and builds upon, the SOMHD-endorsed MBT Programme Phase 3 (2024–2028). In line with the characteristics of the MBT Programme, cooperation and engagement are undertaken through two main modalities: (i) in-country activities that align with and contribute to regional priorities; and (ii) regional activities that address common gaps and challenges across ASEAN Member States.
2. For the purpose of ensuring accuracy in reflecting activities to be implemented during 2026–2030, the numbering of project activities applies only to **regional initiatives to be conducted from 2026 onwards,** including those categorised as continuing, ongoing, or upcoming, with the current total number of **31 regional activities.**
3. Other activities, including in-country initiatives and those already completed, are not included in this document.

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
THEME 1: LABORATORY, BIOSAFETY AND BIOSECURITY STRENGTHENING			
Strengthening and Sustainability on Biosafety, Biosecurity, and Bioengineering for Health Laboratories in ASEAN *Proponent: Department of Medical Sciences, Ministry of Public Health, Thailand*			
CORE ACTIVITIES			
1. Conducting workshops between AMS on BSL-3 practices and maintenance (minimum requirements and checklist)	Record of workshop proceedings and attendee list	**Ongoing** (Q1-2027)	Participant lists and post-workshop evaluations
2. Conducting field examinations for the NSF BSC Field Certifier Basic Accreditation Program between ASEAN Member States	Conducted field examinations	**Ongoing (Q1-2026)** - BSC NSF/ANSI 49 Basic Field Certifier Accreditation Training and Examination on 30 March 2026 - 6 April 2026. Attendees: 11 AMS except Brunei, Cambodia and Singapore **Ongoing (Q3-2027)** - BSC NSF/ANSI 49 Basic Field Certifier Accreditation Training and Examination	Accreditation certificates
3. Modifying of Curriculum between AMS on Biorisk Management for train-the-trainer approach	Revised "Training of the Trainer" curriculum for Biorisk Management	**Ongoing** (Q2-2026)	Revised curriculum documents
4. Conducting workshops between AMS on train-the-trainer of Biorisk Management	Conducted workshops	**Ongoing** (Q4-2026)	Participant lists and post-workshop evaluations
Creation of ASEAN Biobank Framework of Governance Structure and Operations Standards for Biobanking Pathogenic Agents Proponent: *Research Institute for Tropical Medicine (RITM), Department of Health Philippines*			

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
CORE ACTIVITIES			
5. Identification of ASEAN Member States Biobank experts and point person	List of ASEAN Member States experts and point person identified	**Ongoing** (Q2-2026)	Experts and contact points record
6. Biobank and Biorisk Management Training of Trainers (TOT) Program Development	a. Biobank and Biorisk Management Training curriculum is developed. b. Biobank and biorisk Management training materials are developed. c. Trainers are identified.	**Ongoing** Q2 – Q3 2026	Training evaluation/ performance report and training report.
7. Series of consultative Meeting for the development of Regional Biobank Framework and Governing Committee/Network in ASEAN Member States	a. ASEAN Biobank Framework adopted by ASEAN b. Biobank (high risk pathogens) policies, practices and guidelines adapted in ASEAN Member States c. A template for local framework and/or biobank governing council at national level (individual AMS) in accordance with the established regional framework is drafted.	**Ongoing** Q3 2026	Endorsement/ adoption document.
8. Creation of ASEAN Biobank Governing Committee/ Network among ASEAN Member States	a. Memorandum of Agreement (MOA) published. b. Governing Rules and regulations created. c. Network's Implementation plans developed.	**Ongoing** Q3 – Q4 2026	Agreed document.
THEME 2: STRENGTHENING REGIONAL PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE			
CORE ACTIVITIES			
9. Quarterly VC among EOC in charge including yearly subscription of zoom video conference service	At least four (4) video conferences for sharing information on disaster, outbreak, crisis and emergency among AMS are conducted yearly.	**Completed/Continuing**	List of attendance and note-to-file.

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
10. Attachment for CMLV EOC officers to identified AMS EOCs (MYS, PHP, TH)	Improved understanding of AMS's EOCs structure and procedures, enhanced skills in risk assessment, early warning, and response planning, and promoted a regional network of emergency management professionals.	**Completed/Continuing** 9-12 December 2024, Kuala Lumpur, Malaysia.	Registry of the trained AMS EOC personnel.
11. Cross-border Joint simulation exercise between countries with participants from all AMS		**Ongoing** 2026	
12. RARC training at CLMV and non CLMV country		**Completed/Continuing** - UKHSA FUND-Workshop to develop multisector guidance for response to Chemical events, Phnom Penh, Cambodia, 27 – 29 August 2025.	
13. AMS training workshop on preparedness for CBRNe events	Improved technical knowledge of CBRNe.	**Completed/Continuing** - UKHSA FUND-Workshop on Multisector Recovery for Chemical Events, Bangkok, Thailand, conducted on 18 – 20 February 2026. - UKHSA FUND-Simulation Exercise Training, Jakarta Indonesia, conducted on 3 – 7 November 2025. - UKHSA FUND-Regional Workshop on Chemical Incident Surveillance and Early Warning, 27 – 29 January 2026.	Registry of trained AMS EOC personnel.

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
14. Certified EOC Course in collaboration with JIBC , back-to-back instructor training and participants training workshop for AMS		**Completed/Continuing** - Public Health Emergency Operation Centre (EOC) processed and application, 15 – 27 September 2024, Virtual. - ASEAN Emergency Operation Centre (EOC) Application Course in collaboration with JIBC, 19 – 22 November 2024, Kuala Lumpur, Malaysia. - Introduction to Emergency Operations Centre for Public Health, 25 – 31 August 2025, Virtual. - EOC Application Course, 25 – 27 November 2025, Kuala Lumpur, Malaysia.	
15. Sustainability analysis-EOC: Assess sustainability on gains during 4 years of pandemic response especially on EOC function. Reviewing the capacities: Human resources, Equipment and logistics		**Ongoing** 2026	
16. Annual meeting for initial assessment/wrap-up	Meeting conducted	**Upcoming** 2027	
17. Engage a dedicated officer for 2024-2025	Dedicated officer hired and led the day-to-day ASEAN EOC Network operation	**Ongoing** 2024 – 2027	

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
THEME 3: DISEASES SURVEILLANCE, EPIDEMIOLOGY STRENGTHENING, AND PUBLIC HEALTH INTELLIGENCE			
Operation of the ASEAN BioDiaspora Virtual Centre working towards the operationalisation of the ASEAN Centre for Public Health Emergency and Emerging Diseases (ACPHEED) Detection and Risk Assessment *Proponent: ASEAN Biological Threats Surveillance Centre (ABVC), Ministry of Health Indonesia*			
CORE ACTIVITIES			
18. Production of ABVC Products as follows: a. Produce weekly report, namely, Morbidity and Mortality Weekly Report for other diseases (every Tuesday), and Weekly Report for Covid-19 and Mpox (every Friday); b. Produce Risk Assessment Report and Disease Alert (by event); c. Produce Focus Report following the disease of the month (every month); d. Distribution of reports to the ASEAN Secretariat, ASEAN relevant groups, and MOH of Indonesia; and e. Publish all reports to ASEAN PHE Platform.	Reports of ABVC are produced in timely manner and be accessible by public at ASEAN PHE platform	**Completed/Continuing**	- Number of reports - Feedback from AMS, ASEAN Secretariat, and relevant parties and follow up - Number of views/ access to each dissemination product
19. Development of ABVC Dashboard & Data Crawling Engine	ABVC Dashboard for data visualisation is developed and explored with global data hub	**Completed/Continuing** - Development started in January 2024.Completed in April 2024. - Launched on November 5, 2024, at the MBT Meeting in Vientiane, Lao PDR.	Dashboard development report

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
20. Regional Training in collaboration with other national/ regional/global institution on core and advance data analytics	ABVC and ACHPEED personnel are being trained for core and advanced data analytics	**Ongoing** 2026: Ongoing. This activity is in collaboration between ABVC and ACPHEED DRA Preparatory Team to enhance capability of ASEAN Member States in advanced data analytics. The activity was proposed to the Australian Mission to ASEAN through ACPHEED DRA Activity Proposal in 2025. Currently awaiting approval from Australia Mission to ASEAN for funding.	Training report
21. Socialisation of ABVC's Products, Capacities and Capabilities for ASEAN Member States	ABVC management and products are well known in the ASEAN region and supported all ACHPEED Pillars	**Completed/Continuing** - Held on November 13, 2025, in Jakarta, Indonesia. Participated by ASEAN Member States, ACPHEED DRA, MoH Indonesia. The result of the socialization was ABVC reports and dashboard known by ASEAN Member States and receiving feedback to improve ABVC Reports and Dashboard.	Feedback from AMS and Partners
22. Consultative meeting and Introduction on Quick and Immediate Risk Assessment (QIRA) to the ASEAN Region by ABVC	Workshop is conducted and a mechanism is identified to enhance coordination and timely information sharing QIRA recommendation through ABVC.	**Ongoing** The activity will be held in May 2026 in Bogor, Indonesia. Participated by ASEAN Member States, ASEAN Secretariat, ACPHEED Pillars. Facilitator from WHO SEARO, WPRO, and WHO Indonesia.	Consultative meeting report

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
23. Support preparatory activities to establish and operationalize ACPHEED for DRA	Technical inputs and recommendations provided by ABVC to support ACPHEED for DRA framework and other operational modalities.	**Ongoing** Currently ABVC is involved in technical discussion to prepare establishment and operationalisation of ACPHEED.	Meeting minutes, reports and documentation involving ABVC
Strengthening Public Health Emergency Response, Data Science Capabilities, and Coordination Mechanisms for Field Epidemiologists in the ASEAN Plus 3 Field Epidemiology Training Network (FETN) to Better Prepare for, Detect, and Respond to Global Pandemics *Proponent: ASEAN+ FETN Foundation & ASEAN+3 FETN Chair*			
CORE ACTIVITIES			
24. Build capacity of field epidemiologists in public health emergency preparedness and response	Joint activities including table-top exercises, hand-on workshops, and joint field training (e.g., surveillance evaluation, risk assessment, outbreak investigation, etc.) is conducted	**Completed/Continuing** - FETN Regional Public Health Laboratories Joint Workshop on Genomic Epidemiology, 29-31 May 2024, Nonthaburi, Thailand (53 participants: 27 male; 26 female). - ASEAN FETN Chair's Visiting conducted on 28 May 2024, Nonthaburi, Thailand (17 participants: 8 male; 9 female). - Strengthening Field Epidemiologist: Bridging Gaps in Rapid Response Teams, 6-8 August 2024, Bali, Indonesia (40 participants: 16 male, 24 female). - Environmental Epidemiology Training Workshop, 2-6 December 2024, Bangkok, Thailand (54 participants: 28 male, 26 female). - Digital Disease Surveillance System evaluation for Pneumonia and Melioidosis at Trang Province Hospital, 25-29 August 2025 (completed).	- Attendance records at events - Meeting minutes from events - Surveys conducted among ASEAN FETP trainees - Completed report from the meeting

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
25. Increase data science capability of field epidemiologists and public health officers for better prevent and detect the global pandemic	a. Joint conduct with Health Informatics Organisations and IFETP Thailand, the 6-month Training Module and Hands-on experience in data science. Target participants are field epidemiologists (advance and intermediate levels). b. Develop reports/manuscripts of health situation analysis using Python and other data science tools.	**Ongoing** - Outbreak Investigation Board Game development ongoing (Phases 1-4), targeting launch August 2026. - Disease Forecasting Training Course for ASEAN+3 Field Epidemiologists scheduled for 19-30 October 2026, Bangkok, Thailand. Preparation in progress: course announcement issued April 2026; nominations and pre-test planned May 2026; interviews July 2026; participants confirmed August 2026; logistics September 2026.	
26. Enhancement of Network's Communication and Coordination	a. A Series of VC will be administered to facilitate further dialogue and mechanisms for collaboration among the ASEAN Plus 3 Member Countries. b. Conduct the Annual ASEAN+3 FETN Steering Committee and related meetings. c. Share experiences, constraints, and achievements in organising field epidemiology training programs across countries and disciplines among other ASEAN Coordinating Offices and ASEAN secretariat. d. Review and report the progress of collaboration as appropriate and contribute to preparations for an annual report.	**Completed/Continuing** - ASEAN FETN Chair's Visiting conducted on 28 May 2024, Nonthaburi, Thailand (17 participants: 8 male, 9 female). Virtual coordination meetings and network dialogues facilitated throughout 2024-2025. - 14th ASEAN Plus Three FETN Steering Committee Meeting, 10-12 December 2024, Siem Reap, Cambodia (38 participants: 19 male, 19 female).	

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
THEME 4: ENHANCING AND SUSTAINING THE OF HEALTH - SECURITY INTERFACE OPERATION IN ASEAN			
Strengthening Health Security Interface in ASEAN by institutionalisation cross-sector and cross pillar cooperation through the operation of Health Security Support Unit in ASEAN Headquarters *Proponent: ASEAN Secretariat, Health Division*			
CORE ACTIVITIES			
27. Feasibility study for the establishment and operation of the Health Security Support Unit (HSSU)	a. Feasibility study concluded and a report is produced. b. Submission of the feasibility study report to ASEAN Health Cluster 2 and ASEAN SOMHD	**Ongoing** - Feasibility study was endorsed by SOMHD on 6 December 2023. - Preparatory phase including study's design were conducted in 2024, with technical support from UKHSA. - Desk-review and literature study was carried out in Q1 of 2025. - In 2026, AMS and stakeholders' interviews are being carried out.	Endorsement given by the ASEAN Health Sector (AHC2 and SOMHD) for the establishment and operation of the HSSU.
28. Establishment and operation of the HSSU in the ASEAN Headquarters	a. Instrument for the establishment of the HSSU is approved by relevant authorities in ASEAN. b. TOR for all posts in the HSSU is approved. c. Recruitment of the HSSU personnel. d. Day-to-day operation of the HSSU to support MBT project implementation and other relevant health-security initiatives. e. HSSU operation in supporting non-MBT projects relevant to Health Security initiatives.	**Ongoing** - Despite the conclusion and endorsement of the HSSU, the function of HSSU in advancing Health Security interface, the engagement and cooperation with relevant stakeholders are being carried undertaken through the operation of MBT Programme led by the Health Division of ASEAN Secretariat.	- Approved instrument for the HSSU. establishment - Approved TOR for all personnel. - Monthly report of HSSU and its financial statement.

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
29. Fostering cooperation and partnerships with national, regional, and global agencies and organisations on Health Security initiatives with ASEAN	a. Health Security Stakeholders' Meeting conducted by the ASEAN Health sector. b. Partners participated/leading in the ASEAN-led health-security project activities. c. ASEAN MBT Proponents participated in other regional	**Completed/Continuing** - 2024: ASEAN MBT Programme participation in the Global Health Security Conference, 18 – 21 June 2024, Sydney, Australia. - 2024: Conducted the Commemoration of the 10th Anniversary of the MBT Programme which also served as the Regional Health Security Stakeholders' Meeting, 5 – 7 November 2024, Vientiane, Lao PDR. - 2025: Hosted the Wilton Park Dialogue in Defining the Concrete multi-sectoral cooperation and actions in enhancing health security architecture in ASEAN region, 14 – 16 January 2025, Jakarta, Indonesia. - 2025: ASEAN MBT Programme participation in the G7-led Working Group of the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GPWG) and its thematic Sub-Working Groups, 19 – 21 November 2025, Vancouver, Canada.	- Meeting report of the Stakeholders' Meeting. - Engagement instrument/ document with other Partners endorsed by AHC2/ SOMHD.

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
		- 2025: Conducted the ASEAN MBT Programme Coordination and Stakeholders' Meeting, 30 September – 2 October 2025, Vientiane, Lao PDR. - 2025: MBT Programme participation in the 7th Annual Meeting of the Network of ASEAN Chemical, Biological, and Radiological (CBR) Defence Experts, 9 – 10 December 2025, Kuala Lumpur, Malaysia. - 2026: TBC	
30. Knowledge and learning management on health-security initiatives in ASEAN through advocacy documents and functional web-based (PHE Portal) system data depository and learning system.	a. Articles/publication on health-security/MBT-related components are published. b. Live PHE Portal with up-to-date information and database. c. Functional learning management system that is accessible.	**Completed/Continuing** - 2024: inclusion of ABVC-related products uploaded in the PHE Portal. - 2024: development of ASEAN EOC E-Learn Platform in the PHE Portal. - 2025: development of ABVC's Dashboard in the PHE Portal. - 2025: continuation of the development of ASEAN EOC E-Learn Platform in the PHE Portal.	- Articles published/ presented. - PHE Portal is online and functional. - Database on PHE Portal.

PROJECT ACTIVITIES	EXPECTED OUTPUT/S	IMPLEMENTATION UPDATES	MEANS OF VERIFICATION (MOV)
31. Relevant support for the operationalisation of ACPHEED function of Detection and Risk Assessment, Response including Risk Communication, Prevention and Preparedness.	MBT Programme activities to support ACPHEED Detection and Risk Assessment carried out. MBT Programme activities to support ACPHEED Response including Risk Assessment carried out. MBT Programme activities to support ACPHEED Prevention and Preparedness carried out.	**Completed/Continuing** - MBT support for the conduct of the ASEAN SOMHD Special Meeting for the Finalisation of the Establishment Agreement of the ACPHEED, 2 – 4 December 2024, Bangkok, Thailand.	Approved concepts note and budget for mobilisation of MBT resources to support ACPHEED project activities.

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c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

Annex 7.

WORK PLAN OF THE ASEAN PLUS THREE FIELD EPIDEMIOLOGY TRAINING NETWORK (ASEAN+3 FETN) 2026 – 2030

The ASEAN+3 Field Epidemiology Training Network (ASEAN+3 FETN) aims to strengthen national and regional field epidemiology systems through continuous capacity building, development of trainers and mentors, operational learning, multisectoral cooperation including One Health, and sustainable regional mechanisms to support public health preparedness and response across the ASEAN+3 region. The activities under Strategies 1, 2, and 3 collectively support the objectives of ASEAN Health Cluster 2: Responding to All Hazards and Emerging Threats (AHC2) by reinforcing preparedness, enhancing technical competencies, strengthening multisectoral collaboration, and improving access to timely and quality public health information.

The Work Plan places strong emphasis on field epidemiology workforce development through mentor and trainer capacity building, joint training and simulation exercises, predictive data analysis, and sustained knowledge-sharing mechanisms. These activities contribute to improved national readiness and regional surge capacity, while strengthening information exchange and operational linkages essential for effective detection, risk assessment, and response.

By mainstreaming multisectoral and One Health approaches, the Work Plan advances coordinated collaboration among human, animal, and environmental health sectors. Activities such as One Health Training for Trainers, enhanced networking opportunities, and strengthened regional data-sharing platforms support integrated approaches and whole-of-government coordination in line with AHC2 priorities. At the regional level, the establishment and operation of key mechanisms, including the Technical Expert and Advisory (TEA) Panel, a pooled funding mechanism for emergency mobilisation, regular Steering Committee engagement, and recognition through the ASEAN Field Epidemiologist Award, strengthen governance, technical support, and the sustainability of ASEAN+3 FETN activities, ensuring continuity and access to regional expertise during public health emergencies.

To ensure sustained alignment and effective implementation, the ASEAN+3 FETN will pursue

(1) institutional integration through alignment with AHC2 outcomes and indicators

(2) coordinated implementation in close collaboration with the ASEAN Secretariat

(3) strengthened engagement with development partners through AHC2 mechanisms

(4) monitoring and evaluation in consultation with AHC2 to inform adaptive improvements.

Through these measures, ASEAN+3 FETN reaffirms its commitment to supporting AHC2 in building a resilient, coordinated, and technically capable regional public health system. The 2026 - 2030 Work Plan serves as a practical operational instrument to strengthen field epidemiology capacity and contribute to ASEAN's shared goal of a healthier, safer, and more secure ASEAN+3 community.

CORE ACTIVITIES				
STRATEGY 2: FOSTERING SUSTAINABLE MULTI-SECTORAL COOPERATION & ONE HEALTH				
Strategy 2 aims to institutionalize sustainable multi-sectoral collaboration by mainstreaming the One Health approach across human, animal, and environmental health sectors. It strengthens regional networking, knowledge exchange, and coordinated learning among FET professionals and relevant stakeholders through joint trainings, scientific forums, and shared platforms. By enhancing data-sharing mechanisms, promoting One Health training for trainers, and encouraging collaborative research and surveillance initiatives, this strategy supports integrated surveillance and coordinated responses to complex and emerging health threats. The approach reinforces whole-of-government and whole-of-society cooperation in line with ASEAN Health Cluster 2 priorities.				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
CORE ACTIVITIES				
1. One Health Training for Trainers (cross-referenced to the One Health Joint Plan of Action Annex)	**Output:** A pool of trained One Health trainers from human, animal and environmental sectors established.	Cambodia, Thailand	U.S. CDC	2026

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

ESSENTIAL ACTIVITIES				
STRATEGY 1: STRENGTHENING NATIONAL FETP WORKFORCE				
Strategy 1 focuses on strengthening and sustaining a competent, well-distributed field epidemiology workforce across ASEAN Member States and Plus Three Countries. It emphasizes continuous capacity building through regional and national training programmes, simulation exercises, mentorship development, and advanced analytical skills. By enhancing competencies in event-based surveillance, predictive data analysis, community-based surveillance, and emergency response operations, this strategy ensures that FETP graduates and Rapid Response Teams are equipped to support early detection, risk assessment, and timely response to public health threats. The strategy also prioritizes building a strong pipeline of trainers and mentors to ensure long-term sustainability of national FETP programmes.				
PROJECT ACTIVITIES	**EXPECTED OUTPUT/S AND INDICATORS**	**LEAD COUNTRY**	**PARTNERS**	**TIMELINE**
ESSENTIAL ACTIVITIES				
1. Capacity Building related to mentors and alumni: a. for ASEAN+3 FETN mentors to facilitate mobilization of FETP b. for FET alumni as trainers for RRTs and field epidemiology mentors	**Outputs:** 1. Number of mentors trained 2. Number of mentor exchanges 3. Number of trained FET alumni	Cambodia, Indonesia, Lao PDR, Singapore, Thailand		2026
2. Joint regional, national and (where possible) training programme/simulation exercise/capacity building: a. International training programmes and simulation exercises for Field Epidemiology and RRT b. Capacity building for predictive data analysis for detection and risk assessment c. Enhanced FET networking through joint training, conferences and scientific forums d. Expansion of FETP training programmes to increase number of graduates	**Outputs:** 1. Number of training programmes and simulation exercises conducted 2. Enhanced preparedness against EIDs and Public Health Emergency 3. Simulation guidelines developed; multisectoral participation 4. Increased networking 5. participation in human, animal and environmental sectors 6. Increased availability of scholarships and training opportunities	Brunei Darussalam, Cambodia , Indonesia, Lao PDR, Myanmar , Thailand	U.S. CDC SAFETYNET	2026 – 2027

STRATEGY 2: FOSTERING SUSTAINABLE MULTI-SECTORAL COOPERATION & ONE HEALTH

Strategy 2 aims to institutionalize sustainable multi-sectoral collaboration by mainstreaming the One Health approach across human, animal, and environmental health sectors. It strengthens regional networking, knowledge exchange, and coordinated learning among FET professionals and relevant stakeholders through joint trainings, scientific forums, and shared platforms. By enhancing data-sharing mechanisms, promoting One Health training for trainers, and encouraging collaborative research and surveillance initiatives, this strategy supports integrated surveillance and coordinated responses to complex and emerging health threats. The approach reinforces whole-of-government and whole-of-society cooperation in line with ASEAN Health Cluster 2 priorities.

PROJECT ACTIVITIES	EXPECTED OUTPUT/S AND INDICATORS	LEAD COUNTRY	PARTNERS	TIMELINE
ESSENTIAL ACTIVITIES				
3. Knowledge-sharing Platforms and Mechanism: a. Development of multi-sectoral knowledge-sharing platforms b. Webinars to encourage a learning environment c. Enhancement of regional data-sharing platforms linked to ABVC mechanism	**Output**: 1. Knowledge-sharing platform developed and utilised 2. Number of webinars 3. Availability of sharing platform/guidelines 4. Number of participants 5. Regional SOPs or agreed procedures for data sharing developed	Brunei Darussalam, Malaysia, ASEAN+3 FETN CO, ACPHEED	WHO, Canada, UKHSA, KDCA, U.S. CDC, SAFETYNET	2028 - 2030

STRATEGY 3: STRENGTHENING REGIONAL MECHANISMS & RESOURCE POOLS FOR ENHANCED SUPPORT

Strategy 3 focuses on strengthening the regional governance, coordination, and resource mechanisms necessary to sustain ASEAN+3 FETN operations and support Member States during public health emergencies. It establishes and operationalizes key regional instruments, including the Technical Expert and Advisory (TEA) Panel, pooled funding mechanisms for rapid deployment, and regular Steering Committee engagement. The strategy also promotes professional excellence through the ASEAN Field Epidemiologist Award and ensures accountability through structured monitoring and evaluation. Collectively, these mechanisms enhance regional readiness, technical coherence, and the long-term sustainability of the ASEAN+3 FETN.

PROJECT ACTIVITIES	EXPECTED OUTPUT/S AND INDICATORS	LEAD COUNTRY	PARTNERS	TIMELINE
4. Establishment of pooled funding mechanism for mobilisation of FETP graduates/trainees during real-time international events	**Output:** 1. A pooled funding and deployment mechanism established and endorsed 2. Access to ASEAN Fund: ADH	ASEAN+3 FETN Coordinating Office	ASEAN Partners	2027
5. Establishment and operation of Technical Expert and Advisory (TEA) Panel	**Output:** TEA Panel TOR endorsed	ASEAN+3 FETN Chair	ASEAN+ Foundation	2027
6. Annual ASEAN+3 FETN Steering Committee and bilateral/trilateral meetings with development partners a. ASEAN+3 Field Epidemiologist Award (ASEAN FE Award)	**Output:** 1. Annual SCM convened with documented decisions and follow-up actions 2. Draft ASEAN-compliant MOU/Memorandum developed and consulted 3. ASEAN FE Award institutionalised and presented	ASEAN+3 FETN Chair, ASEAN+3 FETN Coordinating Office	ASEAN+ FETN Foundation	2026 – 2030

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a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment

Annex 10.

ASEAN HEALTH SECTOR WORK PLAN FOR MALARIA CONTROL 2026 - 2030

Background

General Objective:
To sustain regional response and accelerate progress towards the elimination of malaria in the ASEAN region, supporting the 2030 regional elimination target

Specific Objectives:

1. To enhance regional capacity to control, eliminate and prevent resurgence of malaria
2. To strengthen capacity for surveillance and cross-border collaboration
3. To strengthen capacity for sustainable resource mobilization for malaria elimination

PROJECT ACTIVITIES	EXPECTED OUTPUT/S AND INDICATORS	LEAD/ CO-LEAD COUNTRY	TIMELINE	Interpillar/ Intersectoral/ Inter-cluster	Source of Support
ESSENTIAL ACTIVITIES – TO BE IMPLEMENTED FROM MID-TERM					
1. Develop national and regional capacity for mobilizing sustainable resources and innovative financing mechanism for malaria elimination	a. ASEAN-level costed malaria elimination plan and resource mobilization strategies is developed and adopted; b. Workshops to share country experiences and case studies on innovative financing mechanisms are conducted; *[Note: Align plan and reporting template with APHDA]*	Indonesia Malaysia (co-lead)	2027 - 2028	To be articulated in concept note	WHO, APLMA

PROJECT ACTIVITIES	EXPECTED OUTPUT/S AND INDICATORS	LEAD/ CO-LEAD COUNTRY	TIMELINE	Interpillar/ Intersectoral/ Inter-cluster	Source of Support
ESSENTIAL ACTIVITIES – TO BE IMPLEMENTED FROM MID-TERM					
2. Organise webinars on malaria elimination issues for AMS health workers	a. At least two webinars are delivered b. Number of health workers attending the webinars c. Webinar documentation is published *[Note: Modelled after ASEAN/APMEN webinars]*	Malaysia	2027 - 2030	To be articulated in concept note	WHO, APLMA, APMEN
3. ASEAN Health Ministerial Dialogue on Malaria Elimination	Health Ministerial meeting is convened and documented	Philippines	2030		WHO, APLMA, APMEN
4. Cross-border malaria collaboration workshops	a. Number of cross-border collaboration meetings conducted b. Joint action plans is developed	Indonesia Malaysia (co-lead)	2026 - 2030 2028	ASEAN EOC Network, ACHPEED, ABVC	WHO, APLMA, APMEN

AHC Work Programme Categories:

a. CORE – activities that are agreed to be implemented commencing in 2026
b. ESSENTIAL – activities that are agreed to be implemented in the mid-term
c. EXPANDED – activities that are agreed to be implemented from the mid-term and after the reassessment