

**Talking Points by Thailand Minister of Public Health
at the Round Table Discussion:
“Multi-Sectoral Collaboration on Prevention and Control of
Emerging Infectious Diseases (EIDs)”
At the 5th ASEAN Plus China Health Ministers Meeting (5th APCHMM)
19 September 2014 (afternoon)**

Excellencies, Distinguished Delegates, Ladies and Gentlemen,

A. Where are we as a region in terms of health security? What are our vulnerabilities and challenges?

- In the past two decades, we are facing increasing threats from health insecurity, but at the same time we also have increasing capacity and regional collaborations. Increasing connectivity and globalization among the ASEAN member states and the global community have made us more vulnerable to new Emerging Infectious Diseases especially those with pandemic potential. We have no choice but to further strengthen our individual and collective capacity on effective disease surveillance, including laboratory capacity, and control. The challenge is how to sustain these efforts and to involve all sectors, public and private, to prevent, detect and response effectively to the threats.

B. How can a regional collaboration work to improve capacities of countries to engage different sectors in?

- Capacity includes individuals, institutes, and networks embedded in a conducive environment, the so-called “INNE” concept. Network is the supreme form of capacity. It allows individual and institutes to do much more than the simple addition of their capacity.
- Regional collaboration supports and strengthens regional health security networks and ensures the maximum capacity to cope with the increasing threats. Health security is included in all the three pillars of ASEAN community. Thus it open the opportunity to mobilize active involvement of different and relevant sectors, public and private, to work together to further build up our capacity, under the so-called “One Health’ approach. One Health approach brings in human, animal and wide life experts working together in collaboration with other stakeholders in both public and private sectors.
- Under the ASEAN health cooperation, we have a few subsidiaries bodies to build up more capacity through networking. These include the ASEAN Expert Group on

Communicable Diseases (AEGCD), the ASEAN plus three FETN. Some AMS also engage in the sub-regional collaboration like the Mekong Basin Disease Surveillance Network. These are still mainly public health sector collaborations, which, although very good, are not adequate. We need to bring in other relevant sectors, public and private.

C. How can we make our health systems ready to response, prevent and control of EIDs?

- The first thing to do is to seriously invest in effective and equitable health care systems, based on Primary Health Care. We need to have adequate health facilities all over the country, manned by well-trained and committed health workers. These facilities not only provide essential health services, but also participate actively as the national resources to ‘prevent, detect, and respond’ to EIDs.
- The case of Ebola outbreak is a good example of the spread of EIDs due to inadequate health systems.
- I am so glad that yesterday all ministers of the AMS pay much interests in strengthening health care systems based on PHC, including but not limited to, expansion of primary care facilities, human resources for health, essential medicines and medical devices, and health care financing towards UHC. I do hope that we can collectively work with China on these areas. China is going to host the 8th Conference of the Asian Action Alliance on Human Resource for Health in Wei Hei in October. I am sure that human resources for health can be one of the most important concrete collaborations under ASEAN China health cooperation work plan. This will definitely ensure that all health facilities are manned with well-trained and committed health personnel.
- Thailand has been using multi-sectoral collaboration approach in implementation of the International Health Regulations 2005 (IHRs 2005) increase nationwide core capacities in responding to all hazards, especially the establishment of more than 1,000 Surveillance and Rapid Response Team (SRRT) all over the country. These teams are composed of trained rural and urban health personnel in the existing health care facilities. The Field Epidemiology Training program which started since more than 3 decades ago has produced adequate number of well-trained first class field epidemiologists to lead the SRRTs and to cope with emerging new EIDs. These well trained staff also manned in the existing health facilities. We will continue to work with international organizations, as well as ASEAN and other countries on key measures such as surveillance and risk assessment, laboratory

diagnosis, case management, infection control, logistics, and other specific measures including risk communication and exit screening at port of entry.

- In working with ASEAN, we serve as ASEAN+3 Field Epidemiology Training Network (ASEAN+3 FETN) Coordinating Office since 2012

D. How can the technical expertise and technological advancement available in the region (such as production of vaccines and essential health technologies) be better utilized in preparing countries to prevent response and control EIDs?

- AMS and China have huge potential in terms of expertise and production of vaccines and essential technologies. China, Indonesia, Vietnam and Thailand are the four countries with the vaccine production capacity.
- We should work together to plan for collective regional capacity to cope with EIDs, including the regional pandemic vaccine capacity especially flu vaccine, the regional rapid response team to react immediately on any outbreak of potential pandemic, and regional training centers for field epidemiology and essential laboratories.
- Yesterday AMS has approved the priority health issues after 2015, One among the four of the proposed clusters is the “Health Response to all Hazards and Emerging Threats”. We see this as an opportunity to strengthen region’s health system to be better prepare. Within the proposed cluster “Access to Care”, Thailand has also initiated the collaboration on regional vaccine security. We are pleased to invite all AMS and China to join this initiative.
- I would like to reiterate the importance of the ASEAN China MOU and its work plan. We should make sure that the work plan includes the activities to establish and support such regional collective activities to ensure adequate regional capacity to prevent, detect and response to EIDs.

Thank you
