

ACMECS CDC Program

Ayeyawady-Chao Phraya – Mekong Economic Cooperation Strategy

GMS Public Health Forum on Regional Cooperation
in CDC and Health System Development, 5-7 Nov, Vientiane, Lao PDR

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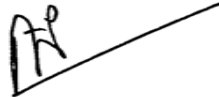
Background

- 1st ACMECS summit, 12 November 2003, Bagan, Myanmar
 - 2nd ACMECS summit, 1-3 November 2005, Bangkok
- ACMECs Leaders' Declaration on Partnership in combating Avian Influenza and other infectious diseases.

ACMECS summit declaration

Adopted this 3rd day of November 2005, in Bangkok, Thailand.

For the Kingdom of Cambodia



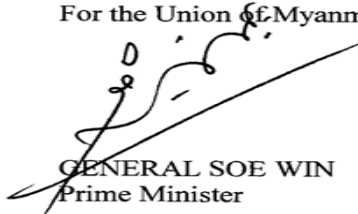
SAMDECH HUN SEN
Prime Minister

For the Lao People's
Democratic Republic



BOUNNHANG VORACHITH
Prime Minister

For the Union of Myanmar



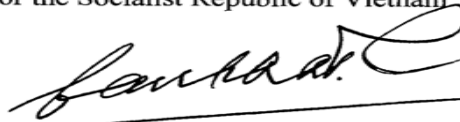
GENERAL SOE WIN
Prime Minister

For the Kingdom of Thailand



THAKSIN SHINAWATRA
Prime Minister

For the Socialist Republic of Vietnam



PHAN VAN KHAI
Prime Minister

I. What is ACMECS ?

- A cooperation framework amongs 5 countries start in 2003 (Mynmar, Thailand, Laos, Cambodia and Vietnam)
- To promote balanced development in the sub-region.
- Utilize member countries' diverse strengths
- Work with developmental partners and interested parties
- Commit by highest government level

Area of Cooperation in ACMECS

Six sectors and name of coordinating countries

- Trade and investment (Thailand)
- Agriculture and industrial (Myanmar)
- Transport linkages (Lao PDR)
- Tourism (Cambodia)
- Human resource development (Vietnam)
- Public Health* (Thailand)

* Agreed to establish as a new sector in 2005

ACMECS Public Health Sector

ACMECS – Public Health Sector

- recognition of potential threat of
 - Emerging and Re-emerging infectious diseases
 - Diseases related to water, hygiene and food
 - Regional pandemic of Avian Influenza
 - HIV/AIDS
- promote
 - network of public health agencies
 - information sharing
 - provide early warning
 - capacity building
 - contain trans-border diseases

II. ACMECS Mechanism

1. ACMECS summit by head of state every 2 year
2. Minister of foreign affair meeting every year
3. Senior Officials Meeting every 6 month
4. Sectoral working group meeting
5. ACMECS working group among embassies coordinate by Ministry of foreign affair.

Mechanism of Health Sectoral Working Group

- Coordinating country by voluntary basis
 - Thailand has volunteered and was endorsed
- Design their own program and plan of action.
- Mobilize resource, implementation, monitoring
- Sectoral working group meetings on regular basis.
 - Minister of health
 - Senior official (permanent secretary or DG)
 - Contact points and persons
- Date and venue of meetings can be held on rotational basis

ACMECS Leaders' Declaration
On Partnership in Combating Avian Influenza
and Other Infectious Diseases
3rd November 2005 Bangkok

Strengthen surveillance and response system

- Training in surveillance and Laboratory
- Regional surveillance and rapid response network
- Prompt information sharing
- Allocate requires resource

Strengthen preparedness

- Educational campaign
- preparing hospital
- response when human-to-human start (phase 4)
- conducting joint study
- strategic stockpile
- telecommunication

2.5 millions US dollars
From Thai government
For seeding fund



ACMECS Health Sector's Plan for Combating Avian Influenza and Other Emerging Infectious Diseases

ACMECS National Focal Point on Health Taskforce Meeting
11-13 July 2007 Bangkok

General Objectives

To strengthen national capacities and regional cooperation to prevent and control Avian Influenza and other Emerging Infectious Diseases such as diseases related to water hygiene and food, and HIV / AIDS.



Specific Objectives

1. Build up national surveillance and laboratory capacity in both human and animal sectors.
2. Facilitate information sharing on AI and other EID disease surveillance system.
3. Support and strengthen the national influenza preparedness plan and initiate an efficient joint rapid containment system.



Specific Objectives (cont.)

4. Promote the control of other emerging diseases at cross – border areas.
5. Introduce consumer protection regarding the quality of essential drugs to treat EID.
6. Enhance Human Resource Development.
7. Strengthen collaborative mechanisms in the ACMECS Health Sector.



Major Activity Components

1. Human Resource Development for Disease Surveillance and Control.
2. Health Information System and Information Sharing.
3. Strengthen National Pandemic Preparedness Plan.
4. Promote other Emerging Infectious Disease Control at Border Areas.
5. Consumer Protection and Drug Initiatives.
6. Establishment of collaborative mechanisms



Component I :

Human Resource Development for Disease Surveillance and control

Objective :

To build up ACMECS member countries' national surveillance and laboratory capacity in both human and animal sectors.

Component I: Human Resource Development for Disease Surveillance and control

Activities 1. Short - term training on surveillance and diagnosis

One – week training for NIH lab.tech.
One – week training for NIAH lab.tech.

- 1.2 Clinical Case management for AI
- 1.3 Laboratory training for AI detection
- 1.4 One week In-country training for SRRT

2. Long - term training

- 2.1 Two-year course in the International FETP
- 2.2 Member Countries propose to TICA (100 scholarship)

One – week training for trainers on SRRTat national level

Targets : 5 veterinarian and P.H staff
at National level from each
ACMECS member countries

Timing : August 2006

Resp. Agency : DDC, DLD

Laboratory training for Avian Influenza detection

1. One-week training for NIH lab. technicians

Targets : 2-3 NIH lab. tech.

Timing : June 2006, August 2006

Resp.Agency : DMSc, TUC - IEIP

Laboratory training for Avian Influenza detection

2. One-week training for NIAH lab. Technicians

Target : 2-3 NIAH Lab.tech. from
each ACMES member country

Timing : (not yet decide)

Resp. Agency : DLD

One week In-country training for SRRT

Target : 25 veterinarians, 25 P.H health staff from each ACMECS member country

Timing : June 2006 in pilot country

Resp. Agency : DDC, DLD, DMSc

Two – year course in the International Field Epidemiology Training Program (FETP)

Target : 1 MD. from each
ACMECS member country

Timing : once a year (June 2007– 2009)

Component II : Health Information System and Information Sharing

Objective :

To set up information sharing system on the HPAI among the ACMECS member countries.

Component II :

Activity :

1. Designating a nation focal point in each ACMES member country.

Targets :

Encourage regular exchanges of information on AI situation.

Component II :

Activity :

2. Establish AI centers in five ACMCS Countries with communication facilities.

Target :

To serve as contact point on AI among the members.

Timing :

From June 2006 onwards.

Component III : Strengthen National Pandemic Preparedness Plan

Objective :

To support, strengthen and harmonize ACMECS existing national preparedness plans and promote efficient joint rapid containment scheme.

Component III :

Activity :

1. Dispatch of experts to support preparedness plans in ACMECS countries.

Target :

To Produce a harmonized or unified national influenza preparedness plans among members.

Component III :

Activity :

2. Simulation desktop exercise among ACMECS countries.

Target :

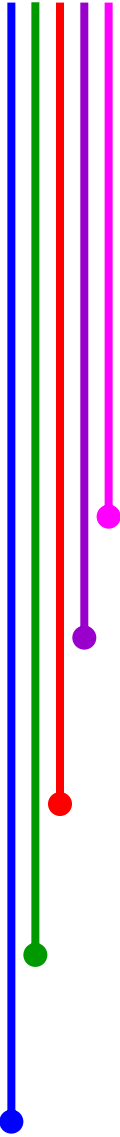
To facilitate real – time information – sharing in case of any possible outbreak.

Timing :

From June 2006 onwards

Component IV: Promote other Emerging Infectious Disease Control at Border Areas

Each country will be allocated funds to strengthen mechanisms at cross-border activities:

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- 4.1 Identify cross-border sites for exchange of important emerging disease information (cross-border sites can be identified by the Mekong Basin Disease Surveillance)
 - 4.2 Strengthen Malaria and HIV/AIDS control
 - 4.3 Training of local health officials on disease prevention and control

Component V: Consumer Protection and Drug Initiatives

- 5.1 Hold “Joint Inspection” workshops among ACMECS countries.
- 5.2 Develop primary methods for screening low-quality drugs and facilitate regulatory inspections.
- 5.3 Develop the use of refractometers and the colorimetric method.
- 5.4 Training the trainers - develop the analytical skills to manage the developed technique.

Component VI Establishment of collaborative mechanisms

- 6.1 Establish a coordinating office for the ACMECS public health sector
- 6.2 Organize the ACMECS Health Ministers' Meeting
- 6.3 Organize the annual ACMECS Public Health Senior Officials' Meeting
- 6.4 Organize the Bi-annual meeting of Focal point and contact persons
- 6.5 Develop an Action Plan through the Public Health Working Group
- 6.6 Monitor and Evaluate progress