

Greater Mekong Subregion

Responses to Infectious Diseases Project

(GMS-RID)

Quarterly Performance Report

For the Period

September 15 to December 31, 2009

Submitted by

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Quarterly Performance Report No. 1

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Chief of Party

GMS-RID Project

Kenan Institute Asia

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1. Program Description Summary

The USAID Regional Development Mission/Asia (USAID/RDMA) has established a cooperative agreement with the Kenan Institute Asia (K.I.Asia) to support regional and country-based infectious disease programs. This five-year cooperative agreement, Greater Mekong Subregion – Responses to Infectious Diseases (GMS-RID) has an estimated budget of \$4.4 million for the period (September 16, 2009 – September 15, 2014). This award will permit K.I.Asia to carry out activities from its headquarters in Bangkok on a region-wide basis and/or in all of the following countries in the Greater Mekong Subregion (GMS): Burma, Cambodia, China, Laos, Thailand, and Vietnam.

Through this Cooperative Agreement with Kenan Institute Asia, USAID is helping to stop the spread of infectious disease in the Greater Mekong Subregion through an integrated program designed to strengthen effective GMS regional, national and local responses to avian and pandemic influenza (API), malaria, tuberculosis (TB) and other infectious diseases.

The GMS-RID Goal: Increased capacity for collaboration on infectious disease prevention, surveillance and response in the GMS.

To achieve this goal, the project is expected to achieve the following objectives:

1. To improve cross-border infectious disease surveillance and response focusing on API, malaria, TB and other emerging infectious diseases in the GMS.
2. To manage malaria drug resistance control including malaria containment and elimination projects.
3. To establish public private partnerships, with a focus on USAID Global Development Alliance (GDA) initiatives.

The above objectives will be reached through strategic programming and partnership development for infectious disease prevention and control in the GMS to include but not limited to the following approaches:

- Trans-boundary and multi-sectoral, i.e. animal and human health, collaboration
- Regional, national, and local capacity building in infectious disease surveillance and response
- Facilitation to enhance inter-country cooperation
- Learning exchanges between host country governments and implementing partners and adaptation of good practices to local contexts
- Grant/subgrant/subcontract management
- Public-private sector alliance building for innovative approaches to infectious disease control
- Integration of activities that promote gender equality and avoid adverse gender impacts

To reach the above stated objectives, this program will achieve these results:

- 1) Effective and sustainable mechanisms established for international dialogue for the prevention and control of communicable diseases including cross-border planning and activities in at least 5 key cross border provincial sites in the GMS.
- 2) Mechanisms established for monitoring and analyzing situation of mobile and migrant populations and risk associated for acquiring avian influenza, malaria, TB, and other infectious diseases, for use in formulation, application, and evaluation of innovative strategies to mitigate those risks.
- 3) Results of pilot malaria elimination initiatives and good practices in Thailand documented and disseminated.
- 4) Annual learning exchange meetings conducted with Burma Border Malaria Task Force with representation by cross-border non-governmental organizations.
- 5) A minimum of 3-5 public private partnerships supported per year to prevent and control infectious diseases in the GMS.

2. Progress on Component 1. Cross-Border Infectious Disease Surveillance and Response

2.1 Progress of program activities in Q1 (Sept. 16 – December 31, 2009)

Activity A1. Cross-border collaboration on Infectious Disease Surveillance and Response (IDSR)

A1.1. Cross-border IDSR collaboration stakeholders workshop

Activity Implemented: From December 22-23, 2009, K.I.Asia organized a stakeholders planning workshop for 61 central health, agriculture, and quarantine officials and provincial health officials from seven twin-province cross-border network sites on GMS borders and international stakeholder organizations (US CDC, USDA, FAO, AED, ADPC, InSTEDD, MBDS). The objectives of the workshop were to:

- Introduce the USAID-funded GMS Responses to Infectious Diseases Project
- Review experiences in cross-border collaboration from the first wave of H1N1
- Obtain input from the stakeholders on the activities planned to support cross-border collaboration on infectious disease surveillance and response in 2010
- Obtain input on design of a prototype web-based outbreak information sharing system

Participants represented fourteen selected provinces with important international border land crossing points of entry as follows.

China PR	Lao PDR	Thailand	Cambodia	Vietnam
Mengla County, Yunnan	Luang Nam Tha			
	Bo Keo	Chiang Rai		
	Vientiane	Nong Khai		
	Bolikhamxay			
	Savannakhet	Mukdahan		Quang Tri
		Trat	Koh Kong	
			Kamphot	Kien Giang

Results: Countries and provinces presented experience in responding to the first wave of the H1N1 2009 influenza pandemic including some examples of cross-border collaboration. The GMS-RID project was presented including draft workplan for the first year of implementation. It was observed that the project is very ambitious, and that it seeks to build on the existing systems to strengthen linkages across borders, using a learning process approach. Twin province sites met to review the draft workplan and consult on sites, timing, and budget needed for their collaboration in 2010. A breakout group held consultations on cross-border outbreak information sharing/reporting. The group agreed that it would welcome GMS-RID's support to improve the reporting system used under the Mekong Basin Disease Surveillance project by developing and implementing a pilot web-based system to enhance user-friendliness and usefulness. It was also agreed to pilot test a new syndromic animal disease outbreak reporting form developed by FAO in selected GMS-RID sites.

Next Steps: Revise budgets for cross-border activities, compile activity plans by country, share with ministries of health to revise schedule and budget, consult with RDMA regarding subgrants/direct payment method by country, notify ministries of health of results of consultations with RDMA, prepare and execute subgrants/MOUs. Coordinate with InSTEDD, MBDS, and FAO on outbreak reporting.

Activity A5. Promoting coordination and sustainability for cross-border collaboration by making trips in the region to participate in regional meetings/events

Activities Implemented:

- K.I.Asia project staff participated in the RDMA AI partners meeting from 23-25 September, 2009, and delivered presentations summarizing API activities and results under the AERA cooperative agreement and the draft workplan for API activities for 2010 under GMS-RID.
- The Chief of Party participated in a regional workshop as part of the second real time evaluation of FAO's work on highly pathogenic avian influenza to help shape future FAO responses to better meet national and regional requirements. from November 30-December 1, 2009.
- The Chief of Party and Regional Coordinator participated in the Pandemic Preparedness Forum meeting on zoonotic diseases.
- The Chief of Party participated in the zoonotic diseases training curriculum development consultation workshop organized by the Asian Disaster Preparedness Center on December 8, 2009.

Results: Coordination with other GMS key stakeholders to promote cross-border collaboration on IDSR.

Next Steps: Continue participating in regional fora on API and IDSR to promote coordination and sustainability of cross-border collaboration.

Activity A7. Meeting of Asian countries on plans for deployment of H1N1 vaccine

Activity Implemented: K.I.Asia organized a regional workshop entitled “Joint WHO/USAID Workshop to Finalize National Plans for Deployment of the H1N1 Vaccine” from November 12-13, 2009 in Bangkok. The 60 participants included health officials from Indonesia, Sri Lanka, Timor-Leste, Cambodia, Lao PDR, Mongolia, Philippines, and Viet Nam, and representatives from the US Embassy, USAID, WHO, AED, US CDC.

Results: National plans for deployment of donated H1N1 vaccine for eight Asian countries.

Next Steps: Countries deploy vaccine according to plans.

Activity W1. Trips to introduce the project and consult with stakeholders in Cambodia, Lao PDR, Thailand, Vietnam, Yunnan

Activities Implemented: K.I.Asia staff made trips to Lao PDR, Vietnam, Yunnan and Bangkok to introduce the project to key stakeholders at ministries of health and MBDS and obtain their input on the workplan for 2010. Staff also met with the Director General of CDC from the Cambodia Ministry of Health for consultations on the workplan during the vaccine deployment planning meeting.

Results: Understanding of GMS-RID and consensus on the activities in the 2010 workplan among GMS ministries of health.

2.2 Constraints/Problems Affecting Implementation of This Component During This Quarter and Solutions

None

3. Progress on Component 2. Infectious Disease Drug Resistance Control

3.1 Progress of program activities in Q1 (Sept. 16 – December 31, 2009)

Activity IR 2.1 B3.1 Annual Burma border-wide stakeholders forum on malaria and IDs (case management, diagnostics, treatment regimens, etc.)

Activity Implemented: The Chief of Party had a consultation with Dr. Francois Nostren, leader of the Burma Border Malaria Task Force, regarding the concept and implementation of this activity.

Results: Agreement in principle to organize the forum in late April or May and include other significant infectious diseases in refugee camps and among migrants.

Next Steps: Plan the program for the forum in consultation with SMRU.

Activity IR3.3 B1. Phuket malaria pre-elimination pilot project

Activity Implemented: In November 2009, K.I.Asia coordinated with the Phuket Provincial Health Office to organize a planning workshop for phase two of the pilot project on elimination of malaria in Phuket province. Partner organizations participating in the workshop included the Malaria Consortium, the Malaria Association of Thailand, and the Bureau of Vector Borne Disease from MOPH. Preliminary consultations were held with AED regarding coordinating K.I.Asia's migrant risk study with a KAP study and communications activities under the C-CHANGE Project.

Results: A draft activity plan and budget for phase two of the pilot project.

Next Steps: Revise the activity plan and budget, formulate a project proposal for a subgrant to implement phase two of the pilot project. Coordinate with AED.

3.2 Constraints/Problems Affecting Implementation of This Component During This Quarter and Solutions

None

4. Progress on Component 3. Public Private Partnerships

Public private partnership (PPP) approach, a key concept of the Global Development Alliance (GDA) model has been integrated into GMS-RID activities. The GDA component objective aims to strengthen capacity for infectious disease prevention and control in the GMS through expanded involvement of the private sector. The program's three main activities include GDA building, GDA grant management and GDA promoting are anticipated to have a minimum of 4 public private partnerships developed in the first year.

4.1 Progress of program activities in Q1 (Sept. 16 – December 31, 2009)

Activity C1. GDA Building

C 1.1 Information Production and dissemination.

Activity Implemented: The GDA working team has come up with criteria to identify potential project partners. Target group comprises (1) corporate sector involves in public health products and services and have their own community public health program focuses on infectious diseases including avian and pandemic influenza, H1N1, malaria, dengue, TB, etc., and (2) associations or foundations or NGOs who are founded or supported by private sector and operate as implementing hands for those corporate sector

in social development activities. Concurrently, draft of request for proposal (RFP) has been developed and sent to RDM/A to review and comment before announcement.

Results: A draft of RFP for further approval.

Next Steps: The working team will send an approved RFP with invitation letter to target partners for proposal development. Proposals for review and approval are anticipated to be received within February-March 2010.

C1.2 to C1.4 Briefing with potential partners/stakeholders in Thailand, Viet Nam, Lao PDR

Activity Implemented: In parallel, survey and company visit to investigate company's interests of project development and implementation in Thailand has been made. Companies to be put in the short list have to have community project site in GMS geographic area or cross border and willing to contribute their resources as matching fund into the project. The first batch of potential partners are Total Access Communications Plc. (DTAC), Colgate Palmolive (Thailand) Co., Ltd., Siam Dutch Thana Netting Co., Ltd. and Chor Karnchang Public Co., Ltd. A survey on multi-national corporations in Vietnam, Lao PDR, and Cambodia is in process.

Results: A list of potential project partners and data base of their community development project in public health area.

Next Steps: Travel to region - Vietnam and Lao PDR for company visit to launch the program in February 2010.

C 2. Grant Management

C 2.1 GDA support for B1 Pilot Project on Malaria Pre-elimination in Phuket

Activity Implemented: GDA program manager participated "Planning Workshop on Malaria Pre-elimination" in Phuket in early November 2009 to understand the current situation of Phuket Provincial plan for malaria pre-elimination.

C 2.2 Meetings with relevant stakeholders (Private sector)

The workshop has led GDA Program manager to a discussion among representatives from private sector such as Phuket Chamber of Commerce, Phuket Hotel and Tourism Association for collaboration in GDA-Malaria.

Results: A list of potential project partners for malaria pre-elimination in Phuket

Next Steps: When the draft provincial plan for malaria pre – elimination is refined, identify potential partners and opportunity for collaboration. Considering integration of GDA part into Phuket Provincial plan for malaria pre-elimination, tentatively completed within March 2010.

4.2 Constraints/Problems Affecting Implementation of This Component During This Quarter and Solutions

Difficult to meet with private sector representatives due to holiday season. Next quarter will follow-up with private sector representatives.

5. Progress on Project Workflow Activities

5.1 Progress of program activities in Q1 (Sept. 16 – December 31, 2009)

Activity W2. Annual Workplan: Annual workplans for AI and malaria were submitted to RDMA.

Activity W3. Performance Monitoring Plan: The first draft of the PMP was submitted to RDMA.

Activity W5. Quarterly Financial Report: The accrual report was submitted to RDMA.

Activity W13. Recruitment of Project Staff: Interviews were conducted with candidates for Infectious Disease Adviser, Field Coordinator, and Assistant Coordinator.

5.2 Constraints/Problems Affecting Implementation of This Component During This Quarter and Solutions

- Recruitment of a suitable candidate for the IDA position has been challenging. It is expected that this will be finalized early in the next quarter.

6. Activities and Events Planned for Implementation During the Next Quarter

Component 1. Cross-Border Infectious Disease Surveillance and Response

- The Chief of Party will deliver a presentation on the GMS-RID Project at the UNSIC-sponsored United Nations Partner Meeting on Avian and Pandemic Influenza.
- K.I.Asia's GMS-RID team will participate in the RDMA monthly COPs meetings.
- Preparation of subgrants and MOUs for cross-border collaboration.
- Meet with partners to move toward integration of workplans.

Component 2. Infectious Disease Drug Resistance Control

- Execute a subgrant with Phuket Provincial Health Office for the malaria elimination pilot project.

- Organize meetings with private sector to mobilize public-private-partnerships for elimination of malaria in Phuket.
- Coordinate with AED on design of a rapid appraisal of migrant risk to malaria and other infectious diseases by K.I.Asia, and a KAP study by AED in Phuket.
- The COP and Chief of the Malaria Cluster (BVBD/DDC/MOPH) will participate in the Second Annual Meeting of the Asia Pacific Malaria Elimination Network.

Component 3. Public Private Partnerships

- Issue a Request For Proposals using the GDA approach to mobilize private sector resources for infectious disease prevention, surveillance, and response

Workflow Activities

- Employ project staff (Infectious Disease Adviser, Field Coordinator, Assistant Coordinator).
- Submit revised workplans.
- Revise the PMP.
- Draft a five year strategy document for GMS-RID.
- Submit semi-Annual Performance Management Report.
- Submit Quarterly Financial Report with Accruals.
- Submit AIMEBA report.
- Submit reports on PMP indicators, targets and results for API and malaria.