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G7 Research Group

The
G7 Research Group
at the Munk School of Global Affairs at Trinity College in the University of Toronto
presents the

2015 Schloss Elmau G7 Summit Interim Compliance Report

9 June 2015 to 20 February 2016

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“We have meanwhile set up a process and there are also independent institutions monitoring which objectives of our G7 meetings we actually achieve. When it comes to these goals we have a compliance rate of about 80%, according to the University of Toronto. Germany, with its 87%, comes off pretty well. That means that next year too, under the Japanese G7 presidency, we are going to check where we stand in comparison to what we have discussed with each other now. So a lot of what we have resolved to do here together is something that we are going to have to work very hard at over the next few months. But I think that it has become apparent that we, as the G7, want to assume responsibility far beyond the prosperity in our own countries. That’s why today’s outreach meetings, that is the meetings with our guests, were also of great importance.”

Chancellor Angela Merkel, Schloss Elmau, June 8, 2015

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10. Health: Coordinated Rapid Deployment

“[The G7] will set up or strengthen mechanisms for rapid deployment of multidisciplinary teams of experts coordinated through a common platform.”

G7 Schloss Elmau Summit Declaration

Assessment

	Lack of Compliance	Work in Progress	Full Compliance
Canada			+1
France		0	
Germany			+1
Italy			+1
Japan		0	
United Kingdom			+1
United States			+1
European Union			+1
Average	+0.75		

Background

The 2007 World Health Organization (WHO) International Health Regulations are a framework for collaboration among states to increase public health and reduce the effects of cross-border epidemics.⁴⁴¹ The 2011 Ebola outbreak, one of the largest in history, was met with a WHO response of unprecedented scale.⁴⁴² However, many deemed efforts to contain and eliminate Ebola unsuccessful. In particular, they argued that the slowness, inefficiency and high cost of the response of WHO and the efforts of the United Nations Mission for Ebola Emergency Response mission demonstrated its inability to respond to a future pandemics.⁴⁴³ The lack of coordination among countries and international organizations has played a significant part in this failure.⁴⁴⁴ Consequently, the G7 has committed to the further expansion of international cooperation to better prepare itself to combat future outbreaks and public health emergencies.

Commitment Features

Part of the solution to global health emergencies is increasing active collaboration between countries. Improving rapid response is best done through the combination of efforts by countries and would focus on a global strategy to improve public health. Germany, Ghana and Norway proposed an initiative to the UN Secretary-General for a comprehensive proposal for effective health crisis management. Response mechanisms are also being developed at WHO, World Bank and the International Monetary Fund, including the development of a Pandemic Emergency Facility by the World Bank. Part of compliance would necessitate supporting these proposals as well as internal G7 efforts.

Compliance to this commitment does not mean a general statement announcing efforts to combat disease and other infectious diseases. Compliance to this commitment would require an active statement on strengthening mechanisms for the rapid deployment of teams to combat global health outbreaks. For full compliance this should be coordinated through a common platform.

⁴⁴¹ Alert & Response Operation, World Health Organization, Date of Access: 17 January 2016.

<http://www.who.int/csr/alertresponse/en/>

⁴⁴² One Year Later, Ebola Outbreak Offers Lessons for Next Epidemic, New York Times, 23 March 2015. Date of access: 17 January 2016. <http://search.proquest.com.myaccess.library.utoronto.ca/docview/1712318216?accountid=14771>

⁴⁴³ Ebola global response was ‘too slow’, say health experts, BBC News, 23 November 2015. Date accessed: 17 January 2016. <http://www.bbc.com/news/health-34877787>

⁴⁴⁴ Ebola global response was ‘too slow’, say health experts, BBC News, 23 November 2015. Date accessed: 17 January 2016. <http://www.bbc.com/news/health-34877787>

Scoring Guidelines

-1	Member neither strengthens multidisciplinary teams NOR coordinates via the development of a common platform.
0	Member strengthens multidisciplinary teams OR coordinates via the development of a common platform.
+1	Member strengthens multidisciplinary teams AND coordinates via the development of a common platform.

Lead Analyst: Emma de Leeuw

Canada: +1

Canada has fully complied with its commitment to strengthen mechanisms for deploying experts to respond to future epidemics.

Canada's response to the Ebola crisis included a number of measures such as domestic preparedness funding, increased border measures, the development of a vaccine and financial as well as technical resources for West African countries. The Canadian government coordinated efforts through the United Nations Missions for Emergency Ebola Response as well as the Red Cross/Red Crescent Societies.⁴⁴⁵ Canada sent 40 Canadian Forces health staff to Sierra Leone to treat affected health care workers and pledged CAD20.9 million to ten humanitarian organizations.⁴⁴⁶ However, Canada did also suspend travel visas for people arriving from those countries, which increased public uncertainty about Ebola threat levels.⁴⁴⁷

Canada's International Health Regulations focus on the "need to report and act on potential public health emergencies of international concern in a timely fashion, and to support public health capacity-building of partners."⁴⁴⁸ Canada has established an Ebola virus Rapid Response team that responds to potential outbreaks within Canada.⁴⁴⁹ Internationally, through collaboration with the World Health Organization (WHO), the US Centers for Disease Control and the Pan American Health Organization, the Canadian Rapid Response team is able to contribute to the mitigation of international public health emergencies.

Canada was also part of a meeting regarding work in outbreaks and emergencies led by WHO and the Global Outbreak Alert and Response Network (GOARN).⁴⁵⁰ The meeting between the various international organizations was to ensure that Canada's Rapid Response Team approach was consistent with other regional and international partners to ensure effective deployment in case of an international public health emergency.⁴⁵¹

Canada receives full compliance on its health commitment for rapid deployment through a common platform. A Canadian rapid deployment team has been created to respond to cases of a public health

⁴⁴⁵ Canada's response to Ebola, Government of Canada (Ottawa) 8 December 2015. Date of Access: 4 February 2016.

<http://healthycanadians.gc.ca/diseases-conditions-maladies-affections/disease-maladie/ebola/response-reponse/index-eng.php>

⁴⁴⁶ Ebola outbreak: Canada calls for volunteers to fight Ebola in Africa, CBC News (Toronto) 27 November 2014. Date of Access: 4 February 2016. <http://www.cbc.ca/news/politics/ebola-outbreak-canada-calls-for-volunteers-to-fight-ebola-in-africa-1.2852392>

⁴⁴⁷ Ebola outbreak: Canada calls for volunteers to fight Ebola in Africa, CBC News (Toronto) 27 November 2014. Date of Access: 4 February 2016. <http://www.cbc.ca/news/politics/ebola-outbreak-canada-calls-for-volunteers-to-fight-ebola-in-africa-1.2852392>

⁴⁴⁸ Canada Communicable Disease Report CCDR (Volume 41S-6), Public Health Agency of Canada (Ottawa) 17 December 2015. Date of Access: 4 February 2016. <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/15vol41/dr-rm41s-6/implementation-science-eng.php>

⁴⁴⁹ Canada Communicable Disease Report CCDR (Volume 41S-6), Public Health Agency of Canada (Ottawa) 17 December 2015. Date of Access: 4 February 2016. <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/15vol41/dr-rm41s-6/implementation-science-eng.php>

⁴⁵⁰ Meeting between Global Outbreak Alert and Response Network (GOARN) Steering Committee (SCOM) members and the Chair of the Advisory Group on Reform of WHO's Work in Outbreaks and Emergencies, World Health Organization http://www.who.int/about/who_reform/emergency-capacities/Meeting-report-GOARN-Steering-Committee-17-Sept-2015.pdf

⁴⁵¹ Canada Communicable Disease Report CCDR (Volume 41S-6), Public Health Agency of Canada (Ottawa) 17 December 2015. Date of Access: 4 February 2016. <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/15vol41/dr-rm41s-6/implementation-science-eng.php>

emergency within Canadian provinces or territories. Initiative has also been taken towards cooperation through common platforms. Canada has met with GOARN to discuss way cooperation can be increased among states but also among international organizations.

Therefore, Canada receives a rank of +1 for compliance as a result of Canadian efforts to strengthen and create a rapid deployment team as well as contributing to the future development of a common platform.

Analyst: Emma de Leeuw

France: 0

France has partially complied with its commitment to strengthen multidisciplinary teams and coordinates via the development of a common platform.

On 25 June 2015, Laurent Fabius, Minister of Foreign Affairs and International Development, held a meeting in Paris with Bill Gates and the Global Alliance for Vaccines and Immunization where the three signed a tripartite agreement for EUR100 million aimed at augmenting immunization levels in several French-speaking countries in the Sahel region: Burkina Faso, Mali, Mauritania, Niger, Senegal and Chad.⁴⁵² The agreement will help provide new vaccines, extend the duration of existing projects and help improve the health systems of the aforementioned countries.⁴⁵³

On 29 October 2015, Annick Girardin, Minister of State for Development and Francophony, held a meeting with Jean-François Delfraissy, Interministerial Coordinator of the fight against Ebola where they discussed progressions in the effort against the West African Ebola epidemic.⁴⁵⁴ Concurrently, France was preparing to send a team of 20 civil security trainers to Guinea in order to assist with ongoing efforts in the fight against Ebola and to provide fresh supplies to response teams already stationed in Guinea.⁴⁵⁵

On 29 October 2015, Minister Girardin and her colleague Thierry Mandon, Minister of State for Research, along with Christos Stylianides, European Commissioner and Ebola Coordinator, chaired an international conference, which examined the lessons learned from the management of the crisis in Africa.⁴⁵⁶ An agreement was reached by setting a common goal for health development and was subsequently followed by a new EUR174 million pledge, which adds to the EUR160 million already assigned to the affected zones.⁴⁵⁷

From March to July 2015, France has deployed several regional epidemic warning and response teams in Guinea as part of the PREPARE Project and France continues to provide logistical and technical assistance to

⁴⁵² Health in the Sahel – Meeting between Laurent Fabius and Bill Gates and signing of an agreement between the Bill & Melinda Gates Foundation, the French Development Agency and the GAVI Alliance (Paris) 25 June 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/events/article/health-in-the-sahel-signing-of-an-agreement-between-the-bill-melinda-gates>

⁴⁵³ Health in the Sahel – Meeting between Laurent Fabius and Bill Gates and signing of an agreement between the Bill & Melinda Gates Foundation, the French Development Agency and the GAVI Alliance (Paris) 25 June 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/events/article/health-in-the-sahel-signing-of-an-agreement-between-the-bill-melinda-gates>

⁴⁵⁴ Ebola – Paris – International conference on lessons learned from the management of the crisis (Paris) 29 October 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/fight-against-the-ebola-epidemic/events/article/ebola-west-africa-meeting-between>

⁴⁵⁵ Ebola – Paris – International conference on lessons learned from the management of the crisis (Paris) 29 October 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/fight-against-the-ebola-epidemic/events/article/ebola-west-africa-meeting-between>

⁴⁵⁶ Ebola – Paris – International conference on lessons learned from the management of the crisis (Paris) 29 October 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/fight-against-the-ebola-epidemic/events/article/ebola-paris-international-conference-on-lessons-learned-from-the-management-of>

⁴⁵⁷ Ebola – Paris – International conference on lessons learned from the management of the crisis (Paris) 29 October 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/fight-against-the-ebola-epidemic/events/article/ebola-paris-international-conference-on-lessons-learned-from-the-management-of>

local Regional health directorates.⁴⁵⁸ In addition to this assistance, the Agence française du développement will provide EUR10 million over the next three years to assist with the improvement of health facilities in the Guinean forest region.⁴⁵⁹

On 29 December 2015, Minister Girardin reiterated the need for Guinea to, “recover economically ... rebuild its healthcare system, and obtain instruments that help it respond more effectively in the event of a new epidemic.”⁴⁶⁰ In addition to its continued logistical and technical and financial support in Guinea, France is actively pursuing the establishment of a health crisis response system with its partners at the United Nations, World Health Organization (WHO) and the European Union.⁴⁶¹

France has committed considerable support by way of financial, technical and logistical aid to regions directly affected by the Ebola crisis, namely Guinea. These efforts, however, have been conducted unilaterally. In addition to these efforts, France has coordinated with the UN, WHO and the EU in an attempt to establish a health crisis response system.

Therefore, France has been awarded a score of 0 for its partial compliance.

Analyst: Mathieu Sitaya

Germany: +1

Germany has fully complied with its commitment to strengthen mechanisms for deploying exports to respond to future epidemics.

Germany’s global health policy is focused on “containing pandemics, fighting fatal infectious diseases (HIV/AIDS, tuberculosis, malaria and polio) and strengthening health care systems.”⁴⁶² The German government sustains a number of partnerships related to health, both bilateral and multilateral. Germany continues to participate in the Northern Dimension Partnership in Public Health and Social Well-being with nine other states in the Baltic Sea Region.

In 2013 Germany’s Federal Foreign Office launched the three-year German Partnership Program for Excellence in Biological and Health Security, with a budget of EUR23 million. This program focuses on global partnerships with the aim of mitigating biological security risks and encompasses a number of projects based in various German institutions.⁴⁶³

Germany’s Federal Ministry for Economic Cooperation and Development (BMZ) hosted the GAVI the Vaccine Alliance pledging conference in January of 2015, in response to the Ebola crisis.⁴⁶⁴ The conference succeeded in mobilizing an additional USD7.5 billion towards a second replenishment of GAVI for 2016–

⁴⁵⁸ <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/fight-against-the-ebola-epidemic/events/article/fight-against-the-ebola-epidemic-19978>

⁴⁵⁹ <http://www.diplomatie.gouv.fr/en/french-foreign-policy/health-education-gender/fight-against-the-ebola-epidemic/events/article/fight-against-the-ebola-epidemic-19978>

⁴⁶⁰ Guinea – End of Ebola epidemic – Statement by Annick Girardin (Paris) 29 December 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/country-files/guinea/events/article/guinea-end-of-ebola-epidemic-statement-by-annick-girardin-29-12-15>

⁴⁶¹ Guinea – End of Ebola epidemic – Statement by Annick Girardin (Paris) 29 December 2015, Date of Access: 3 February 2016 <http://www.diplomatie.gouv.fr/en/country-files/guinea/events/article/guinea-end-of-ebola-epidemic-statement-by-annick-girardin-29-12-15>

⁴⁶² Global health policy, Federal Foreign Office (Berlin) 2 August 2013. Date of Access: 2 February 2016. http://www.auswaertiges-amt.de/EN/Aussenpolitik/GlobaleFragen/Gesundheit/Gesundheitspolitik_node.html

⁴⁶³ German Partnership Program for Excellence in Biological and Health Security, Federal Foreign Office (Berlin) 18 February 2015. Date of Access: 2 February 2016. <http://www.auswaertiges-amt.de/EN/Aussenpolitik/Abroestung/BioChemie/Biosicherheitsprogramm.html?nn=694448>

⁴⁶⁴ Strengthening health care systems, fighting epidemics, increasing immunisation coverage, Federal Ministry for Economic Cooperation and Development (Berlin) December 2015. Date of Access: 2 February 2016. http://www.bmz.de/g7/en/Entwicklungspolitische_Schwerpunkte/Gesundheitssysteme_staerken/index.html

2020. The German government also increased its contribution to GAVI to EUR600 million for the 2016–2020 period.⁴⁶⁵

In August 2015 Germany’s Robert Koch Institute produced a “Framework Ebola Virus Disease” document, containing recommendations and regulations with regards to infection control of the Ebola virus within Germany. The document continues to be updated regularly, with updates in March and August 2015.⁴⁶⁶

The German government provided EUR195 million to support a number of preventive and humanitarian projects related to the Ebola epidemic in West Africa.⁴⁶⁷ These projects include providing special motorcycles from the Federal Agency for Technical Relief for the transportation of blood samples, and providing lorries for the World Food Programme for food transportation to affected areas. German funding also established treatment centres in both Sierra Leone and Liberia, as well as a mobile laboratory in Mali.

The German Government continues to support a two-year program run by the Robert Koch Institute, which trains medical staff in West Africa to treat patients who are highly infectious. This program, which ends in 2016, enables local medical staff to both recognize and care for those infected with Ebola.⁴⁶⁸

Germany receives full compliance with regards to its health commitment for rapid deployment through a common platform. Through its consistent support of global partnerships, and impressive domestic efforts at rapid deployment, Germany receives a rank of +1 for compliance.

Analyst: Jessie Castello

Italy: +1

Italy has fully complied with its commitment to strengthen mechanisms for deploying exports to respond to a future epidemics.

Italy has expressed its support for the rapid deployment of health crisis management resources internationally. It is an active participant in numerous inter-governmental organizations that work to collaborate health emergency responses. Having once been affected by the Ebola virus, Italy has consistently held public health as a priority on its public agenda.

As a member of the Global Health Security Initiative, Italy participated at the 15th ministerial meeting in 2014. The summit issued a communiqué directly responding to the Ebola outbreak, outlining specific actions to recover from this epidemic and prevent future diseases.⁴⁶⁹ Specifically, the statement included a commitment to “operational, material, and technical support” in the form of evacuation services and medical treatment for healthcare personnel.

Furthermore, Italy has worked closely with the World Health Organization (WHO). On 20 March 2015, the association released an organizational blueprint in establishing a global health emergency in question, of which Italy was a signatory.⁴⁷⁰ This represented one of WHO’s structural reforms to improve its emergency capabilities, including actions such as engaging civil society and United Nations agencies, and improving efficiency of deploying personnel.

⁴⁶⁵ Gavi pledging conference January 2015, Gavi The Vaccine Alliance (Berlin) 26 January 2015. Date of Access: 2 February 2016. <http://www.gavi.org/Funding/Resource-mobilisation/Process/Gavi-pledging-conference-January-2015/>

⁴⁶⁶ The Ebola virus disease outbreak in West Africa and the situation in Germany, Robert Koch Institut (Berlin) 18 December 2015. Date of Access: 2 February 2016. http://www.rki.de/EN/Content/Prevention/Ebola_virus_disease/EVD_situation_summary.html

⁴⁶⁷ Supporting the fight against Ebola, Federal Foreign Office (Berlin) 29 June 2015. Date of Access: 2 February 2016. <http://www.auswaertiges-amt.de/EN/Aussenpolitik/HumanitaereHilfe/Ebola/Ebola.html>

⁴⁶⁸ Supporting the fight against Ebola, Federal Foreign Office (Berlin) 29 June 2015. Date of Access: 2 February 2016. <http://www.auswaertiges-amt.de/EN/Aussenpolitik/HumanitaereHilfe/Ebola/Ebola.html>

⁴⁶⁹ Fifteenth Ministerial Meeting of the Global Health Security Initiative, Tokyo, 11 December 2014, Date of Access: 5 February 2016. <http://www.ghsi.ca/english/statementtokyo2014.asp>

⁴⁷⁰ Note for the Record: Member States Consultation – global health emergency workforce , WHO, 20 March 2015, Date of Access: 7 February 2016. http://www.who.int/about/who_reform/emergency-capacities/NFR-ER-20March2015.pdf

On a bilateral level, Italy has been cooperating with the Czech Republic to ensure legislative coordination for disaster risk reduction.⁴⁷¹ The strategic goal of achieving a comprehensive and integrated approach to public health emergencies is one of Italy's policy priorities.

In addition, Italy is also a supportive delegate at the Global Facility for Disaster Reduction, the European Disease Prevention and Control Center, and the ToPDad research centre and many more. Italy's active involvement in such international groups demonstrate its emphasis for a multilateral approach to coordinated medical deployment.

Therefore through Italy's cooperation in both multilateral and bilateral efforts to coordinate rapid response team coordination provides it with a +1 for full compliance.

Analyst: Angela Hou

Japan: 0

Japan has partially complied with its commitment to set up strong mechanisms for the coordinated rapid deployment of multidisciplinary experts to combat global health outbreaks.

On 12 October 2015, the Japan International Cooperation Agency signed a grant agreement with the Government of Mozambique granting aid of up to JPY2.121 billion for the building of a new medical facility to train more health workers in order to improve health services throughout the country.⁴⁷²

Japan hosted the international conference titled, "Universal Health Coverage in the New Development Era: Toward Building Resilient and Sustainable Health Systems," on 16 December 2015.⁴⁷³ In the opening session of the conference, Prime Minister Shinzo Abe emphasized the importance of making health a priority issue in the upcoming G7 Ise-Shima Summit and emphasized the importance of creating a global framework of collaborations to combat health outbreaks.⁴⁷⁴

However, other than issuing statements urging global cooperation to fight public health emergencies more effectively, the Government of Japan has taken very little measure to creating this framework in cooperation with other developed countries.

Thus, Japan receives a score of 0.

Analyst: Raheeb Dastagir

United Kingdom: +1

The United Kingdom has fully complied with its commitment to create and support innovative research networks and rapid response teams, as encouraged by the G7. It has led the global effort to develop increased research transparency among countries and improve existing global health infrastructure, by committing an estimated GBP200 million over the next five years.⁴⁷⁵

⁴⁷¹ Disaster risk reduction legislative as a basis for effective legislation, ISDR, 2011. Date of Access: 5 February 2016 http://www.preventionweb.net/english/hyogo/gar/2011/en/bgdocs/Llosa_&_Zodrow_2011.pdf

⁴⁷² Signing of Grant Agreement with Mozambique: Constructing a new training school for health workers and improving health services, Japan International Cooperation Agency (Tokyo) 13 October 2015. Date of Access 2 February 2015. http://www.jica.go.jp/english/news/press/2015/151013_01.html

⁴⁷³ Hosting the International Conference titled, "Universal Health Coverage in the New Development Era: Towards Building Resilient and Sustainable Health Systems." Ministry of Foreign Affairs of Japan (Tokyo) 16 December 2015. Date of Access 2 February 2015. http://www.mofa.go.jp/press/release/press4e_000975.html

⁴⁷⁴ Address by Prime Minister Shinzo Abe at the International Conference, Office of the Prime Minister of Japan (Tokyo) 16 December 2015. Date of Access 2 February 2015. <http://www.mofa.go.jp/files/000117118.pdf>

⁴⁷⁵ Global Health Leaders ask G7 for post-Ebola rapid response unit, Reuters (London) 5 June 2015. Date of Access: 1 February 2016. <http://uk.reuters.com/article/us-health-g7-global-idUKKBN00L18E20150605>

On 7 June 2015, Prime Minister David Cameron announced an ambitious plan to improve global health infrastructure. He lamented the poor response to the Ebola crisis and announced a three-tiered plan that would include substantive drug and vaccine development, the creation of a UK-funded rapid response team, as well as national commitment to complete transparency in the fields of vaccine research, data and operations, becoming the first country in the world to do so.^{476,477}

Prime Minister Cameron, on the same day, committed GBP20 million over the next five years to create the UK Vaccines Research and Development Network, with a focus on researching Ebola, Lassa, Marburg and Crimean-Congo Fever. This amounts to a GBP4 million commitment per annum.^{478,479}

The UK-based Medical Research Council (MRC) committed an additional GBP5 million to the network as of 8 June 2015. Des Walsh, Head of Infections and Immunity at the MRC, outlined the importance of the network to deliver benefits to global communities, and strongly encouraged leading health organizations of the world to find opportunities to contribute to research more collaboratively.⁴⁸⁰

In addition, two of the seven nationally funded research councils, the Biotechnology and Biology Sciences Research Council and the Engineering and Physical Sciences Research Council held an open call from 3 July 2015 to 13 January 2016 for innovative vaccinology practices. The primary focus of the research is to develop new vaccinology technology and practices, to create forums for vaccinology discussion among researchers, and to encourage collaboration of veterinary and medical scientists to advance both animal and human vaccinology.⁴⁸¹

The second tier of the plan, to increase overall transparency and cooperation in vaccinology amongst the G7 members, was openly called for Prime Minister Cameron at the Elmau Summit. Prime Minister Cameron announced that the UK would lead the global effort via the G7 to make it mandatory to publish results of all clinical results of vaccine trials for relevant diseases; currently, no such mandate exists. This comment comes after the World Health Organization (WHO) made it clear on 14 April 2015, that there was an ethical responsibility to publish results.⁴⁸² Finally, Prime Minister Cameron announced that the United Kingdom's Chief Medical Officer would collaborate closely with WHO to create a data forum for the precise purpose of sharing information and to make global publication more seamless.⁴⁸³

The United Kingdom has committed to create a Rapid Reaction Team (RRT) that would be composed of six to ten expert staff, consisting of epidemiologists, infection control specialists and infection control doctors. Their responsibilities include conducting rapid research on the disease in question, including methods and rate of transmission, and creating immediate global response recommendations. The effort has been

⁴⁷⁶ Prime Minister calls for 'wake-up to the threat from disease outbreak', Prime Minister's Office and The Rt Hon David Cameron MP (London) 7 June 2015. Date of Access: 2 February 2016. <https://www.gov.uk/government/news/prime-minister-calls-for-wake-up-to-the-threat-from-disease-outbreak>

⁴⁷⁷ Data from all UK-funded vaccine trials to be published says PM, BioPharma-Reporter (London) 10 June 2015. Date of Access: 1 February 2016. <http://www.biopharma-reporter.com/Markets-Regulations/Data-from-all-UK-funded-vaccine-trials-to-be-published-says-PM>

⁴⁷⁸ Prime Minister calls for 'wake-up to the threat from disease outbreak', Prime Minister's Office and The Rt Hon David Cameron MP (London) 7 June 2015. Date of Access: 2 February 2016. <https://www.gov.uk/government/news/prime-minister-calls-for-wake-up-to-the-threat-from-disease-outbreak>

⁴⁷⁹ UK Rapid Response Team: UK Rapid Response Team Competition, National Institute for Health Research (London) 1 December 2015. Date of Access: 3 February 2016. <http://www.nihr.ac.uk/funding/uk-rapid-response-team.htm>

⁴⁸⁰ The MRC commits GBP5m towards a new UK R&D Vaccines Network, Medical Research Council (London) 8 June 2015. Date of Access: 3 February 2016. <https://www.mrc.ac.uk/news/browse/the-mrc-commits-5m-towards-a-new-uk-r-d-vaccines-network/>

⁴⁸¹ Highlight notice in novel tools and technologies for vaccinology, Biotechnology and Biology Research Council (London) 3 July 2015. Date of Access: 4 February 2016. <http://www.bbsrc.ac.uk/funding/filter/novel-tools-technologies-for-vaccinology/>

⁴⁸² WHO calls for all clinical trial results to be published, AllTrials (London) 14 April 2015. Date of Access: 3 February 2016. <http://www.alltrials.net/news/who-calls-for-all-clinical-trial-results-to-be-published/>

⁴⁸³ Prime Minister calls for G7 agreement on clinical trial transparency, AllTrials (London) 8 June 2015. Date of Access: 3 February 2016. <http://www.alltrials.net/news/prime-minister-calls-for-g7-agreement-on-clinical-trial-transparency/>

spearheaded by Jeremy Farrar, director of the London-based charity Wellcome Trust, and Peter Piot, director of the London School of Hygiene and Tropical Medicine and co-discoverer of the Ebola.⁴⁸⁴

The majority of the GBP20 million committed is to be dedicated to this RRT, with plans to expand the team to 100 epidemiologists and the reserve to 10,000 scientists. Estimates from Reuters have placed the final cost as being between GBP100–200 million.⁴⁸⁵

Funding for the RRT is currently the joint responsibility of the National Institute for Health Research and Public Health England, with support from the United Kingdom Official Development Assistance Budget. This funding is contingent on the UK only providing financial assistance to recognized countries, which as of 2010 includes approximately 150 countries with a per capita income of USD12,276 or less. The National Institute for Health Research has also identified the army as a public sector partner.⁴⁸⁶

Following Prime Minister Cameron's announcement at the Elmau Summit, the two entities launched a public competition aimed at academic institutions to participate in the funding for the RRT. The academic institution that is selected would be required to contribute a minimum of 40 per cent of the annual RRT budget. Applications for institutions closed on 17 December 2015.⁴⁸⁷

Lastly, the United Kingdom has contributed to the creation of a global Pandemic Emergency Facility, as created by the World Bank Group and WHO. The effort is part of an increased global commitment to faster and more efficient outbreak responses. The Pandemic Emergency Facility is in partnership with the Ebola Recovery and Reconstruction Trust Fund, created by the World Bank Group to address the aftereffects of the Ebola Crisis. As of September 2015 the United Kingdom has committed USD4.5 million to the fund.^{488,489}

The United Kingdom has demonstrated an astounding amount of commitment to furthering the health goals established at the Elmau Summit, with comprehensive funding plans slotted for vaccinology, information technology, and rapid response over the next five years. The United Kingdom has also greatly encouraged the collaboration of the public and private sector by opening calls for funding and cooperation with their research councils and Public Health England. Lastly, the United Kingdom has shown leadership and initiative by being the first country in the world to commit to vaccine research transparency, reaching out to WHO to develop global forums, and committing funds to pre-existing entities to lessen the effects of the Ebola crisis.

The United Kingdom therefore receives a score of +1.

Analyst: Kristen Shi

United States: +1

The United States has fully complied with its commitment to strengthen multidisciplinary teams and coordinates via the development of a common platform.

On 29 July 2015, the United States announced its intention to commit USD1 billion to the Global Health Security Agenda (GHSA); an initiative it has been a part of since early 2014 whereby a common platform

⁴⁸⁴ Britain throws weight behind plans for flying-doctor unit to tackle world diseases, Independent (London) 6 June 2015. Date of Access: 2 February 2016. <http://www.independent.co.uk/life-style/health-and-families/health-news/britain-throws-weight-behind-plans-for-flying-doctor-unit-to-tackle-world-diseases-10302314.html>

⁴⁸⁵ Global Health Leaders ask G7 for post-Ebola rapid response unit, Reuters (London) 5 June 2015. Date of Access: 1 February 2016. <http://uk.reuters.com/article/us-health-g7-global-idUKKBN00L18E20150605>

⁴⁸⁶ UK Rapid Response Team: UK Rapid Response Team Competition, National Institute for Health Research (London) 1 December 2015. Date of Access: 3 February 2016. <http://www.nihr.ac.uk/funding/uk-rapid-response-team.htm>

⁴⁸⁷ UK Rapid Response Team: UK Rapid Response Team Competition, National Institute for Health Research (London) 1 December 2015. Date of Access: 3 February 2016. <http://www.nihr.ac.uk/funding/uk-rapid-response-team.htm>

⁴⁸⁸ Pandemic Emergency Facility, World Bank (Washington D.C.) 24 September 2015. Date of Access: 3 February 2016. <http://reliefweb.int/report/sierra-leone/pandemic-emergency-facility-frequently-asked-questions-last-updated-sep-24-2015>

⁴⁸⁹ Pandemic Emergency Facility Frequently Asked Questions, World Bank (Washington D.C.) 19 January 2016. Date of Access: 2 February 2016. <http://www.worldbank.org/en/topic/pandemics/brief/pandemic-emergency-facility-frequently-asked-questions>

serves to, “prevent, detect, and respond to future infectious disease outbreaks,” globally.⁴⁹⁰ In 17 African countries, the US will work with local authorities to develop a plan to “achieve and sustain each of the targets of the GHSA.”⁴⁹¹

On 4–6 August 2015, the United States announced its partnership with the African Union Commission in helping to create the African Center for Disease Control and Prevention.⁴⁹²

The United States has maintained its commitment throughout 2015 to facilitate the delivery of treatments of neglected tropical diseases by acquiring drug donations from pharmaceutical companies and delivering them to partner countries.⁴⁹³

On 16 November 2015, at the G20 summit in Antalya, US President Barack Obama, announced that the GHSA had expanded to include 30 new partnerships.⁴⁹⁴ These countries, along with existing partners, “will strive to achieve a world safe and secure from infectious disease threats by building measurable, sustainable capacity to prevent, detect and rapidly respond to infectious disease threats, whether naturally occurring, accidental or deliberately spread.”⁴⁹⁵

For its generous contributions and continued efforts in strengthening multidisciplinary teams and coordinating via the development of a common platform such as the GHSA, the United States has been given a score of +1 for its full compliance.

Analyst: Mathieu Sitaya

European Union: +1

The European Union has fully complied with its commitment for coordinated rapid deployment in global health emergencies. The European Union has committed to provide 20 per cent of its 2020 budget to improve generic and health emergency preparedness planning.⁴⁹⁶

The European Union continues to learn from the most recent global health emergency, namely the Ebola outbreak. Between 12 and 14 October 2015, a conference was held in Luxembourg to improve the European Union’s preparedness and response for future outbreaks of health epidemics. Their focus was to identify the learning points arising from the Ebola epidemic. Lessons that were learned include coordination, risk assessment processes, and intersectional cooperation for good preparedness planning.⁴⁹⁷

The European Union has implemented new legislation to deal with cross-border threats to health. This has been instrumental in supporting risk management and coordination of the response at the European Union level. Beyond that, it has increased resources for medical evacuation, mobilization of expertise, and transport

⁴⁹⁰ FACT SHEET: The Global Health Security Agenda (Washington) 28 July 2015, Date of Access: 4 February 2016.

<https://www.whitehouse.gov/the-press-office/2015/07/28/fact-sheet-global-health-security-agenda>

⁴⁹¹ FACT SHEET: The Global Health Security Agenda (Washington) 28 July 2015, Date of Access: 4 February 2016.

<https://www.whitehouse.gov/the-press-office/2015/07/28/fact-sheet-global-health-security-agenda>

⁴⁹² FACT SHEET: The Global Health Security Agenda (Washington) 28 July 2015, Date of Access: 4 February 2016.

<https://www.whitehouse.gov/the-press-office/2015/07/28/fact-sheet-global-health-security-agenda>

⁴⁹³ FACT SHEET: U.S.–African Cooperation on Global Health (Washington) 4 August 2015, Date of Access: 4 February

2016. <https://www.whitehouse.gov/the-press-office/2014/08/04/fact-sheet-us-african-cooperation-global-health>

⁴⁹⁴ FACT SHEET: The U.S. Commitment to the Global Health Security Agenda (Antalya) 16 November 2015, Date of Access: 4

February 2016. <https://www.whitehouse.gov/the-press-office/2015/11/16/fact-sheet-us-commitment-global-health-security-agenda>

⁴⁹⁵ FACT SHEET: The U.S. Commitment to the Global Health Security Agenda (Antalya) 16 November 2015, Date of Access: 4 February 2016. <https://www.whitehouse.gov/the-press-office/2015/11/16/fact-sheet-us-commitment-global-health-security-agenda>

⁴⁹⁶ The EU in Global Health (Brussels) 20 September, 2014. Date of Access: 3 February 2016.

http://ec.europa.eu/health/eu_world/docs/20140930_global_health_infograph_en.pdf

⁴⁹⁷ Conference “lessons learned for public health from the Ebola outbreak in West Africa – how to improve preparedness and response in the EU for future outbreaks” (Luxembourg) 12 December 2015. Date of Access: 3 February 2016.

http://ec.europa.eu/health/preparedness_response/docs/ev_20151012_sr_en.pdf

facilities for lab waste and clinical activities.⁴⁹⁸ New resources available will provide national health authorities rapid access to budgets for communication during a crisis. Contractual procedures are too complex and cumbersome to produce communication material.⁴⁹⁹

The conference in Luxembourg brought forth conclusions to strengthen health systems towards a resilient system that includes core capacities for implementing the International Health Regulations (IHR) and reinforcing epidemiological surveillance. The European Union has worked to provide mobile laboratories, the fast mobilization of epidemiological expert and a better medical evacuation system.⁵⁰⁰

European Union activities show interest and compliance to a long term engagement to support medical evaluation and health systems preparedness. Health systems emergency plans taken by the European Union are in line with goals set by the World Health Organization (WHO) to strengthen health systems and implementation of IHR core capacities. The European Union is now in the process of preparing medical staff to be used as medical corps that can be drawn from on short-term notice to be used as teams and equipment for members in health emergencies.⁵⁰¹ To retain this personnel in zones of need, the European Union has created the PREPARE program as a civil protection mechanisms for regional alert and response teams.⁵⁰²

The European Union is an active member in the Advisory Group on Reform of WHO's work in outbreaks and emergencies with health and humanitarian consequences. The program will initiate on-site risk assessment at the discretion of the director-general's within 72 hours for any high threat pathogen.⁵⁰³ The program is envisioned to come to its rollout phase in January 2016 and will hope to provide transformative changes to response to health risks and emergencies in activities in the Eastern Mediterranean and African regions.⁵⁰⁴

In partnership with WHO and Luxembourg, the European Union continues to work in a program for universal health coverage. Their aim is to build country capacities for the development, implementation, monitoring, and evaluation of robust and comprehensive national health policies, strategies, plans, and health financing policies to promote universal health coverage.⁵⁰⁵

In taking steps to increase coordinate rapid deployment in global health emergencies, the European Union has shown full compliance and is awarded a score of +1.

Analyst: Fernando Casanova

⁴⁹⁸ Conference "lessons learned for public health from the Ebola outbreak in West Africa – how to improve preparedness and response in the EU for future outbreaks" (Luxembourg) 12 December 2015. Date of Access: 3 February 2016. http://ec.europa.eu/health/preparedness_response/docs/ev_20151012_sr_en.pdf

⁴⁹⁹ Conference "lessons learned for public health from the Ebola outbreak in West Africa – how to improve preparedness and response in the EU for future outbreaks" (Luxembourg) 12 December 2015. Date of Access: 3 February 2016. http://ec.europa.eu/health/preparedness_response/docs/ev_20151012_sr_en.pdf

⁵⁰⁰ Information Session on Ebola Panels (Lyon) 24 January 2016. Date of Access: 3 February 2016. <http://www.who.int/about/finances-accountability/evaluation/reports/eu-preparedness-and-response-learning-from-the-ebola-outbreak-european-commission.pdf?ua=1>

⁵⁰¹ Information Session on Ebola Panels (Lyon) 24 January 2016. Date of Access: 3 February 2016. <http://www.who.int/about/finances-accountability/evaluation/reports/eu-preparedness-and-response-learning-from-the-ebola-outbreak-european-commission.pdf?ua=1>

⁵⁰² International Lessons Learned Conference on the Ebola Crisis (Paris) 29 October 2015. Date of Access: 3 February 2016. https://ec.europa.eu/commission/2014-2019/stilianides/announcements/international-lessons-learned-conference-ebola-crisis-paris-29-october-2015_en

⁵⁰³ Advisory Group on Reform of WHO's Work in Outbreaks and Emergencies Second Report (Geneva) 18 January 2015. Date of Access: 3 February 2016. http://www.who.int/about/who_reform/emergency-capacities/advisory-group/second-report.pdf?ua=1

⁵⁰⁴ Advisory Group on Reform of WHO's Work in Outbreaks and Emergencies Second Report (Geneva) 18 January 2015. Date of Access: 3 February 2016. http://www.who.int/about/who_reform/emergency-capacities/advisory-group/second-report.pdf?ua=1

⁵⁰⁵ Evaluation of the EU-Luxembourg-WHO Universal Health Coverage Partnership (UHC-Partnership (Geneva) 20 January 2016. Date of Access: 3 February 2016. http://www.who.int/healthsystems/UHC-Partnership_Evaluation_Call_for_Proposals.pdf?ua=1