

This report is a shortened version of the 2019 IANPHI Annual Activity Report prepared for the IANPHI Executive Board and membership and available on request. It describes the activities carried out by the IANPHI Secretariat based at [Santé publique France](#), Paris, and the United States (U.S.) Office based at [Emory University](#), Atlanta. It does not reflect all the mutual support provided by national public health institutes (NPHIs) in developing and strengthening NPHIs and in supporting the secretariat and U.S. office. Their expertise and know-how are essential to implement the different activities (meetings, workshops, on-site visits, projects).

This report also presents several activities which require additional support from partners and IANPHI members. Each funding stream has its limitations and constraints in terms of eligible activities. Not all NPHIs can benefit from individual support from the IANPHI offices. Nevertheless, efforts are made by both office teams to build synergies and find partners to allow our members to benefit from the IANPHI tools and experience sharing.

I. RELATIONSHIP WITH THE IANPHI FOUNDATION

The IANPHI Foundation, governed by a board of trustees, was established in 2011 and is registered in Finland. Up until 2019 IANPHI membership dues have been paid to the Foundation. In addition, the Foundation has signed:

- an agreement with the [Ethiopian Public Health Institute](#) (EPHI), Ethiopia to pay for expenses related to the 2019 annual meeting; and
- a new agreement with Santé publique France, for a three-year period 2019-2021, as IANPHI completes its organisational transition to an international non-profit association.

II. IANPHI ASSOCIATION – NEW LEGAL ENTITY

Following the decision by the IANPHI General Assembly at the 2018 Annual Meeting in London, statutes for IANPHI to be established as an international non-profit association, including internal rules, an IANPHI Ethical Principles and Code of Conduct, were approved.

The association was formally created on December 4th, 2018 through a notary with the Netherlands' [National Institute for Public Health and the Environment](#), the [Norwegian Institute of Public Health](#) and Germany's [Robert Koch Institute](#) as founding members, and was officially granted legal status in Belgium, upon receipt of a signed decree from Belgium's Minister of Justice on January 17th, 2019.

III. ACTIVITIES OF THE IANPHI SECRETARIAT

1. Activities and Initiatives in 2019

With the expansion of IANPHI's membership, partnerships, activities, and representation at national, regional, and international meetings, in addition to, the extra workload around restructuring the association, IANPHI took a significant step towards the professionalization of the secretariat in being able to meet the needs the network through hiring a project manager.

This position has provided significant support as we:

- engaged and followed up with NPHI work on health security, including the SNAP-GHS project;
- liaised and formalized partnerships;
- channeled increased project requests to the EB from IANPHI members and partners, in addition to information required by the EB to advance IANPHI's work and impact;
- disseminated welcome kits and arranged calls with new directors/members, supported regional network activities and piloted the review of tools and research for NPHI strengthening.

The secretariat was first able to secure resources for this position through support provided by [Public Health England](#), between November 2018 and April 2019, and now has leveraged secretariat savings and additional support from the IANPHI Foundation, to hire a project manager from September 2019 to July 2020.

In addition, the secretariat created an apprentice (12 month) and an intern (3-6 month) positions, which allow for:

- strengthened relationships between Members and the Secretariat, including support for the Asia and Latin American & Caribbean (LatAm) Networks;
- provision of close and individual follow up to maintain targets for the dues collection process;
- enhanced frequency of updates to the members on IANPHI opportunities and collaborations;
- maintenance and updates to member/director's database and website information, and provide high quality organization and support for activities related annual and regional meetings;
- further mapping of the IANPHI members network and contributing to the coordination activities of the Secretariat.

2. Administrative and Finance Management

Collection of Dues (as of November 10, 2019)

The collection of dues was launched in March 2019 by the secretariat with the 110 members of the association, up from 104 members in 2018. The membership dues were forecasted to reach 190,000 € in the 2019 budget year, a 12.5% increase compared to the 2018 budget.

Based on current income from membership dues collected in 2019, we have exceeded budget projections by 17.56% with 199,414 €.

In June 2019, Public Health England (PHE) supported funding for the SNAP-GHS project coordinator position in the IANPHI Secretariat in the amount of 26,000€ and returned 32,480€ in unused funds allocated to support the 2018 IANPHI Annual Meeting, resulting in a total fund transfer to the Foundation of 49,000€.

Special note regarding the dues collection process: 2019 marks three years in a row in which we have exceeded budget projections for the Association, maintained low numbers of “no responses” from NPHIs and, increased requests for waivers for member dues. We believe this success is related to the Secretariat’s consistency in following up with our members, in the same year-to-year timeframe, to request payment of dues. This has allowed members to better integrate IANPHI dues into their budget planning cycles, to ensure ease of payments in the subsequent budget year. Additionally, we have enhanced outreach and communications to our members, through regular emails, updates, newsletters, and the regional networks – showing the clear value of IANPHI for our members. We have also implemented a protocol that all grantees must pay their dues, if they wish to benefit from travel support for the Annual Meeting, which has helped to improve compliance among this group. We hope to continue this momentum in the following year and to ensure sustainability and good value is seen for a membership in IANPHI.

IANPHI Executive Board Activities and Decisions

It was decided in November 2018 to hold executive board meetings every two months, and to invite non-EB members and third parties to present topics of interest to the EB, particularly when IANPHI contribution in projects and partnerships is asked for. Additionally, to further strengthen and engage communication and feedback between the EB and IANPHI regional networks, IANPHI regional chairs have now been given a recurrent agenda spot to provide updates on the work in their regions. The EB is also engaging in methods to enhance EB member participation and accountability to the association. These measures are assisting to improve the EB decision making process and open IANPHI to new opportunities to be involved in initiatives and projects.

3. Strengthening the Network and Supporting NPHIs

Organizing Peer-to-Peer Evaluations

The Secretariat received two peer-to-peer evaluation requests for the year 2019. The outcome of these requests are found below:

- France: [Santé publique France](#)

Following the request and set-up of a review panel in 2018, the peer review of Santé publique France took place the end of January 2019. The review report was handed over in June 2019 to the agency’s director and presented to the management board and scientific council of the agency.

The [review report](#) was made public on June 7, 2019.

- Portugal: [Instituto Nacional de Saúde Dr. Ricardo Jorge](#) (INSA)

A preparatory visit of the secretariat was organized in May 2019, with the peer-to-peer review planned for the second week of September 2019. Due to external events, the INSA peer review had to be postponed and took place on February 17-21, 2020.

- Expanding outreach for peer evaluations for the year 2020

Upon the recommendation of the EB, the IANPHI Secretariat issued a call out to IANPHI members, to expand outreach and organization of peer-to-peer reviews beyond the European region. Subsequently, the secretariat received three peer evaluation requests (in addition to the postponed INSA review) for the year 2020. These organisations include Cabo Verde's [Instituto Nacional de Saúde Pública](#), Tunisia's [Institut National de Santé Publique](#), and Pakistan's [National Institute of Health](#).

Supporting Regional Networks

Guidelines to support the development of regional networks were developed by the Secretariat in 2018. After one year of implementation, it has been decided to utilize the IANPHI regional networks to feed into the EB work and activities, via a recurrent (dedicated) agenda slot during EB meetings (starting in the year 2020).

- IANPHI Europe

The 2019 IANPHI European Directors Meeting was hosted by Moldova's National Center of Public Health, in Chisinau on April 8-9, 2019, in partnership with the [Norwegian Institute of Public Health](#) (providing financial and human resources support), and with support from the IANPHI Secretariat, WHO Europe and WHO Moldova Country Office. This year's meeting welcomed 53 participants (62 including IANPHI Secretariat & Foundation representatives and interpreters). Among the attendees were directors and representatives of institutes from 14 European countries, and organizations including: the [World Health Organization Regional Office for Europe](#) (WHO EURO), the [United Nations Children's Fund](#) (UNICEF), the [European Centre for Disease Prevention and Control](#) (ECDC), and the [Association of Schools of Public Health in the European Region](#) (ASPHER). A new format of interactive sessions was also implemented for this meeting, following the recommendation of a working group to re-shape the sessions in a more interactive and brainstorming way.

The two-day event covered a variety of topics including: new issues for NPHIs in 2019 and beyond, vaccination challenges and perspectives in Europe, organizational structure of NPHIs for leadership and workforce development, tools for action in global health, non-communicable diseases and innovation, global preparedness, mergers, and collaboration with WHO EURO. The meeting also provided an opportunity to present to members on IANPHI tools and updates, and also resulted in the election of IANPHI Europe's first regional network chair and vice-chair.

The European meeting was followed by a technical workshop jointly organized by IANPHI and WHO Europe on mergers, which worked on a guide for successful mergers.

- IANPHI Asia and IANPHI Latin America and the Caribbean

In 2018, the IANPHI Secretariat supported the establishment, guidelines, and structure for two new networks: IANPHI Asia and IANPHI Latin America and the Caribbean (LatAm). Throughout 2019, both networks, under the leadership of their elected chairs and vice chairs, and supported by the IANPHI Secretariat's focal points, held meetings to develop their activities including: organisation of a regional event, prioritisation of areas for collaboration and discussion, creating additional space and opportunities for delegates unable to attend face-to-face meetings to benefit from regional network partnerships, initiatives, and information sharing.

The IANPHI LatAm Network has tentatively scheduled a regional meeting, for February/March 2020, to encourage face-to-face engagement and collaboration with members that cannot attend the 2019 IANPHI Annual Meeting. They are also coordinating web/teleconference initiatives to engage their LatAm Network members to participate remotely during the 2019 IANPHI LatAm Regional Network Meeting.

The IANPHI Asia network organized a four day regional meeting, hosted by the [Chinese Centers for Disease Control](#), on October 28-31, 2019. All directors or their representative from the Asia network were invited and engaged on a variety of topics, with special attention to prevention and control of infectious diseases, and regional cooperation.

- IANPHI Africa

The 2018 IANPHI Africa Regional Meeting and leadership workshop were held in conjunction with the 2018 IANPHI Annual Meeting in London, England. Supported by funding from the U.S. CDC, the leadership workshop was attended by African NPHI directors or their representatives. Training topics covered included defining purpose and priorities, charting success, creating new efficiencies and quality improvement through small, manageable changes, and solutions. The regional meeting provided an opportunity to discuss topics such as the new [Africa Centres for Disease Control and Prevention](#) (Africa CDC) legislative framework, the NPHI development framework, and the scorecard. The Africa CDC Regional Collaborating Centers provided an update on activities. Updates on the public health emergency preparedness workshop and the SDT training were also shared. Additionally, NPHIs discussed their role in [Joint External Evaluations](#) and national action planning.

Organization of Meetings

- 2019 IANPHI Annual Meeting hosted by the Ethiopian Public Health Institute

The [Ethiopian Public Health Institute](#) (EPHI) hosted the annual meeting in Addis Ababa on December 3-6, 2019. Being the main event of the association, the IANPHI Annual Meeting requires an important contribution in human resources from the host (Ebba Abate and his team), the U.S. office

and the secretariat. Both offices contributed to the development of the annual meeting programme, under the supervision of the EB. The annual meeting is made possible thanks to resources provided by the IANPHI Foundation, the U.S. office (through CHAMPS and the [U.S. CDC](#) cooperative agreement) and Ethiopian Public Health Institute as the host for 2019.

Additionally, [Fiocruz](#) (Brazil) has confirmed their offer to host the IANPHI Annual Meeting in 2020, as voted by the General Assembly in London in 2018. The Secretariat had its first call in July 2019 with Felix Rosenberg to launch the process.

Representation at International Meetings

This year has also seen enhanced commitment and representation from IANPHI at strategic national, regional, and international meetings, these include:

- Africa CDC-The International Conference on (Re-)Emerging Infectious Diseases March 18-20, 2019 Addis Ababa, Ethiopia (Katy Seib, IANPHI U.S. Office)
- WHO Africa Health Forum, March 26-28, 2019, Praia, Cabo Verde (Ellen Whitney, IANPHI U.S. Office)
- Coalition of Partners Advisory Group, April 30, 2019, Copenhagen, Denmark (Anne-Catherine Viso, IANPHI Secretariat)
- Global Biosecurity Dialogue, May 7-9, 2019, Addis Ababa, Ethiopia (Jean-Claude Desenclos, IANPHI Secretariat; Ebba Abate, IANPHI Executive Board member, director of EPHI)
- Global Conference on Health Security, June 18-20, 2019, Sydney, Australia (Mika Salminen, THL Finland)
- Public Health England (PHE) Conference, September 10, 2019, London, England (Jean-Claude Desenclos, IANPHI Secretariat)
- Establishment and Strengthening of National Public Health Institutes in Southern Africa Regional Collaborating Center, September 11-13, 2019, Livingstone, Zambia (Ilesh Jani, director, Mozambique INS and former IANPHI Executive Board member; Natalie Mayet, IANPHI African Regional Network chair; Ellen Whitney, IANPHI U.S. Office)
- Workshop on “Strategies and Structures for International Cooperation at National Public Health Institutes”, Robert Koch Institute, October 26, 2019, Berlin, Germany (Jean-Claude Desenclos, IANPHI Secretariat)
- World Health Summit, October 28, 2019, Berlin, Germany (Meerjady Sabrina Flora, EB Member/IEDCR)
- TDDAP Regional Workshop on Health Systems Strengthening with SimEx, November 19 - 21, 2019, Harare, Zimbabwe (Natalie Mayet, IANPHI African Regional Network chair)

4. Working with Partners

World Health Organization

The [World Health Organization](#) (WHO) and IANPHI have a longstanding experience of informal collaboration on strategic and technical levels, dating back to IANPHI's establishment in 2006.

In this context, executive representatives of WHO and IANPHI have expressed great potential for a strategic partnership that will bring about mutual benefits for NPHIs and WHO.

On February 28, 2019 WHO invited IANPHI to attend a high-level brainstorming meeting on how to establish a WHO/IANPHI strategic partnership. Prior to this meeting, preparation was led by the secretariat, with the support of EB and US office, to develop the meeting agenda, PowerPoint presentations and memos which highlight: 1) case studies of NPHIs providing support to other NPHIs, 2) case studies of NPHIs benefiting from support from other NPHIs, and 3) mapping NPHIs with WHO collaborative centres (26 member NPHIs = 82 collaborative centers total) – showing the strength and benefit of the IANPHI network as a potential partner with the WHO.

The meeting, moderated by Professor David Heymann, was attended by current and past IANPHI presidents, Prof. Dr. André van der Zande and Dr. Jeffrey P. Koplan respectively; IANPHI Secretariat and U.S. Office staff; the Africa Regional Network chair; IANPHI Executive Board members; and a group of IANPHI members. WHO was represented by the directors from a range of departments, notably directors for universal health coverage and health systems; country health emergency preparedness and International Health Regulations; public health, environment and social determinants; and partnerships and non-state actors.

The meeting enabled both IANPHI and WHO to better understand their respective working methods and how they could both further benefit from a formal partnership and collaboration. The principal outcome of this meeting was to confirm a mutual ambition to explore a strategic partnership. The first action undertaken has been to prepare a joint action plan between WHO and IANPHI. This action plan will introduce IANPHI, the framework within which collaboration can be focused and a work plan for joint activities.

Once endorsed, this work plan can structure the IANPHI/WHO collaboration in three areas: 1) producing actionable knowledge for NPHIs, 2) sharing experts and expertise and; 3) developing NPHI capacity through technical cooperation. Discussing the draft joint action plan and programme for capacity building for NPHIs with IANPHI members is expected to occur at the 2019 GA, with subsequent discussions and approvals to occur with WHO and its Executive Board. Further to the meeting, it was agreed to develop a joint IANPHI-WHO action plan.

WHO Regional Office for Europe

Since 2017, IANPHI has been an active member of [WHO Regional Office for Europe's](#) (WHO EURO) Coalition of Partners to strengthen essential public health services and capacities across the European Region. Particularly within this framework, IANPHI collaboration with the WHO EURO Division of Health Systems and Public Health has flourished. For example, IANPHI and WHO EURO have organised joint workshops every year – immediately after the IANPHI Europe Regional Network Meetings in Ukraine (2017), Poland (2018), and most recently in Chisinau, Moldova in April 2019.

In the Republic of Moldova, the latest joint workshop was focused on “Establishing national public health institutes through mergers – where are we now?” IANPHI members reflected on their institutional reforms and shared best practices, with English and Russian interpretation – provided throughout the event. A key WHO deliverable from this meeting is a practical step-by-step guide on developing NPHIs through mergers, which is currently in development.

In addition, 2019 saw IANPHI and U.S. CDC continue to successfully introduce NPHIs to the [Staged Development Tool](#) (SDT). In collaboration with WHO EURO and the WHO Country Office in Ukraine, the [Ukrainian Public Health Centre](#), IANPHI and U.S. CDC held a three-day workshop in February to facilitate the SDT. The SDT offers facilitated discussion guides, to determine a NPHI’s level of maturity and identify internal capacities to develop, which enables an NPHI to create work plans in order to strengthen their public health functions.

Furthermore, a meeting with WHO EURO, the IANPHI Europe Network chair and vice chair and the IANPHI Secretariat was held on August 27, 2019 to discuss the value of partnerships and development of a WHO EURO Action Plan in alignment with the WHO IANPHI Action plan, namely: 1) supporting public health systems in the European region, 2) strengthening national public health services in selected countries in the European region, and 3) strengthening peer-to-peer relationships between NPHIs in the region. This process is continuing to advance through the leadership of the IANPHI Europe chairs, with the support of the secretariat, and further discussions are being sought to engage the WHO Venice office to incorporate the aspect of sustainable investment in health. These developments are to be brought to the IANPHI General Assembly and the Europe Regional Network Meeting.

Association of Schools of Public Health in the European Region

IANPHI’s partnership with the [Association of Schools of Public Health in the European Region](#) (ASPHER) has continued to develop in 2019. Recognizing that the public health workforce is important to ensuring that a NPHI is able to deliver the public health functions in its remit, IANPHI has supported ASPHER efforts on developing workforce capacity in the Europe region. In the context of WHO EURO’s Coalition of Partners initiative, IANPHI has contributed from its network an expert review of the core competencies for public health workforce development and a Road Map for Professionalisation.

ASPHER and IANPHI have partnered in presentations delivered at the 2019 IANPHI Europe Network Meeting on the topic of “organizational structure of NPHIs for leadership and workforce development”.

In the spirit of reinforcing this collaboration, IANPHI and ASPHER have been developing a Memorandum of Understanding that will aim to build workforce capacity at all levels, in order to strengthen public health systems – which has been approved by the IANPHI Executive Board, to be presented for approval to the IANPHI General Assembly in Addis Ababa, for signature by both organizations.

Africa Centres for Disease Control and Prevention

The IANPHI Executive Board welcomed the intention of the [Africa Centres for Disease Control and Prevention](#) (Africa CDC) to become an IANPHI partner on August 27th, 2019. A [letter of intent](#) for a public health partnership between IANPHI and Africa CDC was signed in Addis Ababa by both organizations.

5. Better Understanding the Priorities of IANPHI Members

One of the tasks of the Secretariat is to strengthen and enhance the collaboration between the offices and the members or partners, and facilitate collaboration between members. This year, besides the work related to consolidate Asia and LatAm networks, some other actions were implemented such as:

- Use the Q&A to inform the membership and the partners of priorities of directors
 - Q&A with André van der Zande, IANPHI president on “IANPHI’s next steps in 2019”
 - Q&A with Meerjady Flora, IANPHI vice president on “Advocating the value of public health”
 - Q&A with European chair and vice-chair around their election to their posts and future strategies and direction for the network
 - Q&A with Juan Ángel Rivera Dommarco, IANPHI EB member, on “experience in data-to-policy work and Mexico’s soda tax”
 - Q&A with Public Health Agency of Canada (PHAC) around new strategic cycle, vaccine hesitancy statement and IANPHI network’s support in PHAC activities
- Use opportunities to learn about the situation of public health in countries during visit of delegation to Santé publique France and to present IANPHI activities such as:
 - Peer-to-peer visit with the delegation of Ukraine Public Health Centre in December 2018
 - Peer-to-peer visit with the delegation of the newly established NPHI in Burkina Faso in July 2019
- Understanding better the situation of NPHIs, and what could be improved to facilitate their engagement in IANPHI:
 - Through calls with directors or international affairs directors: conference calls with INSP Mexico, Kingdom of Saudi Arabia (National Centre for Disease Control), CARPHA, INSP Algeria, INSP Tunisia, PHAC, etc.
 - IANPHI 2019 Membership Survey: the IANPHI Secretariat prepared and launched a membership survey in June 2019, with analysis to be undertaken in early 2020. This survey was conducted to better understand our membership, including: an overview of the IANPHI network, its areas of expertise, its activities, areas for technical support which might be needed among IANPHI members, and how essential public health functions are being executed throughout our NPHI network; enabling IANPHI to better champion the relevance of its work to several key organizations and advocate on the global stage for NPHIs. 44 NPHIs answered the survey, with 39 providing complete answers. A key output from this survey will include an up-to-date directory for members and a report which will be published and distributed in 2020.

IV. PROGRAM ACTIVITIES

1. IANPHI NPHI Building and Strengthening Projects by Country by U.S. Office

With funding support and guidance from the U.S. CDC via a cooperative agreement and a grant from the Bill & Melinda Gates Foundation the U.S. office supports efforts in more than a dozen countries throughout Africa and Southeast Asia and alongside Africa CDC to build and strengthen NPHIs, typically in the areas of public health surveillance and emergency response, workforce development, laboratory, data use and research capacities, and legal frameworks for NPHI entities. Below are brief synopsis for each country where IANPHI is currently active.

Africa CDC

IANPHI and U.S. CDC supported [Africa CDC](#) in several areas: the Africa CDC NPHI Development Framework, the Africa CDC NPHI Legal Basis Framework, and the Africa CDC annual report and newsletter. The Africa CDC NPHI Development Framework draws heavily on the existing Framework for NPHI Development created by IANPHI in 2007, but contextualizes the guidance for the African continent. The Africa CDC Legal Basis Framework expands existing work and also contextualizes the framework for countries in Africa. The U.S. office also supported the development of the Africa CDC Institute Workforce Development courses for NPHI directors.

Bangladesh

IANPHI worked with the [Institute of Epidemiology Disease Control and Research](#) (IEDCR) to identify a vision for how IEDCR may use CHAMPS data and a work plan to build specific data-to-action capacities related to child mortality prevention. IEDCR has established a call center to provide the community with general medical advice and referral support to foster community engagement and support for MITS. Laboratory scientists have been trained in the use of CHAMPS TaqMan Array Cards for real-time detection of >100 pathogens. IEDCR has also conducted training on data driven policy development including advocacy roundtables focusing on child mortality prevention.

Burkina Faso

Burkina Faso is in the process of establishing an [NPHI](#). IANPHI and U.S. CDC continued to work with a consultant who facilitated Strategic Planning workshops engaging a wide range of stakeholders including Burkina Faso's new Secretary General for the Ministry of Health. The workshops produced a final drafted strategic plan currently awaiting external validation. A delegation of seven Burkina Faso NPHI leaders participated in a [peer-to-peer visit](#) to Santé Publique France and Sciensano, Belgium. The eleven-member NPHI board of directors held their first meeting in September, 2019. The legislative framework for the NPHI is in place.

Cambodia

Cambodia has taken significant steps to improve their health research by setting up a mechanism to promote and monitor the implementation of the national health system research agenda, establishing themselves as the Ministry of Health's first reference contact for research needs. IANPHI facilitated an NIPH strengthening program to identify key partners and build the capacity and quality of academic programs at the NIPH School of Public Health (SPH). This included a formal SPH capability assessment for offering blended online learning options which produced positive feedback to implement progressively. For ten days, IANPHI provided technical assistance Cambodia's [NIPH](#) to build a strategic plan for research development, publication and dissemination. The workshop identified key areas for improvement such as turning research into publications, creating a research training program for junior level staff, and facilitating more collaborations with research global experts and other NPHIs.

Cameroon

The [Department of the Fight against Disease, Epidemics and Pandemics \(DLMEP\)](#) of Cameroon's Ministry of Health has strengthened their emergency response systems. They have also been able to implement weekly data coordination and analysis meetings, and staff trainings. IANPHI and U.S. CDC are supporting stakeholder engagement meetings, strategic plan development and operational plan development over the next year. Progress has slowed in Cameroon due to a change in high level government, but recent efforts to reinvigorate NPHI development have been very positive.

Colombia

With support from IANPHI and U.S. CDC, the [Instituto Nacional de Salud \(INS\)](#) Colombia has been able to strengthen their National Observatory, enhance surveillance, and improve emergency outbreak response. INS continues to improve laboratory capacity by evolving their laboratory information system, ensuring improved water quality for laboratory work, and promoting safe handling of organisms. The INS surveillance system was further strengthened by enhancing data collection and data dissemination. The communications team worked with INS to showcase the impact of INS and their mission.

Ethiopia

IANPHI is supporting data-to-action work at the [Ethiopia Public Health Institute \(EPHI\)](#) as they support the CHAMPS site in Harare, including strengthening linkages between EPHI and the CHAMPS site where good progress has already been made. With the support of IANPHI, progress has been made on other data-to-action goals that includes but not limited to, developing systems and infrastructure to manage and use CHAMPS data including co-support of the National Data Management Center, supporting CHAMPS through participation in key strategic meetings, and finally engaging the Ministry of Health to link with the CHAMPS data stream and encourage data use at national and subnational levels. Plans for the near future include a peer to peer engagement with Mozambique around the formation of their National Health Observatory.

Kenya

IANPHI provides support for CHAMPS data to action activities in Kenya. Kisumu-Siaya County level mortality review workshops are held to better understand under-5 causes of death and their policy implications. Actionable tasks were identified and steps are being taken to implement educational campaigns around nutrition, appropriate antibiotic use, and hospital infection control as these are issues identified during the workshop. IANPHI is also supporting the dissemination of CHAMPS information to stakeholders in Kisumu and Siaya County, with the aim that providing them with a better understanding of the causes of the under-5 mortality can inform their various activities targeted at reducing mortality of the under-5. IANPHI is also supporting capacity building at the [Kenya Medical Research Institute](#) (KEMRI) and the county level to help communicate about the CHAMPS' impact and to capture success stories. IANPHI and CHAMPS have supported stakeholder mapping in the CHAMPS supported areas to best identify resources and partners to engage as the CHAMPS data are available. IANPHI anticipates supporting NPHI development in Kenya in the coming months.

Liberia

U.S. CDC and IANPHI conducted a communications and website training for the [National Public Health Institute of Liberia](#) (NPHIL) information, communications and technology team. The workshop covered the basics of web design, managing the NPHIL website, communications project management and implementation and best practices for using WordPress. An actionable timeline was developed for website revisions. The progress is clear on their [website](#).

Mali

CHAMPS has provided extensive training on a variety of topics including laboratory training on specific molecular techniques (such as TAC testing), clinical training on the MITS procedure, verbal autopsy and grief counseling, qualitative research methods in Excel and Access, HDSS household survey methods and data collection, STATA, GIS, and longitudinal analysis. With technical assistance, Mali's [Center for Vaccine Development](#) (CVD) has been able to develop and execute protocols, with efforts often led by junior staff, and collaborate with other international scientists in the effort to further the local research capacity. CVD has also been able to offer nurses and lay people (such as research assistants) exposure to clinical research via active participation in clinical trials and support staff to undergo formal training in good clinical practice related to the conduct of clinical studies. In addition to supporting the local workforce, they are providing a platform for science graduates and junior doctors to become familiar with the dynamics of basic, applied and clinical research respectively. In November, Mali received technical assistance from IANPHI and U.S. CDC to establish the new NPHI's organizational chart and staffing needs as well as strategies for stakeholder engagement.

Mozambique

IANPHI and U.S. CDC continue to work with Mozambique to strengthen its growing national capacity for surveillance and early detection of vector borne and zoonotic diseases, collection of

high quality data related to oral health and suicide, and building One Health capacity within the country. Ongoing work continues to enhance systems, human resources, and capacities at the [Instituto Nacional de Saude](#) (INS) that will help them improve and modernize surveillance mechanisms for detection of vector borne diseases, conduct data-to-action training at the provincial level, improve grant management capacities, build One Health strategy and surveillance capacities. This is done by facilitating collaborations and mentorship among members such as Brazil's Oswaldo Cruz Institute and Kenya's One Health experts in Mozambique. Efforts are also underway to establish a protocol for sharing CHAMPS Cause of Death findings with the INS health observatory. We are also working to establish INS as a reference training center for post-mortem studies and enhance the laboratory capacities at the Manhiça Health Research Center. Continued support through CHAMPS will focus around the integration of INS technicians into CHAMPS activities, building capacity at INS and ONS on the review, triangulation, analysis and use of CHAMPS and COMSA data and communications about CHAMPS findings to stakeholders.

Myanmar

Myanmar CDC continues to develop its foundation from the existing Central Epidemiology Unit (CEU) in the Ministry of Health and Sports. The MCDC organizational structure is awaiting approval from Ministry of Health officials prior to starting the recruitment process. An implementation agreement was signed with China for the construction of a new building to house Myanmar CDC. IANPHI hosted a [Humphrey Fellow](#) from the Rollins School of Public Health at Emory University from Myanmar who, as part of his studies, will continue to work on a strategic plan for Myanmar CDC. The IANPHI Insider [recently highlighted](#) his accomplishments.

Nigeria

IANPHI and U.S. CDC are supporting laboratory capacity in Nigeria by improving collection, transportation, and field-testing of samples. Technical support has been provided to strengthen outbreak management and emergency response through staff capacity development, creation of Rapid Response Teams and enhancing risk communication capacity. Further support is anticipated in the area of management training. To further strengthen the workforce of the [Nigerian CDC](#), the Improving the Public Health Management for Action (IMPACT) fellowship program was implemented to enhance the capacity of the graduates in planning, implementing and evaluating Public Health Programs. In addition, IANPHI and U.S. CDC provided media, risk, scientific communication and writing support to further strengthen the workforce capacity. These accomplishments can be found in the [IANPHI Insider](#).

Pakistan

In 2017, the Ministry of National Health Services, Regulations and Coordination (MoNHSRC) has identified the [Pakistan National Institute of Health](#) (NIH) to serve as the NPHI for Pakistan. Representatives and stakeholders from Pakistan, the U.S. CDC, IANPHI, and Public Health England met in the Netherlands in November 2017 for discussions about developing the Pakistan National

Public Health Institute (NPHI). The result was a statement of vision and mission, articulation of the most important roles for the NPHI and a workplan. The Minister of MoNHSRC at the time of the Amsterdam meeting was replaced in April, 2019. The new Minister remains committed to the concept of an NPHI, but he has limited experience with or knowledge of NPHIs. For several months, Brigadier Dr. Aamer Ikram, the executive director of the NIH, has expressed interest in IANPHI assistance in following up on the Amsterdam planning. The purpose of a site visit would be to review progress on the workplan developed in 2017, update it, and identify ways to help NIH transition into a strong NPHI. To achieve these purposes, potential activities include planning meetings with staff, a meeting with the minister, a stakeholder meeting, and review of the Joint External Evaluation results and how integration of activities from various organizations might address global health security deficits.

Rwanda

The [Rwanda Biomedical Center](#) is actively supporting Ebola preparedness in response to the DRC Ebola outbreak. The U.S. office and U.S. CDC are supporting preparedness efforts around strengthening surveillance and laboratory diagnosis for emerging zoonotic diseases (EZO), with activities being informed by gaps identified in Rwanda's Joint External Evaluation.

Sierra Leone

Sierra Leone's National Public Health Agency (NPHA) development is moving forward with support from U.S. CDC, Public Health England (PHE), and other partners. IANPHI provided technical assistance to the MoHS in Sierra Leone to support the establishment of the NPHA through support for development, execution and monitoring of work plans and budgets, and efforts to establish efficient systems and functions within the planned NPHA. The final Public Health Bill, establishing the NPHA, is awaiting official sign off by the Minister of Health and Sanitation. The Ministry of Health and Sanitation produced a Human Resource for Health policy and strategy in 2017, covering clinical staff. Resources were secured from REDISSE in 2018 to provide an addendum, covering public health specialities. Work is ongoing to produce a public health Scheme of Service (SoS) to provide consistent role descriptions and grading hierarchies across public health specialities. This work has been driven by AFENET and eHealth Africa (eHA), with support from IANPHI. PHE conducted a workforce assessment to quantify required staffing needs, including necessary trainings drawing on the SoS. A surveillance assessment originally initiated in 2017 was updated in 2019. It makes recommendations for consolidation of surveillance functions, clarifies roles and responsibilities, supports prioritization of laboratory and animal health data in HMIS, and identifies appropriate staffing levels for NPHA's surveillance function among other recommendations. Sierra Leone's National Action Plan for Health Security was published which encourages utilization of a tool developed by ICAP and IANPHI to track activities per the Joint External Evaluation thematic areas.

South Africa

Chris Hani Baragwanath Academic Hospital (CHBAH) in Soweto, South Africa is home to the South Africa CHAMPS site. It is the largest public hospital in South Africa with 20,575 deliveries and

4,185 admissions to the neonatal care units in 2017. CHAMPS South Africa highlighted that 70-80% of neonatal deaths at CHBAH are related to hospital acquired infections. IANPHI and U.S. CDC assisted CHBAH to develop a grant proposal for the [Bill & Melinda Gates Foundation](#) (BMGF) to address multiple infection control issues identified during the January 2018 CDC assessment. Improving medication safety is a particular focus of this project with the aim to improve neonatal survival and reduce hospital acquired bloodstream infections. BMGF funded the project “INSPIRE” and it launched in March 2019. Significant progress has been made in pharmacology – medication ordering and preparation, antimicrobial stewardship and cost savings. Efforts are ongoing to strengthen infection prevention and control in the neonatal care unit.

Zambia

The [Zambia National Public Health Institute](#) (ZNPHI) continues to grow and improve while demonstrating value to the Zambia government and population. The ZNPHI Director led the legal framework process to its final stages, currently awaiting approval via the Ministry of Justice hearing. ZNPHI also worked to strengthen routine and laboratory-based surveillance by directly mentoring six laboratories and leading a large AMR awareness media campaign. The team also conducted two major studies around the 2018 Cholera outbreak on vaccine effectiveness and coverage in addition to assisting three outbreak investigations of Tungiasis, Typhoid and Polio. The ZNPHI Epidemiologist has made strides in establishing cross-border disease surveillance committees with neighboring countries for information-sharing. The communications team successfully launched the [ZNPHI website](#), and increased use of ECHO for information sharing across internet-accessible facilities. In tandem with other partners, workforce development, strengthening information systems, and identifying gaps in public health knowledge and policy will be supported.

2. IANPHI Supported Tools and Best Practices

Southern Africa Regional NPHI Strengthening Meeting

IANPHI’s U.S. office and U.S. CDC collaborated with the Africa CDC Southern African Regional Collaborating Center (RCC) and the Zambia National Public Health Institute to host a summit focused on the acceleration of the establishment and strengthening of NPHIs in the region. Representatives from Zambia, Lesotho, Malawi, Mozambique, Namibia, South Africa, Zambia and Zimbabwe participated in the two day meeting. In addition to establishing a common understanding of NPHIs and their core functions, much of the meeting was dedicated to peer-to-peer networking and exchange of ideas. Attendees shared their challenges, lessons learned, recommendations and strategies for the establishment and strengthening of NPHIs in the region.

The following consensus points were reached during the meeting:

- NPHI development status: Regardless of an NPHI’s stage of development, NPHI strengthening is ongoing and requires concerted efforts and support.

- Political will: There is global political will to establish NPHIs in every African country. Within the region, countries and heads of state need to be encouraged to establish an NPHI to focus on strengthening health security and implementation of the [International Health Regulations](#) (IHR).
- Needs for NPHI development: Human and financial resources, political will, and partnerships are critical to the foundation of an NPHI. Once established, an NPHI requires infrastructure to support its functions. Many tools are available to support these efforts (i.e. NPHI Staged Development Tool, Africa CDC Framework for Development of National Public Health Institutes, IANPHI Best Practices), but more may be needed. Workforce development and sharing of best practices through exchange visits and peer-to-peer mentorship are seen as critical to this work.
- Critical attributes or early actions of NPHIs:
 - NPHIs should promote science-driven public health in alignment with national priorities and plans, while supporting global priorities, as well.
 - NPHI visibility and credibility can be promoted through the identification of quick wins and provision of quality services.

Staged Development Tool (SDT)

In addition, 2019 saw IANPHI and U.S. CDC continued to successfully introduce NPHIs to the Staged Development Tool (SDT). In collaboration with WHO EURO and the WHO Country Office in Ukraine, the Ukrainian Public Health Centre, IANPHI and U.S. CDC held a three-day workshop in February to facilitate the SDT. The SDT offers facilitated discussion guides, to determine a NPHI's level of maturity and identify internal capacities to develop, which enables an NPHI to create work plans in order to strengthen their public health functions.

The SDT was also implemented in Public Health England and Public Health Wales. INS Colombia took the initiative to internally reassess their nine priority Staged Development Tool (SDT) indicators, building on evaluation results from 2017. Prior to reassessment, INS Colombia set specific advancement goals for each of their nine priority domains to progress one or two stages in each category, with ambitious two-stage progress expected in planning, laboratory, surveillance for acute public health problems, emergency preparedness and response, and public health research. INS Colombia then conducted the SDT and charted observed growth, noting equal or even greater progress than expected in six of nine domains (management of organizational information, external communication about the NPHI and its activities, laboratory, surveillance for acute public health problems, emergency preparedness and response, and strategic data collection and analysis). Despite unmet goals in the remaining categories, progress was still observed. The most developed domain is strategic data collection and analysis, achieving a "Low Leading Edge" rating and in emergency response and preparedness, INS jumped three stages to achieve "High Advanced."

The SDT can be found at the following websites:

- www.ianphi.org/tools-resources/sdt.html
- www.cdc.gov/globalhealth/healthprotection/nphi/sdt/index.html

3. IANPHI Communication and Publications

Communications Staff

IANPHI's U.S. office added a director of communications (Andisheh Nouraei) in 2019 and is actively recruiting a communications specialist to replace a departing communications staff member (Catherine Witherspoon). The new communications specialist role will be dedicated to IANPHI.

Publications

In January 2019, the communications team published the first issue of a revamped newsletter. IANPHI Insider is published in a digital magazine format, available for online reading and printing, and features stories highlighting the work of members and partners. IANPHI communications staff works with members and partners to source and edit the articles. IANPHI created and published four editions of IANPHI Insider in 2019, emailing each issue to approximately 2,000 people.

Website and Digital Strategy

IANPHI's U.S. office is working with Emory University's web and information technology team to redesign and improve the IANPHI web site. The new site will feature a simplified menu for easier navigation, and create a space for frequent and prominent public health news and comment updates, including mobile-friendly versions of IANPHI Insider content. The site redesign is part of an overall communications strategy to integrate IANPHI's digital platforms (web, social and email) to more effectively foster connections between national public health institutes. The U.S. office team will begin migrating content from the old site to the new site in December and anticipate the new IANPHI site will go live in early 2020.

Training and Capacity Building

IANPHI's U.S. office led two communications training sessions for members in 2019. In April we facilitated a web site development workshop for team at the National Public Health Institute of Liberia, and in August we facilitated a media relations training session for Nigeria Centre for Disease Control (NCDC). The objective was for everyone in attendance to improve their ability and increase their comfort level with media relations, and for NCDC staff to complete the workshop with the collective ability to continue building its capacity. Topics covered during the training included understanding the overall benefits of strong media relations for NCDC, the risks of weak media relations, mapping key media outlets and understanding the perspectives and motives of journalists.

Key Communications Metrics (November 1, 2018 – October 31, 2019)

- Web: 56,118 users viewed IANPHI web pages 148,740 times
- Facebook: IANPHI Facebook Posts reached 6,766 people
- Twitter: IANPHI Twitter Posts were viewed 90,200 times (impressions)
- Email: IANPHI newsletter emails were opened 2,630 times
- Site Metrics: 56,118 users, 73,151 sessions and 148,740 pageviews

V. ANNEX

1. Contributors to the IANPHI Offices Involved in IANPHI Activities in 2019

Secretary General

Jean-Claude Desenclos, Deputy to the Director General, Santé publique France, France

IANPHI Secretariat

Anne Catherine Viso, Director, Science and International Department Santé publique France

Juliette Fugier, IANPHI Program Manager, Santé publique France

Amanda Nieto, Intern, Santé publique France (July – November 2018), SNAP-GHS Coordinator (November 2018 – April 2019)

Laila Harras-Pelletier, Apprentice, Santé Publique France (September 2018 – September 2019)

N. Charles Hamilton, Intern, Santé Publique France (February 2019 – May 2019)

Louise Rigal, Apprentice, Santé Publique France (August 2019 – August 2020)

Edris Nikjooy, Project Manager, Santé Publique France (September 2019 – July 2020)

Administrative support provided by:

Gregoire Deleforterie, Head of Unit, Finance and Partnerships, Santé publique France

Eric Roux, Finance and Partnerships, Santé publique France

IANPHI U.S. Office

Jeff Koplan, Vice President for Global Health at Emory University and Senior Advisor to IANPHI

Ellen Whitney, Director US Office

Katy Seib, Director of Programs

Andisheh Nouraei, Director of Communications

Stacey Paschal, Senior Administrative Assistant

Stormm Van Rooi, Program Coordinator*

Cat Witherspoon, Communications Specialist*

Public Health Consultants:

Sue Binder, Senior Advisor for Public Health

Philip Daniels, Consultant in Public Health in Sierra Leone*

Ei Ei Khin, Consultant in Public Health in Myanmar *

Claude Millogo, Consultant in Public Health in Burkina Faso

Glen Nowak, Interim Director of Communications*

*No longer with IANPHI US Office

Public Health Students 2018-2019:

Amandine Ballart, Practicum Executive MPHc
Jessica Blackburn, Practicum Executive MPHc
Elisha Bronner, Global Health MPH
Jacob Clemente, Global Health MPH
Michael Flores, Health Policy and Management MPH
Nyan Win Myint, Humphrey Fellow, Global Health Fellow

Public Health Students 2019-2020:

Becky Byram
David Denton
Maggie Gutierrez

Master's in Development Practice (MDP) program 2018-2020:

Abimbola Leslie

2. IANPHI Foundation Board of Trustees - 2019

Pekka Puska, Chair
Andre van der Zande, Vice Chair
Duncan Selbie
Lothar Wieler
Meerjady Sabrina Flora
Katja Heikkilainen, Business Representative

3. IANPHI Executive Board Members - 2019

André van der Zande, IANPHI President, Former Director-General, [National Institute for Public Health and the Environment \(RIVM\)](#), Netherlands
Meerjady Sabrina Flora, IANPHI Vice President, Director, Institute of Epidemiology Disease Control and Research (IEDCR), Bangladesh
Mauricio Hernández Ávila, Immediate Past President, Former Director, [Instituto Nacional de Salud Pública \(INSP\)](#), Mexico
Martha Lucia Ospina, Director, Instituto Nacional de Salud (INS), Colombia
Duncan Selbie, Chief Executive, Public Health England (PHE), England
Mohamed Rhajaoui, Director, [Institut National d'Hygiène](#), Morocco
Juan Ángel Rivera Dommarco, Director General, Instituto Nacional de Salud Pública, Mexico
Camila Stoltenberg, Director General, Norwegian Institute of Public Health (NIPH), Norway
George Fu Gao, Director General, Chinese Centers for Disease Control, China
Lothar H. Wieler, President, [Robert Koch Institute](#), Germany
Ebba Abate, Director General, Ethiopian Public Health Institute, Ethiopia
Tsogtbaatar Byambaa, Director General, National Center for Public Health (NCPH), Mongolia