

Greater Mekong Subregion (GMS): Ninth Meeting of the Working Group on Human Resource Development (WGHRD-9),
Guilin, Guangxi Zhuang Autonomous Region, People's Republic of China
20–21 May 2009

'Implementing New Strategic Directions in HRD Cooperation in the GMS'

BREAK-OUT GROUPS – REPORT FORMAT

Group: Health – Communicable Disease Control

(1) Need/Issue/Problem	(2) PROJECTS/ACTIVITIES RECOMMENDED		(3) KEY PLAYERS/ROLES (lead GMS country, participating GMS countries, public and private sector players, development partners)	(4) ESTIMATED COSTS \$
	Short-Term (less than two-years)	Medium-Long Term (two or more years)		
(1) Need to review implementation success and achievements, disseminate lessons learnt, and to plan together for CDC2 with China, Thailand and Myanmar.	A 2 day workshop is proposed in late October to be funded as regional activity and/or part of the PPTA of CDC2 to plan together for CDC2 with China, Thailand and Myanmar.		Thailand, China and Myanmar to prepare proposals for inclusion in CDC2 design, based on documentation of CDC1 circulated beforehand, current bi-lateral commitments and other coordination mechanisms. RCU to Invite ACMEX and MBDS to participate along with GMS Countries	\$15,000

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(2a) Inadequate surveillance, preparedness, response and control of communicable diseases of regional importance at central and provincial levels in the GMS border areas and in economic corridors		2010-2015	Pipeline CDC2 Project now in preparation with (at least) three sub- components. CLV and other GMS partners to be involved in review and monitoring mechanisms.	CAM \$10 mil. ADB (grant) LAO \$10 mil. ADB (grant) VIE \$15-20 mil ADB (loan)
(2b) High burden of common endemic communicable diseases in border areas with high morbidity and mortality amongst particularly vulnerable populations living of the GMS and along economic corridors		As above	Pipeline CDC2 Project in preparation with (at least) three sub-components. CLV and other GMS partners to be involved in review and monitoring mechanisms.	As above
(2c) Regional coordination, dialogue, communities of practice and technical CDC mechanisms need to be developed to include China, Thailand and Myanmar.		As above	Pipeline CDC2 Project in preparation with (at least) three sub-components. CLV and other GMS partners to be involved in review and monitoring mechanisms.	As above

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(3) Pilots of integrated vector management strategies need to be tested in GMS countries in selected		2009-2011	Currently effective, funding is executed through WHO. WHO and countries to be invited to report to CDC1/CDC2 Project workshop in October 2009 on progress in dengue models	\$2.0 million
(4) GMS Dengue Control Inadequate control of dengue fever in the GMS in economic corridors in face of a changing epidemiology and increasingly severe rates incidence and transmission.		2011-2012	Gates Foundation for vaccine development and for genetically modified mosquitoes. Thailand interested in trial.	\$15-\$20 million
(5) Animal health issues needs to be covered under CDC2 to the extent possible, and covered better by other specialized donors and agencies.				
(6) Capacity building needs to be strengthened for the FDA of each GMS country in food and drug safety. Drug		2011	ASEAN, USA Pharmacophia,	

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testing capacities need to be enhanced at provincial levels of the GMS.				
(7) Health Impact assessment and enhancement is needed with other GMS sectors	Dialogue and commissioned studies, and project design as required		GMS Working groups and GMWHRDW sub-groups	
(8) Need to collaborate with HRD WG on migration sub-group on health aspects				
(9) Animal health needs to be covered under CDC2 to the extent possible, and specially by other specialized donors and agencies				