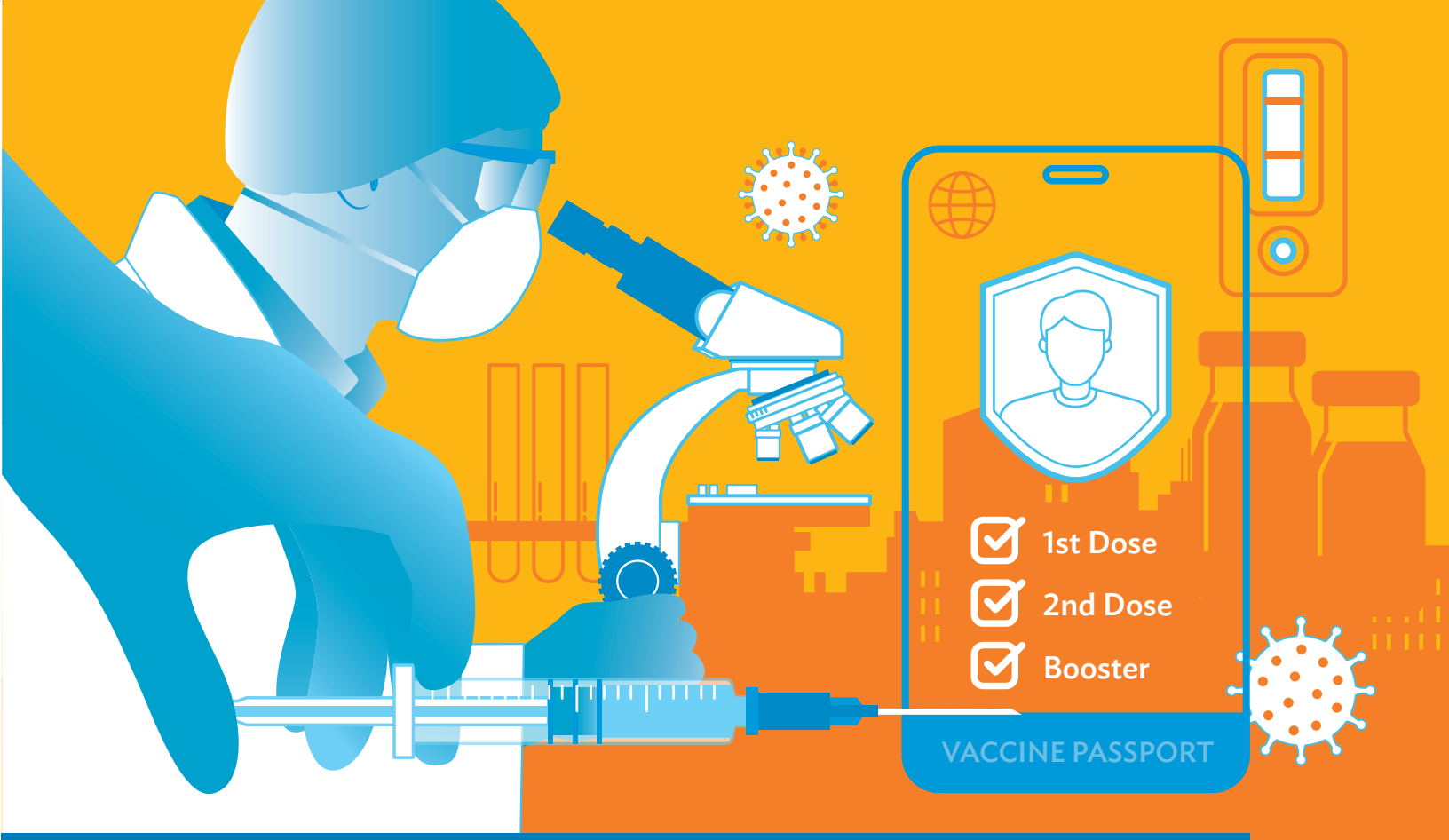

HEALTH SECURITY INTERVENTIONS FOR COVID-19 RESPONSE

GUIDANCE NOTE

Patrick L. Osewe

SEPTEMBER 2022

ASIAN DEVELOPMENT BANK

ADB

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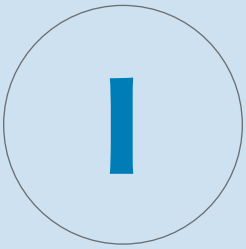

Introduction

The coronavirus disease (COVID-19) pandemic has destabalized health and economic security worldwide. It will take years to understand the full costs of COVID-19 on society, and subsequent waves of infection threaten to prolong the impacts of the initial outbreak. Within this context, the Asian Development Bank (ADB) has experienced unprecedented demand from its developing member countries (DMCs) for resources—including technical guidance—to support efforts to strengthen health security and health systems in order to mitigate the effects of the ongoing COVID-19 outbreak and prevent and improve responses to future outbreaks.

II

The Purpose of This Guidance Note

This guidance note includes a menu of evidence-based and expert-validated technical areas and interventions to assist countries in implementing priority health security and health systems strengthening measures. It is intended for use by ADB country officers and other development partners as a starting point to guide the development of comprehensive interventions to mitigate negative consequences of COVID-19. Taken together, these interventions contribute to national and international agendas to support COVID-19 response, recovery, and resilient health systems strengthening. While overall prioritization of these interventions has been conducted by international experts, it is essential that recommendations in this guidance note are interpreted in the relevant implementation context. Country partners should identify nation- or region-specific gaps and priorities, and adapt these interventions as necessary to meet local needs.

III

The Selection of Technical Areas and Interventions

The guidance was developed in consultation with a panel of leading experts and key stakeholders and is informed by global best practices in pandemic preparedness, response, and resilient systems strengthening. Delphi process was used to reach consensus on the technical areas and key activities that should be included and prioritized by ADB resources.[1]

The initial list of technical areas and interventions was compiled based on a desk review of international and Asia and Pacific-specific frameworks, recommendations from technical documents, and relevant systematic reviews. These included (i) World Health Organization (WHO) COVID-19 response documents,[2] (ii) the International Health Regulations (IHR)[3] framework, (iii) Joint External Evaluation (JEE) reports,[4] (iv) Asian Pacific Strategy for Emerging Diseases and Public Health Emergencies progress reports, (v) World Bank COVID-19 response project documents, (vi) a supplement of peer-reviewed journal articles published by US Centers for Disease Control and Prevention (CDC) detailing the evidence base for strengthening health security, and (vii) systematic reviews of components that make health systems more resilient against infectious disease outbreaks (Appendix 1).

Once a list of intervention components was developed, it was then presented to an audience of key stakeholders—including representatives from WHO, International Monetary Fund, the World Bank, the Department for International Development, and ADB leadership. After incorporating feedback from this

1 The Delphi process is a series of sequential questionnaires or "rounds," interspersed by controlled feedback, that seeks to gain the most reliable consensus of opinion from a group of experts.

2 Specifically, the "WHO Western Pacific Regional Action Plan for Response to Largescale Community Outbreaks of COVID-19" published on 2 April was reviewed and adapted for DMCs.

3 The IHR framework is an international legally binding agreement in 196 countries—entered into force on 15 June 2007—that require countries to report certain disease outbreaks and public health events to WHO.

4 The JEE reports—developed by WHO—are a voluntary, external assessments of a country's ability to prevent, detect, and respond to infectious diseases and other public health threats.

group, a panel of leading global health security experts (Appendix)—from (i) multilateral organizations (WHO, UNICEF, World Bank, and ADB); (ii) governments (People's Republic of China [PRC] CDC, US CDC, Australia's Commonwealth Scientific and Industrial Research Organisation [CSIRO], etc.); (iii) nongovernment organizations (Coalition for Epidemic Preparedness Innovations [CEPI], Gates Foundation, RESOLVE to Save Lives, Eco Health Alliance, and Ending Pandemics); and (iv) academia (Hong Kong University, University of Sydney, Griffith University, Georgetown University, and Johns Hopkins Center for Health Security)—were assembled to review the interventions and prioritize them by consensus using the Delphi technique.

These experts were then convened on 17 April 2020 through a virtual validation meeting to discuss the domains and specific interventions. Some of the key feedback and points of discussion from this meeting were as follows:

- **Risk communication** and **community engagement** are complementary strategies and are pillars of any successful epidemiologic intervention (e.g., contact tracing) or any non-pharmaceutical intervention (e.g., social distancing).

- Despite the COVID-19 crisis, ensuring that **routine, essential services** are maintained is a top priority to avoid additional outbreaks (e.g., vaccine-preventable diseases) and to ensure that people have continued access to chronic care management.

- The COVID-19 pandemic has demonstrated the **critical linkages between health, economics, and social inequality**. Therefore, pandemic preparedness and response requires contributions and responsibilities from all sectors. Health interventions cannot be designed in isolation.

Scope of the Interventions

Recommended interventions are presented under 11 technical areas (e.g., surveillance and case investigation, community engagement, diagnostic and laboratory capacity, etc.) and by activity area (e.g., supporting screening at ports of entry, developing and testing messages and materials, etc.). Specific interventions provide examples of actionable items that contribute to achieving the activities.

Suggested Interventions

The remainder of the report provides the activity areas and specific interventions for countries to consider as they develop project proposals for health security and health systems strengthening. Activity components are described in three categories: (i) **COVID-19-specific response**—immediate preparation and emergency response efforts to mitigate the impact of COVID-19 and stop the spread of disease, (ii) **COVID-19 recovery**—medium-term efforts to rebuild from the effects of COVID-19, and (iii) **broader preparedness and systems strengthening**—efforts that will strengthen health security and leave the region better prepared to prevent, detect, and respond to future health emergencies.

Table 1: Surveillance and Epidemiology

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Establishing national screening /referral guidelines and procedures	Conduct ongoing case-based surveillance and analysis for COVID-19.	✔	✔	
	Support countries to adapt and update national case definitions and surveillance strategies and systems to support the objectives of the COVID-19 response, based on updated WHO guidance.	✔		
	Confirm national guidelines for reporting public health emergencies of international concern to WHO.			✔
Supporting screening at ports of entry	Procure thermal scanners and PPEs and distribute to ports of entry.	✔		
	Train staff on COVID-19 symptom recognition and investigation/quarantine/referral protocols.	✔		
Strengthening systems for contact tracing	Train public health workers to conduct contact tracing, establishing procedures, and ensuring mechanisms exist to conduct contact tracing and investigate potential cases.	✔	✔	✔
Establishing enhanced surveillance systems (event, case-based, and/or environmental)	Support countries to build systems to detect unusual events that might signal an outbreak. Information can come from sources like reports in the media or rumors on an internet blog.			✔
	Create linkages with community engagement initiatives to ensure that information about a possible public health event is reported by people in the community through a hotline or other messaging system.	✔	✔	✔
Improving surveillance systems for zoonotic diseases	Establish national mechanisms for livestock farmers to track and report disease surveillance to a central government agency and conduct surveillance of zoonotic diseases (e.g., wild animals, insects, and other vectors).			✔

COVID-19 = coronavirus disease, PPE = personal protective equipment, WHO = World Health Organization.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 2: Community Engagement

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Mapping community networks and structures	Map, utilize, and build upon existing networks and structures to engage communities; especially marginalized, and hard-to-reach populations, in planning COVID-19 response. Networks can include disease control volunteers from existing programs (immunization, tuberculosis, malaria, HIV), nongovernment organizations, medical associations, unions, community or religious leaders, women's groups, and non-health organizations that work with vulnerable groups.	✔	✔	✔
	Engage with influential community leaders to mobilize community-owned preparedness and response.	✔	✔	✔
Enhancing local engagement	Support capacity building of community groups.		✔	✔
	Establish linkages between community members and public health-care delivery (such as clinics, hospitals, and social care).		✔	✔
	Build staff capacity and skills to interact with communities in ways that address fears/concerns, build trust, reduce anxiety, and communicate correct information.		✔	✔
	Address misinformation and stigma in communities.		✔	✔
	Education and awareness raising on both COVID-19 and public health interventions.	✔	✔	
Supporting and incorporating feedback loops to decision-making	Support countries to establish/strengthen mechanisms to gather information on community perceptions (such as through social media monitoring, surveys or feedback) and incidents of social stigmatization and discrimination. This information should be used to respond to public concerns, rumors, and misinformation; and to update risk communication messaging and materials.	✔	✔	✔
	Support countries and areas to define key principles for community engagement during the response that will form the foundation for trust during recovery and after the outbreak. Nationally and regionally available expertise should inform the development and implementation of context-specific engagement strategies with at-risk and affected communities and to facilitate community-based approaches to the COVID-19 response from the ground up. Engagement should be genuine and two-way, enabling communities to offer feedback and local solutions.	✔	✔	✔

COVID-19 = coronavirus disease.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 3: Risk Communication

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Developing and testing messages and materials to be used for the COVID-19 outbreak on risk and potential impact of the pandemic	Develop materials to promote social distancing measures, health promotion, social mobilization, stakeholder engagement, community engagement, and robust engagement with patient populations.	✔	✔	
	Target messages to combat the "infodemic" of misinformation and cybercrime.	✔	✔	
Enhancing infrastructure to disseminate information from the national to subnational levels, and between the public and private sectors	Support (i) development and distribution of basic communication materials (such as question and answer sheets and fact sheets) on COVID-19; (ii) general preventive measures such as "dos" and "don'ts" for the general public; (iii) information on measures such as social distancing and quarantine; (iv) active combating of misinformation; and (v) transparent, regular, and relevant situation reports.	✔	✔	
	Establish communication channels between health system actors and other sectors, including public–private partnerships.	✔	✔	✔
Developing and implementing information, guidelines, and training for health care providers	Target risk communications to health care providers and other at-risk populations (such as those who work in elderly care homes).	✔	✔	
	Prepare and update guidance on (i) information and guidelines for health care providers: (ii) training modules (web-based, printed, and video); (iii) (uniform and standardized) presentations, slide sets, videos, and documentaries; and (iv) symposia on surveillance, treatment, and prophylaxis.	✔	✔	

COVID-19 = coronavirus disease.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 4: Diagnostic and Laboratory Capacity

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Strengthening laboratory staff capacity	Refresher training on bio-safety and bio-security.	✔	✔	✔
	Train relevant staff to ensure that the existing system to handle samples at the national and subnational levels is understood and consistently applied.	✔	✔	✔
Expanding domestic diagnostic capacity	Train health workers on the proper administration of COVID-19 diagnostic testing.	✔	✔	
	Expand point-of-care and community diagnostic testing (including cloud-enabled software where possible).	✔	✔	✔
	Make improvements to existing laboratories or build new laboratories.	✔	✔	✔
	Improve laboratory quality assurance systems.			✔
Procuring and/or producing essential diagnostic equipment and supplies	Procure/produce test kits, RT-PCR techniques, reagents, specimen collectors, packing supplies, and other laboratory consumables.	✔		
	Support the manufacture of domestic essential diagnostic equipment and supplies.	✔	✔	✔
Establishing/ strengthening laboratory networks, surge plans, and information sharing at the subnational and regional levels	Support countries to identify national laboratories with the capacity to test for COVID-19 or, if domestic capacity does not exist, to establish arrangements with an international reference laboratory.	✔		✔
	Establish surge plans (including staffing, equipment, reagents, and other consumables) to manage increased demand for testing and to return results in a timely manner.	✔		✔
	Adapt and establish protocols for sharing specimens.			✔

COVID-19 = coronavirus disease, RT-PCR = reverse transcription polymerase chain reaction.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 5: Case Management and Infection Control

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Procuring personal protective equipment, oxygen delivery equipment, therapeutics, etc.	Ensure a stable, sufficient supply of necessary medical supplies and build a stockpile if in an inter-outbreak period.	✔		✔
	Strengthen supply chains through regional approaches (production and advance market commitments) and/or bulk purchasing methods.	✔	✔	✔
Adapting national treatment guidelines	Support countries to review and update national infection prevention and control (IPC) guidance for COVID-19 in line with existing policies and procedures, disseminate this guidance to hospitals and primary health care facilities, and train staff in implementation.	✔	✔	
	Establish dedicated IPC focal points and dedicated treatment units.	✔	✔	✔
	Support countries to translate, adapt, and disseminate COVID-19-specific IPC guidance for home and community care providers and other relevant facilities (such as elderly homes, long- term care facilities, and points of entry).	✔	✔	
	Engage the private sector to adopt and support these guidelines.	✔	✔	✔
Procuring and/or producing essential diagnostic equipment and supplies	Procure/produce test kits, RT-PCR techniques, reagents, specimen collectors, packing supplies, and other laboratory consumables.	✔		
	Support the manufacture of domestic essential diagnostic equipment and supplies.	✔	✔	✔
Training health workers on infection prevention and control	Support countries to review, disseminate, and train health care workers in national guidance for clinical management of COVID-19 and management of patients with comorbidities and risk factors.	✔	✔	
	Engage communities and civil society groups to develop and implement guidance for community and home care of mild cases. Training strategies should include special considerations for health workers in remote locations and those providing care to marginalized and hard-to-reach communities.	✔	✔	✔
	Establish a clinical professional network to share expertise and lessons in managing patients with COVID-19.	✔	✔	✔

COVID-19 = coronavirus disease, RT-PCR = reverse transcription polymerase chain reaction.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 6: Hospital and Primary Health Care Capacity

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Upgrading existing facilities and expanding services	Plan for surge capacity at the hospital level, including quarantine and isolation facilities, ensuring that non-COVID-19 operations can proceed.	✔		✔
	Identify designated hospitals and transport services for patients with COVID-19 across different levels of health care (primary and hospital) and to designate trained staff to provide care.	✔		✔
	Enhance water, sanitation, and hygiene and other infrastructure (e.g., oxygen delivery) in primary health care facilities.	✔		✔
	Develop triage, referral, and case management mechanisms and ensure they are coordinated with designated hospitals and transport services.	✔		✔
Planning for triage facilities/ nontraditional treatment sites during surges	Develop facility-level plans (from primary to tertiary) to triage and treat severe and high-risk cases of suspected COVID-19 through facility configuration; patient distribution; and transfer mechanisms, equipment, and resources (including PPE and hand hygiene consumables).	✔	✔	
	Develop plans to repurpose facilities for isolation and for treatment of mild COVID-19 cases.	✔		
	Identify ways to increase bed capacity if needed (such as utilizing long-term care wards for acute care).	✔		✔
	Address specific service delivery challenges, such as service delivery to remote islands and areas.	✔	✔	✔
Establishing guidelines for delivery of essential routine care	Develop national and subnational plans to continue delivery of essential routine care (e.g., births and chronic disease management) and emergency care (e.g., trauma and heart attacks). These should include plans to designate specific facilities for these services, to deliver routine care online or by telephone (e.g., repeat prescription needs), and bring elective surgeries forward (before anticipated large-scale community outbreaks) or postpone them.	✔	✔	✔
	Develop and adapt plans to address "pent-up demand" for routine services.		✔	

COVID-19 = coronavirus disease, PPE = personal protective equipment.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 7: Health Workforce Capacity

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Training epidemiologists	Establish an applied epidemiology training program in country or provide resources to send citizens to another country to participate in applied epidemiology training programs.			✔
	Ensure that field epidemiology training programs are explicitly inclusive of animal health professionals, including wildlife capacity beyond veterinary training.			✔
	Scale up the training of field epidemiologists.			✔
Strengthening community and clinical health care workforces	Train health workers, especially through the use of technology and online service training.	✔	✔	✔
	Establish staff health and welfare policies (workload, compensation, sick leave, protection from abuse, psychosocial support, etc.), provide necessary training and technical support, and ensure adequate IPC measures.	✔	✔	✔
	Recruit and train staff if needed (including volunteers, retirees, and emergency medical teams).	✔	✔	✔
Enhancing response workforce capacities	Establish/strengthen rapid response teams: a multidisciplinary deployable team of public health experts to investigate and respond to health emergencies.	✔	✔	✔
	Conduct regular simulation exercises to practice the implementation of plans.			✔

COVID-19 = coronavirus disease, IPC = infection prevention and control.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 8: Information Systems

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Improving health information systems	Operate electronic reporting in surveillance and laboratory systems at both the national and subnational level.	✔	✔	✔
	Invest in data visualization and analysis platforms to allow policymakers to easily interpret data and make evidence-based decisions.	✔	✔	✔
	Publish pre-identified health surveillance data on disease outbreaks via reports (or other format) on government websites (such as the Ministry of Health, Ministry of Agriculture, or similar).	✔	✔	✔
Integrating information systems across disciplines and nations	Support interoperability of health information systems and other information systems such as civil registration, national insurance schemes, death registries, and other records to enable contact tracing and other response efforts.	✔		✔
	Support policy to enable cooperative agreements to share surveillance data during a public health emergency with other countries in the region.			✔
	Ensure interoperable One Health data-sharing platforms (to share data across domestic animal, wildlife, vector, and human surveillance).		✔	✔
Sharing lessons learned	Establish a clinical professional network to share expertise and lessons in managing patients with COVID-19.		✔	✔

COVID-19 = coronavirus disease.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 9: Policy and Coordination Mechanisms

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Developing and implementing national COVID-19 (and all hazards) pandemic prevention, preparedness, and response plans	Develop/strengthen plans that focus on a whole-of-government approach, considering implications and roles for health, finance, foreign affairs, defense, transport, education, agriculture, community, and other sectors.	✔	✔	✔
	Develop/strengthen plans that establish clear roles, responsibilities, and collaboration mechanisms at the national and subnational levels, including the delegation of authority.	✔		✔
Establishing/strengthening emergency operations centers or national incident management systems	Support countries to establish centralized mechanisms for organizing crisis response staffed by highly trained experts to exchange information and make decisions quickly.			✔
Establishing/strengthening national and/or regional One Health coordinating platforms	Implement multisector mechanisms to coordinate response activities and whole-of-society participation. Managed by national emergency platforms, coordination actions should strengthen collaboration across the entire health system (including national, subnational, and community levels; public, private, and informal facilities); across multiple sectors (such as finance, education, transportation, tourism, culture, development, nongovernment organizations, and business); and across society (including vulnerable groups and hard-to-reach communities).			✔
Conducting epidemiologic and economic risk assessment and reduction/ management plans	Conduct continuous systematic risk and severity assessments in terms of epidemiological and economic impacts.	✔	✔	✔
	Integrate assessment findings to review and inform risk reduction measures for policymakers.		✔	✔
	Implement risk reduction and management strategies to minimize likelihood of future outbreaks.			✔
Establishing a vaccine preparedness plan	Develop plan to ensure access to and availability of a COVID-19 vaccine at national and subnational levels.	✔	✔	
	Scale up domestic production/procurement of a COVID-19 vaccine where appropriate.	✔	✔	
	Deliver COVID-19 vaccines at local, national, and regional levels.	✔	✔	

COVID-19 = coronavirus disease.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 10: Building Resilient Health Systems

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Removing financial barriers for COVID-19 patients	Develop patient payment options and initiatives to reduce financial barriers and out-of-pocket payments people may face in accessing health care for COVID-19.	✔	✔	
Removing barriers to essential health care services	Assess and remove barriers to accessing care (including geographic accessibility, availability, affordability, and acceptability). Vulnerable populations should be explicitly examined.		✔	✔
	Support continuity of essential services (e.g., for those with chronic conditions) and plan for unintended consequences that may arise from interruptions (especially to interruptions in immunization services). Special attention should be given to providing services to displaced populations, migrant workers, undocumented populations, fragile states, and humanitarian settings.	✔	✔	✔
Supporting timely and flexible access to domestic emergency/ crisis financing	Develop policies that ensure access to contingency financing is continuously built into budgets.		✔	✔

COVID-19 = coronavirus disease.

Sources:
Centers for Disease Control and Prevention. 2014. *Global Health Security Agenda: Action Packages*. Atlanta; Nuclear Threat Initiative, Johns Hopkins Center for Health Security, and Economist Intelligence Unit. 2019. *Global Health Security Index 2019*. Washington, DC; The World Bank and World Health Organization. 2020. *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19*. Manila; and World Health Organization. 2016. *Joint External Evaluation Tool: International Health Regulations 2005*. Geneva.

Table 11: Social Protection and Social Services

Activity Area	Specific Interventions	COVID-19 Response	COVID-19 Recovery	Systems Strengthening
Ensuring steady food supply for vulnerable populations	Provide food assistance or relief for individuals who are food-insecure or at risk of becoming food-insecure (e.g., those engaged in informal sector employment).		✔	
Providing economic relief for those with reduced income	Those participating in the informal economy are at particular risk of losing their livelihood during a pandemic and financial safety nets should be developed.		✔	
Providing schooling support for those with disrupted learning	Interruptions in schooling should be minimized by providing access to materials to facilitate distance learning, especially using approaches that can penetrate impoverished areas and do not require substantial resources (e.g., internet access).		✔	
Providing mental health and emotional support services	Focus services on those who are and have recovered from COVID-19 as well as health workers.		✔	

COVID-19 = coronavirus disease.

Sources:
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Appendix: List of Participants–Delphi Technique and Expert Panel

The following list of experts provided feedback on the list of interventions, participated in the experts' meeting, and/or participated in the Delphi questionnaire survey.

	Name	Affiliation
1	Patrick Osewe	Asian Development Bank
2	Mei-Shang Ho	Taipei,China Health Corps (Former)
3	Jane Halton	CEPI
4	David Heymann	London School of Hygeine and Tropical Medicine
5	George Gao	PRC CDC
6	Rob Grenfell	CSIRO
7	William Karesh	EcoHealth Alliance
8	Mark Smolinski	Ending Pandemics
9	Kayla Laerson	Gates Foundation
10	Rebecca Katz	Georgetown University
11	Gabriel Leung	Hong Kong University
12	Jennifer Nuzzo	Johns Hopkins Center for Health Security
13	Amanda McClelland	RESOLVE
14	Jih-Haw Chou	Taipei,China CDC
15	Luwei Pearson	UNICEF
16	Stefan Peterson	UNICEF
17	Adam Kamradt-Scott	University of Sydney (currently with Karolinska Institutet)
18	David Wilson	World Bank (currently with the European University Institute)
19	Muhammad Pate	World Bank PRC
20	Abdi Mahamud	WHO WPRO
21	Martin Taylor	WHO WPRO
22	Rodrigo Ofrin	WHO SEARO
23	Robin Davies	Indo Pacific Centre for Health Security (currently with WHO India)
24	Lara Andrews	Indo Pacific Centre for Health Security
25	Sara Davies	Griffith University
26	Mark Anderson	US CDC
27	Tara Brown	US CDC
28	Heidi Soeters	US CDC (currently with WHO)

CDC = Centers for Disease Control and Prevention, CSIRO = Commonwealth Scientific and Industrial Research Organisation, PRC = People's Republic of China, UNICEF = United Nations Children's Fund, US = United States, WHO = World Health Organization, WPRO = World Health Organization Regional Office for the Western Pacific.

Source: Asian Development Bank.

Further Reading

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——— 2005. *International Health Regulations 2005*. Geneva.

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Health Security Interventions for COVID-19 Response

Guidance Note

This guidance note is designed to help developing member countries of the Asian Development Bank strengthen their health systems and security as they recover from the impact of COVID-19. Drawing on evidence-based and expert-validated interventions, it lays out a comprehensive series of measures policy makers could weave into national agendas. These range from steps to bolster health guidelines and ramp up testing and contact tracing to strategies that can improve community engagement and prevent misinformation. The guidance note discusses ways of addressing local gaps and priorities, responding to the destabilizing impact of the pandemic, and preparing for future outbreaks.

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