2008 Joint Statement of the Third ASEAN Plus Three Health Ministers Meeting

Issued in Manila, the Philippines on 10 October 2008

We, the Ministers of Health of the ASEAN Member States and People’s Republic of China, Japan and Republic of Korea, convened the Third ASEAN Plus Three Health Ministers Meeting on 10 October 2008 in Manila, Philippines.

United by the common aim of improving the health situation in the region, we discussed progress in implementing joint activities in the health sector and we explored areas for future collaboration.

## “Trade Liberalisation: Its Adverse Impact on our Borderless Health Problems”

We are of the view that in the era of globalisation and trade liberalisation, HIV and AIDS, avian and pandemic influenza, and other emerging infectious diseases continue to threaten the lives of people in the region, especially the vulnerable populations, with socio-economic consequences that pose a formidable challenge to ASEAN community building.

We have agreed to address the potential challenges that trade and trade agreements may pose to the health sector. We have tasked the ASEAN Plus Three Senior Officials to gather information on the possible implications of international and regional trade and trade agreements for health and health policy at the national and regional levels, especially trade agreements between ASEAN Member States and the Plus Three Countries, in order to strengthen regional cooperation, as appropriate, through liberalisation and facilitation measures in the area of trade in goods, services and investments.

## ASEAN Plus Three partnership in combating communicable diseases and pandemic preparedness and response

We welcome the achievements made in implementing the Year 1 Action Plan (July 2007-June 2008) of the ASEAN Plus Three Emerging Infectious Diseases (EID) Programme, which aims to enhance regional preparedness and capacity through integrated approaches to prevention, surveillance and timely response to emerging infectious diseases, including SARS, avian and pandemic influenza.

We commend the key activities of the ASEAN Plus Three EID programme, namely the launch of the improved website “http.//www.aseanplus3-eid.info”; strengthening collaboration between animal and public health networks; conducting research to support mainstreaming of gender and social issues in the prevention and control of emerging infectious diseases; initiating healthy tourism; developing, disseminating and operationalising of minimum standards on multi-sectoral joint outbreak investigation and response; developing minimum standards on logistical and administrative arrangements required in times of an outbreak; establishing a Laboratory Based Surveillance of 13 pathogens and the ASEAN Plus Three Laboratory Partnership; and strengthening collaboration with partners organisations, such as WHO, OIE, FAO, AusAID, USAID, UNSIC, and UNOCHA.

We endorse the Year 2 Action Plan of the ASEAN Plus Three EID Programme (July 2008 – June 2009) and hope that the activities would bring the ASEAN Plus Three countries even closer together in preparing for future threats of disease outbreaks, including those related to natural disasters,
bio-terrorism, and pandemic influenza, as well as facilitate partnerships among existing networks and experts in the region on public and animal health.

We support the Call for Action towards the Elimination of Rabies in the ASEAN Member States and the Plus Three Countries by year 2020. They requested the ASEAN Plus Three EID Programme to develop a regional strategic framework for the prevention and control of rabies in the ASEAN and the Plus Three countries in accordance with and in support of guidelines of the WHO and international standards for animal disease control and surveillance of World Organisation for Animal Health.

We support the Plan of the ASEAN Plus Three EID Programme to develop and implement
medium-term and long-term plans to sustain regional cooperation for prevention and control of emerging infectious diseases through multisectoral and integrated approaches in support of International Health Regulation (2005) and Asia Pacific Strategy for Emerging Infectious Diseases (APSED). The Health Ministers agreed that future collaboration will include initiatives to address treatment of emerging infectious diseases.

We support the work of the ASEAN Technical Working Group on Pandemic Preparedness and Response. Comprising focal points from the health, agriculture and disaster management sectors, the Working Group was established earlier this year to enhance and promote multi-sectoral coordination in pandemic preparedness and response at the regional and national levels. We recommended that the Working Group expand its focal points to include representatives of other key relevant service sectors and work closely with their counterparts from the Plus Three countries.

We express strong support for the Vientiane Statement of Commitment on the Greater Involvement and Empowerment of People Living with HIV. The Statement of Commitment, which was initiated in May this year, calls for the elimination of all forms of stigmatisation and discrimination against people living with HIV, and their families.

We thank the Government of Australia for supporting the efforts to develop and implement the ASEAN Plus Three EID Programme and the Government of the United States of America for supporting the initiatives on ASEAN Multisectoral Pandemic Preparedness and Response and on HIV/ AIDS prevention and control. We also thank the Plus Three countries, WHO, OIE, FAO, UNAIDS, UNDP and other partner organisations for their contributions and support. We look forward to stronger collaboration and cooperation.

## ASEAN Plus Three Cooperation in Health

We have noted the progress made in ASEAN Plus Three collaboration in health since we first met in 2004. The areas of collaboration include health promotion; capacity building for health professionals; human resource development, infectious diseases; traditional, complementary and alternative medicine; and policy coherence for health and social welfare development.

We thank the Government of the People’s Republic of China for supporting regional activities and building capacity of ASEAN in the prevention and control of communicable diseases, such as HIV and AIDS and avian and pandemic Influenza, of traditional medicinal resources, laboratory diagnosis and food safety. Further cooperation in the future is geared for capacity-building, information sharing and quality control on traditional medicine and on advocacy, surveillance, prevention and control of infectious diseases.

We thank the Government of Japan for supporting the ASEAN-Japan Project on Regional Stockpiling of Oseltamivir (Tamiflu) and Personal Protective Equipment (PPE) against potential influenza pandemic, through which 500,000 courses of Oseltamivir (Tamiflu) and PPE for 700,000 people have been stockpiled for early containment of an outbreak of pandemic influenza. We also thank the Government of Japan for providing additional 500,000 courses of antivirals for stockpiling at country level for rapid response and rapid containment purposes.

We commend the achievements made in implementing Phase 2 of the ASEAN-Republic of Korea on Home Care for Older Persons, utilising untapped resources, such as older people themselves and communities, to provide care to older people. The Ministers support the proposal submitted by HelpAge Korea to continue Phase 3 of the project for 2009-2012.

We welcome the plan to mount a regional initiative that would bring together health, trade and other relevant policy-makers and stakeholders in the region to discuss and develop consultative and inclusive multi-sectoral approaches for integration of healthcare into development agendas.

We have agreed to sustain the momentum of cooperation through joint initiatives in addressing the following health issues:

* Prevention and control of communicable diseases, including HIV and AIDS and emerging infectious diseases
* Health human resource development and capacity building in addressing globalisation and trade liberalisation, promoting healthy lifestyles, pandemic preparedness and response, and ONE Health approach for prevention and control of EIDs
* Health systems strengthening, including primary health care and social safety nets
* Traditional, alternative and complementary medicine
* Integrated approaches, policies and programmes to addressing the special needs of vulnerable and disadvantaged groups of people, including children, women, people with disability and older persons.
* Health effects of climate change and the environment.
* Food safety

## Next ASEAN Plus Three Health Ministers Meeting

We look forward to further exchanges of views on joint collaboration in health development at our next meeting in Singapore in 2010.