

Successful Cooperation in Central Asia: Experience from Infectious Diseases Control

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CAREC Senior Officials' Meeting

16-17 April 2010

Manila

Key Messages

- **Genuine cooperation**

Diseases do not recognize borders, thus require cross-border collaboration

- **Country-led/ current needs/**

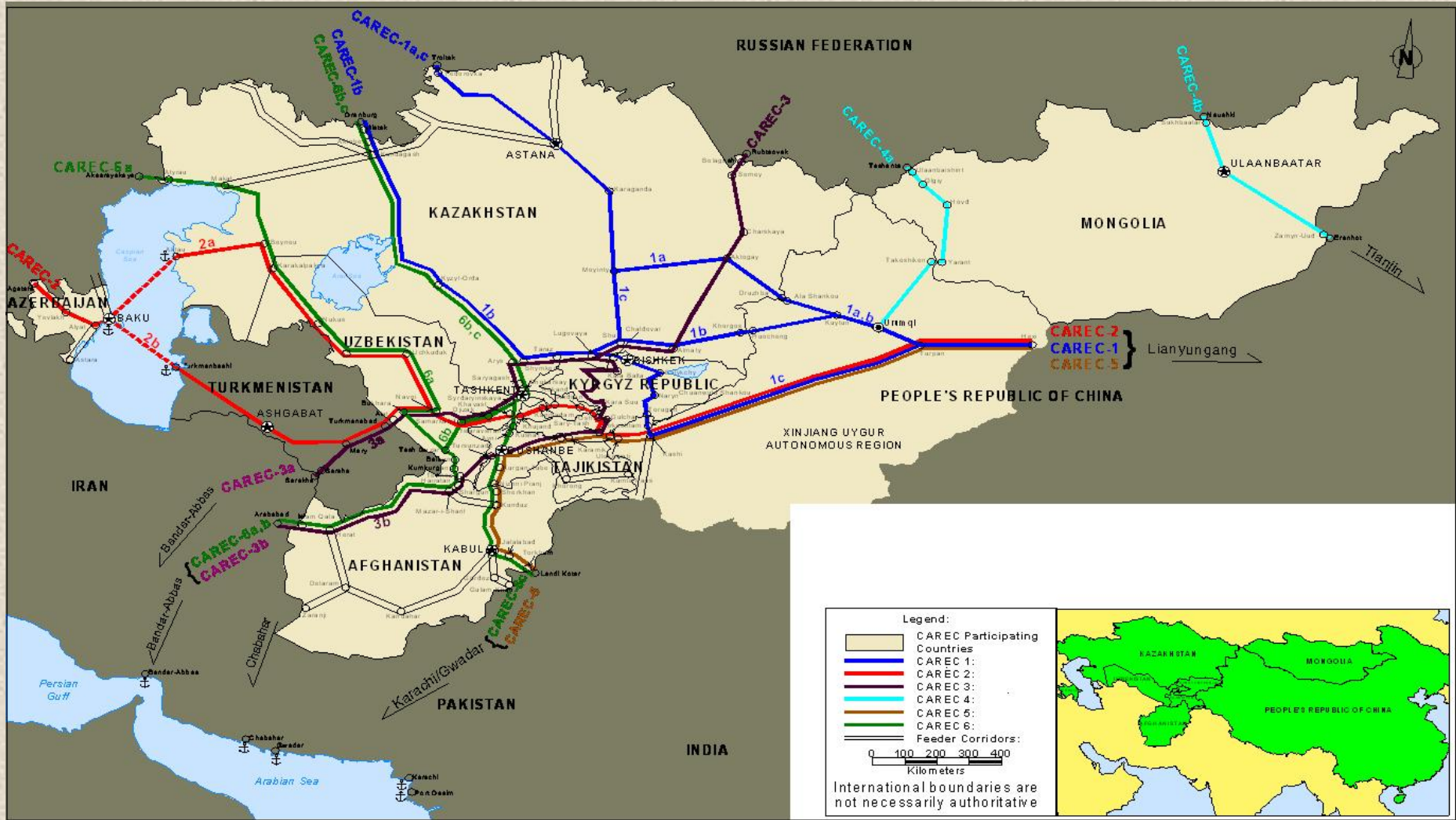
CAREC countries ill-equipped to respond to public health emergencies. Health cooperation responds to current needs

- **Involves EurAsEC, SPECA, and SCO**

- **Economic costs**

Good health supports economic growth: link with other CAREC sectors and strategies

CAREC Transport Corridors





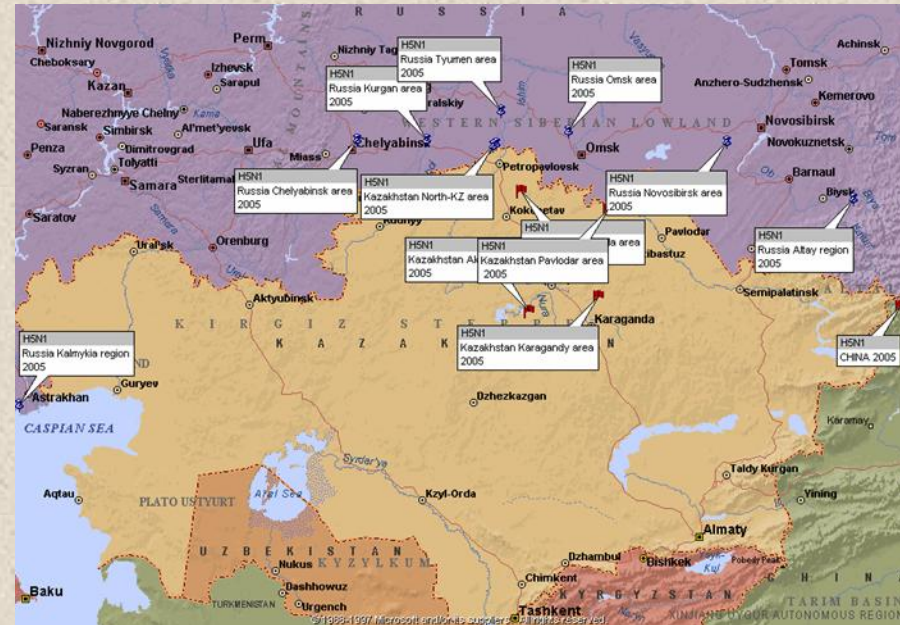
Country	Cumulative number of case(s) ²	Number of new cases since last WHO update ²	Number of deaths	Number recovered ³	Date last probable case reported
Australia	5	0	0	5	12/May/2003
Brazil	1	0	0	1	9/Jun/2003
Canada ⁴	250	0	38	194	9/Jul/2003
China ⁵	5327	0	348	4941	25/Jun/2003
				1433	11/Jun/2003
				1	21/May/2003
				507	19/Jun/2003
				1	5/May/2003
				1	7/May/2003
				6	9/May/2003
	10	0	0	9	4/Jun/2003
	3	0	0	3	13/May/2003
	2	0	0	2	23/Apr/2003
	4	0	0	4	29/Apr/2003
	1	0	0	1	9/Apr/2003
	5	0	2	3	20/May/2003
New Zealand	1	0	0	0	30/Apr/2003
Philippines	14	2	2	12	21/May/2003
Republic of Ireland	1	0	0	0	21/Mar/2003
Republic of Korea	3	0	0	3	14/May/2003
Romania	0	0	0	1	27/Mar/2003
Russia	0	0	0	0	31/May/2003
Singapore	206	0	32	172	18/May/2003
South Africa	1	0	1	0	9/Apr/2003
Spain	1	0	0	1	2/Apr/2003
Sweden	3	0	0	3	18/Apr/2003
Switzerland	1	0	0	1	17/Mar/2003
Thailand	9	0	2	7	7/Jun/2003
United Kingdom	4	0	0	4	29/Apr/2003
United States ⁷	75	0	0	67	23/Jun/2003
Viet Nam	63	0	5	58	14/Apr/2003
Total	8437	0	813	7452	

2003

SARS

Global pandemics showed need for multi-country technical networks

Bird flu 2005



Health as a Regional Public Good: Progress in CAREC

- Comprehensive Action Plan (2006)
Regional public goods pillar refers to communicable disease control
- Call for cooperation for health
at ministerial conference (Urumqi, 2006)
- Many initiatives from the countries
since then

2006 **Almaty Declaration:**
Human & animal health officials agree on influenza priorities for CAREC, Russia and Turkmenistan



2008 **“One Health” Committee**
Identifies areas of regional cooperation for 2009-2011



2008 **Exchange visit: PRC in KAZ**

2009 **Shanghai Cooperation Organization:**
Ministries of Health, Novosibirsk, Russia



2009 **Cross-border Outbreak**
Response Exercise
Ministries of Health, Yining, China



Strategic Approach

1. One Health, One World
Interdisciplinary, cross-sectoral
(human, animal)
2. Regional coordination
3. Partnerships
4. Country - led
5. Sustainability

Priority Areas for Cooperation

(From Nov. 2008 CDC workshop for CAREC)

- Information exchange
- Capacity building
- Pilot cross-border diseases control projects
 - surveillance and rapid response
 - priority diseases emerging from animals
 - HIV/AIDS

Proposed Activities

- Information hub (Website?)
- **Training:** workshops & on-the-job leadership development (FETP)
- Study visit
- Cross-border pilot projects:
pandemic influenza, HIV/AIDS,
high priority diseases emerging from animals
- Knowledge sharing

Examples:

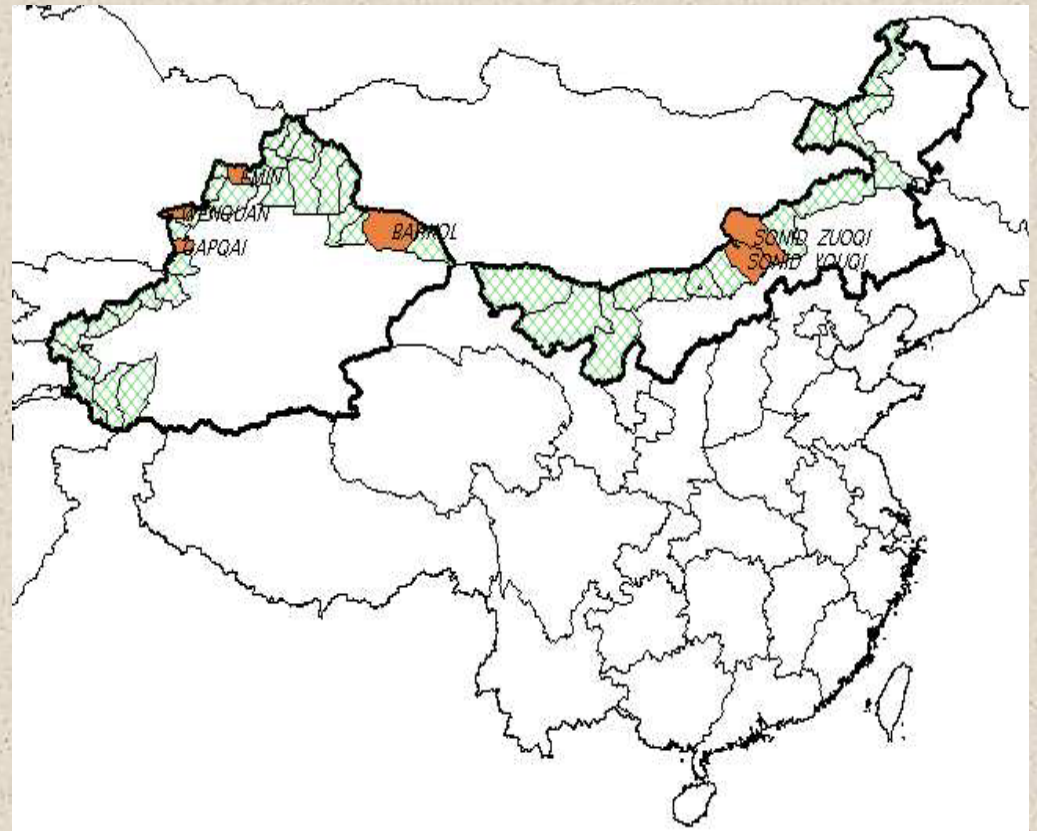
Activities initiated by China

- CAREC HIV/AIDS workshop and study visit, China (Urumqi and Xi'an, May 2010)
- International Workshop on Echinococcosis, July/August 2010
- Training on animal health protection for veterinary experts (Hohhot, 2010)
- Study visit to selected CAREC countries, June
- Cross-border surveillance project (China-Kazakhstan/China-Mongolia)

Examples:

Activities proposed by Kazakhstan

- Cross-border surveillance project
- Information center / knowledge “hub” on diseases spreading across borders hosted in Almaty



Success Factors

- **High-level advocacy**
- **Country leadership**
 - In regional capacity building
 - Co-financing
- **Building confidence with partners**
 - CAREC + (Turkmenistan and Russian Federation)
 - Multilateral and bilateral partner agencies and regional development organizations
- **Aiming at consistent and tangible outputs**
- **Sustainability**