



1. We, Ministers/Secretaries/Commissioner from Canada, France, Germany, Italy, Japan, Mexico, the United Kingdom, the United States and the European Commission, gathered today in Tokyo to reflect on emerging health security events of the last year and to explore collaborative actions to protect the health and safety of our populations, and to strengthen health security globally. At today's Ministerial Meeting, we discussed key priorities for our collective preparedness and response to chemical, biological, radiological and nuclear (CBRN) threats, pandemic influenza and other emerging infectious diseases, specifically the Ebola Virus Disease (EVD) outbreak in West Africa.

#### **Strengthening Collaborative Response to the Ebola Outbreak in West Africa (2014)**

2. We affirm our ongoing support to the countries affected by the EVD outbreak and reiterate our common concern that the virus continues to pose a threat to global health security as well as to global peace and security. We express our strong determination to remain vigilant in our response and to support all necessary efforts to stop the virus from spreading further.
3. We are saddened and concerned by the suffering and loss of thousands of lives caused by the disease. We also recognize the courageous efforts undertaken by health care workers and volunteers in the region. We fully support the leading roles within the United Nations (UN) of the World Health Organization (WHO) and the United Nations Mission for Ebola Emergency Response (UNMEER) in responding to the outbreak.
4. We recognise that measures to contain the epidemic and to support the affected countries require additional urgent assistance. We remain committed to working collaboratively with relevant UN bodies and other organizations to coordinate our efforts. We urge the international community to continue to commit both health care workers and other necessary resources to provide needed public health interventions and appropriate health care to Ebola patients in the affected region. Furthermore, we call on all international donors to respond to the UN appeal, including through the UN Ebola Trust Fund, bearing in mind the critical needs in the short and medium term.

5. Alongside financial support, GHSI members will continue to respond to the EVD outbreak through the provision of operational, material, and/or technical support. Deployments of technical and operational personnel as well as in-kind contributions of needed equipment, laboratory supplies and other materials are essential in helping to save lives and have proven valuable in limiting the transmission of EVD. Furthermore, many GHSI members have contributed to the global response effort through the provision of evacuation services and medical treatment for health care personnel working with international organizations and non-governmental organizations.
6. Since the onset of the outbreak, GHSI has used its existing structure to rapidly share information among its members, exchange best practices, and develop a multinational evidence base to support and adapt preparedness and response efforts in our respective countries.
7. As part of today's meeting, we have discussed and compared our respective preparedness and response measures, the potential deployment and use of medical countermeasures, public health measures and risk communications strategies, approaches and tools.
8. With regard to medical countermeasures for EVD, we acknowledge the key policy, ethical, logistical, legal and regulatory challenges associated with their development, deployment and use. As such, we recognize the importance of ongoing exchange of information, joint planning of research, and dissemination of best practices relevant to experimental countermeasures (therapeutics and vaccines) and we remain committed to the open and transparent sharing of the results of clinical trials to expedite any efforts to protect human lives. Furthermore, based on the significant progress of the GHSI towards building a framework for the international deployment of medical countermeasures, we will continue working with the WHO to support its efforts toward the eventual international deployment of therapeutics and vaccines against EVD.
9. Together, we discussed challenges and best practices in risk communication reinforcing that sharing information with the public in an open and timely manner builds trust and credibility and minimizes false perceptions about the potential impact of the disease. With this in mind, we commit to addressing the key communications challenges encountered during the Ebola response, specifically through the development of common communication strategies to address uncertainty and fear, and to apply these learnings to our preparedness efforts for future public health emergencies.
10. In the context of the EVD outbreak and to address threats to global health security more broadly, we support full implementation of the International Health Regulations (2005). We also support initiatives that will enhance implementation, such as the Global Health Security Agenda. We commit to working across sectors to prevent, detect and respond to infectious diseases and other threats, whether naturally occurring, accidental, or the result of a deliberate act by a state or non-state actor.

11. Finally, we remain committed to the sharing of research, experience, and best practices with respect to the EVD outbreak and will advance further work in this regard, including a lessons learned exercise. Over the longer-term, this exercise will inform approaches for future public health emergencies, regardless of the specific threat.

### **Strengthening Longer-term Recovery Efforts from Public Health Emergencies**

12. We thank Professor Seiji Yasumura, Department of Public Health, Fukushima Medical University, for his address in support of strengthened collaboration for long-term recovery efforts to public health emergencies. We recognize that full recovery from a severe public health incident requires sustained efforts and we support the efforts of the Japanese government to help the affected population rebuild after the Great East Japan Earthquake, Tsunami and Radiation Crisis. We recognize the recovery phase as an important opportunity to enhance prevention and increase preparedness, thereby building resiliency in the event of another public health emergency. As such, we remain committed to working collaboratively to inform future planning for radiological and nuclear incidents within the health sector.
13. We thank Dr. Shigeru Omi, President of the Japan Community Health Care Organization, for his address outlining the importance of implementing lessons learned from past experiences such as the 2009 H1N1 Pandemic, to strengthen preparedness for emerging and re-emerging infectious diseases such as the EVD outbreak in West Africa. We recognize that our previous experiences with public health emergencies have laid the groundwork for improvements in our response capacity and have contributed to a more efficient and effective response for future outbreaks.

### **Strengthening Longer-Term Preparedness**

14. Since the creation of GHSI, Ministers and Senior Officials have reassessed the mandate, scope and membership of the network on various occasions based on lessons learned from events that impacted global health security and in response to members' needs and priorities. An in-depth review in 2014 led to the establishment of a Strategic Framework that guides network engagement in policies, programs and activities in a common direction and that supports the GHSI mandate. Under the Framework, this work will take place in the context of key risks to global health security, specifically CBRN threats and the spread of pandemic influenza and other emerging infectious diseases across the following pillars: strengthen prevention; strengthen preparedness; rapidly detect threats and risks; respond effectively; and support recovery and build resilience. The Strategic Framework for GHSI recognizes that taking timely collaborative actions to address threats and risks will help mitigate the effects of potential future events and will also position the work of GHSI within the broader global health security landscape.

15. Medical countermeasures are key components of preparedness and response to medical and public health emergencies. In support of the WHO, our experts have analyzed the legal, regulatory, logistical and communication issues to be considered during the international deployment of medical countermeasures. GHSI will continue to support WHO efforts to (1) develop a process to enable national regulatory authorities to evaluate and authorize as appropriate the use of experimental or unlicensed medical countermeasures during international emergencies; and (2) collaborate with other countries to further strengthen a generic capability for the rapid international deployment of medical countermeasures.
16. The experience with acquiring MERS-CoV samples for research and diagnostic purposes at the beginning of the outbreak highlighted the complexities and challenges, but also the benefits, of sharing biological materials and information among countries during a potential or actual Public Health Emergency of International Concern. Together we have made progress in the development of practical mechanisms to facilitate sample sharing among GHSI countries and third parties so that we are collectively better prepared to respond to public health threats in the future.
17. Through the Laboratory Network, our experts have strengthened information exchange and cooperation in areas such as diagnostics for emerging and dangerous pathogens. We have instructed our officials to continue to develop protocols to address diagnostics of unknown pathogens in order to further improve GHSI capabilities. This will contribute to the development of surge improvement profiles for probable threats in an effort to avoid diagnostic gaps and challenges in laboratories during a possible outbreak.
18. With regard to preparedness for radio-nuclear events, we are pleased with the current results comparing methods of sample handling, analysis, and dose assessment across laboratories for radiological or nuclear substances. We also welcome the development of a web-based tool that is designed to assist in guiding our rapid decision making following a potential radio-nuclear event.
19. We continue to emphasize our preparedness for chemical events by supporting the WHO in strengthening the implementation of the International Health Regulations (IHR) (2005) through technical information sharing and the dissemination and uptake of training materials for the management of chemical incidents. To this end, we are pleased with the significant progress made to date on the development of e-learning materials and a guidance manual that will assist IHR National Focal Points with the assessment and reporting of chemical incidents.
20. Finally, the network continues to collaborate effectively on the sharing of approaches to national pandemic influenza risk assessments and national plans that relate to pandemic as well as seasonal influenza preparedness and response including national research protocols for rapid assessment of safety, effectiveness and impact of countermeasures during a pandemic influenza response and approaches to antiviral and vaccine stockpiling and their distribution in a pandemic. Technical experts are also collaborating with the WHO on assessments of disease severity and in the development of scenarios that would help illustrate the challenges associated with the shift from seasonal influenza vaccine production to full-scale pandemic vaccine production.

21. We welcomed the proposal of the United States of America to host the next Ministerial Meeting in 2015.

This statement was endorsed by Ministers, Secretaries, and Commissioner for Health and Food Safety.

The Honourable Yasuhisa Shiozaki, Minister of Health, Labour and Welfare, Japan

The Honourable Hermann Gröhe, Minister of Health, Germany

The Right Honourable Earl Howe, Parliamentary Under-Secretary of State for Health, United Kingdom

Dr. Gregory Taylor, Chief Public Health Officer, on behalf of the Honourable Rona Ambrose, Minister of Health, Canada

Mr. Martin Seychell, Deputy Director General for Health, on behalf of the Honourable Dr. Vytenis Andriukaitis, Commissioner for Health and Food Safety, European Commission

Dr. Benoit Vallet, Director General for Health, on behalf of the Honourable Marisol Touraine, Minister of Social Affairs and Health, France

Dr. Maria Grazia Pompa, Senior Medical Officer, on behalf of the Honourable Beatrice Lorenzin, Minister of Health, Italy

Dr. Pablo Kuri Morales, Undersecretary for Prevention and Health Promotion, on behalf of the Honourable Mercedes Juan, Secretary of Health, Mexico

Dr. Nicole Lurie, Assistant Secretary for Preparedness and Response, on behalf of the Honourable Sylvia Burwell, Secretary of Health and Human Services, United States of America