

Meeting Report

Report of the First Regional Forum of WHO Collaborating Centres in the Western Pacific



13–14 November 2014
Manila, Philippines

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WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR THE WESTERN PACIFIC

English only

MEETING REPORT

REPORT OF THE FIRST REGIONAL FORUM OF
WHO COLLABORATING CENTRES IN THE WESTERN PACIFIC

Convened by:

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR THE WESTERN PACIFIC

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NOTE

The views expressed in this report are those of the participants of the First Regional Forum of WHO Collaborating Centres in the Western Pacific and do not necessarily reflect the policies of the conveners.

This report has been prepared by the World Health Organization Regional Office for the Western Pacific for Member States in the Region and participants in the First Regional Forum of WHO Collaborating Centres in the Western Pacific, in Manila, Philippines from 13 to 14 November 2014. This report may be accessed at:

http://iris.wpro.who.int/bitstream/10665.1/10911/3/RS_2015_GE_20_PHL_eng.pdf and
http://www.wpro.who.int/whocc_forum/en/.

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Keywords: / Technical Cooperation / World Health Organization/

SUMMARY

The Western Pacific Region has had remarkable success in achieving many of the health-related Millennium Development Goals. However, the Region still continues to face complex public health challenges, ranging from escalating health-care costs and widening social and economic inequities to persistent risks of new infections and diseases related to climate change. Meanwhile, ageing populations, urbanization and changing lifestyles continue to fuel a pandemic of noncommunicable diseases (NCDs).

WHO collaborating centres are indispensable partners in advancing WHO technical work at the country, regional and global levels. However, given the changing landscape and unprecedented magnitude of public health challenges, new ways of working together and a strengthening of the strategic nature of the partnerships between WHO and collaborating centres must be explored.

The first Regional Forum of WHO Collaborating Centres in Western Pacific was held at the WHO Regional Office for Western Pacific, Manila, Philippines, from 13 to 14 November 2014. It provided an opportunity for collective deliberation to achieve more effective and accountable partnerships.

The objectives of the forum were:

1. to provide an overview of WHO current priorities and future initiatives;
2. to share good practices and success stories of effective collaboration that could be scaled up and more widely adopted; and
3. to identify innovative opportunities and means for strengthening and enhancing partnerships between WHO collaborating centres and WHO.

Overall, 196 representatives – 181 attendees in Manila and 15 via videoconference – from 135 collaborating centres in 10 countries in the Region participated in the forum.

Dr Shin Young-soo, WHO Regional Director for the Western Pacific, set the tone for the forum in his keynote speech. He outlined how WHO had shifted from biological interventions to a health systems approach in response to the evolving global health landscape. His description of WHO's work at the country, regional and global levels and ongoing WHO reform efforts helped participants understand the context of the partnership between collaborating centres and WHO. Five plenary presentations from technical division directors in WHO Western Pacific Region built upon the Regional Director's keynote speech, and these presentations familiarized the participants with ongoing WHO programmes, technical work and future needs.

Thirteen parallel group sessions of 13–15 people each were conducted in a focus group discussion style by trained facilitators to seek feedback from collaborating centres on how to strengthen the partnership with WHO. Twenty parallel sessions were also organized around technical programmes, which provided opportunities to review each technical area in detail to identify innovative collaborative opportunities in the coming years based on the expertise and resources of collaborating centres, as well as the programmatic needs of WHO.

Five poster sessions – presentations of findings by an individual or representatives of an institution or research team – helped build a better understanding of the technical expertise, resources and capacity of the collaborating centres to support collaborative work with WHO. Representatives from six WHO

collaborating centres were invited in a plenary session to share good practice examples, with an emphasis on the process of collaboration and its outcome and impact at the country level. The session triggered a lively discussion on what constitutes good practices, and how collaborating centres may be more engaged in supporting WHO work, especially at the country level.

Two lunchtime seminars were also conducted to update policies and procedures related to WHO collaborating centres.

At the conclusion of the forum, an outcome statement was adopted reflecting the discussions and agreements among the collaborating centres and WHO.

The key discussion points during the forum included:

1. enhanced information sharing between WHO and the collaborating centres and among the various collaborating centres;
2. prioritization of activities and resources of WHO and collaborating centres;
3. funding for collaborative activities; and
4. intensified country support by collaborating centres.

This meeting report summarizes and synthesizes the proceedings and outcomes of the First Regional Forum of WHO Collaborating Centres in the Western Pacific.

1. INTRODUCTION

1.1 Background

The Western Pacific Region has had remarkable success in achieving many of the health-related Millennium Development Goals. However, the Region still continues to face complex public health challenges, ranging from escalating health-care costs and widening social and economic inequities to persistent risks of new infections and diseases related to climate change. Meanwhile, ageing populations, urbanization and changing lifestyles continue to fuel a pandemic of noncommunicable diseases (NCDs).

WHO collaborating centres are indispensable partners in advancing WHO technical work at the country, regional and global levels. However, given the changing landscape and unprecedented magnitude of public health challenges, new ways of working together and a strengthening of the strategic nature of the partnerships between WHO and collaborating centres must be explored.

The First Regional Forum of WHO Collaborating Centres in Western Pacific was held at the WHO Regional Office for Western Pacific, Manila, Philippines from 13 to 14 November 2014. It provided an opportunity for collective deliberation to achieve more effective and accountable partnerships.

1.2 Objectives

The objectives of the meeting were:

- 1) to provide an overview of WHO current priorities and future initiatives;
- 2) to share good practices and success stories of effective collaboration that could be scaled up and more widely adopted; and
- 3) to identify innovative opportunities and means for strengthening and enhancing partnerships between collaborating centres and WHO.

1.3 Organization

The forum was convened by WHO Regional Office for the Western Pacific. Annex 1 provides the meeting agenda and detailed programme.

1.4 Participants

Overall, 196 representatives – 181 attendees in Manila and 15 via videoconference – from 135 collaborating centres located in 10 countries in the Western Pacific Region participated in the forum. The WHO Secretariat was represented by the Regional Director, Director of Programme Management, directors of all the technical and administrative divisions, the core organizing committee, and WHO technical responsible officers for each of the collaborating centres. Annex 2 provides a list of participants.

2. PROCEEDINGS

2.1 Overview

Dr Shin Young-soo, WHO Regional Director for the Western Pacific, set the tone for the forum in his keynote speech. He outlined how WHO had shifted from biological interventions to a health systems approach in response to the evolving global health landscape. His description of WHO's work at the country, regional and global levels and the ongoing WHO reform efforts helped participants understand the context of the partnership between collaborating centres and WHO. Five plenary presentations by technical division directors in the WHO Western Pacific Region built upon the Regional Director's keynote speech, and these presentations familiarized the participants with ongoing WHO programmes, technical work and future needs.

Thirteen parallel group sessions of 13–15 people each were conducted in a focus group discussion style by trained facilitators to seek open feedback from collaborating centres on how to strengthen the partnership with WHO. Twenty parallel sessions were also organized around technical programmes, which provided opportunities to review each technical area in detail to identify innovative collaborative opportunities in the coming years based on the expertise and resources of collaborating centres, as well as the programmatic needs of WHO.

Five poster sessions helped build a better understanding of the technical expertise, resources and capacity of the collaborating centres to support collaborative work with WHO. Representatives from six WHO collaborating centres were invited in a plenary session to share good practice examples, with an emphasis on the process of collaboration and its outcome and impact at the country level. The session triggered a lively discussion on what constitutes good practices, and how collaborating centres may be more engaged in supporting WHO work, especially at the country level.

Two lunchtime seminars were also conducted to update policies and procedures related to WHO collaborating centres.

2.2 Opening session and Plenary Sessions 1 and 2

Keynote speech by Dr Shin Young-soo, WHO Regional Director for the Western Pacific

In his keynote speech, *Working Together in Addressing Health Challenges*, Dr Shin noted that the forum is not only the first such gathering in the Region, but also a first for any WHO region or headquarters. Dr Shin expressed his sincere appreciation to those present, stating that the collaborating centres are part of the WHO extended family, and that their commitment and expertise deserve even greater recognition. He presented a brief history of WHO, with a focus on the evolving global health landscape and the subsequent changes in the programmatic focus of WHO from biological interventions to health systems.

In light of these changes, he noted, the role of collaborating centres – as an institution designated by the Director-General to form part of an international collaborative network carrying out activities in support of the Organization's programme at all levels – is more important now more than ever before. An analysis of the work undertaken by collaborating centres in the Region was provided, highlighting how their work fits into the overall work of WHO, complementing the priority health programmes in

the Region, as well as the global public health agenda. The Region started with just one collaborating centre in 1962, which still actively contributes to WHO work, and the number has grown significantly over the years. The strong relationship WHO has with collaborating centres in the Region is signified by the fact that nearly half have been partners for over 20 years.

In conclusion, Dr Shin noted that collaboration means much more than just working together across geographical or organizational boundaries. Effective collaboration requires new mechanisms that support regular communication, harmonized work plans and systematic evaluation.

Presentation from technical directors on WHO current priorities and future initiatives

Dr Mark Jacobs, Director, Communicable Diseases, presented WHO's role in the area of communicable diseases, highlighting key achievements and challenges in the Region. Communicable diseases continue to be a major driver of morbidity and mortality in the Western Pacific Region. There are, however, effective evidence-based interventions that have supported significant improvements over the last decade.

While these achievements are notable, significant challenges remain. Drug resistance is a particular challenge in tackling a range of key diseases, such as tuberculosis, malaria and gonorrhoea. Efforts need to be scaled up and coverage needs to be increased for antiretroviral therapy (ART) for HIV infections and for immunizations for both existing and new vaccines. Further, new treatment options for viral hepatitis need to be progressively adopted. Effective control of many diseases rely on providing services for hard-to-reach populations such as the poor, migrants and those in remote areas.

The artificial divide between communicable diseases and NCDs ignores the very significant overlap between the two. For example, some of the communicable diseases are a significant driver of NCDs, such as liver cancer, cervical cancer, rheumatic heart disease and haematopoietic cancers caused by HIV/AIDS. Thus, it was emphasized that effective prevention of these diseases will require communicable disease-focused approaches. At the same time, some communicable diseases need chronic disease management, for instance long-term therapy for hepatitis B, ART for HIV, and disability from leprosy or Japanese encephalitis. Thus, communicable disease practitioners and programmes need to learn from those managing NCDs.

In conclusion, Dr Jacobs invited attention to the crucial issue of sustainability in the Region. There is an overreliance on externally funded vertical programmes; a critical focus on health system capacities to effectively control and manage key communicable diseases alongside other health priorities is now required. A successful shift from externally funded vertical programmes to robust national health systems needs sound planning and solid resourcing. Finally, he flagged a hidden danger – success in communicable disease control can make some threats invisible, resulting in inattention that could undo past achievements. Diseases can and will recur and increase, reversing many recent health gains.

Dr Susan Mercado, Director, NCD and Health through Life-Course, noted that globalization and rapid urbanization were changing the world, leading to a rise in NCD risk factors and NCDs. She shared some startling statistics. About half of all child deaths under the age of 5 in the Region are related to under-nutrition, while one in four adults is overweight. In most countries, three out of four smokers agree that smoking should be banned in all public places. Drowning is the leading cause of death for children aged 5–14 years; road traffic injuries are the leading cause of death among people aged 15–49 years. One in four women in the Region experienced violence at the hands of their

partner. Some 90 million people in the Region are visually impaired, including 10 million who are blind. Every single day, 500 people commit suicide, and more than 100 million people continue to suffer from mental disorders. Every two minutes a newborn dies, but many of these deaths can be prevented through simple but lifesaving interventions, such as skin-to-skin contact with the mother immediately after birth.

Available guidance for evidence-based national action was also shared. Dr Mercado introduced new approaches to tackle a variety of issues, including tobacco control through legislation such as plain packaging of tobacco products and a hike in tobacco taxes, introducing stronger laws for occupational health and worker health, multisectoral engagement for work on road safety, disability and rehabilitation, and environmental health. The importance of linking the community to health systems was emphasized, with examples including the promotion of universal eye health and rolling out the package of essential NCD interventions for primary health care in low-resource settings. Dr Mercado also discussed the need for innovative work in NCDs and health through the life-course, and touched on the importance of working at the local and city levels by empowering local leaders.

She concluded by noting the need for networking, sharing technical expertise, developing partnerships for specific support to countries, enhancing research, and engaging in capacity-building and training in conjunction collaborating centres.

Dr Li Ailan, Director, Health Security and Emergencies, presented an overview of health security and emergencies in the Region. She emphasized that the Western Pacific Region is highly vulnerable to various health security threats, having been a hotspot for emerging infectious diseases such as avian influenza and SARS. Describing health security challenges in the historical context, the current Ebola virus disease outbreak was presented as an example of the impact of health security threats and regional vulnerabilities to such threats. The possibility of imported Ebola virus disease cases to the Region is low but if it occurs, the consequences could be significant.

Health security and emergency work is required by various global mandates, such as the WHO Constitution, the International Health Regulations (2005), the United Nations Humanitarian Reform Agenda in which WHO serves as the health cluster lead agency, and the Codex Alimentarius Commission, which is the international standard for food safety. In this context, Dr Li discussed approaches and strategies to address health security threats. In the Western Pacific, regional health security work is currently guided by three regional strategic frameworks that have been developed in line with the global mandates and endorsed by countries in the Region: the *Asia Pacific Strategy for Emerging Diseases* (APSED), the *Western Pacific Regional Food Safety Strategy 2011–2015* and the *Regional Framework of Action for Disaster Risk Management for Health*. Taken together, these strategies address a broad range of health risks through the use of a step-by-step approach. APSIED has provided Member States with a roadmap for strengthening core capacities required by the International Health Regulations (2005), also known as IHR (2005), for early detection, rapid response and effective preparedness planning for emerging infectious disease threats. The core capacities developed through APSIED/IHR implementation provide a good foundation for managing emerging infectious diseases, including Ebola.

In conclusion, Dr Li stressed that health security threats often occur in unexpected ways, and the best approach is to invest in core capacities and system strengthening during so-called “peaceful” times. Collective actions and partnerships are key to success as no single country or partner alone can manage health security threats

Dr Vivian Lin, Director, Health Systems, presented an overview of health systems in the Western Pacific Region and WHO efforts to support the strengthening of health systems towards universal health coverage (UHC). She illustrated underlying health systems challenges and issues using examples from relevant programmatic areas, such as antimicrobial resistance and NCDs.

The concept and principles underlying UHC, which have been at the core of WHO work since the Organization's inception, were highlighted, including access to good-quality services, financial protection and equity. With support from WHO, various countries in resource-limited settings considers possible choices or set priorities and inevitable trade-offs among the three UHC dimensions – population, services and financial protection. Across the Region, countries are at different stages of the UHC journey. Strengthening of health systems, through health policy and financing, integrated people-centred services, essential medicines and technologies, and health information and innovation can help them advance in the journey.

Dr Lin also addressed cross-cutting issues for health systems and programmes, such as mainstreaming equity, gender and human rights, advocating for social determinants of health, and tackling vulnerable populations. Lastly, the role of collaborating centres in the advancement of UHC was discussed. She proposed the following as possible collaboration areas with health system team in the Region: comparative research, knowledge synthesis and communities of practice at the regional level; and technical assistance, programme reviews and training at the country level. She identified global normative standards and guidelines as possible areas for collaboration between the Region and WHO headquarters.

She concluded her presentation by highlighting the need for a whole-of-system approach – one that links programmes with appropriate financing, workforce development, information systems and accountability. She emphasized that UHC is not a goal but a journey in which each country has its own targets and priorities, and where collaborating centres can play a critical supporting role.

Dr Liu Yunguo, Director, Pacific Technical Support and WHO Representative in the South Pacific, discussed the Division of Pacific Technical Support which was established in 2010 to bring WHO's technical assistance closer to Pacific island countries and areas, and to respond to the specific needs in a more timely manner. He also presented major health challenges in the Pacific, which included frequent occurrences of communicable disease outbreaks. For example in 2014, many Pacific countries had outbreaks of Chikungunya, dengue fever, diarrhoea, influenza, measles and Zika virus. Likewise, NCDs are a significant and growing problem in the Pacific. At the same time, Pacific countries are vulnerable to natural disasters and the health impacts of climate change. In most Pacific countries, health systems are weak and fragile due in part to shortages of health workers, difficulties of communication and the high cost of service delivery. Dr Liu also discussed WHO priorities in supporting Pacific island countries and areas.

In conclusion, he proposed several areas in which collaborating centres can help Pacific island countries and areas achieve many of their public health goals, including human resource development such as online training, assisting in specialized analysis such as food composition and safety, helping sustain regional networks, providing support in carrying out health impact assessments, and supporting resource mobilization.

Discussion

Following the presentations by the directors of the technical divisions, the floor was opened for discussion, with 10 participants offering comments. Most of the participants touched issues of

strengthening WHO's partnership with collaborating centres. Others addressed cross-cutting technical issues, including human resource development, traditional medicine, mental health, collaboration between communicable disease and NCD programmes, an integrated approach under the theme of universal health coverage, and environmental health.

Dr Shin, Regional Director, in response, said that the forum is a concrete effort to foster networking among collaborating centres, with networking opportunities available during various parallel sessions on the agenda.

Dr Takeshi Kasai, Director of Programme Management, highlighted the issue of country-specific support. He emphasized that each country has its own needs depending on its specific context and these needs change rapidly over time. Hence, multisectoral collaboration and engagement are needed to effectively address country-specific needs.

2.3 Parallel Session 1: Feedback from WHO collaborating centres

Thirteen parallel group sessions with 13–15 participants each were conducted using a focus group discussion style led by trained facilitators to seek feedback from WHO collaborating centres about their current collaboration and ways to strengthen the partnerships.

The following guide questions were used to facilitate the discussion:

- What aspects of the current system are working to support successful collaboration?
- What aspects of the current system are not working or pose a hindrance to successful collaboration?
- How do we make the partnerships work?

A summary of the outcome of the parallel session is available in Annex 3.

2.4 Plenary Session 3: Practice of good collaboration

The objective of this session was to share good practices and success stories of effective collaboration for scaling up and wider adoption. Representatives from six pre-selected collaborating centres were invited to share their collaborative experiences.

Dr Lin, Director of Health Systems, moderated the session.

Presentations from selected collaborating centres

Dr Duckhyoung Lee from National Cancer Center (NCC Korea), Republic of Korea (WHO Collaborating Centre for Cancer Registration, Prevention and Early Detection) reported that NCC Korea has assisted Fiji, Macao SAR (China), Mongolia and Papua New Guinea in building their own cancer registries. This included technical consultations, on-site education and training, and follow-up technical collaboration. It also helped Fiji to establish a cancer therapy unit and improve the quality of cancer registration. Dr Lee also discussed leadership training courses for cancer control

(CanLEAD) and pledged to expand collaboration and support to Member States upon request of WHO by providing technical experts.

Ms Jennifer Luchavez of the Research Institute for Tropical Medicine (RITM), Philippines, which is a WHO Collaborating Centre for Malaria Diagnosis, presented the terms of reference of RITM as WHO collaborating centre, which included maintenance of specimen bank for testing, the evaluation of malaria rapid diagnostic tests (RTDs), and maintenance of a regional malaria blood film repository. RITM is collaborating at all the levels of WHO. At the global level, it is an active collaborator with the malaria RDT evaluation programme. This includes support for development of standard operating procedures and quality control panel preparation, as well as provision of lot-testing services for malaria-endemic countries. At the regional level, RITM is supporting the following: development and maintenance of a regional malaria slide bank, external competency assessments, national training, and proficiency testing. Other flagship activities at regional level include external quality assessment of malaria laboratories, expert microscopy services, and evaluation research on other malaria diagnostic tests. She also discussed that good practices of successful collaboration of RITM with WHO included regular communication with WHO and other sponsors and partners, harmonization of national, regional and global functions, and utilization of local expertise and experience. Finally, Ms Luchavez highlighted the impact of these collaborative activities, including substantial progress in setting up a quality-assurance system in the production and process of malaria RDTs, and increasing use of quality-assured RDTs among Member States. Additionally, the competency level of microscopists in the Region has improved with increasing use of diagnostics to reduce unnecessary treatments.

Dr Ken Takahashi, University of Occupational and Environmental Health (UOEH), Japan, which is a WHO Collaborating Centre for Occupational Health, presented UOEH's experience in supporting Viet Nam to ban the use of asbestos. WHO called on all countries in 2006 to eliminate asbestos-related diseases. The most efficient way to do this is to cease using asbestos. Contrary to this declaration, Viet Nam continues to use asbestos and is currently the seventh-largest consumer in the world in terms of per capita asbestos use. With this in mind, as well as in accordance with the terms of reference as a WHO collaborating centre, that UOEH has been engaged to offer expert advice and support to the Ministry of Health of Viet Nam upon request of the WHO country office in Viet Nam. The goal of the activity was to assist Viet Nam in moving towards a total asbestos ban. The specific activities requested were to: a) share relevant Japanese expertise and experiences; b) discuss tactics for pursuing policies; and c) produce evidence to support the activities. Thus, UOEH engaged in a wide range of activities, including dispatching Japanese experts to Viet Nam and hosting study tours to Japan, supporting technical seminars to raise awareness and formulate a roadmap towards a national asbestos ban, and engaging in joint inspections of asbestos factories in the country together with the Ministry of Health of Viet Nam.

Dr Takahashi noted that good practices in the collaboration with Viet Nam included carefully managed discussions and a coordination effort among WHO consultants, UOEH and the WHO country office. Whenever possible, the best available evidence was collated to support the activities. This included, for example, scientific publication of the National Asbestos Profile of Viet Nam, adhering to a WHO-recommended outline, published jointly by Ministry of Health staff and WHO consultants. Dr Takahashi reported that Viet Nam is considering action that eventually would lead to a total asbestos ban. Furthermore, an Occupational Health Law is undergoing revision which, when completed, may assist in the imposition of an asbestos ban. He concluded his presentation with a renewed commitment to continue supporting and collaborating in this important endeavour.

Dr Philip Wakem, Pacific Paramedical Training Centre (PPTC), New Zealand, which is a WHO Collaborating Centre for External Quality Assessment in Health Laboratory Services, discussed the centre and its long history of collaboration with WHO. PPTC was established in 1980 primarily to provide training and assistance in the medical laboratory sciences, including developmental assistance for clinical laboratories and blood transfusion services to Pacific island countries and to countries in South-East Asia. It has been supported by the New Zealand Government through the New Zealand Aid Programme, the New Zealand Institute of Medical Laboratory Sciences, New Zealand Red Cross, the New Zealand Blood Service, and the University of Otago School of Medicine and Health Sciences. It was designated as WHO collaborating centre in 1990 and has been collaborating with WHO in providing technical services in the area of external quality-assurance programmes, teaching courses in the medical laboratory sciences and information resource sharing in clinical management and areas of policy development.

Dr Wakem noted that the Pacific region and its associated health systems have always presented a challenging environment, and PPTC's contribution has had to grapple with factors beyond its control. Still, the quality of medical laboratory diagnostic services in the Pacific island countries and areas has been improving at a steady rate.

He also noted that an important aspect of good practice is effective communication with developmental partners in the monitoring of laboratory performance and seeking resolutions to any problems that may compromise progress. Other factors he mentioned were continuous communication with clinicians and ministry officials in the Pacific, ongoing evaluation and country motivational support throughout the process, and provision of continuous laboratory education and training through various modalities including New Zealand-based training, in-country training and distance learning, specifically with the Pacific Open Learning Health Net (POLHN).

Dr Wakem concluded his remarks by emphasizing that it is essential to acknowledge the vital importance of quality laboratory services and to commit necessary support to ministries of health in the Pacific to achieve the desired impact and results.

Dr Wang Dayan Chinese Center for Disease Control and Prevention (China CDC), which is a WHO Collaborating Centre for Reference and Research on Influenza, presented the history of collaboration between China CDC and WHO, as well as the factors related to successful collaboration. The Chinese National Influenza Center was established in 1957. The national influenza surveillance network in China now includes 554 sentinel hospitals and 408 network laboratories. It was designated as WHO collaborating centre on 28 October 2010. Globally, it is part of the Global Influenza Surveillance and Response System (GISRS), an international network of influenza laboratories coordinated by WHO. As a collaborating centre, China CDC provides training, detection kits, viruses, and sequence and surveillance data to other countries, especially those in the Western Pacific Region. The work of the collaborating centre contributed to global risk assessment, response and vaccine development.

Dr Wang also summarized factors related to successful collaboration on influenza as the following: establishment of clear objectives for collaboration, organization of regular meetings to review past achievements and set future directions, transparent and well-defined communication mechanisms, regular monitoring of performance, shared interests among members, the long-standing working relationship between WHO and GISRS, and assurance of adequate resources, particularly financial resources. Finally, she emphasized that building capacity of the influenza surveillance and response system globally will also contribute to the response to other respiratory diseases.

Dr Jacqui Webster, George Institute for Global Health, Australia, a WHO Collaborating Centre on Population Salt Reduction, shared its experience and success factors of strong collaboration on the salt reduction programme in Mongolia. The George Institute has been collaborating with the WHO on salt reduction since 2010. Its Food Policy Division was designated as a WHO collaborating centre in March 2013. The remit of the centre is to support Member States towards achieving the new global NCD control target of a 30% relative reduction in the mean population intake of salt by 2025. The centre has a global responsibility, with a specific focus on the Asia Pacific region and is currently involved in projects in Australia, Cambodia, China, India, Mongolia, the Pacific islands and Viet Nam. It is working with WHO to develop a range of tools and resources to support countries to develop and implement salt reduction strategies and is coordinating the Asia Pacific Salt Action Network (APSAN).

Dr Webster cited the salt reduction programme in Mongolia as an example of successful country support collaboration. In May 2011, the George Institute was invited by the Ministry of Health of Mongolia to facilitate the development of a salt reduction strategy in Mongolia. The specific terms of reference were to: a) conduct a feasibility study on the implementation of a pilot salt reduction strategy in Ulaanbaatar; b) support the research design of the pilot project; c) conduct training for the baseline assessment of salt intake; and d) develop an action plan for the implementation of the pilot project.

The mission took place over 10 days in Ulaanbaatar and involved bilateral meetings with key stakeholders, factory visits and a public consultation on the proposals for action. The mission was successful in terms of both short- and long-term outcomes. Following a visit to its main factory, where examples of international targets for salt in bread were discussed, the Talkh-Chikher Bakery attended the public consultation meeting and announced that it would reduce salt in its bread by 12%. The new loaves were on the shelves in the next few days, with immediate public health benefits for the people of Mongolia. Other companies in Mongolia have since started to do the same. The Pinch Salt Pilot project took place in Ulaanbaatar over the next few years and successfully reduced average salt intake through a combination of interventions in the workplace, public education and food industry action to reduce salt in key products. Discussions are currently under way about rolling out the project nationally.

She noted that the success of the mission was based on broad stakeholder engagement in the project from the outset. A technically competent local multi-stakeholder salt reduction task force was established prior to the consultation and was involved throughout the planning, training, implementation and evaluation of the pilot project. The George Institute's salt reduction training and facilitation was informed by an international review of good practices on salt reduction and effective training materials and resources that had been developed in collaboration with WHO. Most importantly, there was money to support the implementation and evaluation of the pilot programme, as well as commitment and support from the WHO country office in Mongolia. More and more countries are now developing strategies to reduce salt, and the programme in Mongolia provides an excellent good practice example that other countries can learn from.

Discussion

Dr Lin, Director of Health Systems, moderated the discussion. She asked the presenters how the institutional relationship was built and strengthened between their collaborating centres and WHO –

considering frequent changes and turnover of directors and responsible officers. In response, the following were highlighted by the presenters as important to maintain collaborative partnership:

- good personal relationships among directors and WHO staff;
- setting of common goals and objectives and ensuring mutual respect;
- having regular meetings between WHO country office staff and collaborating centres, and also among various WHO collaborating centres;
- clear terms of reference for the collaborating centres;
- clear agreement between regional and global priorities; and
- annual work plans agreed among the collaborating centres, WHO headquarters and the Regional Office.

Dr Lin then asked Dr Wang about China CDC's journey to become a WHO collaborating centre and its experience in building the capacities of institutions in developing countries. Dr Wang explained that China CDC went through two evaluations by WHO before being designated as a collaborating centre. She added that China CDC wanted to improve the quality of its contributions to other countries and the designation as a collaborating centre was a win-win situation.

Considering limited resources, Dr Lin asked the presenters how their collaborating centres or WHO could mobilize resources for collaborative activities. Key discussion points were:

- piggybacking on institutional resources from government in situations where there are similar objectives and collaborative activities;
- internal advocacy to mobilize in-country funds and explore multiple avenues; and
- the encouragement of joint funding by collaborating centres and WHO.

Dr Lin recapped the key discussion points and concluded the session.

2.5 Parallel Session 2, 3 and 4: Technical sessions for WHO collaborating centres

Three sessions, each lasting one and a half hours, were allocated to parallel technical sessions. The key overall objective of the parallel technical sessions was to identify innovative opportunities to strengthen and enhance partnerships based on factors that constitute good collaboration. Participants were divided, based on technical areas of work of the collaborating centres, into 10 broad groups for Parallel Session 2 and then were further subdivided into 20 groups for Parallel Sessions 3 and 4.

Discussions and recommendations from these parallel sessions were consolidated and presented during Plenary Session 4. Innovative collaborative opportunities in coming years based on expertise and resources of WHO collaborating centres and programmatic needs of WHO were highlighted. Detailed reports from each of the sessions are available in Annex 3.

2.6 Poster Sessions

A total of five poster sessions were organized during the forum to understand better the technical expertise and resources of WHO collaborating centres relevant to the current and future collaboration with WHO and their way of operating.

The posters were expected to:

- reflect on the terms of reference of their WHO collaborating centre;
- describe key technical expertise, resources, networks and the work of the institution designated as WHO collaborating centre that may be of relevance to current and future collaboration with WHO; and
- highlight key results and achievements from ongoing collaboration with WHO.

Accordingly, each participating WHO collaborating centre was invited to submit one poster entry for these sessions. In all, a total of 122 posters/institutions were presented in the five poster sessions. The electronic copies of the posters are available via the forum website

http://www.wpro.who.int/whocc_forum/agenda/en/). The full list of posters presented can be seen in Annex 4.

2.7 Lunchtime seminar: Overview on policies and procedures of WHO collaborating centres

Lunchtime seminars were organized to provide an overview of the policies and procedures of WHO collaborating centres on both days of the forum. Dr Manju Rani, Regional Focal Point for WHO Collaborating Centres, gave a presentation and all participants were invited to attend the seminar on either day of the forum.

2.8 Plenary Session 4 and the closing session: synthesis and recommendations

A synthesis of the discussions and key messages emerging from previous plenary sessions and parallel sessions was presented during Plenary Session 4. At the end of the forum, an outcome statement reflecting the discussions of the forum was adopted. The key conclusions and the outcome statement are presented in the next section.

In his closing remarks, Dr Shin, Regional Director, emphasized the importance of active collaborative partnerships between WHO and collaborating centres in achieving WHO's public health mandate at the country, regional and global levels. He acknowledged the sense of enthusiasm shown by the participants to work with WHO. Dr Shin said he will report the outcome of the two-day meeting to the Global Policy Group of WHO, which includes as members the WHO Director-General and the six Regional Directors. He also made a commitment to see that the WHO Secretariat does its very best to ensure that the outcomes of the forum will be implemented.

Dr Shin thanked the WHO Secretariat team that helped make the forum a success, including technical and administrative staff and those who provided logistical support. He concluded by thanking the participants and wished them a safe trip back home.

3. CONCLUSIONS AND RECOMMENDATIONS

Overall, the First Regional Forum of WHO Collaborating Centres in the Western Pacific was a constructive and forward-looking dialogue for mobilizing strategic partnerships between WHO and WHO collaborating centres, with an emphasis on improving the impact and outcome at the country level. Key discussion points during the forum included:

- **Enhanced information sharing between WHO and collaborating centres and among the various collaborating centres.** Key strategies include:
 - promoting clear understanding of the nature of the partnership and roles of WHO and the collaborating centres;
 - establishing a system for regular updating of collaborating centres on WHO policies, plans and programmes (e.g. regular visits to collaborating centres, inviting representatives from collaborating centres to the annual meeting of the Regional Committee for the Western Pacific);
 - WHO proactively proposing, facilitating and maintaining coordination across multiple collaborating centres for activities that require contributions from more than one collaborating centre;
 - information sharing among collaborating centres by facilitating mini-networks for sharing of resources, research collaboration and other joint activities (e.g. through social media, newsletters, listserves and websites); and
 - providing opportunities for new collaborating centres to learn from experienced collaborating centres.
- **Prioritization of activities and resources of WHO and collaborating centres.** Key strategies include:
 - match institution expertise, resources and work plan with WHO priorities;
 - prioritize based on resources and institutional constraints of both WHO and collaborating centres;
 - coordinate priorities across different levels of WHO; and
 - regularly assess and evaluate collaborative priorities.
- **Funding for collaborative activities.** Key strategies include:
 - catalytic funding to ensure functional viability though the designation period and also to strengthen the collaborating centre partnership; and
 - undertake joint planning and fundraising.
- **Intensified country support by WHO collaborating centres.** Key strategies include:
 - WHO providing information on specific country needs and defined expected outputs in selected countries; and
 - developing capacity and instituting mentoring programmes in specific countries on priority areas, building on existing relationships among countries, WHO and collaborating centres.

An outcome statement reflecting the discussions of the forum was adopted jointly by WHO collaborating centres participants and WHO Secretariat.

OUTCOME STATEMENT OF THE FIRST REGIONAL FORUM OF WHO COLLABORATING CENTRES IN WESTERN PACIFIC

We, the representatives of the WHO collaborating centres in Western Pacific Region and the WHO Secretariat, participating in the First Regional Forum of WHO Collaborating Centres in the Western Pacific, organized in Manila in November 2014,

Believe that:

The increasingly complex and dynamic global public health landscape requires strategic partnerships and collective efforts.

Acknowledge that:

WHO collaborating centres are a valuable asset and contribute to the work of WHO in a wide range of technical areas with meaningful engagement among stakeholders and the exchange of information and knowledge.

Recognize that:

WHO technical cooperation priorities must address the changing needs of Member States both at the regional (Western Pacific Region) and global levels, in order to maximize the value of the Organization's support.

The changing nature of WHO technical cooperation priorities should be reflected in the profile of WHO collaborating centres.

Are convinced that:

Partnership between WHO and collaborating centres, as well as among WHO collaborating centres, can be strengthened to improve outcomes and impact at the country level.

Agree:

1. To share and use good practices in collaborative partnerships, including enhanced communication, consultative planning of work and strategic resource mobilization to improve outcomes.
 - a. That WHO will inform collaborating centres about areas requiring support, including the resources required, and the methods of implementation will be the responsibility of collaborating centres upon approval from WHO.
 - b. That the work plan for the initial designation and renewal of collaborating centres should be aligned with WHO technical cooperation priorities – as well as the abilities, resources and expertise of the collaborating centres – which may change over time.
2. To step up efforts to regularly monitor the implementation of activities and assess the impact.
3. To promote the recognition of WHO collaboration centres among all Member States.
4. To convene the next Regional Forum of WHO Collaborating Centres in the Western Pacific in 2016 to review progress and provide direction for the future.

ANNEXES

ANNEX 1

MEETING AGENDA AND DETAILED PROGRAMME

The objectives of the Forum:

1. To provide an overview of WHO current priorities and future initiatives;
2. To share good practices and success stories of effective collaboration for scaling-up and wider adoption; and
3. To identify innovative opportunities and means for strengthening and enhancing partnerships between WHO collaborating centres and WHO.

Day 0 (Wednesday, 12 November 2014)		
17:00 – 19:30	Reception hosted by the Director, Programme Management	Cafeteria
Day 1 (Thursday, 13 November 2014)		
07:30 – 08:30	Registration	Conference Hall Foyer
08:30 – 09:00	Opening Session	Conference Hall
09:00 – 09:30	Plenary Session 1: Keynote speech by the Regional Director	
09:30 – 10:00	Group photo	Lawn
10:00 – 10:45	Morning tea break	Cafeteria
	Poster Session 1	Conference Hall Lounges
10:45 – 12:15	Plenary Session 2: WHO current priorities and future initiatives	Conference Hall
12:15 – 13:30	Lunch break	Cafeteria
12:45 – 13:30	Lunch time seminar: Policies and procedures of WHO Collaborating Centres system	Conference Hall
	Poster Session 2	Conference Hall Lounges and Foyer
13:30 – 15:00	Parallel Session 1: Feedback from WHO CCs	Meeting rooms
15:00 – 15:45	Afternoon tea break	Cafeteria
	Poster Session 3	Conference Hall Lounges
15:45 – 17:15	Parallel Session 2: Technical session for WHO CCs	Meeting rooms
17:15 – 18:00	Transport for RD's Reception	
18:00 – 20:00	Reception and dinner hosted by the Regional Director	Manila Hotel
Day 2 (Friday, 14 November 2014)		
08:30 – 10:00	Plenary Session 3: "Practice of good collaboration"	Conference Hall
10:00 – 10:45	Morning tea break	Cafeteria
	Poster Session 4	Conference Hall Lounges
10:45 – 12:15	Parallel Session 3: Technical session for WHO CCs	Meeting
12:15 – 13:30	Lunch break	Cafeteria
12:45 – 13:30	Lunch time seminar: Policies and procedures of WHO Collaborating Centres system	Conference Hall
	Poster Session 5	Conference Hall Lounges and Foyer
13:30 – 15:00	Parallel Session 4: Technical session for WHO CCs	Meeting rooms
15:00 – 15:45	Afternoon tea break	Cafeteria
15:45 – 16:30	Plenary Session 4: "Synthesis and recommendations"	Conference Hall
16:30 – 17:00	Closing Session	

Details of Activities Day 1: Thursday, 13 November 2014											
Time											
08:30	Opening Session at the Conference Hall Dr Shin Young-soo – WHO Regional Director for the Western Pacific Dr Takeshi Kasai – Director, Programme Management										
09:00	Plenary Session 1 at the Conference Hall Key Note Speech by Dr Shin Young-soo – WHO Regional Director for the Western Pacific *Working together in addressing health challenges*										
09:30	Group Photo at the WHO Lawn										
10:00	Morning tea break	Poster Session 1									
	Cafeteria	Upper Lounge				Lower Lounge					
		Theme: Communicable Diseases				Theme: Emerging diseases and food safety					
10:45	Plenary Session 2 at the Conference Hall WHO current priorities and future initiatives: 1. Dr Mark Jacobs, Director, Communicable Disease 2. Dr Susan Mercado, Director, NCD and Health through the Life-Course 3. Dr Li Allan, Director, Health Security and Emergencies 4. Dr Vivian Lin, Director, Health Systems 5. Dr Liu Yunguo, Director, Pacific technical Support										
	Lunch break	Poster Session 2									
	Cafeteria	Seminar		Upper Lounge		Lower Lounge		Conference Hall Foyer			
		Conference Hall		Theme: Health promotion		Theme: Noncommunicable diseases		Theme: Mental Health and substance abuse			
13:30	Parallel Session 1 Feedback Session from WHO CCS										
	Committee Rm A Lead: Cornelia Henning	Committee Rm B Lead: Radhinda Abeyasinghe	Cafeteria Function Rm Lead: Pengfei Zhao	Rm: 208-E Lead: Sonia McCarthy	Rm: 210-A Lead: Andreas Mueller	Rm: 210-B Lead: Pauline Klenitz	Rm: 212 Lead: James Rankin	Rm: 313-5 Lead: Karin Engelhardt	Rm: 314-I Lead: Kevin Khaw	Rm: 321 Lead: Jang Hyun Bae	Rm: 403 Lead: Francisca Konings
15:00	Afternoon tea break										
	Cafeteria	Upper Lounge				Poster Session 3					
		Theme: Essential medicine, health technology and integrated health services				Lower Lounge					
15:45	Parallel Session 2 Technical Session for WHO CCS										
	Rm: 421 A. Communicable disease	Rm: 314-I B. NCD, health promotion and ageing	Rm: 313-5 C. Mental health and substance abuse	Rm: 402 D. Disability, rehabilitation and blindness prevention	Rm: 208-E E. Reproductive, maternal, neonatal, child and adolescent health	Rm: 210-A F. Environmental health	Rm: 210-B G. Occupational health	Conference Hall H. Health Systems		Rm: 403 I. International Health Regulations, Emerging disease and food safety	Rm: 221 (Library meeting room) J. Library and publication
17:15	Transport to the Regional Director's Reception										
18:00	Reception and dinner hosted by the Regional Director at the Manila Hotel										

Time	Details of Activities Day 2: Friday, 14 November 2014									
08:30	Plenary Session 3 at the Conference Hall Theme: "Practice of Good Collaboration" Speakers: 1. Dr Lee Duckyoung – WHO CC for Cancer Registration, Prevention and Early Detection, National Cancer Center, Republic of Korea 2. Dr Socorro Lupisan – WHO CC for Malaria Diagnosis, Research Institute for Tropical Medicine, Philippines 3. Dr Ken Takahashi – WHO CC for Occupational Health, University of Occupational and Environmental Health, Japan 4. Dr Philip Wakem – WHO CC for External Quality Assessment in Health Laboratory Services, Wellington Hospital, New Zealand 5. Dr Wang Dayan – WHO CC for Reference and Research on Influenza, Chinese Center for Disease Control and Prevention, China 6. Dr Jacqui Webster – WHO CC on Population Salt Reduction, The George Institute for Global Health, Australia Morning tea break Cafeteria									
10:00	Poster Session 4 Upper Lounge Theme: Traditional Medicine Lower Lounge Theme: Human Resources for Health									
10:45	Parallel Session 3 at the Meeting Rooms Theme: "Practice of Good Examples" Rm: 421 A1. HIV, AIDS and sexually transmitted infections Rm: 409-D A2. Tuberculosis Rm: 210-A F. Environmental Health Cafeteria Function Rm A3. Malaria, other vectorborne disease and NTDs Committee Rm A H1. Essential Medicine and health technology Rm: 210-B G. Occupational health Rm: 314-I B1. Health promotion and tobacco free initiative Committee Rm-B H2. Health information and e-Health Rm: 212 H3. Integrated service delivery Rm: 408-K H4. Health research Rm: 321 H5. Human Resources for Health Rm: 408-J H6. Traditional medicine Rm: 404 B4. Ageing Rm: 313-S C. Mental health and substance abuse Rm: 402 D. Disability, rehabilitation & blindness prevention Rm: 208-E E. Reproductive, maternal, neonatal, child & adolescent health Library mtg room J. Library and publication L. International Health Regulations: Emerging disease and food safety									
12:15	Lunch break Cafeteria Seminar Conference Hall Theme: Overview on policies and procedures related to WHO collaborating centres Upper Lounge Theme: Occupational Health Lower Lounge Theme: Environmental Health Conference Hall Foyer Theme: Reproductive, maternal, newborn, child and adolescent health									
13:30	Parallel Session 4 WHO CCs technical discussion Rm: 421 A1. HIV, AIDS and sexually transmitted infections Rm: 409-D A2. tuberculosis Rm: 210-A F. Environmental health Rm: 208-E E. Reproductive, maternal, neonatal, child and adolescent health Cafeteria Function Rm A3. Malaria, other vectorborne disease and NTDs Committee Rm A H1. Essential Medicine and health technology Rm: 210-B G. Occupational health Rm: 314-I B1. Health promotion and tobacco free initiative Committee Rms A&B H1-H4. Health systems Rm: 314-H B2. Healthy diet and oral health Rm: 321 H5. Human resources for health Rm: 408-J H6. Traditional medicine Rm: 404 B4. Ageing Rm: 313-S C. Mental health and substance abuse Rm: 402 D. Disability, rehabilitation & blindness prevention Library mtg room J. Library and publication L. International Health Regulations: Emerging disease and food safety									
15:00	Afternoon tea break									
15:45	Plenary Session 4 at the Conference Hall Theme: "Synthesis and Recommendation"									
16:30	Closing Session at the Conference Hall									

LIST OF PARTICIPANTS

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
AUS-38	Food Standards Australia New Zealand	WHO Collaborating Centre for Food Contamination Monitoring	Dr Scott Crerar Director <i>(joined via videoconference)</i>
AUS-42	Therapeutic Goods Administration	WHO Collaborating Centre for the Quality Assurance of Vaccines and Other Biologicals	Dr Lisa Kerr Director (also representing AUS-47) <i>(joined via videoconference)</i>
AUS-45	St Vincent's Institute of Medical Research	WHO Collaborating Centre for Diagnostics and Laboratory Support for HIV/AIDS and Other Blood-borne Infections	Ms Susan Best Director
AUS-47	Therapeutic Goods Administration	WHO Collaborating Centre for Drug Quality Assurance	Dr Lisa Kerr <i>(joined via videoconference)</i>
AUS-59	Royal Victorian Eye and Ear Hospital	WHO Collaborating Centre for the Prevention of Blindness	Dr Robert Finger Principal Investigator Population Health
AUS-61	University of Melbourne	WHO Collaborating Centre for Women's Health	Dr Cathy Vaughan Lecturer
AUS-63	Curtin University	WHO Collaborating Centre for the Prevention of Alcohol and Drug Abuse	Dr Steve Allsop Professor and Director
AUS-68	James Cook University Australia	WHO Collaborating Centre for the Control of Lymphatic Filariasis, Soil-transmitted Helminths and other Neglected Tropical Diseases	Dr Patricia Graves Director
AUS-69	University of Newcastle	WHO Collaborating Centre for Pharmaco-economics & Rational Pharmacotherapy	Dr David Newby Associate Professor

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
AUS-75	St Vincent's Hospital	WHO Collaborating Centre for Research and Training in Mental Health	Professor Helen Herrman Head A/Prof Iraklis Minas Head, Global and Cultural Mental Health Unit
AUS-77	University of Western Australia	WHO Collaborating Centre for Research, Training and Consultative Work on Mental Health	Dr Aleksandar Janca Professor of Psychiatry and Director of WHOCC in Perth
AUS-78	Curtin University	WHO Collaborating Centre for Environmental Health Impact Assessment	Dr Helen Brown Director Health Safety and Environment
AUS-80	Deakin University	WHO Collaborating Centre for Obesity Prevention	Dr Colin Bell Associate Professor
AUS-87	University of Melbourne	WHO Collaborating Centre for Research and Training in Child and Neonatal Health	Dr Shidan Tosif Paediatrician Ms Jane Hawtin Senior Communications Officer
AUS-89	Albion Street Centre	WHO Collaborating Centre for Capacity Building and Health Care Worker Training in HIV/AIDS Care, Treatment and Support	Dr Julian Gold Director
AUS-92	University of New South Wales	WHO Collaborating Centre on eHealth	Dr Pradeep Ray Director
AUS-93	University of Technology, Sydney	WHO Collaborating Centre for Nursing, Midwifery and Health Development	Ms Michele Rumsey Director of Operations and Development
AUS-94	University of Newcastle	WHO Collaborating Centre for International Longitudinal Studies on Gender, Ageing and Health	Dr John Hall Associate Professor of Public Health
AUS-95	Victorian Infectious Diseases Reference Laboratory	WHO Collaborating Centre for Mycobacterium Ulcerans	Professor Paul Johnson Director

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
AUS-98	James Cook University Australia	WHO Collaborating Centre for Nursing and Midwifery Education and Research Capacity-Building	Dr Caryn Patrice West Senior Lecturer & Deputy Director Professor Lee Stewart Professor & Dean of the College of Healthcare Sciences
AUS-101	Queensland University of Technology	WHO Collaborating Centre on Air Quality and Health	Dr Lidia Morawska Director of ILAQH and Professor of CPME
AUS-106	La Trobe University	Collaborating Centre for Occupational Health	Dr Wendy Macdonald Adjunct Professor
AUS-107	University of Sydney	WHO Collaborating Centre for Physical Activity, Nutrition and Obesity	Dr Stephen Colagiuri Professor of Metabolic Health
AUS-109	Flinders University	WHO Collaborating Centre for Mass Gatherings and High Visibility/High Consequence Events	Dr Malinda Steenkamp Post-Doctoral Research Fellow
AUS-110	The George Institute for Global Health	WHO Collaborating Centre on Population Salt Reduction	Dr Jacqui Webster Director
AUS-111	Queensland Children's Medical Research Institute, University of Queensland	WHO Collaborating Centre for Children's Health and the Environment	Dr Peter Sly Deputy Director Dr Paul Jagals Senior Lecturer
AUS-114	University of Queensland	WHO Collaborating Centre for Health Information Systems	Dr Charles Gilks Head, School of Population Health
AUS-115	Baker IDI Heart and Diabetes Institute	WHO Collaborating Centre for Research and Training in Cardiovascular Diseases	Professor Garry Jennings Director
AUS-116	Monash University	WHO Collaborating Centre for Bioethics	Dr Michael J. Selgelid Professor and Director of Centre for Human Bioethics Dr Justin Oakley Deputy Director, Centre for Human Bioethics

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
AUS-117	Victorian Health Promotion Foundation	WHO Collaborating Centre for Excellence in Health Promotion	Ms Susan McGill Acting Lead, Policy Development Office
CHN-6	Chinese Center for Diseases Control and Prevention (China CDC)	WHO Collaborating Centre for Malaria, Schistosomiasis and Filariasis	Dr Yayi Guan Chief, Department of International Cooperation, National Institute of Parasitic Diseases, China CDC
CHN-19	National Institute for Food and Drug Control	WHO Collaborating Centre for Drug Quality Assurance	Mr Ma Xiao <i>(joined via videoconference)</i>
CHN-24	China National Center for Food Safety Risk Assessment	WHO Collaborating Centre for Food Contamination Monitoring	Dr Xiaowei Li Director Associate <i>(joined via videoconference)</i>
CHN-28	Beijing Neurosurgical Institute	WHO Collaborating Centre for Research and Training in Neurosciences	Dr Wenzhi Wang Director of National Office for CVD Prevention and Control
CHN-33	Shanghai University of Traditional Chinese Medicine	WHO Collaborating Centre for Traditional Medicine	Dr Jianrong Shi Vice-President Mr Guangdong Wang Deputy Director of Research Management Office
CHN-34	Institute of Chinese Materia Medica, China Academy of Chinese Medical Sciences	WHO Collaborating Centre for Traditional Medicine	Ms Wulumujiafu Coordinator
CHN-47	Nanjing Child Mental Health Research Centre	WHO Collaborating Centre for Research and Training in Child Mental Health	Dr Xiaoyan Ke Director
CHN-50	Sun Yat-Sen University of Medical Sciences	WHO Collaborating Centre for Rehabilitation	Dr Dong Feng Huang Chair, Department of Rehabilitation Medicine

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
CHN-52	Capital Institute of Paediatrics	WHO Collaborating Centre for Child Health	Dr Yaohua Dai Professor <i>(joined via videoconference)</i>
CHN-56	Chengdu University of Traditional Chinese Medicine	WHO Collaborating Centre for Research in Human Reproduction	Dr Xiaozhang Liu Director Dr Hua Lu Director Ms Hanbing Wang Program Officer
CHN-58	Hunan Institute of Parasitic Diseases	WHO Collaborating Centre on Schistosomiasis Control in Lake Regions	Dr Xun-ya Hou Head of Department of Education Program and Grant Application/ Professor
CHN-62	Institute of Medical Information	WHO Collaborating Centre for Health and Biomedical Information	Ms Xiaoxi Liu Chief of General Office
CHN-63	National Research Institute for Family Planning	WHO Collaborating Centre for Research in Human Reproduction	Dr Yiqun Gu Professor/Deputy Director Dr Qing Liu Associate Professor/Chief of Division of Science and Technology
CHN-65	Peking University	WHO Collaborating Centre for Research in Reproductive Health and Population Science	Dr Lihua Pang Director Assistant <i>(joined via videoconference)</i>
CHN-71	Central South University	WHO Collaborating Centre for Psychosocial Factors, Substance Abuse and Health	Dr Xiao Xiang Associate Professor
CHN-75	Institute of Dermatology, Chinese Academy of Medical Sciences and Peking Union Medical College	WHO Collaborating Centre for the Prevention and Control of Sexually Transmitted Infections	Mr Xiangsheng Chen Deputy Director

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
CHN-76	Second Military Medical University	WHO Collaborating Centre for Gene Synthesis and Expression	Dr Weiqing Pan Director, Department of Tropical Infectious Diseases
CHN-79	Beijing Hui Long Guan Hospital	WHO Collaborating Centre for Research and Training in Suicide Prevention	Dr Xianyun Li Vice Director Dr Yongsheng Tong
CHN-83	The Hong Kong Society for Rehabilitation	WHO Collaborating Centre for Rehabilitation	Dr Kin Mak Advisor Ms Shuk Lau Senior Manager Ms Sheila Purves Consultant
CHN-86	Fudan University	WHO Collaborating Centre for Health Technology Assessment and Management	Professor Jie Chen Director <i>(joined via videoconference)</i>
CHN-89	The Hong Kong Polytechnic University	WHO Collaborating Centre for Community Health Services	Dr Alex Molasiotis Director Dr Regina Lee Deputy Director Ms Cherry Au Communications Manager
CHN-91	Food and Environmental Hygiene Department	WHO Collaborating Centre for Risk Analysis of Chemicals in Food	Dr Yuk-yin Ho Consultant (Community Medicine) Risk Assessment and Communication Ms Wai-king Wong Scientific Officer
CHN-93	Peking Union Medical College	WHO Collaborating Centre for Nursing Policy-Making and Quality Management	Dr Huaping Liu Dean of School of Nursing
CHN-95	Shanghai Cancer Institute	WHO Collaborating Centre for Cancer Prevention and Control	Dr Yu-Tang Gao Professor, Chief, Department of Epidemiology

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
CHN-104	Chinese Center for Disease Control and Prevention (China CDC)	WHO Collaborating Centre for Reference and Research on Influenza	Dr Dayan Wang Deputy Director
CHN-109	Shandong University	WHO Collaborating Centre for nursing care for vulnerable groups, including those impacted by disasters	Dr Yuli Zang Professor, Deputy Dean, Executive Director of WHOCC
CHN-110	Peking University Institute of Mental Health	WHO Collaborating Centre for Research and Training in Mental Health	Dr Hong Ma Director of Department of Public Mental Health
CHN-112	Ministry of Health of the People's Republic of China	WHO Collaborating Centre for Health Information and Informatics	Ms Xu Ling Director <i>(joined via videoconference)</i>
CHN-113	Department of Health, Hong Kong (SAR)	WHO Collaborating Centre for Smoking Cessation and Treatment of Tobacco Dependence	Dr Chiu-sing Lo Senior Medical Officer
CHN-114	National Institute for Communicable Disease Control and Prevention, Chinese Centre for Disease Control and Prevention (China CDC)	WHO Collaborating Centre for Vector Surveillance and Management	Mr Qiyong Liu Professor/Director
CHN-115	Department of Health, Hong Kong (SAR)	WHO Collaborating Centre for Traditional Medicine	Dr Kwok Hung Chan Senior Medical & Health Officer (Traditional Chinese Medicine)
JPN-22	National Institute of Infectious Diseases	WHO Collaborating Centre for Virus Reference and Research (Enteroviruses)	Dr Hiroyuki Shimizu Director of Department of Virology II
JPN-32	Radiation Effects Research Foundation	WHO Collaborating Centre for Research on Radiation Effects on Humans	Dr Hiroaki Katayama Chief of the Information Technology Department

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
JPN-34	Juntendo University	WHO Collaborating Centre for Prevention of Blindness	Dr Koichi Ono Associate Professor Dr Toshimitsu Kasuga, Research Associate
JPN-38	Research Institute of Tuberculosis	WHO Collaborating Centre for Reference, Research and Training on Tuberculosis	Dr Akiko Takaki Chief, Bacteriology Division
JPN-45	National Centre for Global Health and Medicine	WHO Collaborating Centre for Health Systems Research	Dr Utsunomiya Osamu Director-General Dr Nakasa Tamotsu Director, Technical Cooperation Center, Bureau of International Medical Cooperation Dr Murakami Hitoshi Senior Advisor, Bureau of International Medical Cooperation
JPN-46	Kitasato University	WHO Collaborating Centre for Traditional Medicine	Dr Hiroshi Odaguchi Vice-Director General
JPN-49	National Institute for Minamata Disease	WHO Collaborating Centre for Studies on the Health Effects of Mercury Compounds	Dr Hiroshi Noda Director General
JPN-50	National Institute of Public Health	WHO Collaborating Centre for Healthcare Facility Planning and Service Delivery	Dr Tomofumi Sone Director for Planning and Coordination
JPN-51	National Institute of Public Health	WHO Collaborating Centre for Community Water Supply and Sanitation	Dr Masaki Sagehashi Senior Researcher
JPN-53	University of Occupational & Environmental Health	WHO Collaborating Centre for Occupational Health	Dr Ken Takahashi Professor
JPN-54	University of Toyama	WHO Collaborating Centre for Traditional Medicine	Dr Yutaka Shimada Professor Dr Makoto Fujimoto Associate Professor

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
JPN-56	Kyoto Medical Center, National Hospital Organization	WHO Collaborating Centre for Diabetes Treatment and Education	Dr Shigeo Kono Director
JPN-57	Kurihama Medical and Addiction Center, National Hospital Organization	WHO Collaborating Centre for Research and Training on Alcohol-Related Problems	Dr Mitsuru Kimura, Director Division of Psychiatry Dr Sachio Matsushita Deputy Director
JPN-58	St. Luke's College of Nursing	WHO Collaborating Centre for Nursing Development in Primary Health Care	Dr Naoko Arimori Director of PCC Research Center Dr Junko Tashiro Professor Dr Yoko Shimpuku Assistant Professor
JPN-61	Osaka Medical Centre & Research Institute for Maternal & Child Health	WHO Collaborating Centre for Maternal and Child Health	Dr Takuyo Sato Director of Osaka Maternal and Child Health Information Center
JPN-64	National Institute of Infectious Diseases	WHO Collaborating Centre for Reference and Research on Influenza	Dr Masato Tashiro Former Director (Honorary Member)
JPN-67	Nagasaki University	WHO Collaborating Centre for Reference and Research on Tropical and Emerging Virus Diseases	Dr Kouichi Morita Professor
JPN-68	Nagasaki University School of Medicine	WHO Collaborating Centre for Research on Radiation-Induced Thyroid Diseases and Surgical Treatment of Radiation Injuries	Dr Noboru Takamura Professor
JPN-70	National Rehabilitation Centre for Persons with Disabilities	WHO Collaborating Centre for Disability Prevention and Rehabilitation	Dr Yayoi Kitamura Section Chief, Social Support Systems Section, Dept. of Social Rehabilitation, Research Institute
JPN-73	Tokyo Medical & Dental University	WHO Collaborating Centre for Healthy Cities and Urban Policy Research	Dr Keiko Nakamura Head of International Health

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
JPN-75	Niigata University Graduate School of Medical and Dental Sciences	WHO Collaborating Centre for Translation of Oral Health Science	Dr Hideo Miyazaki Professor/ Director Dr Misuzu Sato Dentist/ Assistant
JPN-76	National Institute of Occupational Safety and Health	WHO Collaborating Centre for Occupational Health	Dr Yasutaka Ogawa President Dr Masaya Takahashi Senior Researcher
JPN-77	Research Institute of Nursing Care for People and Community	WHO Collaborating Centre for Nursing in Disasters and Health Emergency Management	Dr Aiko Yamamoto Professor and Executive Director Ms Akiko Kurotaki Assistant Professor
JPN-78	Nihon University	WHO Collaborating Centre for Research and Training in Population , Reproductive Health and Development	Mr Ilja Musulin Assistant to Director Mr Rikiya Matsukura Researcher
JPN-79	National Institute of Radiological Sciences	WHO Collaborating Centre for Radiation Emergency Medicine	Dr Kazuo Sakai Director of Research Center for Radiation Protection Dr Katsuko Kato
JPN-81	Tokyo Metropolitan Geriatric Hospital and Institute of Gerontology	WHO Collaborating Centre for Health of the Elderly	Dr Masafumi Ito Team Leader Dr Tatsuro Ishizaki Research Team Leader
JPN-83	Dokkyo Medical University Koshigaya Hospital	WHO Collaborating Centre for the Prevention and Control of Chronic Respiratory Diseases	Dr Sohei Makino Director/Head Dr Clyde Ito, Technical Officer
JPN-85	Ministry of Health, Labour and Welfare	WHO Collaborating Centre for the Family of International Classifications	Ms Saori Kobayashi Chief Dr Junichi Nitta Second Secretary of the Embassy of Japan in the Philippines

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
JPN-87	Hokkaido University	WHO Collaborating Centre for Zoonoses Control	Dr Hiroshi Kida Head Dr Norikazu Isoda Associate Professor
JPN-88	National Institute of Health and Nutrition	WHO Collaborating Centre for Nutrition and Physical Activity	Dr Nobuo Nishi Chief, Center for International Collaboration and Partnership Ms Miki Miyoshi, Head, Section of International Nutrition Research and Development
JPN-89	Gunma University	WHO Collaborating Centre for research and training on Interprofessional Education	Dr Hiromitsu Shinozaki Professor Dr Bumsuk Lee Associate Professor
JPN-90	National Institute of Public Health	WHO Collaborating Centre on Tobacco Testing and Research	Dr Akira Ushiyama Chief Senior Researcher
JPN-91	Hokkaido University	WHO Collaborating Centre for Environmental Health and Prevention of Chemical Hazards	Dr Atsuko Araki Associate Professor
KOR-9	The Catholic University of Korea	WHO Collaborating Centre for Occupational Health	Dr Jung Wan Koo Director
KOR-16	Yonsei University	WHO Collaborating Centre for Research and Training for Nursing Development in Primary Health Care	Dr Sunah Kim Dean, Professor Dr Yeonsoo Jang Assistant Professor Dr Sue Kim Associate Professor
KOR-17	Kyung Hee University	WHO Collaborating Centre for Traditional Medicine	Dr Ki Ho Cho Director
KOR-18	Seoul National University	WHO Collaborating Centre for Traditional Medicine	Dr Yeong Shik Kim Professor

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
KOR-19	Yonsei University, College of Medicine	WHO Collaborating Centre for Health Systems Research	Dr Eun-Cheol Park Head of research center Dr Sohee Park Permanent Researcher Ms Kyoung Hee Cho Manager of research center
KOR-24	Korean Institute of Tuberculosis - The Korean National Tuberculosis Association	WHO Collaborating Centre for Research, Training and Reference Laboratory on Tuberculosis	Dr Hee Jin Kim Director Dr Kyung Hyun Oh Head of Department of Program Cooperation
KOR-27	Yongin Mental Hospital	WHO Collaborating Centre for Psychosocial Rehabilitation and Community Mental Health	Dr Jonggook Lee Deputy Director Ms Jeehyun Kong Coordinator in Services and Program
KOR-84	National Cancer Center	WHO Collaborating Centre for Cancer Registration, Prevention and Early Detection	Dr Dukhyoung Lee Director Ms Sooyoun Lee Manager Ms Kyu-Won Jun, Branch Chief
KOR-86	Korea Occupational Safety and Health Agency	WHO Collaborating Centre for Occupational Health	Mr Buhyun Kwon Deputy Director Mr Ryoo Jang-Jin Deputy Director of Health Support Team
KOR-89	Korea Institute of Oriental Medicine	WHO Collaborating Centre for Traditional Medicine	Dr Yangsup Song Director Ms Jinseok Moon Chief

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
KOR-90	Ministry of Food and Drug Safety	WHO Collaborating Centre for standardization and evaluation of biologicals	Dr Gi-Hyun Kim Deputy Director Dr Sangjin Park Scientific Officer Dr Jaejun Lee Scientific Officer Ms Hye Jin Jeong Officer
KOR-90	Ministry of Food and Drug Safety	WHO Collaborating Centre for standardization and evaluation of biologicals	Dr Gi-Hyun Kim Deputy Director Dr Sangjin Park Scientific Officer Dr Jaejun Lee Scientific Officer Ms Hye Jin Jeong Officer
KOR-94	Korea Health and Welfare Information Service	WHO Collaborating Centre for the WHO Family of International Classifications, Terminologies, and Standards	Mr Sang Hur Director
KOR-96	The Asian Institute of Bioethics and Health Law, Yonsei University	WHO Collaborating Centre for Health Law and Bioethics	Dr So Yoon Kim Vice President
KOR-97	National Institute of Environmental Research	WHO Collaborating Centre for Vulnerable Population and Environment Health	Dr Kyunghee Choi Director General Dr Boeun Lee Researcher
KOR-98	Seoul National University	WHO Collaborating Centre for Health System and Financing	Dr Juhwan Oh Professor
KOR-99	Seoul National University	WHO Collaborating Centre for Health information and library services	Dr Jeong-Wook Seo Professor Ms Allison Alley Researcher Ms Eun-Sun Park Librarian

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
KOR-100	Korean Red Cross	WHO Collaborating Centre for Blood Transfusion Safety	Ms Sunhee Kim Section Head
KOR-101	Research Institute for Healthy Cities and Health Impact Assessment Soonchunhyang University	WHO Collaborating Centre for Healthy Cities and Health in All Policies	Dr Yoon Park, Director Research institute for Healthy cities and Health impact assessment
MAA-12	University of Malaya	WHO Collaborating Centre for Arbovirus Reference & Research (Dengue/Dengue Haemorrhagic Fever)	Dr Sazaly Abubakar Director
MAA-13	Institute for Medical Research	WHO Collaborating Centre for Ecology, Taxonomy and Control of Vectors of Malaria, Filariasis and Dengue	Dr Lee Lim Head
MAA-14	Institute for Health Systems Research, Ministry of Health	WHO Collaborating Centre for Health Systems Research and Quality Improvement	Dr Ramli Zainal Head, Health Economics Research Division
MAA-15	National Pharmaceutical Control Bureau, Ministry of Health, Malaysia	WHO Collaborating Centre for Regulatory Control of Pharmaceuticals	Ms Siti Aida Abdullah Deputy Director
MAA-16	Science University of Malaysia (Universiti Sains Malaysia)	WHO Collaborating Centre for Drug Information	Mr Razak Lajis Director, Malaysia National Poison Centre Dr Maizurah Omar Lecturer Ms Haslina Hashim Head Pharmacist
MAA-18	Ministry of Health Malaysia	WHO Collaborating Centre for Evidence-Based Health Care Practice	Madam Noormah Mohd Darus Senior Principal Assistant Director
MOG-1	Health Sciences University of Mongolia	WHO Collaborating Centre for reference on Emergency and Essential Surgical Care	Dr Sergelen Orgoi Professor/ Director Dr Bat-Orgil Biziya Manager

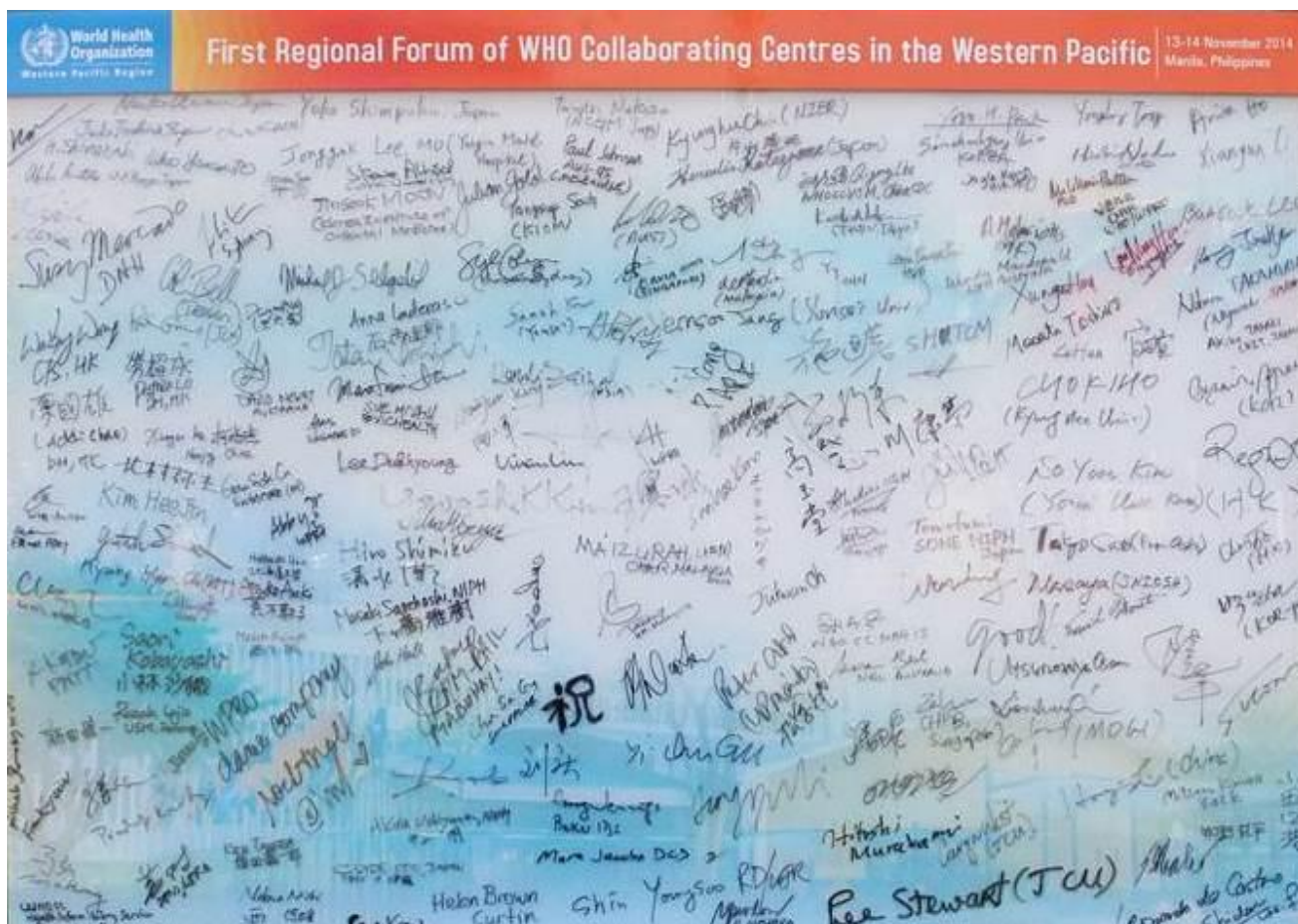
Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
NEZ-15	Pacific Paramedical Training Centre	WHO Collaborating Centre for External Quality Assessment in Health Laboratory Services	Mr Philip Wakem Chief Executive Officer
NEZ-16	University of Otago	WHO Collaborating Centre for Human Nutrition	Professor Jim Mann Director <i>(joined via videoconference)</i>
PHL-13	University of the Philippines Manila	WHO Collaborating Centre for Leadership in Nursing Development	Dr Lourdes Marie Tejero Dean, College of Nursing Dr Josefina Tuazon Professor Mr Peter James Abad Instructor
PHL-19	Research Institute for Tropical Medicine	WHO Collaborating Centre for Malaria Diagnosis	Dr Socorro Lupisan Director Ms Jennifer Luchavez
SIN-11	Ministry of Manpower	WHO Collaborating Centre for Occupational Health	Dr Siok Lin Gan Executive Director
SIN-16	Health Sciences Authority	WHO Collaborating Centre for Transfusion Medicine	Ms Leou Kim Senior Manager, Capability Development & International Collaboration
SIN-17	Health Sciences Authority	WHO Collaborating Centre for Food Contamination Monitoring	Dr Chee Wei Lim Senior Scientist/Scientific Officer
SIN-18	National University of Singapore	WHO Collaborating Centre for Occupational Health	Dr Sin Eng Chia Director
SIN-21	Health Promotion Board	WHO Collaborating Centre for Health Promotion and Disease Prevention	Ms Zahra Asgarali Senior Executive (Strategic Planning & Collaborations)
SIN-22	Health Sciences Authority	WHO Collaborating Centre for Tobacco Testing and Research	Ms Joyce Kiang Scientific Officer

Reference Number	Name of Institution	Title of the Centre	Name of Participant/s
SIN-25	Health Sciences Authority	WHO Collaborating Centre for Medicines Quality Assurance	Ms Lee Cheng Agnes Chin Senior Analytical Scientist
SIN-26	National Environment Agency	WHO Collaborating Centre for Reference and Research of Arbovirus and their Associated Vectors	Dr Christina Liew Assistant Director (Partnerships)
SIN-27	PUB Singapore	WHO Collaborating Centre for Safe Management of Drinking-water and Integrated Urban Water Management	Dr Lim Hoo Chief Specialist (Water Quality) Ms Ervia Huang Microbiologist
SIN-28	National University of Singapore	WHO Collaborating Centre for Bioethics	Professor Leonardo DeCastro Professor A/Professor Anita Ho Associate Professor
VTN-3	National Institute of Occupational & Environmental Health	WHO Collaborating Centre for Occupational Health	Dr Hai Ngoc Doan Director-General

WHO SECRETARIAT

Dr Shin Young-soo	Regional Director
Dr Takeshi Kasai	Director, Programme Management
Mr Ahmad Partow	Acting Director, Administration and Finance Administrative Officer (Information Technology and Administration)
Dr Corinne Capuano	Director, Office of the Regional Director and Coordinator, External Relations and Communications
Dr Mark Jacobs	Director, Communicable Diseases
Dr Vivian Lin	Director, Health Systems
Dr Susan Mercado	Director, Noncommunicable Diseases and Health through the Life-Course
Dr Li Ailan	Director, Healthy Security and Emergencies
Dr Graham Harrison	WHO Representative Malaysia, Brunei Darussalam and Singapore
Dr Eva-Maria Christophel	Coordinator, Malaria, Other Vectorborne and Parasitic Diseases
Dr Ying-Ru Jacqueline Lo	Coordinator, HIV, Hepatitis and Sexually Transmitted Infection
Dr Nobuyuki Nishikiori	Coordinator, Stop TB & Leprosy Elimination
Dr Xu Ke	Coordinator, Health Policy and Financing
Dr Rasul Baghirov	Coordinator, Integrated Service Delivery
Dr Klara Tisocki	Coordinator, Essential Medicines and Health Technologies
Mr Mark Landry	Coordinator, Health Intelligence and Innovation
Ms Anjana Bhushan	Coordinator, Equity and Social Determinants
Dr Hai-Rim Shin	Coordinator, Noncommunicable Diseases and Health Promotions
Dr Xiangdong Wang	Coordinator, Mental Health and Substance Abuse
Dr Howard Sobel	Coordinator, Reproductive, Maternal, Newborn, Child and Adolescent Health
Dr Mohd Nasir Hassan	Coordinator, Health and the Environment

Dr Chin-Kei Lee	Coordinator, Emerging Disease Surveillance and Response
Dr Gulin Fethiye Gedik	Technical Lead, Human Resources for Health
Dr Andreas Mueller	Technical Lead, Blindness Prevention and Control
Ms Pauline Kleinitz	Technical Lead, Disabilities and Rehabilitation
Dr Katrin Engelhardt	Technical Lead, Nutrition
Dr Rabindra Abeyasinghe	Technical Officer, Regional Entomologist
Dr Pengfei Zhao	Technical Officer, HIV, Hepatitis and Sexually Transmitted Infection
Dr Cornelia Hennig	Medical Officer, Tuberculosis
Dr Shin Jinho	Medical Officer, Expanded Programme on Immunization
Ms Laura Hawken	Technical Officer, Capacity Development Coordination
Dr Sangyoung Ahn	Technical Officer, Traditional Medicine
Dr Manju Rani	Senior Technical Officer, Evidence for Health Systems
Mr Kelvin Khoo	Programme Management Officer, Noncommunicable Diseases and Health through the Life-Course
Dr Sonia McCarthy	Technical Officer, Noncommunicable Diseases and Health Promotion
Dr James Rarick	Technical Officer, Tobacco Surveillance
Dr Franciscus Konings	Technical Officer, Laboratory
Dr Jang Hwan Bae	Consultant, Food Safety
Ms Marie Sarah Villemin-Partow	Publications Officer
Dr KiDong Park	Coordinator, Country Support Unit
Dr Rodel Nodora	Technical Officer, Global Health Partnerships, Country Support Unit
Dr Go Tanaka	Medical Officer, Partnership in Technical Cooperation, Country Support Unit



Signature board of the First Regional Forum of WHO Collaborating Centres in the Western Pacific

OUTCOME OF PARALLEL SESSIONS

Parallel Session 1: Feedback from WHO Collaborating Centres (13H30–1500H, Thursday, 13 November 2014)

Thirteen small parallel group sessions with 13–15 participants each were conducted in focus group discussion style by trained facilitators to seek open feedback from WHO collaborating centres on how to strengthen the partnerships.

The following guide questions were used to facilitate the discussion:

- What aspects of the current system are working to support successful collaboration?
- What aspects of the current system are not working or pose as hindrance to successful collaboration?
- How do we make the partnerships work?

The following areas for improving collaboration between WHO and the collaborating centres and among collaborating centres were collated from the outputs of the 13 focus groups during Parallel Session 1. Where similar ideas were expressed, these were grouped but details have been reflected to maintain the richness of the discussions.

- **Administration**
 - Need for improved administrative systems from both WHO and collaborating centres to facilitate collaboration (e.g. procurement, fund transfers for projects)
 - A dedicated focal person in the collaborating centre should be made in-charge of a project/activity and limit the person's rotation inside the collaborating centre
 - Appoint one person in WHO to be in-charge of all collaborating centres
 - Provide concrete guidance from WHO on planning, implementing and managing projects and activities of collaborating centres
 - Ensure that WHO Collaborating Centre responsible officers facilitate coordination across divisions and levels of WHO
- **Coordination and collaboration**
 - Organize or convene regular meetings of collaborating centres either through face-to-face or virtual conferences and through other meetings outside of Manila
 - Align the work plans of collaborating centres along WHO priority areas but ensure flexibility in the implementation of the work plans
 - WHO to provide recognition, feedback and acknowledgements regarding progress in the collaborative activities (e.g. when annual reports are received by WHO, the collaborating centres should be notified of any changes or suggestions)
 - Collect data and place in single system to be used for further planning and for target setting
 - Provide opportunity for the collaborating centres to work outside their technical area especially if the Centre has the expertise or can contribute in activities outside their designated work plan

- **Communication**
 - Improve communication through regular bulletins, newsletters, e-newsletters, and virtual meetings.
- **Information technology**
 - Use information technology, online discussions, social media (e.g. Facebook, Twitter), Skype
- **Projects**
 - Conduct more country collaboration in low and middle-income countries
 - Develop longer-term projects
- **Research**
 - Undertake more multi-collaborating centre research
- **Funding**
 - Tap into and explore other sources of funds for the implementation of collaborative activities
- **Relationships between collaborating centres**
 - Organize site-visits for information sharing among collaborating centres
 - Foster closer networks among collaborating centres
 - Encourage networking and opportunities between or among collaborating centres
- **Relationships with stakeholders**
 - Convene regular meetings with donors, sponsors
 - Work with nongovernmental organizations and industrial partners



Parallel Session 2, 3 AND 4: Technical Sessions for WHO Collaborating Centres
(15H45–17H15, Thursday, 13 November 2014; 10H45–12H15, Friday, 14 November 2014; and
13H30–1500H, Friday, 14 November 2014)

A total of three sessions of 1.5 hours each were allocated to technical parallel sessions. The key overall objective of the technical parallel sessions was to identify innovative opportunities to strengthen and enhance partnerships based on factors that constitute good collaboration. Participants were grouped based on technical area of work of the WHO collaborating centres into 10 broad groups for parallel session 2 (15h45 – 17h15, Thursday, 13 November 2014) and then were further sub-divided into 20 parallel groups for parallel sessions 3 and 4.

Grouping and detailed schedule are as follows:

Parallel session 2 (15:45–17:15, 13 November)	Parallel session 3 (10:45–12:15, 14 November)	Parallel session 4 (13:30–15:00, 14 November)
A. Communicable disease	A-1. HIV/AIDS and sexual transmitted infections	
	A-2. Tuberculosis	
	A-3. Malaria, other vectorborne disease and neglected tropic diseases	
B. NCD, health promotion and ageing	B-1. Health promotion and tobacco free initiative	
	B-2. Healthy diet and oral health	
	B-3. Noncommunicable diseases	
	B-4. Ageing	
C. Mental health and substance abuse		
D. Disability, Rehabilitation, and Blindness Prevention		
E. Reproductive, maternal, neonatal, child and adolescent health		
F. Environmental health		
G. Occupational health		
H. Health systems	H-1. Essential medicine and health technology	Joint session of H-1, H-2, H-3 and H-4
	H-2. Health Information and e-Health	
	H-3. Integrated service delivery and public health law	
	H-4. Health research	
	H-5. Human resources for health	
	H-6. Traditional medicine	
I. International health regulations: Emerging diseases and food safety		
J. Library and publication		

Technical Parallel Session Group A. Communicable Diseases

All the 17 collaborating centres working on communicable diseases – HIV/AIDS, tuberculosis, malaria and neglected tropical diseases – first met jointly for 1.5 hours. The WHO technical coordinators responsible for above-mentioned communicable diseases made brief presentation on the technical collaboration priorities in the specific technical areas highlighting the cross-cutting areas.

Following this introductory combined parallel session, the collaborating centres were subdivided into three subgroups according to their technical focus for the next two parallel sessions to further identify innovative opportunities in strengthening and enhancing partnerships based on factors that constitute good collaboration. The proceedings, key discussion points and recommendation actions for follow-up are detailed in the succeeding sections.



A1. HIV, hepatitis and sexually transmitted infections

WHO session lead: *Dr Ying-Ru Lo*

Session objectives:

- Discuss potential contribution of WHO collaborating centres to strengthening laboratory system for surveillance and diagnosis of HIV, hepatitis and STI (capacity-building and external quality- assurance systems, training)
- Discuss potential contribution of WHO collaborating centres to improving uptake of HIV, hepatitis and STI testing (decentralization, community-based testing) and linkages to care
- Discuss potential contribution of WHO collaborating centres to strengthen uptake of care and treatment for HIV, hepatitis and STI among key populations (addressing stigma and discrimination in health-care settings, health care workers capacity-building, community outreach and other service delivery models)
- Discuss health systems strengthening and financing for sustaining HIV and STI interventions and introducing hepatitis interventions in low and lower middle income countries

Participating WHO collaborating centres:

- St Vincent's Institute of Medical Research, Australia (WHO Collaborating Centre for Diagnostics and Laboratory Support for HIV/AIDS and Other Blood-borne Infections, AUS-45)
- Albion Street Centre , Australia (WHO Collaborating Centre For Capacity Building and Healthcare worker training in HIV/AIDS Treatment Care and Support, AUS-89)
- Institute of Dermatology, Chinese Academy of Medical Sciences and Peking Union Medical College, China (WHO Collaborating Centre for Prevention and Control of Sexually Transmitted Infections, CHN-75)
- National Centre for Global Health and Medicine, Japan (WHO Collaborating Centre for Health Systems Research, JPN-45)
- The Hong Kong Polytechnic University, Hong Kong (SAR) (WHO Collaborating Centre for Community Health Services, CHN-89)

Proceedings and key discussion points:

An overview of new regional priority actions in HIV, hepatitis and sexually transmitted infections (STI) were provided. Six focus areas were: (a) raising awareness, advocacy and communication, (b) evidence-based policy and data for action, (c) prevention, (d) elimination of parent-to-child transmission of HIV and syphilis, (e) improving uptake of interventions across the continuum of care through innovative approaches, and monitoring and evaluating impact of the implementation of WHO guidelines in the Region, and (f) addressing TB/HIV and HIV/hepatitis co-infections. Strengthening health information systems and laboratory services as well as exploring mid-and long-term financing strategies are critical areas for the future. These discussions provided a background and context to succeeding discussions with the collaborating centres on how they can best contribute to the regional priority actions.

WHO HIV and STI collaborating centres are also (core) members of the HIV and Health Network. Established in 2008, the WHO Network for HIV and Health in the Western Pacific Region (the

Network) was set up to support Member States to implement effective multidisciplinary public health approaches to HIV based on WHO strategic directions. Currently, the Network has 22 member institutions, including five collaborating centres for HIV. The Network was coordinated by an external entity (i.e., the Albion Street Centre) which established a database, a network skill and capacity matrix and developed a business plan for 2011–2015. The Albion Street Centre received funding from the Australian Government for these activities. Recently, however, the Network has been less active for a number of reasons including turnover of staff in network member institutions and at WHO. To address this, it was proposed that joint activities of the Network could focus in providing support to priority countries. The group concluded that there should be a mechanism for communication among the Network members. It was also suggested that the coordination of the Network should be facilitated by the WHO Regional Office for the Western Pacific rather than an external body as WHO expressed reservation to an external secretariat managing proposals and calls for expression of interest.

Recommendations and follow-up action points:

- Expand scope and reach of HIV and Health Network to the entire Asia and the Pacific.
- Expand technical focus from HIV to address Hepatitis and other STIs.
- Establish communication platform for the Network
 - Pilot a closed group of Network members on Facebook as an interactive and easy to manage platform or explore other communication means
 - Explore the possibility of using the website of the WHO Western Pacific Region for sharing of newsletters and new tools
 - Maintain listserve for HIV, hepatitis and STI and health more broadly
 - Call for proposals for technical assistance contracts will be posted by WHO on the listserve which is not limited to members of the network but includes institutions from other Regions.
- Define few joint outputs in selected countries in-line with current WHO country work plans to show the collaborative impact of the Network.

A2. Tuberculosis

WHO session lead: *Dr Nobuyuki Nishikiori*

Session objectives:

- Identify and communicate key areas where collaborating centres may add value
- Review the quality, efficiency and impact of ongoing collaboration
- Identify potential activities for networks (in lieu of the usual bilateral collaboration)
- Agree on activities with well-defined outputs and working method for next cycle

Participating WHO collaborating centres:

- National Centre for TB Control and Clinical Medicine, Centre for Disease Control of China, China (WHO Collaborating Centre for Research and Training on Tuberculosis, CHN-57)

- Research Institute of Tuberculosis, Japan (WHO Collaborating Centre for Reference, Research and Training on Tuberculosis, JPN-38)
- Korean Institute of Tuberculosis, the Korean National Tuberculosis Association, Republic of Korea (WHO Collaborating Centre for Research, Training and Reference Laboratory on Tuberculosis, KOR-24)

Proceedings and key discussion points:

An overview of WHO's priority areas in the coming years was provided in line with the WHO End TB Strategy that was adopted during the 67th World Health Assembly in May 2014. WHO will accelerate support to Member States to strengthen quality TB services including diagnosis and care for drug-resistant TB, in which support from supra-national reference laboratories including Korean Institute of Tuberculosis (KIT) and Research Institute of Tuberculosis (RIT), Japan will continue to be critical. The Regional Office would also like to support countries in exploring TB care financing options especially in middle-income countries where donor funding is moving away. The experiences in and structures of TB care financing systems in the Republic of Korea and Japan would be very important resources to elaborate policy options for other countries in the Region.

Resource mobilization for collaborative activities was extensively discussed. Some collaborative activities between WHO and the collaborating centres for TB have been funded partly through bilateral funding (i.e., Official Development Assistance) schemes of the Republic of Korea and Japan, respectively. It was proposed that WHO and the collaborating centres maintain existing funding arrangement with donor government and further explore other funding schemes within each country.

When formulating collaborative activities, comparative advantages and strengths of WHO and the collaborating centres have to be fully taken into account. For example, when formulating training programmes, WHO can provide normative guidance while the collaborating centres can focus on technical skills transfer. Similarly, country-based projects, to be implemented by national counterparts and the collaborating centres, can be technically supported by WHO from global and regional policy perspective.

Both KIT and RIT expressed keen interest in further expanding collaborative work with WHO. Potentially fruitful areas include joint operational research projects in TB high-burden countries. A regional forum to identify research agenda and to explore potential collaborative arrangement would be a very good starting point.

Recommendations and follow-up action points:

- WHO and the collaborating centres will continue to exchange information and to discuss organizational priorities and country needs so that collaborative activities will be always in line with regional and country needs.
- WHO and the collaborating centres will make an effort to maintain existing funding arrangement particularly with bilateral donors of each country and further expand donor-base when an opportunity arises.
- Explore more engagement and collaborative work in the area of operational research in TB high-burden countries.

A3. Malaria and other vectorborne diseases and neglected tropical diseases

WHO session lead: *Dr Eva-Maria Christophel*

Session objectives:

- Review the quality, efficiency and impact of ongoing collaboration and highlight good practices
- Identify and communicate key areas where collaborating centres may add value
- Identify potential activities for establishing disease specific networks where collaborating centres working on specific diseases could share experiences and contribute to joint activities supporting WHO in its activities (in addition to the usual bilateral collaboration between individual centres and WHO)
- Identify concrete ways for a closer and more effective collaboration
- Agree on activities with well-defined outputs and working method for next cycle
- Identify means of communication

Participating WHO collaborating centres:

- James Cook University Australia, Australia (WHO Collaborating Centre for the Control of Lymphatic Filariasis, Soil-transmitted Helminths and other Neglected Tropical Diseases, AUS-68)
- Victorian Infectious Diseases Reference Laboratory, Australia (WHO Collaborating Centre for Mycobacterium Ulcerans) (Mycobacterium Reference Laboratory, AUS-95)
- National Institute of Parasitic Diseases, China CDC, China (WHO Collaborating Centre for Malaria, Schistosomiasis and Filariasis, CHN-6)
- Hunan Institute of Parasitic Diseases, China (WHO Collaborating Centre on Schistosomiasis Control in Lake Regions, CHN-58)
- Second Military Medical University, China (WHO Collaborating Centre for Gene Synthesis and Expression, CHN-76)
- National Institute for Communicable Disease Control and Prevention, China CDC, China (WHO Collaborating Centre for Vector Surveillance and Management, CHN-114)
- Institute for Medical Research, Malaysia (WHO Collaborating Centre for the Ecology, Taxonomy & Control of the Vectors of Malaria, Filariasis & Dengue, MAA-13)
- Research Institute for Tropical Medicine, Philippines (WHO Collaborating Centre for Malaria Diagnosis, PHL-19)
- National Environment Agency, Singapore (WHO Collaborating Centre for Reference and Research of Arbovirus and their Associated Vectors, SIN-26)

Proceedings and key discussion points:

Each of the collaborating centres introduced their respective centres, highlighting their current collaborative activities. The ongoing collaboration between WHO and the collaborating centres is considered to be of good quality but the forum provided an avenue for such collaboration to improve in the future. During the parallel session, several collaborating centres expressed the need for more frequent communications with WHO as a means to further strengthen collaboration. Specifically, frequent communications was seen as a way to provide more opportunities to understand needs and priorities, and to come up with collaborative actions to respond to these needs.

The collaborating centres were also encouraged to share ideas on how to accomplish their current activity plans and to identify potential activities among the priority areas mentioned by WHO for future engagement, particularly in relation to strengthening country support, operational research requirements and capacity-building. After which, the discussion focused on ways to improve communication, and to strengthen ties and collaborations among the collaborating centres and with WHO. Discussion focused around the use of an electronic mailing list with a newsletter as a means of sharing information among the collaborating centres and WHO.

Detailed discussions took place between the technical unit and individual collaborating centre which are due for redesignation within the next few months. Potential activities as per existing terms of reference and future WHO priorities were discussed for inclusion in the new re-designation proposal.

Recommendations and follow-up action points:

General

- The collaborating centres agreed to expand and increase direct country support to selected countries in line with priority needs identified by WHO (in consultation with the concerned countries), but not currently included in their terms of reference and work plan.
- WHO to prepare draft annual work plans for country support to be shared and agreed upon with the collaborating centres.
- Improve communication between the technical unit and the collaborating centres through establishment of a mailing list. The possibility of providing web links from the Regional Office's Malaria, other Vectorborne and Parasitic Diseases (MVP) home page to collaborating centre websites will be explored.

Specific

- Explore additional roles for James Cook University, Australia, WHO Collaborating Centre in Pacific island countries for neglected tropical diseases.
- Strengthen links and country support of the Hunan Institute of Parasitic Diseases, China, WHO collaborating centre on Schistosomiasis Control in Lake Regions with Philippines and other selected Mekong countries for support in mapping schistosomiasis.
- Explore possible expansion of role of the Second Military Medical University, China, WHO Collaborating Centre for Gene Synthesis in monitoring for artemisinin resistance and K13 marker in Yunnan Province, China.
- Strengthen collaboration and activities of Institute of Medical Research, Malaysia, WHO Collaborating Centre for study and mapping of vectors of *Plasmodium (P.) knowlesi* and further study of novel innovative tools for control of dengue vectors.
- Expand country support provided by Research Institute of Tropical Medicine, Philippines, WHO Collaborating Centre for Malaria Diagnosis for quality assurance in malaria microscopy in affected countries.
- Explore possibility of organizing an additional higher level training by National Environmental Agency, Singapore, WHO Collaborating Centre for Reference and Research of Arbovirus and their for graduates of the current training as a follow-up activity.
- Explore possible expansion of terms of reference of the National Institute of Parasitic Diseases, WHO Collaborating Centre for Malaria, Schistosomiasis and Filariasis, China to include other tropical/neglected diseases.

- Strengthen country support for integrated vector management through training of selected country staff and expansion of country support for Integrated Vector Management in countries through National Institute for Communicable Disease Control and Prevention, WHO Collaborating Centre for Vector and Surveillance and Management, China.
- Establish and support Pacific island countries and areas particularly Papua New Guinea in diagnosis for Buruli Ulcer through country support and training at the WHO Collaborating Centre for Mycobacterium Ulcerans at Victorian Infectious Diseases Research Laboratory , Australia.

B. Noncommunicable diseases, health promotion and ageing

All the 20 collaborating centres working on noncommunicable diseases, health promotion, and ageing first met jointly for 1.5 hours to specifically understand the cross-sectoral nature of work in noncommunicable disease, health promotion, and ageing, and to identify opportunities for cross-cutting work. The Division of NCD and Health through the Life-Course and all the technical coordinators made brief presentation on the technical collaboration priorities in the specific technical areas highlighting the cross-cutting areas.

This session also served as “getting to know you” session and each of the participating collaborating centre made a two-minute presentation on key achievements and countries supported using a one-slide template provided by WHO.

During the open discussion following the presentations, one centre recommended the development of a better way of launching and disseminating resources prepared by the centres to other organizations which could use these resources to further their own work. Another centre noted that the cross-cutting nature of NCDs should lend itself to collaboration among centres of varying types, such as chronic respiratory disease and tobacco control.

Following this introductory combined parallel session, the collaborating centres were subdivided into four subgroups according to their technical focus for the next two parallel sessions to further identify innovative opportunities in strengthening and enhancing partnerships based on factors that constitute good collaboration. The proceedings, key discussion points and recommendation actions for follow-up are detailed in the succeeding sections.



B1. Health promotion and tobacco-free initiative

WHO session lead: *Dr James Rarick*

Session objectives:

- Identify opportunities for synergy and collaboration to strengthen support to countries
- Develop a common action plan that is country-focused (e.g. to identify countries that collaborating centres could provide support to)
- Strengthen technical networking opportunities between WHO and the collaborating centres

Participating WHO collaborating centres:

- Victorian Health Promotion Foundation, Australia (WHO Collaborating Centre for Excellence in Health Promotion, AUS-117)
- Tokyo Medical & Dental University, Japan (WHO Collaborating Centre for Healthy Cities and Urban Policy Research, JPN-73)
- Research Institute for Healthy Cities and Health Impact Assessment, Soonchunhyang University, Republic of Korea (WHO Collaborating Centre for Healthy Cities and Health in All Policies, KOR-101)
- Health Promotion Board, Singapore (WHO Collaborating Centre for Health Promotion and Disease Prevention, SIN-21)
- Department of Health, Hong Kong (SAR) (WHO Collaborating Centre for Smoking Cessation and Treatment of Tobacco Dependence, CHN-113)
- National Institute of Public Health, Japan (WHO Collaborating Centre on Tobacco Testing and Research, JPN-90)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Tobacco Testing and Research, SIN-22)

Proceedings and key discussion points:

Tobacco control session

The first half of the session was held together with the collaborating centres on health promotion and ageing. An overview of the work being done at the regional level on the technical areas of health promotion, ageing, and tobacco control was presented by the technical officers-in-charge of each area. Dr James Rarick highlighted the key goals and objectives of the Regional Action Plan for the Tobacco Free Initiative in the Western Pacific Region (2015–2019) which was recently endorsed by Western Pacific Region Member States. He also presented key outcomes from the Sixth Conference of Parties to the WHO Framework Convention on Tobacco Control (WHO FCTC).

Following the formal presentations, there was a general discussion about technical areas for potential collaboration among the different collaborating centres and WHO.

In the last part of the session, the collaborating centres on tobacco control met separately for more detailed discussions. Each of the three collaborating centres working on tobacco related activities presented an overview of their current and planned activities.

The Hong Kong Centre for Smoking Cessation and Treatment of Tobacco Dependence announced that it would host a Tobacco Control Fellowship Programme from 17–21 November 2014, with approximately 20 participants from China, Macao SAR (China), Philippines, Mongolia and Kiribati. The 2013 Fellowship Programme included 16 participants from seven countries. The Centre would like to expand the number of participating countries in the future, and possibly also include participants from South East Asia. The Centre also intends to expand the fellowship programme into a full tobacco control leadership programme if supported by the Hong Kong Department of Health.

Singapore Collaborating Centre on Tobacco Testing (TobLabNet) has been actively participating as a member of the working group on the development of guidelines for WHO FCTC Articles 9 and 10 for several years and has also done testing of tobacco samples from Fiji, the Federated States of Micronesia (FSM) and Tonga in coordination with the Division of Pacific Technical Support (DPS) and the Regional Office. It has also provided consultation and sample language to Fiji, Federated States of Micronesia, Samoa and Solomon Islands. The Centre's Laboratory Director participated in the Meeting on Tobacco Product Regulation in Nadi, Fiji, in September 2014, which was organized by WHO headquarters in collaboration with the Regional Office and DPS. It has contributed to the development of modalities to support testing and disclosure of tobacco products in countries which were presented at the Sixth WHO FCTC Conference of Parties in Moscow in October 2014.

The Japan Collaborating Centre on Tobacco Testing has been designated only recently but has experience in methodology for testing smokeless tobacco products, as well as other tobacco products.

Health promotion session

The focus of the Healthy Cities Initiative is to continue addressing the urban health challenges and specifically to support cities in building up capacity to monitor their health status and other environmental measures as well as in knowledge dissemination. The need for innovation in approaches, tools and evidence (e.g. in school and community-based health promotion programmes) was further emphasized.

The WHO Collaborating Centre on Health Promotion from the Republic of Korea shared an accreditation system for Healthy Cities developed by the Centre. The Centre is keen to further collaborate with WHO and other collaborating centres in fine-tuning the accreditation and certification criteria.

The Victorian Health Promotion Foundation, a newly designated WHO Collaborating Centre for Excellence in Health Promotion from Australia shared their activities including the "Leading Thinkers" programme which is a large scale evaluation of efficacy of standing work stations, and the use of social media and marketing campaigns towards responsible use of alcohol, increasing physical activity and water intake. The Centre received many requests from countries (e.g. Viet Nam and Tonga) who wish to apply tobacco control lessons from Australia in their own contexts. Another area of interest was on alcohol and junk food in sports. The Centre emphasized the need to consolidate evidence and case studies on the successes of tobacco control that can be applied to other unhealthy behaviours under a shared platform.

The Singapore Health Promotion Board, another WHO Collaborating Centre, mainly focused on increasing physical activity e.g., encouraging mobility breaks during meetings. Obesity prevention is a primary priority in Singapore and the Centre is keen to work on promoting healthier eating.

Recommendations and follow-up action points:

Tobacco control

- *Ideas for some additional collaboration with the Regional Office:* As the designation of WHO Tobacco Testing Laboratories is initiated by the WHO headquarters and much of the work is directed from the WHO headquarters, it was recommended that WHO headquarters should involve or at least regularly communicate with the Regional Office regarding the work of these collaborating centres in the Region. Likewise, the Regional Office can continue to facilitate testing requests from countries.
- *Collaboration between Centres:* It was recommended to synergize the work of Japan and Singapore Tobacco Testing collaborating centres, with Japan Testing Laboratory focusing on testing smokeless products. Possibility of testing other various components of betel quid used in countries may be explored with WHO headquarters and possibly other TobLabNet labs in other regions.
- The approach used by Singapore Health Promotion Board in collaboration with the Tobacco Testing Laboratory to conduct tours of high school students to raise awareness about the work of the laboratory and the harmful ingredients in tobacco products may be explored further for educating the youth. A video documenting the work of the laboratories highlighting the harmful constituents in tobacco and tobacco industries subterfuge in designing cigarettes to maximize their addictive properties may be produced.
- The possibility of pursuing some joint publications particularly on smokeless tobacco products and/or other tobacco products such as the locally produced products tested from Tonga should be explored.

Health promotion

- In collaboration with other collaborating centres through a joint city-to-city learning and sharing of experiences and lessons learnt, WHO can facilitate meeting the needs of cities with specific capacity gaps. This may include health impact assessment or doing city-level surveillance.
- With regard to the proposed accreditation criteria put forth by the collaborating centre in the Republic of Korea, it was suggested that WHO provides technical support to the Centre in finalizing the Healthy Cities accreditation guidelines and to pursue further avenues for joint collaboration around this topic.
- WHO should establish a virtual mailing list and/or social network platform linking up all the health promotion-related WHO collaborating centres to facilitate exchange of information. This knowledge network should also encourage better documentation of examples of good practice and case studies that can be shared.
- A capacity mapping of the strengths, expertise, resources available and training programmes conducted in the WHO collaboration centres should be conducted to encourage more joint collaboration and/or sharing of expertise and assets.
- WHO should provide information on specific country needs to facilitate WHO collaborating centres support in providing capacity building opportunities to different countries in the Region.
- The WHO collaborating centres highly encouraged WHO staff to visit their centres whenever possible to learn more about their activities.

B2. Healthy diet and oral health

WHO session lead: *Dr Katrin Engelhardt*

Session objectives:

- Identify opportunities for synergy and collaboration to strengthen support to countries
- Develop a common action plan that is country-focused (e.g. to identify countries that collaborating centres could provide support to)
- Strengthen technical networking opportunities between WHO and the collaborating centres

Participating WHO collaborating centres:

- Deakin University, Australia (WHO Collaborating Centre for Obesity Prevention, AUS-80)
- National Institute of Health and Nutrition, Japan (WHO Collaborating Centre for Nutrition and Physical Activity, JPN-88)
- University of Sydney, Australia (WHO Collaborating Centre for Physical Activity, Nutrition and Obesity, AUS-107)
- The George Institute for Global Health, Australia (WHO Collaborating Centre on Population Salt Reduction, AUS-110)
- Niigata University Graduate School of Medical and Dental Sciences, Japan (WHO Collaborating Centre for Translation of Oral Health Science, JPN-75)

Proceedings and key discussion points:

- During the session, the work and priorities of the Regional Office for the Western Pacific were introduced through the NCD and Nutrition Workplans (Programme Budget 2014–2015). The Regional Action Plan for the Prevention and Control of NCDs and the Action Plan to reduce the Double Burden of Malnutrition in the Western Pacific Region were shared with the collaborating centre participants. The Global Targets for Nutrition and NCDs were presented and distributed as pocket guides.
- The collaborating centres were requested to identify countries of interest for future collaboration and WPRO agreed to summarize key country activities for 2015 to facilitate this process. The collaborating centres reviewed the relevant deliverables and identified those that they were keen to support ranging from capacity building activities to the development of joint advocacy and training materials.
- An in-depth discussion about practical measures and next-steps to improve collaboration to support regional and country activities took place to improve outcomes in the areas of in-country support, service delivery, and research. The discussion resulted in the following recommendations and follow-up action points.

Recommendations and follow-up action points:

- Formation of an informal technical advisory group involving all collaborating centres present in the session.

- Formation of an email group, and sharing of terms of reference and contact details of all collaborating centres
- Sharing of the mapping exercise identifying WHO and the collaborating centre priority country activities
- Regular communication of planned country activities between WHO and the collaborating centres via group email. The collaborating centres will support specific country activities based on these priorities.
- WHO and the collaborating centres are to organize joint Regional and in-country training activities.
- WHO should send information about WHO internship programme and Regional Committee Meetings to the collaborating centres.
- WHO should visit the collaborating centres more often. The collaborating centres should send technical information updates, research activities and reports as well as include and invite WHO to their network meetings (e.g. a meeting of the Australian WHO collaborating centres).

B3. Noncommunicable diseases

WHO session lead: *Dr Hai-Rim Shin*

Session objectives:

- Identify opportunities for synergy and collaboration to strengthen support to countries
- Develop a common action plan that is country-focused (e.g. to identify countries that collaborating centres could provide support to)
- Strengthen technical networking opportunities between WHO and the collaborating centres

Participating collaborating centres:

- Baker IDI Heart and Diabetes Institute, Australia (WHO Collaborating Centre for Research and Training in Cardiovascular Diseases, AUS-115)
- Shanghai Institute of Cardiovascular Diseases, China (WHO Collaborating Centre for Research and Training in Cardiovascular Diseases, CHN-10)
- Shanghai Cancer Institute, China (WHO Collaborating Centre for Cancer Prevention and Control, CHN-95)
- Kyoto Medical Centre, National Hospital Organization, Japan (WHO Collaborating Centre for Diabetes Treatment and Education, JPN-56)
- Dokkyo Medical University Koshigaya Hospital, Japan (WHO Collaborating Centre for Prevention and Control of Chronic Respiratory Disease, JPN-83)
- National Cancer Center, Republic of Korea (WHO Collaborating Centre for Cancer Registration, Prevention and Early Detection. KOR-84)

Proceedings and discussion points:

The session opened with a five-minute presentation on the objectives of the Western Pacific Regional Action Plan for the Prevention and Control of NCDs (2014–2020), the Voluntary Global NCD targets

for 2025, and the tasks identified in the NCD workplan 2014–2015, with emphasis on how collaborating centres could support the various initiatives.

The centres were asked to discuss and identify opportunities for synergy and collaboration along four general areas: (1) with WHO, (2) with other centres, (3) in countries, and (4) in topical areas.

The National Cancer Center, Republic of Korea noted the enormous commitment of time and resources that they have expended in achieving their long-standing terms of reference as a collaborating centre and pledged to sustain such commitment into the future. The Shanghai Cancer Institute, China, on the other hand underscored the importance of fully understanding the situation prior to engagement (e.g. by political mapping), including national needs (i.e. what should be done), priorities (i.e. what they want to be done), and resources (i.e. what can be done).

For parallel technical session 4, both centres joined the subgroup for health promotion and tobacco.

Recommendations and follow-up action points:

- In addition to existing projects, the National Cancer Center, Republic of Korea is willing to explore opportunities for collaboration in the area of tobacco control, particularly with respect to cessation.
- WHO to take a more proactive role in proposing and planning specific collaboration activities.

B4. Ageing

WHO session lead: *Ms Anjana Bhushan*

Session objectives:

- Identify opportunities for synergy and collaboration to strengthen support to countries
- Develop a common action plan that is country-focused (e.g. to identify countries that the collaborating centres could provide support to)
- Strengthen technical networking opportunities between WHO and the collaborating centres

Participating WHO collaborating centres:

- University of Newcastle, Australia (WHO Collaborating Centre for International Longitudinal Studies on Gender, Ageing and Health, AUS-94)
- Tokyo Metropolitan Geriatric Hospital and Institute of Gerontology, Japan (WHO Collaborating Centre for Health of the Elderly, JPN-81)

Proceedings and key discussion points:

The session began with a brief overview of the Regional Office for the Western Pacific approach on ageing and health. The Regional Committee for the Western Pacific discussed ageing and health at its Sixty-fourth session in October 2013, and adopted a resolution that endorses the Regional Framework

for Action on Ageing and Health in the Western Pacific 2014–2019. In follow-up, the Regional Office is undertaking technical collaboration with member states in line with the following four action pillars of the Regional Framework (with particular focus on pillar 3, given strong interest from Member States):

- Fostering age-friendly environments through action across sectors;
- Promoting healthy ageing across the life course and preventing functional decline and disease among older people;
- Reorienting health systems to respond to the needs of older people; and
- Strengthening the evidence base on ageing and health.

Priority countries for WHO include those where population ageing is particularly rapid. Many low- and middle-income countries in the Region face a much shorter timeframe to prepare for meeting the needs of older people. Strong advocacy is needed to keep ageing on the policy agenda.

Each of the three collaborating centres who attended the session provided a brief overview of their activities and research interests, highlighting linkages with the action pillars of the Regional Framework as applicable. Discussions covered the links between ageing and NCDs, in particular in relation to the comorbidities that many older people experience. The implications of ageing for health and long-term care, including related workforce and financing requirements were discussed. Palliative care was emphasised as a growing issue of concern across many countries in the Region. Discussions also highlighted how technology, especially innovations in eHealth/mHealth and robotics provides significant opportunities relevant to ageing and health. It was noted that age-friendly assistive technologies could be an area of future collaboration.

It was stressed that there is a need for evidence-based policy recommendations on key health systems questions including health workforce, long-term care, integrated service delivery, and access to medicines. The Regional Office has commissioned policy-focused analysis on these issues to inform national policy dialogue.

Knowledge translation to inform evidence-based policy-making was highlighted as a shared interest. WPRO is interested in the documentation and analysis of good practices and lessons learned. Ageing and health is not a new issue but information on what is happening in countries remains uneven. For example, the valuable experience of Japan and the Republic of Korea is difficult to access due to lack of translations in English. The Tokyo Metropolitan Geriatric Hospital and Institute of Gerontology could assist by translating key documents into English, so that other countries can learn from Japan's experience. The collaborating centres can also help fill gaps in the evidence-to-practice continuum.

Recommendations and follow-up action points:

- A rights-based, life-course approach is needed to ageing and health, in line with the social determinants of health. The collaborating centres support the four pillars of the Regional Framework for Action on Ageing and Health in the Western Pacific 2014-2019. The collaborating centres support evidence generation, synthesis and dissemination to all countries in the Region, to facilitate evidence-informed policy-and decision-making.

- The collaborating centres support the reorientation of health systems (across the health system building blocks) to become more age-friendly and to ensure that people age with dignity and their human rights are protected.
- Many successes are available in the Region, which are context-specific, but still need to be documented and shared across the Region. The collaborating centres can help fill gaps in the evidence-to-practice continuum.
- The collaborating centres can tap their own networks to link better with other centres that may be working on ageing and health but do not have this issue in their title or terms of reference.
- Better information sharing between WHO and the collaborating centres and among centres can strengthen collaboration.

C. Mental health and substance abuse



WHO session lead: *Dr Wang Xiangdong*

Session objectives:

- Provide an overview of the WHO global and regional developments in mental health and substance abuse
- Share good practices on collaboration that provide effective support to countries' mental health and substance abuse programmes
- Identify priority actions to be taken for the implementation of the Mental Health Regional Agenda and the Alcohol Regional Strategy
- Explore innovative approaches, opportunities and mechanism for strengthening and sustaining partnerships between WHO and the collaborating centres

Participating WHO collaborating centres:

- Curtin University, Australia (WHO Collaborating Centre for the Prevention of Alcohol and Drug Abuse, AUS-63)

- St Vincent's Hospital Institute of Mental Health Service, Australia (WHO Collaborating Centre for Research and Training in Mental Health, AUS-75)
- University of Western Australia, Australia (WHO Collaborating Centre for Research, Training and Consultative Work on Mental Health, AUS-77)
- Beijing Neurosurgical Institute, China (WHO Collaborating Centre for Research and Training in Neurosciences, CHN-28)
- Nanjing Child Mental Health Research Centre, China (WHO Collaborating Centre for Research and Training in Child Mental Health, CHN-47)
- Central South University, China (WHO Collaborating Centre for Psychosocial Factors, Substance Abuse and Health, CHN-71)
- Beijing Suicide Research and Prevention Centre, China (WHO Collaborating Centre for Research and Training in Suicide Prevention, CHN-79)
- Peking University Institute of Mental Health, China (WHO Collaborating Centre for Research and Training in Mental Health, CHN-110)
- Kurihama Medical and Addiction Center, National Hospital Organization, Japan (WHO Collaborating Centre for Research and Training on Alcohol-Related Problems, JPN-57)
- Yongin Mental Hospital, Republic of Korea (WHO Collaborating Centre for Psychosocial Rehabilitation and Community Mental Health, KOR-27)

Proceedings and key discussion points:

The Regional Office for the Western Pacific provided an overview of the WHO regional mental health and substance abuse programme, especially on the development and implementation of regional strategies and action plans. An overview of region-wide technical collaborations in suicide prevention, management of severe mental disorders, and post disaster mental health support was also provided. The experiences and lessons learnt from two regional networks were introduced and discussed. The Regional Agenda and recent discussion at the Sixty-fourth Session of the Regional Committee Meeting was presented to the participants. The collaborating centres welcomed the stepwise approach in mental health programme and fully supported the priority actions proposed in the Regional Agenda, i.e. depression, management of severe mental disorders (like schizophrenia and bipolar disorder), suicide prevention, and disaster mental health. The Regional Agenda is considered useful for ongoing collaboration and for developing a new work plan at redesignation of collaborating centres.

Each collaborating centre then introduced their main collaborative activities with WHO to identify priority actions to be taken in the implementation of the Mental Health Regional Agenda and the Alcohol Regional Strategy. The collaborating centres made significant contributions to WHO regional initiatives by sharing their expertise in special areas ranging from mental health policy and service development, child mental health, alcohol and drug use problems and disorders, to mental health promotion and suicide prevention. A number of centres are also closely working with WHO in providing direct technical support to Member States in terms of building capacity, developing policy and legislation, and strengthening of information and evidence for mental health.

The group brainstormed on how to address various barriers to effective collaboration, including consensus on nature of collaboration, communication, coordination, financial resources, and management issues. The discussion resulted to the following recommendations and action points.

Recommendations and follow-up action points:

General

- Regular timely communication between WHO and the collaborating centres and among the centres especially on country needs with engagement of WHO country offices and mental health focal points in Member States. Annual meetings and newsletters were suggested to facilitate communication.
- Explore mutual beneficial opportunities, such as internship programme in WHO, involving PhD students in country support, and joint training programme by WHO, the collaborating centres, and institutions from countries in need of support.
- Joint resource mobilization, including human and financial resources.
- Stronger support from WHO, such as through visit of WHO officials, for the collaborating centres to mobilize resources from hosting institution.
- To further clarify the nature of relationship between the WHO and the collaborating centres.
- Ensure that practices in collaborating centre designation, redesignation, and collaboration are consistent with the definition of a collaborating centre.
- Strengthen communication and collaboration among the Collaborating Centres.

Specific:

- The Yongin Mental Hospital, Republic of Korea, WHO Collaborating Centre in Psychosocial Rehabilitation will host the annual meeting of Mental Health and Substance Abuse Collaborating Centres in 2015 in conjunction with 12th World Congress of World Association of Psychosocial Rehabilitation.
- Develop a newsletter about the Collaborating Centres on mental health and substance abuse. The Peking University Institute of Mental Health, China will propose the template for the newsletter.
- Disseminate the work and activities of the collaborating centres on mental health and substance abuse to WHO country offices and government counterparts.
- Engage the collaborating centres in existing networks like the Pacific Islands Mental Health Network and the Asia Pacific International Research and Education Network.
- Establish country-focused advisory group on mental health and substance abuse upon request of Member States.

D. Disability, rehabilitation and blindness prevention

WHO session leads: *Dr Andreas Mueller and Ms Pauline Kleinitz*

Session objectives:

- Provide overview of the collaborating centres and current activities
- Highlight collaboration between WHO and the collaborating centres, and among collaborating centres themselves
- Explore challenges and good practices in collaboration experienced by WHO and the collaborating centres and identify steps for improvement

- Provide overview of the global and regional plans for disability and rehabilitation, prevention of blindness and deafness
- Identify and communicate key areas where the collaborating centres may add value to WHO work
- Review current activity plans and identify alterations and or additions to activities based on collaborating centre capacity and needs of WHO
- Agree on activities with well-defined outputs and plans for implementation

Participating WHO collaborating centres:

- Sun Yat-Sen University of Medical Sciences, China (WHO Collaborating Centre for Rehabilitation, CHN-50)
- The Hong Kong Society for Rehabilitation, Hong Kong (SAR) (WHO Collaborating Centre for Rehabilitation, CHN-83)
- National Rehabilitation Centre for Persons with Disabilities, Japan (WHO Collaborating Centre for Disability Prevention and Rehabilitation, JPN-70)
- Royal Victorian Eye and Ear Hospital, Australia (WHO Collaborating Centre for the Prevention of Blindness, AUS-59)
- Juntendo University, Japan (WHO Collaborating Centre for Prevention of Blindness, JPN-34)

Proceedings and key discussion points :

The first parallel session for technical programs provided an opportunity for the five collaborating centres to share an overview of their structure and main collaborative activities. The centres were all involved in service delivery as well as in research and training. Their presentations included information about their management structures and funding situation. The following discussion explored the flexibility and opportunities collaborating centres have in identifying new activities and funding. The range of funding sources available to the centres were discussed and included research funds, bilateral aid agencies and international nongovernment agencies.

During the second parallel session, the regional WHO Disability and Rehabilitation and Prevention of Blindness Programme focal points provided an overview of current global and regional activities. Recently approved global action plans from both programmes and the Regional Prevention of Avoidable Blindness Action Plan were shared with the participants. A discussion started on the types of activities both programmes would like the collaborating centres to undertake to support their objectives. The capacity of collaborating centres to undertake a range of activities, such as report writing, development of resources and support to low and middle-income countries were discussed.

The session allowed specific discussion about cross-over activities between disability and blindness control program and potential for collaboration. The most relevant cross-over area of work are low vision service rehabilitation, i.e. eye care service delivery for people with irreversible visual impairment. The Centres discussed the need for mapping current low vision services in the Region and ideas for specific collaboration to develop an assessment tool.

In the last part of the session, the Technical Lead for each of the Disability and Rehabilitation and the Prevention of Blindness met separately with their collaborating centres. During these meetings, specific ongoing and planned collaborating centre activities were discussed and revisions or updates

were identified based on changes in WHO or the centres. Small changes were made to ongoing and planned activities for the Disability and Rehabilitation collaborating centres.

Recommendations and follow-up action points:

- All collaborating centres should regularly share their draft and final reports of activities they had committed to do under the collaborating centre terms of reference.
- All collaborating centres should reach out to WHO regularly and share information and similarly the WHO Technical Programme Leads should be in more frequent contact with the centres in future.
- The China-based WHO Collaborating Centre for Disability and Rehabilitation agreed on a joint project to report on the status of Community Based Rehabilitation (CBR) in China and share this at the Asia Pacific CBR Congress.
- The Disability and Rehabilitation Collaborating Centre in Japan will host a side meeting on rehabilitation for interested participants during the upcoming Asia Pacific CBR Congress.

E. Reproductive, maternal, neonatal, child and adolescent health

WHO session lead: *Dr Howard Sobel*

Session objectives:

- Provide an opportunity for WHO and the collaborating centres to learn essential information about each other's strengths and strategic priorities
- Highlight collaborative reproductive, maternal, newborn, child and adolescent health (RMNCAH) activities that the collaborating centres feel most important (i.e., what they did, why and why they consider this most important)
- Identify and communicate key areas where the collaborating centres may add value
- Agree on individual collaborating centre activities with well-defined outputs and working method for next cycle, building on strengths of the collaborating centres to fill in the gaps currently present
- Agree on activities for networks (in lieu of the usual bilateral collaboration)

Participating WHO collaborating centres:

- University of Melbourne, Australia (WHO Collaborating Centre for Women's Health, AUS-61)
- University of Melbourne, Australia (WHO Collaborating Centre for Research and Training in Child and Neonatal Health, AUS-87)
- Chengdu University of Traditional Chinese Medicine, China (WHO Collaborating Centre for Research in Human Reproduction, CHN-56)
- National Research Institute for Family Planning, China (WHO Collaborating Centre for Research in Human Reproduction, CHN-63)
- Hong Kong Polytechnic University, Hong Kong (SAR) (WHO Collaborating Centre for Community Health Services, CHN-89)

- Osaka Medical Centre & Research Institute for Maternal & Child Health, Japan (WHO Collaborating Centre for Maternal and Child Health, JPN-61)
- Nihon University, Japan (WHO Collaborating Centre for Research and Training in Population, Reproductive Health and Development, JPN-78)

Proceedings and key discussion points:

Dr Sobel introduced the Regional Office for the Western Pacific/RMNCAH team and presented the Regional Office priority framework to achieve progress towards achieving Millennium Development Goals 4 and 5. The collaborating centre representatives were requested to share the information to the Centres that were not able to participate.

The centres' representatives introduced themselves and stated their centres' current targets and new achievements.

During the first part of the session, a montage exercise was conducted to visually represent the activities of the collaborating centres, network of collaboration, and the linkage of their activities with regional priorities. An installation was set up for the exercise outlining member states in the Western Pacific Region on a map along with the Regional Office activities according to Regional priority framework on pink boards, and the centres' profiles and key staff on white boards. The centre representatives traced the linkages from the centre, to the centre's terms of reference, to the centre's current priority activities, to the WHO WPRO priority framework, to the target Western Pacific Region countries, using differently coloured string for each Centre. Out of a total of 37 priority activities currently being implemented by the Centres, 30 were aligned with the Regional Office priorities while seven activities do not align with Regional priorities. Some specific priorities not aligned were initially taken up during the session.

Dr Sobel, the session lead, looked towards achieving regional priorities through joint regional collaboration within the network of collaborating centres by shifting from centres' individual planning to joint regional planning.

The collaborating centre representatives shared experiences from successful programmes. Achievements—and results in reducing infant mortality rates—from the implementation of kangaroo mother care (i.e. skin-to-skin contact shortly after birth) were attributed to the passion underlying the efforts made by neonatologists some 30 years ago in Osaka. Expertise gained from achievements in Sichuan was presented for the development of projects to fill unmet needs in contraception in some Western Pacific Region countries such as the Philippines.

The collaborating centres' representatives, grouped by area of collaboration, proceeded to brainstorming and planning on future network collaboration on joint priority activities. The centres' representatives planned new activities, with defined timeline in specific WPR countries, to fill existing gaps in regional priority areas using WHO global outputs and the Regional Office strategic priority as guides for aligning/linking priorities.

Discussion and planning of new priority activities centred on projects on quality of data and data collection in five countries of the Mekong region, China and Philippines, preliminary pilot study for women's health in Southeast Asian countries for post-partum care and contraception, mother/baby safety, breastfeeding promotion and child nutrition, and innovative survey and training/advocacy methodologies including email exchanges, outcome evaluation and training guidelines/package.

Joint projects were planned for data collection and correction on newborn health, newborn care in the Solomon Islands (possibly also in Papua New Guinea, or another Pacific island country) based on the Regional Office strategic priorities including essential early newborn care (EENC) and the First Embrace, with support from the Regional Office, and unmet needs for family planning/contraception, with focus on Cambodia, the Lao People's Democratic Republic, Philippines and beyond the Region, Bangladesh.

Highlighted during the discussion, however, were limitations on funding sources that would support the implementation of these collaborative activities.

Suggestions were made to continue discussions, outside of and after the forum, through newsletter, feedback on new ideas originating from individual centres, and email exchange by group members within the area of collaboration.

Recommendations and follow-up action points:

- Continue to work on the development of proposals and implementation plans in the weeks following the Forum so that appropriate proposals could be circulated for comments/review before end of 2014. Given the limitation in funding source, the proposals should consider activities that could be implemented without additional funding, those that would require minimum funding and those that would require new sources of funding. Data expertise and capacity in health economics from NUPRI were cited as additional resources.
- Further face-to-face discussion through the Regional Office visit to centres was suggested.

F. Environmental Health



WHO session leads: *Jung-sub Yeom, Alexander Von Hildebrand, Swee K Lian*

Session objectives:

- Update on the current activities of the collaborating centres based on their terms of reference
- Highlight major contribution of each collaborating centre
- Explore achievements and challenges of collaboration practices with WHO and identify steps for improvement

- Provide an overview of WHO environmental health programme and work plan in the Western Pacific
- Share the work of the Regional Forum on Environment and Health and to explore opportunities for the collaborating centres to contribute and add value to their collaboration with WHO in the Regional Forum
- Agree on future plans with well-defined outputs to improve environmental health in the countries based on collaborating centre capacity and needs of WHO

Participating WHO collaborating centres:

- Curtin University, Australia (WHO Collaborating Centre for Environmental Health Impact Assessment, AUS-78)
- Queensland University of Technology, Australia (WHO Collaborating Centre on Air Quality and Health, AUS-101)
- Queensland Children's Medical Research Institute, University of Queensland, Australia (WHO Collaborating Centre for Children's Health and the Environment, AUS-111)
- Radiation Effects Research Foundation, Japan (WHO Collaborating Centre for Research on Radiation Effects on Humans, JPN-32)
- National Institute for Minamata Disease, Japan (WHO Collaborating Centre for Studies on the Health Effects of Mercury Compounds, JPN-49)
- National Institute of Public Health, Japan (WHO Collaborating Centre for Community Water Supply and Sanitation, JPN-51)
- Nagasaki University School of Medicine, Japan (WHO Collaborating Centre for Research on Radiation-Induced Thyroid Diseases and Surgical Treatment of Radiation Injuries, JPN-68)
- National Institute of Radiological Sciences, Japan (WHO Collaborating Centre for Radiation Emergency Medicine, JPN-79)
- Hokkaido University, Japan (WHO Collaborating Centre for Environmental Health and Prevention of Chemical Hazards, JPN-91)
- National Institute of Environmental Research, Republic of Korea (WHO Collaborating Centre for Vulnerable Population and Environment Health, KOR-97)
- PUB Singapore, Singapore (WHO Collaborating Centre for Safe Management of Drinking-water and Integrated Urban Water Management, SIN-27)

Proceedings and key discussion points:

The meeting served as a venue for the 11 collaborating centres for Environmental Health to present their work and at the same time understand the work of other Centres which paved the way for the exploration of possible collaborations. The Regional Office for the Western Pacific Health and Environment unit briefly introduced environmental health programmes in the region related with water, sanitation and hygiene, air pollution, chemical safety, climate change, health impact assessment.

After the presentation of each centre's activities and plans, there was a discussion on potential collaborations between centres, as well as identified challenges and opportunities for synergy and cooperation of the centres within the country level, with the Regional Office and other WHO regions. Discussion focused on a proper mechanism which could harmonize the activities of 11

technically-diverse collaborating centres for environmental health and environmental health policies in the region. An overview of the Regional Forum on Environment and Health in Southeast and East Asian Countries and its proposed work plan and Programme Budget 2014–15 of Environmental Health in the Regional Office for the Western Pacific were presented. The Regional Forum consists of ministers on health and environment from 14 countries that meets every 3 years and a high-level forum being held every 18 months since 2007. To support the outcomes/outputs of the Regional Forum, there are seven Technical Working Groups (TWGs) that covers (1) air quality, (2) water, sanitation and hygiene, (3) waste, (4) chemicals, (5) climate change, (6) environmental health emergency, and (7) health impact assessment.

After the discussion, most participants had the understanding that Regional Forum (RF) on Environment and Health in Southeast and East Asian countries can be a useful platform for engaging diverse Centres to the policy direction of the Regional Office for the Western Pacific Environmental Health programme.

For future direction among the collaborating centres for Environmental Health, the representatives also discussed and gave inputs to the proposed Outcome Statement.

Recommendations and follow-up action points:

- Share information and resources from each collaborating centre to facilitate networking among the centres and Thematic Working Groups (TWGs). The Regional Forum website could be used for this purpose and could be expanded towards a global platform to monitor environmental health matters.
- Encourage participation of all collaborating centres in the Regional Forum as they work closely with many countries. They could start using the Regional Forum documents and encourage implementing National Environmental Health Action Plans (NEHAPs) which could facilitate these countries wanting to become members in the future.
- Explore joint actions to address the increasingly complex and dynamic global public and environmental health landscape, influenced by climate change and other global changes through strategic partnerships and efforts.
- Strengthen the partnership between WHO and the collaborating centres, and among collaboration centres as well as within WHO to improve outcomes and impact at all levels.

G. Occupational Health

WHO session lead: *Dr Nasir Hassan*

Session objectives:

- Provide an overview of WHO's occupational health programmes in the Western Pacific Region in supporting countries
- Understand the work of each collaborating centre in occupational health
- Share the Regional Office for the Western Pacific vision to strengthen occupational health in four selected countries in the region and collect inputs for a draft work plan to that purpose

- Present and discuss the draft work plan for strengthening occupational health programmes in four selected countries – innovative work with the collaborating centres and agree on next steps
- Discuss about global and regional meetings in occupational health that could be shared and participated by the collaborating centres

Participating WHO collaborating centres:

- La Trobe University, Australia (WHO Collaborating Centre for Occupational Health, AUS-106)
- University of Occupational & Environmental Health, Japan (WHO Collaborating Centre for Occupational Health, JPN-53)
- National Institute of Occupational Safety and Health, Japan (WHO Collaborating Centre for Occupational Health, JPN-76)
- The Catholic University of Korea, Republic of Korea (WHO Collaborating Centre for Occupational Health, KOR-9)
- Korea Occupational Safety and Health Agency, Republic of Korea (WHO Collaborating Centre for Occupational Health, KOR-86)
- National University of Singapore, Singapore (WHO Collaborating Centre for Occupational Health, SIN-18)
- National Institute of Occupational & Environmental Health, Viet Nam (WHO Collaborating Centre for Occupational Health, VTN-3)

Proceedings and key discussion points:

The Regional Office for the Western Pacific and the Division of Health and the Environment (HAE) presented its mandate, as well as the work the division is doing for occupational health. The challenges the WHO HAE is facing include the need to (1) increase the capacity of Member States in occupational health through comprehensive and multisectoral policies, plans, and programmes and thru regional technical networks, (2) enhance health sector leadership on primary prevention interventions to reduce environmental and occupational health hazards, and (3) enhance multi-sectoral and inter-country cooperation.

The Global Plan of Action for Workers' Health and the Regional Framework for Action for Occupational Health was introduced as basis for the WHO Occupational Health Programme. Initially, four Member States, namely Cambodia, the Lao People's Democratic Republic, Mongolia and Viet Nam, were chosen and agreed upon to be the focus of activities of the collaborating centres on occupational health. These Member States were selected based on the occupational health status of their respective jurisdictions. Dr. Hassan, the session lead, requested the collaborating centre representatives to identify ways to support the selected member states. Collaborative support to strengthen the occupational health programme of the selected Member States included the creation of institutional profiles as well as analysis of the occupational health situation.

After the presentation, an inquiry was raised about the difference between the Global Master Plan for Implementing the Global Plan of Action on Workers' Health and the Regional Framework for Action, since most of the collaborating centres developed their terms of reference around the objectives of the

Global Master Plan. It was clarified that the Global Master Plan was used as guide in the implementation of the regional framework. With that, the group agreed to map the differences between the two documents in order to clarify the validity of each of the collaborating centre's terms of reference and their roles in accordance to the regional framework. In addition, the group came up with a consensus to extend the implementation of the Regional Framework for Action until 2017 since the document that was used as basis (i.e., the Global Plan of Action) also ends its implementation period in 2017.

All the collaborating centres for occupational health were given time to introduce their activities and priorities in line with the Regional Office for the Western Pacific as mandated by their terms of reference. After the presentations, Professor Ken Takahashi of Institute of Industrial Ecological Sciences, University of Occupational and Environmental Health (IIES-Japan) presented their project on the mapping of resources for the collaborating centres in occupational health which collated all the regional and national outputs the centres have produced and which summarized all the centres work for occupational health.

The individual centre presentations clearly indicated their adherence to their individual terms of reference, which are patterned after the Global Master Plan. Most of the collaborating centres focus in providing guidance, sharing of tools and initiatives that support the health sector in formulating relevant policies to improve health, safety, and the environment. Besides this, a number of collaborating centres also served the following functions: (1) technical assistance and support for strengthening occupational and environmental health risk management systems, functions, and services, (2) technical support and guidance for the implementation of primary prevention interventions reducing environmental health hazards, (3) health sector leadership for creating a healthier environment through responding to emerging environmental and occupational health issues, (4) formulation and updating of norms and standards related to major environmental hazards to health, and (5) formulation of policies, strategies and recommendations on climate change for reference of member states. Furthermore, some centres perform these functions in line with special areas of concern for occupational health, such as ergonomics and human factors, occupational health for healthcare workers, workers in the small and medium enterprises, occupational health programmes for retiree workers, and the assessment and prevention of asbestos-related diseases.

An inquiry was raised regarding the funding used by the collaborating centres and if these funds are specifically allocated for centre work. All the centres present agreed that there is no specific budget provided by their institution which is allotted for their work as a collaborating centre.

The group also focused on how to formulate an action plan which the collaborating centres will implement and focus their efforts on in order to achieve the main objective of strengthening the occupational health programme of Member States in the Western Pacific Region. Taking into account that the Regional Office for the Western Pacific now focuses on four Member States for the improvement of their occupational health programmes, a plan was devised with recommendations for immediate action. These recommendations are summarized below.

Recommendations and follow-up action points:

- Extend the period of implementation of the Regional Framework for Action for Occupational Health 2011-2015 up to 2017 since the Global Plan of Action for Workers' Health by which the former is based upon also ends in 2017.

- Using the Regional Framework for Action for Occupational Health 2011–2015 as the basis to strengthen the cooperation between WHO and the collaborating centres, it is recommended to:
 - (a) document the achievements made by Member States in the development and strengthening of national policies and plan of action for occupational health with appropriate targets and milestones.
 - (b) provide support in strengthening occupational health of selected Member States in the Region (i.e., Cambodia, Laos, Mongolia and Viet Nam) with the following objectives:
 - develop the national occupational health profile of the four selected Member States and identify areas in need of strengthening
 - develop a guideline in establishing Occupational Disease Surveillance System for developing countries and disseminate the results
 - develop a model integrating provision of occupational health services¹ in the primary healthcare system and document and share the experience.
 - develop guidelines on risk assessment and management of occupational hazards in high-risk sectors and vulnerable worker groups and disseminate the results.
 - (c) support collaboration between the WHO Regional Office for the Western Pacific and the collaborating centres, and among the centres through the Regional collaborating centre meetings and publication of meeting reports, online meetings, and the Regional Office-hosted email list and website.

H. Health Systems

All 41 collaborating centres working on health systems first met jointly for 1.5 hours to specifically understand the cross-sectoral nature of health system work and to identify opportunities for cross-cutting work. The Division of Health Systems and all the technical coordinators made a brief presentation on the technical collaboration priorities in the specific technical areas highlighting the cross-cutting areas.

Following this introductory combined parallel session, the collaborating centres were subdivided into six subgroups according to their technical focus for the next two parallel sessions to further identify innovative opportunities in strengthening and enhancing partnerships based on factors that constitute good collaboration. The proceedings, key discussion points, recommendations and actions for follow-up are detailed in the succeeding sections.

H1. Essential medicines, health technology and biologicals

WHO session lead: *Dr Klara Tisocki*

Session objectives:

- Understand the concept of WHO collaborating centre network

¹ *Occupational health services cover prevention of occupational disease, occupational injury and noncommunicable diseases.*

- Update WHO collaborating centres on current medicines/health technology related priority work of WHO for the Twelfth General Programme of Work for 2014–2019
- Discuss priority area(s) of collaboration through regional Collaborating Centre network for medical products/technology

Participating WHO collaborating centres:

- Key Lab of Health Technology Assessment, Fudan University, China (WHO Collaborating Centre for Health Technology Assessment and Management, CHN-86)
- Ministry of Food and Drug Safety, Republic of Korea (WHO Collaborating Centre for standardization and evaluation of biologicals, KOR-90)
- Korean Red Cross, Republic of Korea (WHO Collaborating Centre for Blood Transfusion Safety, KOR-100)
- Jalan University, Malaysia (WHO Collaborating Centre for Regulatory Control of Pharmaceuticals, MAA-15)
- Science University of Malaysia, Malaysia (WHO Collaborating Centre for Drug Information, MAA-16)
- Pacific Paramedical Training Centre, New Zealand (WHO Collaborating Centre for External Quality Assessment in Health Laboratory Services, NEZ-15)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Transfusion Medicine, SIN-16)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Medicines Quality Assurance, SIN-25)

Proceedings and key discussion points:

The WHO collaborating centres provided an overview of their work highlighting the areas of technical support provided to member states through the essential medicines, health technologies and vaccine regulatory strengthening units of the Regional Office for the Western Pacific.

The following are the key areas in which the contribution of the collaborating centres at the country level can fill existing gaps in the work of WHO:

- Systemic and sustainable capacity building in management and regulation of different medical products, health technologies, blood and laboratory services.
- Need for increased capacity-development for technical evaluation of medicines and vaccines for effectiveness, safety and cost-effectiveness including use of scientific objective tools such as health technology assessment
- Contributions from different perspectives and from different stakeholders to deal with antimicrobial resistance at country, regional and global level.
- Generation of evidence from policy evaluation and research on how to increase access to essential medicines and health technologies, including vaccines under universal health coverage.

The collaborating centres shared their experiences on how successes from developing intervention in different areas may be used to tackle other medicine-related issues (e.g., education, advocacy and intervention methodologies with successful resources mobilization developed for tobacco control and smoking cessation) might provide models for strategies to deal with antimicrobial resistance. There

was an emphasis for the need to share lessons learned for the creation of a network of collaborating centres to support WHO's work in specific areas such as health technology assessment.

Recommendations and follow-up action points:

- Contribute in the fight against antimicrobial resistance (AMR) by increasing awareness, developing specific information education campaign tools and materials in country specific context, and increasing laboratory capacity for AMR surveillance.
- Support regional networks of regulatory national regulatory authorities (NRAs) wherein fully-functional NRAs can help with regulatory strengthening of less-developed/functional NRAs.
- Provide technical support to countries in implementing WHO guidelines and standards on health technologies and in informing national practice guidelines.
- Share standardized tools for assessment, and existing good and best practices to other countries.
- Focus on systematic long-term institutional development and organizational strengthening rather than direct training assistance only.
- The Regional Office for the Western Pacific to facilitate online sharing of collaborating centre contacts and technical information on their work.

H2. Health information and e-health

WHO session lead: *Mr Mark Landry*

Session objectives:

- Review the contribution of each collaborating centre in 2013–2014 with respect to agreed objectives and terms of reference (i.e., what was achieved and what was the impact?)
- Share and discuss updates on WHO priorities, current and planned actions in the areas of monitoring and evaluation (M&E), health information systems (HIS), civil registration and vital statistics (CRVS), effective use of eHealth and mHealth solutions to improve health outcome
- Given the organizational and resource constraints of both WHO and the collaborating centres, explore opportunities for additional collaborative activities starting in 2015

Participating WHO collaborating centres:

- University of New South Wales, Australia (WHO Collaborating Centre on e-Health, AUS-92)
- University of Queensland , Australia (WHO Collaborating Centre for Health Information Systems, AUS-114)
- Korea Health and Welfare Information Service, Republic of Korea (WHO Collaborating Centre for the WHO Family of International Classifications, Terminologies, and Standards, KOR-94)

Proceedings and key discussion points:

A review of the technical support provided to Member States through the Health Intelligence and Innovation Unit of the Regional Office for the Western Pacific was shared, emphasizing areas of monitoring and evaluation (M&E), health information systems (HIS), e-Health, and civil registration and vital statistics (CRVS) strengthening. In particular, the types of collaboration that has occurred in recent years with the collaborating centres in attendance was highlighted, including development of standards and tools with support for improving the International Classification of Diseases (ICD) and guidance documents such as the CRVS assessment tools. Overall the key areas of centre collaboration discussed included:

- Development and implementation of norms, standards, and tools
- Analysis and research
- Knowledge exchange
- Co-convening meetings and workshops
- Capacity-building and training
- Support of communities of practice

Each of the four collaborating centres in the session shared their recent collaborative efforts with WHO, primarily focusing on the work of two of the unique centres in the region that are part of the WHO Family of International Classification (WHO-FIC) network that help improve the classification standards and have developed tools for increasing their adoption and use to improve the quality and use of morbidity and mortality statistics. The collaborating centre for e-Health described their commissioned work to review evidence for the efficacy of e-Health to improve healthcare service delivery and recent developments on adapting e-Health solutions for elderly populations and issues associated with the ageing. One of the newest collaborating centres focusing on health information systems highlighted the effective collaborations in the past three years to improve HIS and CRVS systems and joint publications developed with WHO for assessment, planning, short-courses, and white papers on special topics.

Recommendations and follow-up action points:

- The two WHO-FIC network collaborating centres and the collaborating centre for health information systems discussed a potential joint collaboration with WHO for piloting the new ICD-10 code short list for morbidity and mortality and potential linkages with overall CRVS implementation plans in Cambodia, Lao PDR, and Viet Nam. This will be linked to the Asia Pacific WHO-FIC Network planned activities.
- The collaborating centres for e-Health and for health information systems both based in Australia discussed new efforts to strengthen overall use of information and communications technology (ICT) in the health sector to improve reliability, analysis, and use of health data.
- The collaborating centre for e-Health discussed new opportunities in 2015 to collaborate with the Regional Office in use of e-Health in line with the new ageing agenda for the region.
- Planned meetings co-organized by the Regional Office on HIS and e-Health in 2015 and 2016 will extend invitations to these collaborating centres for participation and contribution to the programme to improve knowledge exchange and learning.

H3. Integrated service delivery and public health law

WHO session lead: *Dr Rasul Baghirov*

Session objectives:

- Review contribution of each collaborating centre in the 2013–2014 with respect to agreed objectives
- Update collaborating centres on the Regional Office approaches in strengthening integrated people-centred services in the countries of the region, including patient safety/quality of care and public health law
- Explore areas for some joint work and cooperation in 2015

Participating WHO collaborating centres:

- Jiading Primary Health Care Centre, China (WHO Collaborating Centre for Primary Health Care, CHN-123)
- National Centre for Global Health and Medicine, Japan (WHO Collaborating Centre for Health Systems Research, JPN-45)
- National Institute of Public Health, Japan (WHO Collaborating Centre for Healthcare Facility Planning and Service Delivery, JPN-50)
- The Asian Institute of Bioethics and Health Law, Yonsei University, Republic of Korea (WHO Collaborating Centre for Health Law and Bioethics, KOR-96)
- Institute for Health Systems Research, Malaysia (WHO Collaborating Centre for Health Systems Research and Quality Improvements, MAA-14)
- Health Sciences University of Mongolia, Mongolia (WHO Collaborating Centre for reference on Emergency and Essential Surgical Care, MOG-1)

Proceedings and key discussion points:

Each collaborating centre was invited to give an update of their ongoing activities and plans for 2015. The Integrated Service Delivery (ISD) technical team highlighted in some detail the Regional Office priorities in the areas of integrated and people-centred service delivery and patient safety/quality of healthcare as well as broader health systems strengthening issues (e.g., governance in health) with universal health care (UHC) as focus.

As highlighted at this session, ISD priorities for 2015 as well as 2016–2017 include:

- Joint WPRO/SEARO/OECD/OECD Korea network meeting with focus on safety and patient/family empowerment.
- The Western Pacific Region countries consultation on application of Feedback, Finance Regulation, Ownership, Governance and Goals (FFROGG) as part of UHC consultation.
- Country hospital sector development support – in China, Lao People's Democratic Republic, Mongolia, Papua New Guinea and Viet Nam.
- Consultation on Traditional Medicine integration with national health systems (piggyback on International Congress on Complementary Medicine Research (ICCMR)).
- Global Health Learning Centre: coordination of cohort 2015 from March to August, Manila.

- Human Resources Health (HRH) country dialogue, strategic planning and support to strengthening health professions education development centres, faculty – in China, Cambodia, Lao People’s Democratic Republic and Malaysia.
- Country support on development/implementation of integrated service delivery models, funded by Global Health Initiatives (GHI).
- Costing of services and sustainability studies (i.e., Lao People’s Democratic Republic, Viet Nam immunization programme).

The participants were then invited to highlight areas where collaboration between the collaborating centres and WHO can be strengthened. The following areas have been identified as having potential for improved collaborating efforts:

- **Hospital services and management** - The emphasis on hospital reform is consistent with increasing demand for hospital sector support from WHO and partners. The Member States increasingly request support in areas such as strategic planning, regulation, management skills, efficiency, performance monitoring and accountability. China and Viet Nam are among the countries which received initial support from WHO. In parallel with the country work, an expert consultation on hospital services and management was organized in Manila in November 2014. Initial consultations have now been held with policy makers and experts from the Pacific Island countries about the hospital sector challenges, many of which relate to management practices and challenges in addressing chronic non-communicable diseases. A formal consultation with the member states of the Pacific are being planned for 2016. The collaborating centres were invited to join in this effort.
- **Patient safety and quality improvement** is another area where collaborating centres’ effort has been particularly welcomed. The realization that quality and safety are indispensable in improving health outcomes is emphasized in a number of WHO strategic and policy documents. Health service quality does not necessarily mean having nice and sophisticated amenities, but it is about having services which are safe and effective meeting individual and population needs. Particularly, joint effort is needed on the following objectives:
 - Strengthen national legislative frameworks, policies and regulatory bodies (i.e., health workforce, medicines and health technologies, health facilities and infrastructure)
 - Design and implement protocols, guidelines, and pathways
 - Build competent and responsive health workforce and multi-disciplinary teams
 - Improve relevance and continuity of information for building quality assurance systems
 - Implement integrated service delivery models to ensure continuity of care
 - Improve health literacy and strengthen systems of health information and education for individuals, families and communities

In conclusion, the session lead summarized the main points of the discussion and proposed next steps.

Recommendations and follow-up action points:

- Scale up bilateral collaboration with each participating collaborating centre the approved terms of reference.
- Identify and launch collaborative activities among the collaborating centres. Some of the activities proposed were in the area of hospital services management, and safety and quality.
- Improve information exchange by emails, online forums, and participation in meetings/workshops.

- Identify and engage collaborating centres which are not directly mapped to service delivery cluster, but would be interested to contribute to a joint ISD activity.
- Visit each collaborating centre on integrated service delivery in the next 18 months.
- Review the terms of reference and course of action for 2015 of the Health Sciences University of Mongolia collaborating centre together with the WHO headquarters responsible to strengthen the capacity of the centre.

H4: Health research and ethics

WHO session lead: *Dr Manju Rani*

Session objectives:

- Understand and jointly review the ongoing collaborative work on health research and Ethics
- Update WHO collaborating notes on current priorities on health research and ethics of WHO for the Twelfth General Programme of Work for 2014–2019
- Discuss potential priority area(s) of collaboration through WHO collaborating centres at the country level

Participating WHO collaborating centres:

- Monash University, Australia (WHO Collaborating Centre for Bioethics, AUS-116)
- Yonsei University, College of Medicine, Republic of Korea (WHO Collaborating Centre for Health Systems Research, KOR-19)
- National University of Singapore, Singapore (WHO Collaborating Centre for Bioethics, SIN-28)

Proceeding and key discussion points:

All the three participating collaborating centres first presented their current terms of reference and key collaborative activities they are engaged in. Both Bioethics centres were designated by WHO headquarters and have been actively engaged as part of global collaborating centre network on Bioethics. They also supported the development of various norms and standards on research ethics and public health ethics. Although designated by the WHO headquarters, the two centres expressed their willingness to engage and support work at the regional and country level as well. As an example, there are ongoing discussions between Singapore collaborating centre and the Regional Office to support Lao People's Democratic Republic national health research ethics committee. The centres also gave an overview of their technical resources available that may be tapped for collaborative activities.

Dr Rani provided an update on the current ongoing work in health research, ethics and knowledge management at the regional and country level. She briefed on the initiatives on health research governance and management, improving access to research data and research ethics. She highlighted the importance of ethical issues in routine service delivery and how WHO and collaborating centres may work together to raise awareness about this agenda and bring visibility to this issue.

Potential activities for future collaboration were also discussed. These focused on country-level work on public health ethics and the development of training programs on research ethics for use in developing countries, on top of their ongoing support for development of guidelines and norms at the global level.

Recommendations and follow-up actions:

- Ensure communication in the coming months to further elaborate on tangible activities of the centres including country support.
- Explore opportunities for joint activities involving other collaborating centres that work on other health system issues, considering cross-cutting nature of ethical issues.

H5. Human Resources for health

WHO session lead: *Dr Fethiye Gulin Gedik*

Session objectives:

- Provide an opportunity for WHO and the collaborating centres to learn about each other's strengths and strategic priorities
- Identify challenges to effective collaboration between WHO and the collaborating centres

Participating WHO collaborating centres:

- University of Technology Sydney, Australia (WHO Collaborating Centre for Nursing, Midwifery and Health Development, AUS-93)
- James Cook University, Australia (WHO Collaborating Centre for Nursing and Midwifery Education and Research Capacity-Building, AUS-98)
- Hong Kong Polytechnic University, Hong Kong (SAR) (WHO Collaborating Centre for Community Health Services, CHN-89)
- Peking Union Medical College, China (WHO Collaborating Centre for Nursing Policy-Making and Quality Management, CHN-93)
- Shandong University, China (WHO Collaborating Centre for Nursing Care for Vulnerable Groups including those impacted by disasters, CHN-109)
- St. Luke's College of Nursing, Japan (WHO Collaborating Centre for Nursing Development in Primary Health Care, JPN-58)
- Research Institute of Nursing Care for People & Community, University of Hyogo, Japan (WHO Collaborating Centre for Nursing in Disasters and Health Emergency Management, JPN-77)
- Gunma University, Japan (WHO Collaborating Centre for research and training on Interprofessional Education, JPN-89)
- Yonsei University, Republic of Korea (WHO Collaborating Centre for Research and Training for Nursing Development in Primary Health Care, KOR-16)
- University of the Philippines Manila, Philippines (WHO Collaborating Centre for Leadership in Nursing Development, PHL-13)

Proceeding and key discussion points:

Ten out of 11 Human Resources for Health (HRH) related WHO collaborating centres participated in the session. Nine of them were nursing and midwifery collaborating centres with involvement in several networks and had long-lasting relationship.

The representatives of the collaborating centres expressed that they value being a collaborating centre as it provides an opportunity to work together with other colleagues and to be involved in global health issues. The designation as a collaborating centre also gives them the leverage at the national level, and provides encouragement and motivation for faculty development.

They agreed that the WHO collaborating centers for HRH will work towards WHO's goal of Universal Health Care (UHC) through development of fit for purpose health workforce contributing to ensure access to quality services. The centres also agreed to align their activities with the work plans and priorities of WHO.

The collaboration between WHO and the centres, and among the centres will be maintained and strengthened. Nine of the 11 collaborating centres related to HRH are active members of three already existing collaborative networks. These are the Global Network for WHO collaborating centres on Nursing and Midwifery Development, Asia Pacific Emergency Disaster Nursing Network, and South Pacific Chief Nursing and Midwifery Officers Alliance. These networks will be strengthened regionally to respond to emerging regional issues.

Recommendations and follow-up actions:

- Continue analysis of terms of reference of the collaborating centres, their priority and focus areas, country relationships, and outputs and activities.
- Establish regular regional virtual meetings of HRH collaborating centres.
- Active engagement in regional and global consultations (e.g., Global Strategies for HRH and Strategic Directions for Nursing and Midwifery)

H6. Traditional Medicine



WHO session lead: *Dr Sangyoung Ahn*

Session objectives:

- Share experiences of joint symposia conducted by WHO collaborating centres
- Identify and prioritize potential areas for intervention and how WHO and its partners could assist Member States with evidence based traditional medicine
- Review measures for better coordination supplementing the routine e-system
- Mainstream traditional medicine with public health challenges

Participating WHO collaborating centre:

- Institute of Acupuncture & Moxibustion, China Academy of Chinese Medical Sciences, China (WHO Collaborating Centre for Traditional Medicine, CHN-32)
- Shanghai University of Traditional Chinese Medicine, China (WHO Collaborating Centre for Traditional Medicine, CHN-33)
- Institute of Chinese Materia Medica, China Academy of Chinese Medical Sciences, China (WHO Collaborating Centre for Traditional Medicine, CHN-34)
- Institute of Clinical Research & Information, China Academy of Chinese Medical Sciences, China (WHO Collaborating Centre for Traditional Medicine, CHN-35)
- (Institute of Medicinal Plant Development, Chinese Academy of Medical Sciences, China (WHO Collaborating Centre for Traditional Medicine, CHN-44)
- Department of Health, Hong Kong (SAR) (WHO Collaborating Centre for Traditional Medicine, CHN-115)
- Kitasato University, Japan (WHO Collaborating Centre for Traditional Medicine, JPN-46)
- University of Toyama, Japan (WHO Collaborating Centre for Traditional Medicine, JPN-54)
- Kyung Hee University, Republic of Korea (WHO Collaborating Centre for Traditional Medicine, KOR-17)
- Seoul National University, Republic of Korea (WHO Collaborating Centre for Traditional Medicine, KOR-18)
- Korea Institute of Oriental Medicine, Republic of Korea (WHO Collaborating Centre for Traditional Medicine, KOR-89)

Proceedings and key discussion points:

Dr Vivian Lin welcomed the representatives of the collaborating centres for traditional medicine. Three collaborating centres were invited to share their experiences in conducting activities in relation to their terms of reference. Dr Wulumujiafo of Institute of Chinese Material Medica, China Academy of Chinese Medical Sciences presented the outcome of the symposium of Collaborating Centres for Traditional Medicine in China held in June 2014, Beijing, China. Similarly, Dr Hiroshi Odaguchi of Kitasato University and Dr Yeong Shik Kim of Seoul National University shared the outcome of the joint symposia that their collaborating centre organized.

The common challenges the three collaborating centres encountered in organizing the symposia were the limited number of participating collaborating centres, the need for better coordination with WHO and the need for setting agenda aligned with collaborating centre activities.

Dr Ahn introduced the operational principles of the proposed joint symposia of collaborating centres for traditional medicine. He commented on the frequency of the symposium, formation of secretariat, mission and objectives of the network, financial consideration, and intended output. In the next parallel session, Dr Ahn introduced WHO volunteer programme for better coordination between collaborating centres and WHO in their activities.

Dr Taneda Kenichiro and Dr Sarah Paulin joined the session to introduce potential cross- sectoral activities with traditional medicine. Dr Sarah Paulin discussed the potential role of traditional medicine in containing antimicrobial resistance. Most participants supported the suggestion and shared their experiences. It is expected that a concrete activity on this regard is planned by 2015.

Dr Taneda Kenichiro, on the other hand, presented the patient safety programme in WHO. The collaborating centres for traditional medicine in Japan has significant experience in the area and discussed concrete activities to progress patient safety in traditional medicine.

Recommendations and follow-up action points:

- Encourage the communication/sharing of experience between the collaborating centres and WHO to achieve shared goals that addresses the needs of Member States.
- Maximize mechanism of volunteer programme for better cooperation between the collaborating centres and WHO in accordance with the WHO's priorities/
- Contribute to cross-sectoral areas such as antimicrobial resistance (AMR) and patient safety.

I. International Health Regulations: Emerging Diseases and Food Safety



WHO Session leads: *Dr Li Ailan, Dr Varja Grabovac, Dr Frank Konings*

Session objectives:

- Build a common understanding of Regional Health Security
- Determine factors for success between WHO and the collaborating centres working together
- Provide an overview of the recent country support provided by collaborating centres related to preparedness, alert and response
- Identify best practices of collaborating centre engagement with countries and discuss mechanisms of operation
- Understanding the current regional support provided by the collaborating centres related to preparedness, alert and response
- Understand the importance, role and opportunities for the collaborating centres in regional preparedness for alert and response now and in the future

Participating WHO collaborating centres:

- Flinders University, Australia (WHO Collaborating Centre for Mass Gatherings and High Visibility/High Consequence Events, AUS-109)
- Chinese Center for Disease Control and Prevention WHO CC for Reference and Research on Influenza, CHN-104)
- National Institute of Infectious Diseases, Japan (WHO Collaborating Centre for Virus Reference and Research (Enteroviruses), JNP-22)
- National Institute of Infectious Diseases, Japan (WHO Collaborating Centre for Reference and Research on Influenza, JPN-64)
- Nagasaki University, Japan (WHO Collaborating Centre for Reference and Research on Tropical and Emerging Virus Diseases, JPN-67)
- Hokkaido University, Japan (WHO Collaborating Centre for Zoonoses Control, JPN-87)
- University of Malaya, Malaysia (WHO Collaborating Centre for Arbovirus Reference & Research (Dengue/Dengue Haemorrhagic Fever), MAA-12)

- Food and Environmental Hygiene Department, China (WHO Collaborating Centre for Risk Analysis of Chemicals in Food, CHN-91)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Food Contamination Monitoring, SIN-17)

Proceedings and key discussion points:

An overview of the International Health Regulations (IHR 2005) as a global legal framework for protecting global public health security was provided and how the Asia Pacific Strategy for Emerging Diseases (APSED) serves as a tool to meet IHR core capacity requirements. Sustainable national and regional capacities and partnerships are needed to ensure public health security. These discussions provided a background and context to succeeding discussions with the collaborating centres on how they can best contribute to this.

Participants discussed that the Western Pacific Region is highly vulnerable to health security threats. Ebola in West Africa was addressed in this context and the need to be prepared for emerging diseases that may arrive in the Region. Besides emerging diseases, there is also a need to have the systems in place to manage food safety emergencies effectively in order to ensure Regional health security. It was noted that more interaction between different networks should be promoted, such as the International Food Safety Authorities Network (INFOSAN) and IHR.

An exercise was conducted to better understand the country support given by the collaborating centres and the mechanisms of how this support is provided. The collaborating centres provided support in the following key areas: (1) technical support, (b) material and data sharing, (c) research, (d) collaboration and networking, and (e) trainings. Training was by far the most common avenue of providing support to countries. The collaborating centres indicated the continued need for training as in-country staff turnover is often high. Training of trainers is a mechanism to build in-country capacity.

It was noted that the collaborating centres for food safety have traditionally focused mostly on chemical events related to food safety. However, there is a strong need and capability to strengthen their capacity of detecting and responding to foodborne pathogens considering the food chain continuum in collaboration with WHO.

The collaborating centres for influenza have been actively working together and with our Member States through the National Influenza Centres over the past decades. They set a good example on how to support countries and the region with strengthening surveillance and laboratory capacities for influenza. This system also proved useful beyond influenza and was used for other emerging infectious diseases such as the Middle East respiratory syndrome coronavirus. Regular annual face-to-face meetings of all members of the influenza system at biregional National Influenza Centres meetings ensure that information is shared and the future directions are set.

Participants recognized the importance of face-to-face meetings such as the collaborating centre forum to strengthen existing working relationships and build new ones. For example, building linkages between the collaborating centres for influenza, zoonoses, emerging viral diseases, dengue and polio may strengthen surveillance and response capacities and Regional Health Security. The Forum provides the opportunity for new the collaborating centres, such as for mass gathering and food safety, to learn from well-established collaborating centre and determine where they fit within the bigger picture of WHO programmes and priorities.

Recommendations and follow-up action points:

- A better understanding of the communication and coordination mechanisms between the collaborating centres and WHO is needed while recognizing the effectiveness of established informal networks of the collaborating centres.
- A better understanding and ownership of the collaborating centre host government to receive their appreciation and support needs to be fostered. The lack of funding remains a general concern of Centres affecting the sustainability of their activities, including country support.
- Ensure regular communication and networking among the collaborating centres to strengthen existing relationships and to building new ones.

J. Library and Publications

WHO session lead: *Ms. Marie Villemain-Partow*

Participating WHO collaborating centres:

- Institute of Medical Information, China (WHO Collaborating Centre for Health and Biomedical Information, CHN-62)
- Seoul National University, Republic of Korea (WHO Collaborating Centre for Health Information and Library Services, KOR-99)

Session objectives:

- Identify the gaps and challenges to come up with a doable and effective collaboration between WHO and the collaborating centres.
- Review the quality, efficiency and impact of ongoing collaboration.
- Present the objectives of the collaborating centres.
- Identify and discuss projects and activities in relation to the objectives of the collaborating centres
 - Identify and communicate key areas where the collaborating centres may add value

Proceedings and key discussion points:

The two collaborating centres discussed with the Regional Office Library how to further work together for an effective collaboration and to address the challenges and barriers that affects health information access in the Western Pacific Region.

Among the matters discussed were the following: the need for a central repository to make information products produced by the collaborating centres available, address the gaps on language diversity in the Region which is not only limited to the three official languages (i.e., Chinese, English and French) but as well as the local languages, raise awareness on the availability of information products in the Institutional Repository for Information Sharing (IRIS) and in the Regional Index Medicus (WPRIM). Furthermore, it was also recommended that there should be reinforced communication and collaboration between the Library, Translation and Publications collaborating centres.

Recommendations and follow-up action points:

- Create a community in IRIS (Institutional Repository for Information Sharing) to share information produced by the collaborating centres.
- Support multilingualism by collecting information products produced by Member States and WHO country offices in all languages and make them available in IRIS (for WHO country offices) and WPRIM (Member States).
- Promote WHO information via WHO collaborating centre network.
- Conduct capacity building activities on information access and sharing at country level.
- Agreed to hold an annual meeting between the Regional Office Library and the collaborating centres

LIST OF POSTERS PRESENTED

Poster session 1-1: Communicable diseases

- St Vincent's Institute of Medical Research, Australia (WHO Collaborating Centre for Diagnostics and Laboratory Support for HIV/AIDS and Other Blood-borne Infections, AUS-45)
- Albion Street Centre , Australia (WHO Collaborating Centre for Capacity Building and Healthcare worker training in HIV/AIDS Treatment Care and Support , AUS-89)
- Institute of Dermatology, Chinese Academy of Medical Sciences and Pekling Union Medical College, China (WHO Collaborating Centre for Prevention and Control of Sexually Transmitted Infections , CHN-75)
- Victorian Infectious Diseases Reference Laboratory, Australia (WHO Collaborating Centre for Mycobacterium Ulcerans, AUS-95)
- Research Institute of Tuberculosis, Japan (WHO Collaborating Centre for Reference, Research and Training on Tuberculosis, JPN-38)
- Korean Institute of Tuberculosis, the Korean National Tuberculosis Association, Republic of Korea (WHO Collaborating Centre for Research, Training and Reference Laboratory on Tuberculosis, KOR-24)
- James Cook University Australia, Australia (WHO Collaborating Centre for the Control of Lymphatic Filariasis, Soil-transmitted Helminths and other Neglected Tropical Diseases, AUS-68)
- National Institute of Parasitic Diseases, China CDC, China (WHO Collaborating Centre for Malaria, Schistosomiasis and Filariasis, CHN-6)
- Hunan Institute of Parasitic Diseases, China (WHO Collaborating Centre on Schistosomiasis Control in Lake Regions, CHN-58)
- Second Military Medical University, China (WHO Collaborating Centre for Gene Synthesis and Expression, CHN-76)
- National Institute for Communicable Disease Control and Prevention, China CDC, China (WHO Collaborating Centre for Vector Surveillance and Management, CHN-114)
- Institute for Medical Research, Malaysia (WHO Collaborating Centre for the Ecology, Taxonomy & Control of the Vectors of Malaria, Filariasis & Dengue, MAA-13)
- Research Institute for Tropical Medicine, Philippines (WHO Collaborating Centre for Malaria Diagnosis, PHL-19)
- Research Institute for Tropical Medicine, Philippines, Singapore (WHO Collaborating Centre for Reference and Research of Arbovirus and their Associated Vectors. SIN-26)

Poster session 1-2: Emerging diseases and food safety

- Flinders University, Australia (WHO Collaborating Centre for Mass Gatherings and High Visibility/High Consequence Events, AUS-109)
- Chinese Center for Disease Control and Prevention, China (WHO CC for Reference and Research on Influenza, CHN-104)
- National Institute of Infectious Diseases, Japan (WHO Collaborating Centre for Virus Reference and Research (Enteroviruses), JPN-22)

- National Institute of Infectious Diseases, Japan (WHO Collaborating Centre for Reference and Research on Influenza, JPN-64)
- Nagasaki University, Japan (WHO Collaborating Centre for Reference and Research on Tropical and Emerging Virus Diseases, JPN-67)
- Hokkaido University, Japan (WHO Collaborating Centre for Zoonoses Control, JPN-87)
- University of Malaya, Malaysia (WHO Collaborating Centre for Arbovirus Reference & Research (Dengue/Dengue Haemorrhagic Fever, MAA-12)
- Food and Environmental Hygiene Department, China (WHO Collaborating Centre for Risk Analysis of Chemicals in Food, CHN-91)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Food Contamination Monitoring, SIN-17)

Poster session 2-1: Health promotion

- Deakin University, Australia (WHO Collaborating Centre for Obesity Prevention, AUS-80)
- National Institute of Health and Nutrition, Japan (WHO Collaborating Centre for Nutrition and Physical Activity, JPN-88)
- University of Sydney, Australia (WHO Collaborating Centre for Physical Activity, Nutrition and Obesity, AUS-107)
- The George Institute for Global Health, Australia (WHO Collaborating Centre on Population Salt Reduction, AUS-110)
- Niigata University Graduate School of Medical and Dental Sciences, Japan (WHO Collaborating Centre for Translation of Oral Health Science, JPN-75)
- Victorian Health Promotion Foundation, Australia (WHO Collaborating Centre for Excellence in Health Promotion, AUS-117)
- Tokyo Medical & Dental University, Japan (WHO Collaborating Centre for Healthy Cities and Urban Policy Research, JPN-73)
- Research Institute for Healthy Cities and Health Impact Assessment, Soonchunhyang University, Republic of Korea (WHO Collaborating Centre for Healthy Cities and Health in All Policies. KOR-101)
- Health Promotion Board, Singapore (WHO Collaborating Centre for Health Promotion and Disease Prevention, SIN-21)
- Department of Health, Hong Kong (SAR) (WHO Collaborating Centre for Smoking Cessation and Treatment of Tobacco Dependence, CHN-113)
- National Institute of Public Health, Japan (WHO Collaborating Centre on Tobacco Testing and Research, JPN-90)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Tobacco Testing and Research, SIN-22)

Poster session 2-2: Noncommunicable disease, ageing and disability

- Baker IDI Heart and Diabetes Institute, Australia (WHO Collaborating Centre for Research and Training in Cardiovascular Diseases, AUS-115)
- Shanghai Cancer Institute, China (WHO Collaborating Centre for Cancer Prevention and Control, CHN-95)
- Kyoto Medical Center, National Hospital Organization, Japan (WHO Collaborating Centre for Diabetes Treatment and Education, JPN-56)

- Dokkyo Medical University Koshigaya Hospital, Japan (WHO Collaborating Centre for Prevention and Control of Chronic Respiratory Disease, JPN-83)
- National Cancer Center, Republic of Korea (WHO Collaborating Centre for Cancer Registration, Prevention and Early Detection. KR-84)
- University of Newcastle, Australia (WHO Collaborating Centre for International Longitudinal Studies on Gender, Ageing and Health, AUS-94)
- Tokyo Metropolitan Geriatric Hospital and Institute of Gerontology, Japan (WHO Collaborating Centre for Health of the Elderly, JPN-81)
- Sun Yat-Sen University of Medical Sciences, China (WHO Collaborating Centre for Rehabilitation, CHN-50)
- The Hong Kong Society for Rehabilitation, Hong Kong (SAR) (WHO Collaborating Centre for Rehabilitation, CHN-83)
- National Rehabilitation Centre for Persons with Disabilities, Japan (WHO Collaborating Centre for Disability Prevention and Rehabilitation, JPN-70)
- Royal Victorian Eye and Ear Hospital, Australia (WHO Collaborating Centre for the Prevention of Blindness, AUS-59)
- Juntendo University, Japan (WHO Collaborating Centre for Prevention of Blindness, JPN-34)

Poster session 2-3: Mental health and substance abuse

- Curtin University, Australia (WHO Collaborating Centre for the Prevention of Alcohol and Drug Abuse, AUS-63)
- St Vincent's Institute of Mental Health, Australia (WHO Collaborating Centre for Research and Training in Mental Health, AUS-75)
- University of Western Australia, Australia (WHO Collaborating Centre for Research and Training in Mental Health, AUS-77)
- Beijing Neurosurgical Institute, China (WHO Collaborating Centre for Research and Training in Neurosciences, CHN-28)
- Nanjing Child Mental Health Research Centre, China (WHO Collaborating Centre for Research and Training in Child Mental Health, CHN-47)
- Central South University, China (WHO Collaborating Centre for Psychosocial Factors, Substance Abuse and Health, CHN-71)
- Beijing Hui Long Guan Hospital, Suicide Research and Prevention Center, China (WHO Collaborating Centre for Research and Training in Suicide Prevention, CHN-79)
- Peking University Institute of Mental Health, China (WHO Collaborating Centre for Research and Training in Mental Health, CHN-110)
- Kurihama Medical and Addiction Center, National Hospital Organization, Japan (WHO Collaborating Centre for Research and Training on Alcohol-Related Problems, JPN-57)
- Yongin Mental Hospital, Republic of Korea (WHO Collaborating Centre for Psychosocial Rehabilitation and Community Mental Health, KOR-27)

Poster session 3-1: Essential medicine, health technologies and integrated health services

- University of New Castle, Australia (WHO Collaborating Centre for Pharmaco-economics and Rational Pharmacotherapy, AUS-69)
- Ministry of Food and Drug Safety, Republic of Korea (WHO Collaborating Centre for standardization and evaluation of biologicals, KOR-90)
- Korean Red Cross, Republic of Korea (WHO Collaborating Centre for Blood Transfusion Safety, KOR-100)
- Jalan University, Malaysia (WHO Collaborating Centre for Regulatory Control of Pharmaceuticals, MAA-15)
- Science University of Malaysia, Malaysia (WHO Collaborating Centre for Drug Information, MAA-16)
- Pacific Paramedical Training Centre, New Zealand (WHO Collaborating Centre for External Quality Assessment in Health Laboratory Services, NEZ-15)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Transfusion Medicine, SIN-16)
- Health Sciences Authority, Singapore (WHO Collaborating Centre for Medicines Quality Assurance, SIN-25)
- National Centre for Global Health and Medicine, Japan (WHO Collaborating Centre for Health Systems Research, JPN-45)
- National Institute of Public Health, Japan (WHO Collaborating Centre for Healthcare Facility Planning and Service Delivery, JPN-50)
- The Asian Institute of Bioethics and Health Law, Yonsei University, Republic of Korea (WHO Collaborating Centre for Health Law and Bioethics, KOR-96)
- Institute for Health Systems Research, Malaysia (WHO Collaborating Centre for Health Systems Research and Quality Improvements, MAA-14)
- Health Sciences University of Mongolia, Mongolia (WHO Collaborating Centre for reference on Emergency and Essential Surgical Care, MOG-1)

Poster session 3-2: Health information, research and library

- University of New South Wales, Australia (WHO Collaborating Centre on e-Health, AUS-92)
- University of Queensland, Australia (WHO Collaborating Centre for Health Information Systems, AUS-114)
- Ministry of Health, Labour and Welfare, Japan (WHO Collaborating Centre for the Family of International Classifications, JPN-85)
- Korea Health and Welfare Information Service, Republic of Korea (WHO Collaborating Centre for the WHO Family of International Classifications, Terminologies, and Standards, KOR-94)
- Monash University, Australia (WHO Collaborating Centre for Bioethics, AUS-116)
- Yonsei University, College of Medicine, Republic of Korea (WHO Collaborating Centre for Health Systems Research, KOR-19)
- National University of Singapore, Singapore (WHO Collaborating Centre for Biomedical Ethics, SIN-28)

- Institute of Medical Information, China (WHO Collaborating Centre for Health and Biomedical Information, CHN-62)
- Seoul National University, Republic of Korea (WHO Collaborating Centre for Health Information and Library Services, KOR-99)

Poster session 4-1: Traditional medicine

- Shanghai University of Traditional Chinese Medicine, China (WHO Collaborating Centre for Traditional Medicine, CHN-33)
- Institute of Chinese Materia Medica, China Academy of Chinese Medical Sciences, China (WHO Collaborating Centre for Traditional Medicine, CHN-34)
- Institute of Medicinal Plant Development, Chinese Academy of Medical Sciences, China (WHO Collaborating Centre for Traditional Medicine, CHN-44)
- Department of Health, Hong Kong (SAR) (WHO Collaborating Centre for Traditional Medicine, CHN-115)
- Kitasato University, Japan (WHO Collaborating Centre for Traditional Medicine, JPN-46)
- University of Toyama, Japan (WHO Collaborating Centre for Traditional Medicine, JPN-54)
- Kyung Hee University, Republic of Korea (WHO Collaborating Centre for Traditional Medicine, KOR-17)
- Seoul National University, Republic of Korea (WHO Collaborating Centre for Traditional Medicine, KOR-18)
- Korea Institute of Oriental Medicine, Republic of Korea (WHO Collaborating Centre for Traditional Medicine, KOR-89)

Poster session 4-2: Human resources for health

- University of Technology Sydney, Australia (WHO Collaborating Centre for Nursing, Midwifery and Health Development, AUS-93)
- James Cook University, Australia (WHO Collaborating Centre for Nursing and Midwifery Education and Research Capacity-Building, AUS-98)
- Hong Kong Polytechnic University, Hong Kong (SAR) (WHO Collaborating Centre for Community Health Services, CHN-89)
- Peking Union Medical College, China (WHO Collaborating Centre for Nursing Policy-Making and Quality Management, CHN-93)
- Shandong University, China (WHO Collaborating Centre for Nursing Care for Vulnerable Groups including those impacted by disasters, CHN-109)
- St. Luke's College of Nursing, Japan (WHO Collaborating Center for Nursing Development in Primary Health Care, JPN-58)
- Research Institute of Nursing Care for People & Community, University of Hyogo, Japan (WHO Collaborating Centre for Nursing in Disasters and Health Emergency Management, JPN-77)
- Gunma University, Japan (WHO Collaborating Centre for research and training on Interprofessional Education, JPN-89)
- Yonsei University, Republic of Korea (WHO Collaborating Centre for Research and Training for Nursing Development in Primary Health Care, KOR-16)
- University of the Philippines Manila, Philippines (WHO Collaborating Centre for Leadership in Nursing Development, PHL-13)

Poster session 5-1: Occupational Health

- La Trobe University, Australia (WHO Collaborating Centre for Occupational Health, AUS-106) – Poster submitted already
- University of Occupational & Environmental Health, Japan (WHO Collaborating Centre for Occupational Health, JPN-53)
- National Institute of Occupational Safety and Health, Japan (WHO Collaborating Centre for Occupational Health, JPN-76)
- The Catholic University of Korea, Republic of Korea (WHO Collaborating Centre for Occupational Health, KOR-9)
- Korea Occupational Safety and Health Agency, Republic of Korea (WHO Collaborating Centre for Occupational Health, KOR-86)
- National University of Singapore, Singapore (WHO Collaborating Centre for Occupational Health, SIN-18)
- National Institute of Occupational & Environmental Health, Viet Nam (WHO Collaborating Centre for Occupational Health, VTN-3)

Poster session 5-2: Environmental health

- Curtin University, Australia (WHO Collaborating Centre for Environmental Health Impact Assessment, AUS-78)
- Queensland University of Technology, Australia (WHO Collaborating Centre on Air Quality and Health, AUS-101)
- Queensland Children's Medical Research Institute, University of Queensland, Australia (WHO Collaborating Centre for Children's Health and the Environment , AUS-111)
- Radiation Effects Research Foundation, Japan (WHO Collaborating Centre for Research on Radiation Effects on Humans, JPN-32)
- National Institute for Minamata Disease, Japan (WHO Collaborating Centre for Studies on the Health Effects of Mercury Compounds, JPN-49)
- National Institute of Public Health, Japan (WHO Collaborating Centre for Community Water Supply and Sanitation, JPN-51)
- Nagasaki University School of Medicine, Japan (WHO Collaborating Centre for Research on Radiation-Induced Thyroid Diseases and Surgical Treatment of Radiation Injuries, JPN-68)
- National Institute of Radiological Sciences, Japan (WHO Collaborating Centre for Radiation Emergency Medicine, JPN-79)
- Hokkaido University, Japan (WHO Collaborating Centre for Environmental Health and Prevention of Chemical Hazards, JPN-91)
- National Institute of Environmental Research, Republic of Korea (WHO Collaborating Centre for Vulnerable Population and Environment Health, KOR-97)
- PUB Singapore, Singapore (WHO Collaborating Centre for Safe Management of Drinking-water and Integrated Urban Water Management, SIN-27)

Poster session 5-3: Reproductive, maternal, newborn, child and adolescent health

- University of Melbourne, Australia (WHO Collaborating Centre for Women's Health, AUS-61)
- University of Melbourne, Australia (WHO Collaborating Centre for Research and Training in Child and Neonatal Health, AUS-87)
- Chengdu University of Traditional Chinese Medicine, China (WHO Collaborating Centre for Research in Human Reproduction, CHN-56)
- National Research Institute for Family Planning, China (WHO Collaborating Centre for Research in Human Reproduction, CHN-63)
- Osaka Medical Centre & Research Institute for Maternal & Child Health, Japan (WHO Collaborating Centre for Maternal and Child Health, JPN-61)
- Nihon University, Japan (WHO Collaborating Centre for Research and Training in Population, Reproductive Health and Development, JPN-78)

