



PARALLEL SESSION 3.1

GLOBAL PARTNERSHIPS FOR COUNTRY OUTCOMES





| BACKGROUND

Despite significant scientific and technological advances, as well as ongoing collaborative efforts to prevent, detect, and respond to high-impact diseases associated with emerging infectious or antimicrobial-resistant pathogens, these diseases continue to emerge and pose threats to human and economic security. The underlying causes of their emergence include growing human populations, increasing socioeconomic development, and associated industrialized food production, urbanization, and globalization. Each of these factors in turn results in ever-increasing personal interaction, animal-human interface, and interdependence within and among communities at the local, regional, and global levels. In the context of such an inter-connected world -- with disease drivers ready to multiply and amplify the adverse impacts of emerging infectious or antimicrobial-resistant pathogens -- cross-sectoral collaboration is needed more than ever to facilitate and enhance prevention, detection, and response.

Although the first line of defense in disease prevention and control rests at the country level, pandemics respect no borders. Thus, regional and global cooperation and coordination, with increasing involvement of the private sector and communities, are essential to tackle problems from various angles. Although many multi-sectoral partnerships have to date been initiated with different mechanisms and structures, some partnerships and networks have been used in coordinated manners to manage globally concerning health crises such as the 2014 Ebola epidemic in Africa. It will be valuable to learn from such examples and understand how partners from different sectors were engaged to serve public needs. It will also be beneficial to identify obstacles to and gaps in coordinated action during joint crisis-management efforts and to explore options for improved preparedness and response in the future.

| OBJECTIVES

The objectives of this session are therefore to:

- · Discuss the models and platforms that currently exist globally and regionally
- · Share findings on the effectiveness of these models and platforms in guiding practice and partnerships

 \cdot Identify common needs and bottlenecks that can be practically addressed to establish a more effective and inclusive partnership for management of EIDs and pandemics, as well as AMR









Panelist / Panelist

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Tanarak Plipat, M.D., Ph.D. is serving as the Deputy Director of the Department of Disease Control (DDC), Ministry of Public Health, Kingdom of Thailand (MOPH/Thailand). Dr. Tanarak, received a doctor in Medicine from Prince Songkla University, Thailand, a Master in Public Health from Mahidol University, Thailand and Ph.D. in Epidemiology from UCLA, USA. He is a graduate of the Field Epidemiology Training Programme, Thailand. Dr. Plipat started his medical career as the general physician at Krabi provincial health office in 1991. He served as Medical Epidemiologist for HIV/AIDS surveillance section, Bureau of Epidemiology (2000-2010), a chief of the national HIV/TB/STI surveillance unit (2003-2009) and a director of Bureau of Knowledge Management, Department of Disease Control (2006-2010). From March 2010-December 2013, served as Thai Co-Director of Thailand MOPH-U.S. CDC Collaboration (TUC). He worked as the Director of Bureau of Epidemiology, DDC between December 2013 and February 2017 and he has been promoted to be a deputy director of the Department of Disease Control in February 2017. From 2001 to present, he has served on numerous national committees for MOPH/Thailand, including recently serving as member on Committee for Clinical Study of Pandemic Influenza Cases and Deaths, and the National Strategic Advisory Committee of Experts on Pandemic Influenza. He was appointed a chair of a committee to draft a Department of Disease Control's research strategic plan in 2003 and a chair to draft the Department's strategic plan in 2004 and again in 2017. He has a record of publications regarding important public health issues in Hepatitis, measles and HIV/AIDS situation in Thailand. He has experience working in the field of surveillance and outbreak investigation. As a director of Bureau of Epidemiology, he initiated a laboratory-based surveillance system for priority syndromes in Thailand, supported the initiation of public health laboratory network and supported the use of laboratory evidence to support an outbreak investigation.

