

The background of the cover is a photograph of a modern, multi-story building with a curved facade and a glass-enclosed walkway. The building is made of light-colored stone or concrete panels. The sky is blue with some clouds. A blue banner is overlaid at the top, containing the title and subtitle.

IANPHI

INSIDER

INSIGHTS FOR NATIONAL PUBLIC HEALTH INSTITUTES

IANPHI IN THE NEW DECADE

**THE 2019 IANPHI ANNUAL MEETING AND
OUR PRIORITIES FOR THE YEAR AHEAD**

FEBRUARY 2020

ISSUE #5

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Dear IANPHI Insider Readers:

We're proud to share the fifth edition of IANPHI Insider with you, and to serve our members better than ever.

This issue of Insider opens with an important message from IANPHI President Dr. André van der Zande outlining his priorities for the coming year. A review of our successful annual meeting in Addis Ababa follows, and includes links to many of the materials shared at the meeting.

This month we're shining a spotlight on two member achievements, one in Malawi and the other in Colombia. We welcome these opportunities to share important news from our members and look forward to publishing even more of these type of articles in the future.

Please e-mail us at info@ianphi.org if you have any comments, questions, or stories you want to share with us. We're here to serve our membership.

Thank you,

IANPHI Insider Team

IANPHI Insider serves our members by sharing information that provides knowledge, expertise and insights to help public health professionals learn from their peers. IANPHI Insider connects member organizations to IANPHI's work, and touts our successes, plans and challenges, as we strive to improve global health.

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IANPHI's strategic priorities for 2020

By André van der Zande, president of IANPHI



Dear IANPHI colleagues:

To begin the new year, and as a follow-up to some of the important discussions we had at the IANPHI Executive Board and General Assembly meetings in Addis Ababa in December, I want to share with you my priorities for IANPHI for this year.

1. Updating our Strategic Vision 2018-2022

We will prepare an update of IANPHI's Strategic Vision, to be put to a vote by our General Assembly in December 2020 in Rio de Janeiro. Our current Strategic Vision document for the period 2018-2022 was adopted during our 2017 General Assembly meeting in Rome.

IANPHI has accomplished a lot in the in the past two years, but with our fast growth, the Executive Board and I believe that we need to review our priorities and strategic goals, and set new ones, for example, strengthening our regional approach.

At the December 2019 meeting in Ethiopia, the Executive Board decided to create a working group to draft an updated and improved Strategic Vision, which can be used on our website and for external communications purposes. At the next Executive Board meeting, Secretary General Jean-Claude Desenclos will introduce a process to enable this working group to gather input from our members and partners.

2. Reaching an agreement on a joint action plan with WHO

We aim to finalize and formalize IANPHI's draft joint working plan with the World Health Organization's (WHO) head office. A joint working group has been

drafting the plan since a meeting in Geneva of IANPHI and WHO delegations.

The initial theme for this plan is *Strengthening preparedness and response*. It was inspired by the *Strengthening National Accountability and Preparedness for Global Health Security* program, or SNAP-GHS. The program aligns with WHO's 'triple billion goals'. Two other themes under development, universal healthcare and health promotion, have been addressed by the joint working group, but are not yet as well developed.

The draft joint action plan was discussed in Addis Ababa at the Executive Board and the General Assembly meetings, and with WHO representatives in the Partnership dialogue. Our ongoing cooperation with WHO Euro has already proved very fruitful, focusing on capacity building and leadership. I know that many of you have stressed the need to formalize this partnership at the global level and I will do my best to make it happen this year.

3. Implementing a resource development action plan for IANPHI globally

IANPHI's current Strategic Vision includes a target for resources development, which entails fundraising for additional missions to be undertaken by the IANPHI Secretariat at the global level. A lot of IANPHI's work can be done using in-kind contributions of our members' staff or through "sponsoring" by one of our prominent members. However, there is an unfulfilled ambition to increase staff capacity at the main Secretariat in Paris.

We need to find dedicated funding and donors for this, as additional burdens cannot be placed on the main Secretariat without new resources. We aim to follow the IANPHI US Office's best practices, for example its successful partnership with U.S. CDC.

To meet this objective, we will organize extra temporary staff responsible for resource development at the Paris Secretariat. They will be in charge of drafting and implementing a resources development action plan, under the supervision of our Secretary General and Secretariat. I will personally support the Secretary General to make this happen.

I will keep you informed of our progress this year, and I look forward to seeing all of you at our next annual meeting in Rio de Janeiro in December 2020.

With best wishes,



André van der Zande
President of IANPHI

Highlights of the 2019 IANPHI Annual Meeting

The 2019 IANPHI Annual Meeting took place in Addis Ababa, Ethiopia from December 3-6. More than 150 public health leaders from 59 countries attended the meeting hosted by the Ethiopian Public Health Institute and Africa Centres for Disease Control and Prevention.



Group photo at the 2019 IANPHI Annual Meeting in Ethiopia

Holding its annual meeting in Addis Ababa was of particular significance to IANPHI, in light of the work the organization has been doing to help create and support African NPHIs and its strong partnership with the Africa Centres for Disease Control and Prevention (CDC).

The 2019 meeting focused on the theme “Evidence-informed global action for trans-boundary public health challenges”.

Ethiopia’s state Minister of Health, Dr. Lia Tadesse, opened the conference, following introductory remarks by Dr. Ebba Abate, director of the Ethiopian Public Health Institute (EPI), and André van der Zande, president of IANPHI. In her speech, Dr. Tadesse highlighted the great strides her country has made in improving key health indicators and

renewed her commitment to support and contribute resources to the EPI.

Over the course of three days, seven plenary and seven concurrent sessions took place, as well as regional network meetings, IANPHI’s executive board and general assembly meetings, and a social dinner with an Ethiopian dance performance. Public health

topics included the role of NPHIs in a nation's development, strengthening national preparedness for health emergencies, the importance of working with diverse stakeholders to promote healthier societies and more.

[You can view the full meeting agenda and presentations here.](#)

New partnerships

At the annual meeting, IANPHI and [Africa Centres for Disease](#)

[Control and Prevention \(CDC\)](#) signed a letter of intent for a public health partnership to coordinate efforts to support building and strengthening NPHIs in Africa to reduce international disease threats and improve population health on the continent. You can learn more about this partnership by reading the Africa CDC Corner on page 14.

The General Assembly approved a memorandum of understanding (MOU) between

IANPHI and the Association of Schools of Public Health in the European Region (ASPHER), an independent European organization dedicated to improving education and training of public health professionals in Europe. The MOU will be signed in early 2020 and includes supporting the quality assurance of public health education and training through the Agency for Public Health Education Accreditation (APHEA).



From left to right: the African Union conference room, Ebba Abate and Lia Tadesse speaking at the meeting

New IANPHI members

IANPHI welcomed five new member organizations this year. IANPHI's membership now extends to 114 members across 99 countries.

Burkina Faso: [Institut National de Santé Publique](#)

Burkina Faso's Institut National de Santé Publique (INSP) was established in June 2018, following the merger of four Ministry of Health departments: research, health monitoring and emergency response management, population health observatory, and national reference laboratory. Recent site visits to France and Belgium, as part of IANPHI's peer-to-peer learning support, were critical to the success of the young NPHI.

The INSP is recognized as the national reference with a high level of expertise in epidemic control, thanks to its center for operations in health emergencies department. The INSP has a strong reporting and surveillance system for communicable diseases, to prevent, identify and manage outbreaks of illnesses such as measles, meningitis, tuberculosis, and yellow fever.

The INSP has strong laboratory capacities and is actively involved in developing the public health workforce by offering placements for public health students and field epidemiology training. The institute publishes at least six research studies each year, which can have impacts on public practices or policies.

Denmark: [Statens Serum Institut](#)

Statens Serum Institut (SSI) is an institution under the auspices of the Danish Ministry of Health. It aims to strengthen public health through disease control and research. Its main function is to ensure preparedness against infectious diseases and biological threats as well as control of congenital disorders. The organization of SSI consists of a management board and three health priority areas: infectious disease preparedness, biobank and biomarkers, and research.

Germany: [Federal Center for Health Education \(BZgA\)](#)

The Federal Center for Health Education (BZgA) is a specialist authority within the portfolio of the Federal Ministry of Health in Germany. It is tasked with interdisciplinary work around health education at the national level. BZgA is involved in the elaboration of guidelines regarding practical health education, vocational training and continuing education of persons working in health education, coordination and intensification of health education in Germany, and international collaboration.

BZgA uses many indicators, with good coverage of the entire country, to develop health promotion, disease prevention recommendations, and educational materials. The institute focuses on child health, healthy aging, diabetes, sexual health, smoking, drinking, drugs, vaccination and gambling addiction.

Guinea: [Agence Nationale de Sécurité Sanitaire](#)

Guinea's Agence Nationale de Sécurité Sanitaire (ANSS) was established following the 2014-2015 Ebola epidemic in West Africa, which highlighted the need for stronger in-country epidemiological surveillance and alert systems.

In collaboration with the Ministry of Health, ANSS manages the surveillance data for epidemic-prone priority diseases, including Ebola, yellow fever, measles, meningitis, cholera, avian flu, anthrax, and Lassa fever.

ANSS' major departments include surveillance, emergency operations center, logistics, communication, treatment, and finances. It provides technical assistance and play a leading role in collaboration with laboratories, other Ministries, non-governmental organizations, international agencies, and programs within the Ministry of Health to reduce epidemic risk.

Zimbabwe: [Zimbabwean National Public Health Institute](#)

The Zimbabwean National Public Health Institute is in the process of being developed through a partnership agreement between the Ministry of Health and Child Care (MoHCC) and the University of Zimbabwe. The mission of institute will be to support the MoHCC in using evidence for programming health interventions.

Once established, the Zimbabwean NPHI will have five strategic goals, which cover research on public policy and health legislation, the public health workforce, a national public health observatory, public policy and economic analysis, collaborative research and partnerships with other NPHIs.

Topics discussed at the annual meeting

- Impact of an NPHI in the health development of a nation
- Development and strengthening of African NPHIs
- Role of NPHIs in promoting synergies and balance between universal health coverage (UHC), health security and health promotion
- Child Health and Mortality Prevention Surveillance (CHAMPS) network update – the role of NPHIs and subnational public health authorities in using the data to support action for improving child survival
- Impact of an NPHI's funding sources on their activities, autonomy and partnerships
- Building on a proposal for a joint IANPHI-WHO action plan – how to support NPHIs in strengthening public health systems through partnerships
- Results from the SNAP-GHS pilot program (Strengthening National Accountability and Preparedness for Global Health Security)
- Intersectoral collaboration for disease prevention and health promotion – approaches taken by NPHIs to strengthen their position with stakeholders, including the industry

[All the presentations from panelists are available on our website.](#)

[The official conclusions of the annual meeting from the IANPHI executive board are available on our website.](#)

[The photo album of the annual meeting is available on Flickr.](#)



From left to right: Meerjady Sabrina Flora, director of Institute of Epidemiology Disease Control and Research in Bangladesh and IANPHI President André van der Zande; George Fu Gao, director general of China CDC; Hajer Skhiri, director of the National Health Institute of Tunisia; Taye Worku, master of ceremony of the annual meeting; John Nkengasong, director of Africa CDC, and Claire Bayntun, consultant in Global Public Health; Nancy Knight, director of the Global Health Protection division at U.S. CDC



From left to right: Camilla Stoltenberg, director general of the Norwegian Institute of Public Health, Haleema Alserahi, director for Global Health at Saudi CDC, and Felix Rosenberg, director at Fiocruz, Brazil; Eduardo Samo Gudo, Deputy Director General, National Institute of Health in Mozambique; Jean-Claude Desenclos, secretary general of IANPHI; Vladimir Prikazsky, deputy director for scientific affairs at the Czech National Institute of Public Health and Chikwe Ihekweazu, chief executive officer of Nigeria CDC; Bjørn Iversen, director of the Global Health department at the Norwegian Institute of Public Health; André van der Zande, president of IANPHI, John Nkengasong, director of Africa CDC, and Ellen Whitney, director of the IANPHI U.S. secretariat; Ethiopian dance performance; Natalie Mayet, deputy director of the National Institute for Communicable Disease in South Africa; Duncan Selbie, chief executive of Public Health England; Pekka Puska, chair of the IANPHI Foundation, and André van der Zande; a coffee break at the annual meeting ; Amira Elfadil, social affairs commissioner of the African Union; Ebba Abate, director of the Ethiopian Public Health Institute, being interviewed by journalists

Success story competition: the results are in

IANPHI held its first annual success stories competition to highlight the successes and notable achievements of our members in 2019.

During the 2019 IANPHI Annual Meeting, the IANPHI regional network chairs and vice-chairs were tasked to select and present success stories to the General Assembly at its December meeting in Addis Ababa.

The stories reflect the diversity of IANPHI membership, with NPHIs at different development stages, all in pursuit of a common goal for better public health for their population. Thank you to all of you who participated and shared success stories.

IANPHI Africa Regional Network

- Institut National de Santé Publique, **Burundi**
- Public Health Institute of Malawi (PHIM), **Malawi**
- National Institute for Communicable Disease, **South Africa**

IANPHI Asia Regional Network

- Chinese Center for Disease Control and Prevention (CDC), **China**
- National Institute of Health, **Pakistan**

IANPHI Europe Regional Network

- Sciensano, **Belgium**
- National Center for Disease Control and Public Health (NCDC), **Georgia**
- National Institute for Public Health and the Environment (RIVM), **The Netherlands**
- Public Health England (PHE), **UK**
- Public Health Wales, **UK**
- Santé Publique France, **France**

IANPHI Latin America Regional Network

- National Laboratories and Health Institutes

- Administration (ANLIS), **Argentina**
- Fiocruz, **Brazil**
- National Health Institute, **Colombia**
- National Institute of Health, **Peru**
- National Institute of Public Health, **Mexico**
- Instituto Nacional de Salud, **Salvador**

The following regional stories were recognized in front of the General Assembly in Addis:

IANPHI Africa Regional Network

Public Health Institute of Malawi (PHIM), **Malawi**
“Malawi Public Health Institute and One Health partners prevent human transfer in anthrax outbreak”

IANPHI Asia Regional Network

Chinese Center for Disease Control and Prevention (CDC), **China**

“China CDC’s global health support capacities upgraded: NPHI networking expedites the process”

IANPHI Europe Regional Network

Public Health England (PHE), **UK**

“PHE sugar reduction and wider reformulation programme”

IANPHI Latin America Regional Network

National Laboratories and Health Institutes Administration (ANLIS), **Argentina**

“Knowledge Management system, in open-source software, Dspace-CRIS”

Congratulations to each NPHI on their

successes! These stories will be featured in the Insider, starting with the Public Health Institute of Malawi.

SUCCESS STORY

Malawi Public Health Institute and One Health partners prevent human transfer in anthrax outbreak

In late 2018 and early 2019, the Public Health Institute of Malawi successfully responded and contained an anthrax outbreak among the local hippopotamus population, in collaboration with One Health partners.



The outbreak began in October 2018 when local public health authorities started noticing an increasing number of dead hippopotami floating on the Shire River, which runs alongside Liwonde National Park in Southern Malawi. The Shire is the country's largest river and Lake Malawi's only outlet.

The Public Health Institute of Malawi (PHIM), along with the Department of Wildlife and the Ministry of Agriculture, Irrigation and Water Development,

opened a joint investigation to investigate the cause of these deaths. Two PHIM officers were sent to secure specimens from the hippopotami and restrict access to the zone, preventing any bioterrorism-related risk.

Samples, such as animal carcasses and water, were tested in two national laboratory facilities: the Central Veterinary Laboratory and the PHIM laboratory. They quickly revealed that the hippopotami were dying from anthrax, a serious

bacterial disease caused by *Bacillus anthracis*.

Anthrax is known to kill wild and domestic animals, and sometimes humans, typically infecting the skin, gastrointestinal track, and lungs. One of the biggest risks was direct transmission. Although anthrax does not spread easily, the spores can survive in the soil for years before it infects an animal or human. Infection occurs when animals or humans breathe in the spores, ingest the spores from contaminated food or water, or the spores enter through a cut or scrape in the skin.

Once the anthrax was confirmed in hippopotami, PHIM coordinated a multi-agency response based on the principles of One Health. One Health is the concept that recognizes that human, animal and environmental healths are deeply connected.

At PHIM's weekly One Health meetings, multi-disciplinary groups from different ministries shared updates on the outbreak, and mobilized resources and relevant partners. The strengths and weaknesses of the response activities were assessed, and participants prepared reports that were sent out to other Malawian government agencies and to the World Organization for Animal Health (OIE), an intergovernmental organization coordinating, supporting and promoting animal disease control. For real-time information sharing, the teams responding to the outbreak created a dedicated WhatsApp forum on anthrax.

At the district level, public health emergency committees met weekly in the affected districts of Balaka and Machinga. Both districts were given extra antibiotics and supplies in case the outbreak was to transfer to people. PHIM staff, local farmers and wildlife personnel were kept informed about the outbreak and response. Public service announcements were made to school children, at village meetings and through public address systems such as town criers sharing information about how to protect themselves from contracting anthrax.

Health officials conducted aerial surveillance to locate animal carcasses in and adjacent to the containment zone. Local police assisted with the response by intervening to stop people in local

communities from using dead animals for food; this action helped prevent human infection.

“The health of the wildlife is directly linked to the health of the people”, explained PHIM Director Dr. Matthew Kagoli

“The health of the wildlife is directly linked to the health of the people”, explained PHIM Director Dr. Matthew Kagoli. He pointed out that wildlife grazes in the same environment as domestic animals, and, when this environment is contaminated, domestic animals can in turn contaminate the communities. Those animals were also closely monitored.

The comprehensive response was a success. Between October and early December 2018, 39 hippopotami were found to have died of anthrax. In December, the death rate stabilized and then began to drop. The last reported hippopotamus death was January 3, 2019. The outbreak was contained to 48 hippo deaths, with no transmission to humans or domestic animals.

According to Dr. Kagoli, the outbreak allowed the country's health leaders and PHIM, a NPHI with only a few years of existence, to demonstrate effective and efficient response capabilities. The PHIM was able to bring everyone to the table and coordinate with ministries and partners in a way that would not have been possible in the past. Dr. Kagoli added that community engagement was key to this success.

The outbreak allowed the country's health leaders and PHIM to demonstrate effective and efficient response capabilities.

Colombia's NPHI receives national award for its state-of-the-art public health information system

Last October, the Instituto Nacional de Salud (INS) received a prestigious award for SIVIGILA 4.0, an enhanced version of their national system of public health surveillance.

The Colombian Federation of Software Industry awarded the INS its Ingenuity Award in recognition of the high quality of the improved system, which has received technical and financial support from IANPHI and the U.S. Centers for Disease Control (CDC).

SIVIGILA 4.0 assists with national epidemiologic intelligence data management generated from the local level. It collects, analyzes, evaluates and disseminates public health information affecting the Colombian population in a timely manner from an estimated 14,000 local health service providers. SIVIGILA gives access to essential data such as the number of pregnant women affected by the Zika epidemic and the number of children born with microcephaly.

This large pool of public health information allows the INS to make evidence-based policy recommendations, improve emergency response systems, and more closely monitor the nation's health security. SIVIGILA has been certified by Colombia's National Administrative Department of Statistics, DANE, for the quality and reliability of its statistical information.

The Ingenuity Awards recognize the best health software projects in Colombia. SIVIGILA was one of more than 360 presented for this seventh edition. This recognition is the result of 19 years of public health surveillance work in the country.

For Dr. Franklyn Prieto, director of Public Health Surveillance at the INS, this award acknowledges the institutional effort that allowed the INS to spearhead public health surveillance.

Prieto stated: "The Institute needed to put Colombia at the forefront of epidemiological information systems in terms of structure and technology. With the support of the U.S. CDC and IANPHI and using the INS experience in innovation, today Colombia is increasingly in the 21st century, with better software, greater interaction and production of information for decision making at all levels."



Franklyn Prieto, Rodrigo Nassar, CEO of ICONOI that supported the development of SIVIGILA 4.0, Claudia Huguett from INS, and a representative of the Federation of Software and IT Industry

IANPHI and Africa CDC formalize their partnership at annual meeting in Ethiopia

On December 4, 2019, at IANPHI's Annual Meeting in Ethiopia, Africa CDC Director John Nkengasong and IANPHI President André van der Zande signed a Letter of Intent for a public health partnership.



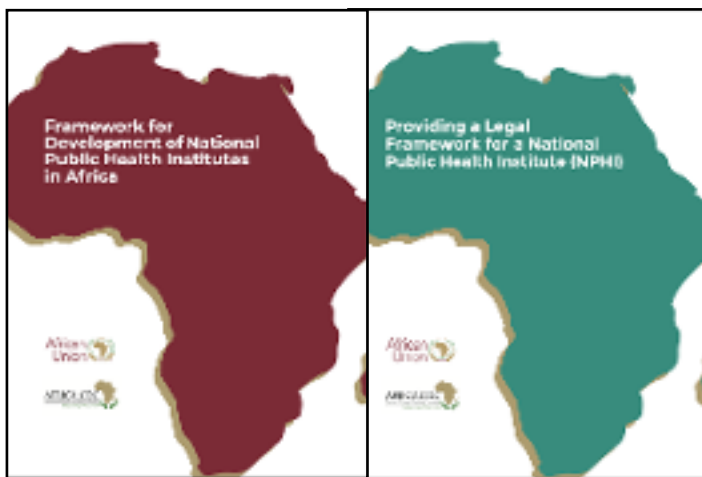
John Nkengasong, director of Africa CDC, and André van der Zande, president of IANPHI, at the 2019 IANPHI Annual Meeting

The agreement between the Africa Centres for Disease Control and Prevention (CDC) and IANPHI formalizes a long-term, fruitful relationship that started when Africa CDC was founded in 2017.

Through this agreement, IANPHI and Africa CDC pledge to support one another's mission and vision, to support one another in reducing the international disease burden and in improving population health in Africa, by helping build and strengthen African NPHIs.

In recent years, IANPHI supported several Africa CDC projects including their website, first two annual reports, newsletters, and other marketing materials. Africa CDC contributed to the organization and hosting IANPHI's annual meeting in December, and the Africa CDC Institute for Workforce Development, established in partnership with Emory University's Rollins School of Public Health, also held a leadership and management training for African NPHI directors.

Together with H.E. Amira Elfadil, social affairs commissioner of the African Union, Dr. Nkengasong and Dr. van der Zande, along with Dr. Natalie Mayet from South Africa's NICD, Shelly Bratton from U.S. CDC and Ellen Whitney from IANPHI, launched two essential new frameworks that serve as essential resources to countries as they work to establish new NPHIs: a [Framework for NPHI Development in Africa](#) and a document on providing a [Legal Framework for a National Public Health Institute](#).



Adapted from IANPHI's Framework for NPHI Development, the Framework for NPHI Development in Africa is tailored for African countries and includes core aspects of their operations and public health functions. It also covers topics for NPHIs to consider as they develop, such as mandates, guiding principles and activities that are vital to create, strengthen and sustain NPHIs. The appendices serve as guidance documents for African countries that want to create more robust and effective national public health capacities.

The creation of this document, available in [English](#), [French](#), [Portuguese](#) and [Arabic](#), was a collaborative effort between the [Africa CDC](#), the [Human Development and Public Health Initiative of Nigeria](#), Mozambique's [Instituto Nacional de Saúde](#), [Public Health England](#), South Africa's [National Institute for Communicable Diseases](#), the [U.S. CDC](#), [Zambia National Public Health Institute](#), and IANPHI.

The purpose of the second document introduced at the meeting – Providing a Legal Framework for

an NPHI – is to describe the types of legal mechanisms countries are using to establish NPHIs or enhance the stature of existing NPHIs and the issues typically addressed. It also describes processes countries have used to place NPHIs on sound legal footing, and some of the typical challenges and facilitating factors encountered. It includes detailed descriptions of content that countries might want to include in their legal frameworks and case studies from countries with varied experiences creating NPHIs by decree, law, or regulation.

The creation of this document, also available in [English](#), [French](#), [Portuguese](#) and [Arabic](#), was a collaborative effort between the [Africa CDC](#), [Emory University School of Law](#), Guinea Bissau National Institute of Public Health, Mozambique's [Instituto Nacional de Saúde](#), the [National Public Health Institute of Liberia](#), [Nigeria Centre for Disease Control](#), [Public Health England](#), South Africa's [National Institute for Communicable Diseases](#), the [U.S. CDC](#), and IANPHI.

You can access these documents on [IANPHI's website](#).



From left to right: André van der Zande, president of IANPHI, Natalie Mayet, deputy director of the National Institute for Communicable Disease in South Africa, Amira Elfadil, social affairs commissioner of the African Union, John Nkengasong, director of Africa CDC, Ellen Whitney, director of IANPHI U.S. Secretariat, and Shelly Bratton, associate director for program development for the National Public Health Institute Program in the Division of Global Health Protection at U.S. CDC

UPCOMING EVENTS



REGISTER NOW

The next IANPHI European Regional Network meeting will take place in Paris, France on March 30-31, 2020. It will be hosted by Santé Publique France.

There will be a back-to-back seminar co-organized by IANPHI and WHO EURO on March 31 and April 1, which will focus on workforce development.

[Details and registration are available here.](#)



SAVE THE DATE

The IANPHI 2020 Annual Meeting will take place in Rio de Janeiro, Brazil on December 1-4, 2020.

It will be hosted by Fiocruz.

As is custom, regional meetings will take place the day after the annual meeting.

[More information will be made available in the coming months.](#)

ICREID

Africa CDC will host the 2020 International Conference on (Re-)Emerging Infectious Diseases (ICREID) in Addis Ababa, Ethiopia on March 18-20, 2020. ICREID is a global platform that brings together experts from around the world involved in emerging diseases.

IANPHI member NPHIs and CHAMPS teams will participate in the meeting. Dr. Chikwe Ihekweazu, director general of the Nigeria Centre for Disease Control (NCDC), Prof. Abderrahmane Maaroufi, director of the Institut Pasteur Maroc, Pontiano Kaleebu, director of the Uganda Virus Research Institute (UVRI) and director of MRC/UVRI and LSHTM Uganda Research Unit and Prof. Sam Kariuki, director of research and development at the Kenya Medical Research Institute (KEMRI), will be among the panelists.

WHO

IANPHI will participate in the "Keeping the World Safe, Protecting Economies, Connecting Nations" High Level Meeting on Diplomacy for Health Security and Emergency Preparedness, which will take place from March 24-26, 2020 in Marrakesh, Morocco. The World Health Organization is co-hosting this high-level meeting together with the Kingdom of Morocco, the Republic of Rwanda, and the World Bank.

**Hosting or representing your NPHI at a global or regional event?
Let us know about it at info@ianphi.org.**

IANPHI STAFF ADDITIONS

IANPHI is delighted to announce the addition of new IANPHI staff members at the main Secretariat in Paris, France and at the U.S Secretariat in Atlanta, Georgia.



Edris Nikjooy
Project Manager
IANPHI Secretariat in Paris, France



Louise Rigal
Intern
IANPHI Secretariat in Paris, France



Muna Ainashe
Senior Financial Analyst
IANPHI U.S. Secretariat in Atlanta, Georgia



Amandine Ballart
Project Coordinator
IANPHI U.S. Secretariat in Atlanta, Georgia



Marie Deveaux
Communications Specialist
IANPHI U.S. Secretariat in Atlanta, Georgia

We are thrilled to add such talented people to our team who are committed to taking on IANPHI's mission as their own.

PUBLICATIONS

IANPHI members and partners contribute to the global scientific knowledge base on a wide array of public health topics. Below are some highlights:

Health Security, Volume 18, Issue S1 / January 2020: What Works? Lessons Learned in Global Health Security Implementation

Health Security Editor-in-Chief: Thomas V. Inglesby, MD. CDC Editors: Cynthia H. Cassell and Ronald L. Moolenaar. Center for Health Security Editors: Diane Meyer and Jennifer B. Nuzzo..



China's Response to a novel coronavirus stands in stark contrast to the 2002 SARS outbreak response

Author: John Nkengasong

Public Health Institutes of the World

IANPHI

IANPHI Secretariat Main Office French Public Health Agency

Jean-Claude Desenclos
Secretary General
ianphi-mainoffice@santepubliquefrance.fr

IANPHI U.S. Secretariat at Emory Global Health Institute

Ellen Whitney
Director
info@ianphi.org

IANPHI INSIDER

IANPHI U.S. Secretariat at
Emory Global Health Institute
info@ianphi.org