Public Health Institutes of the World



IANPHI STRATEGY 2021-2025

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ABBREVIATIONS

Africa CDC APHEA ASPHER ASPPH China CDC COVID-19 ECDC EPHO/F Fiocruz GHS IANPHI IHR (2005) JEE NAPHS NCDs NIPH NPHI PHCU PHE RIVM RKI SDT SNAP-GHS THL U.S. CDC	Africa Centres for Disease Control and Prevention Agency for Public Health Education Accreditation Association of Schools of Public Health in the European Region Association of Schools and Programs of Public Health Chinese Center for Disease Control and Prevention Coronavirus Disease 2019 European Centre for Disease Prevention and Control Essential public health operations and functions Fundação Oswaldo Cruz Global Health Security International Association of National Public Health Institutes International Health Regulations (2005) Joint External Evaluations National Action Plans for Health Security Non-Communicable Diseases Norwegian Institute of Public Health National Public Health Institute Public Health Center of the Ministry of Health of Ukraine Public Health England The Dutch National Institute for Public Health and the Environment Robert Koch Institute, Germany Staged Development Tool Strengthen National Accountability for Preparedness in support of Global Health Security Finland's National Institute of Public Health and Welfare United States Centers for Disease Control and Prevention World Health Organization
WHO WHO EURO	World Health Organization World Health Organization European Regional Office

FOREWORDS



IANPHI has updated our strategy for the next five years following the commitment made by our Executive Board during the 2019 Annual Meeting held in Ethiopia. Moreover, COVID-19 spurred us on to review our practices and strategic direction to support our members.

As the public health landscape transforms with the COVID-19 pandemic, the growing global burden of non-communicable diseases and the acceleration of environmental change, IANPHI must be at the forefront of

these transitions to support national public health institutes (NPHIs).

Firstly, as a member of IANPHI, as director-general of the Netherlands' RIVM, as vice president and then as president of IANPHI from 2019 to 2020, I have seen at first hand the connections and collaborations that flourish within IANPHI.

In 2017, along with colleagues from U.S. CDC and Public Health England, I was pleased to support our member from Pakistan as they developed their strategic and operational plan for their National Institute of Health.

For a number of years, I have attended joint technical meetings between IANPHI and WHO EURO to strengthen our members in their own countries by providing support on cross-cutting strategic and operational issues common to many IANPHI members.

More recently, it was a particularly special occasion to chair IANPHI's 2019 Annual Meeting hosted by the Ethiopian Public Health Institute in the Africa CDC headquarters. This gave members an excellent insight into the collaboration between NPHIs and Africa CDC and the opportunity to learn about the Ethiopian Public Health Institute's role at a national level.

Revising IANPHI's strategy for the next five years will enable our network to strengthen the connections between members from all parts of the world, develop their institutional capacity and reinforce our global advocacy for strong NPHIs. Our vision is built on our strong foundation of 15 years spent connecting, developing and strengthening our members. Partners must be a critical component of our strategy with whom we will work to complement our respective missions. Now established formally as an internationally recognised non-profit association, we will move forward with even more agility to respond to the needs of our members and the changing public health landscape.

Indeed, this new strategy comes at a time when societies across the world are impacted by COVID-19. NPHIs have an essential role to play in advising decision makers on response strategies by mobilizing scientific knowledge and operational capacities to improve the population's heath and support health care systems. A key lesson from the COVID-19 pandemic is that strong and scientifically independent NPHIs must be celebrated and that preparedness must be considered as an investment for healthier and more equitable societies. Now more than ever, it is critical to connect across the world to advocate for strong NPHIs.

Prof. Dr. André van der Zande Past President of IANPHI (2019-2020) IANPHI's new strategy is launched into a world that has changed as a result of the COVID-19 pandemic. Never has the need for public health and global collaboration been more apparent. Never has the need for strengthening the essential public health functions in every country through strong NPHIs been more urgent. The vision and the priorities set out here will guide IANPHI's development over the next five years. In my role as president of IANPHI, it will be my duty and pleasure, working through the Executive Board and the Secretariat and with our global membership, to secure its implementation.



The IANPHI network is a force for great good in furthering global health security and improving the health and wellbeing of all people and in strengthening public health institutes and agencies globally. The strength and energy of the network comes from our unity, from sharing and learning with and from each other, enriched by our diversity in facing common challenges. This strategy will enable IANPHI to respond to the changing public health landscape and our members' individual needs. The years ahead will hold many challenges, however I believe that together we will have the strength to overcome the many hurdles. I believe we can build global capability for inclusive, resilient health systems, and champion Universal Health Coverage and progress towards the UN Sustainable Development Goals.

I am looking forward to working with all IANPHI members, to use the platform that IANPHI has developed and our collective voice, to strengthen global partnerships and to strengthen public health systems globally to ensure that in the aftermath of the COVID-19 pandemic we not only build back better, but we also build back fairer.

My special thanks to the working group of IANPHI members who managed to develop and produce this during the first year of the COVID-19 pandemic. I am aware this took dedication during a time of great uncertainty and global crisis.

I look forward to working across our great network to achieve our shared vision and meeting our goals. We have some great work to do together.

Professor Duncan Selbie President of IANPHI

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PURPOSE



IANPHI Members at the 2019 IANPHI Annual Meeting in Addis Ababa, Ethiopia, in December 2019

IANPHI was formed in 2006 and has grown into a global network of 110 member institutions in 95 countries. The delivery of past strategic plans has supported the development of strong bonds of collaboration between public health institutes across the globe, developing resources and providing technical assistance to support institutional development and peer-to-peer support. IANPHI has fostered active communication between institute directors, developing a supportive community of practice of influential public health leaders who work to support governments on behalf of their populations.

The IANPHI Strategy 2021-2025 signals the next phase of IANPHI's strategic development. It has been developed in the midst of the COVID-19 pandemic, when the need for global collaboration and collective action has never been more apparent. It is clear that all countries have been challenged by the pandemic. Institutes are and will continue to be a major part of the solution to building future health security and fairer societies and strengthening public health action. Our priority is to champion the development of NPHIs where they are most needed, supporting the creation of institutes where they do not yet exist and targeting support at low-income countries and in low resourced settings where the need to maximize the impact of limited health resources is paramount and where effective

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public health action will maximize health gain and reduce inequalities. This purpose will be achieved through the further strengthening of the robust network of institute directors and an active program of public health capacity development.

IANPHI will champion and develop NPHIs that build health security and promote healthier lives through independent scientific evidence. In every country across the world, the creation and development of NPHIs should be invested in as public health policy priority. In particular, emergency preparedness and response functions and health promotion interventions should be reinforced on a global scale through NPHIs.

At its 2018 annual meeting in London, IANPHI launched three regional networks for Asia, Latin America and the Caribbean, building on learning from the IANPHI Africa network established in 2013 and the IANPHI Europe network established in the very early days of IANPHI. IANPHI regional networks facilitate the exchange of knowledge, best practices and technical assistance with a focus on regional priorities and contexts. Collaborating at this level enables IANPHI to mobilize its partnerships with regional and international organizations, including World Health Organization (WHO) regional offices, extending collaboration established at the global level. Renewing our strategy will ensure that IANPHI works through its regional networks to support each institute in our growing network of members.

IANPHI's official legal status as an international non-profit association was established in January 2019, incorporating some of the IANPHI Foundation's duties. This newly formed legal entity strengthens IANPHI's capacity to support its members by engaging in collaborations and mobilizing external resources on behalf of the network. The new strategy enables IANPHI to take full advantage of its new structure by directing capabilities towards the priorities of its members over the years to come, beyond COVID-19.

IANPHI has detailed its vision and impact through five strategic priorities for the next five years. To ensure we deliver this strategy and respond to the needs of our members, key action points will guide our work and an action plan will be developed to ensure we deliver on our goals.

The IANPHI Strategy 2021-2025 is the result of the dedicated engagement of a working group consisting of Brazil's Fundação Oswaldo Cruz (Fiocruz), Burkina Faso's Institut National de Santé Publique, Bangladesh's Institute of Epidemiology, Disease Control and Research, the IANPHI Secretariat and U.S. Office, the Norwegian Institute of Public Health, Germany's Robert Koch Institute (RKI), the Saudi Centre for Disease Prevention & Control, Dr. Rüdiger Krech of WHO and Prof. Bettina Borisch of the World Federation of Public Health Associations. Public Health England (PHE), with the support of the IANPHI secretariat and Santé publique France, has been particularly supportive in their coordination of the working group (see appendices for full list of individuals who contributed to the strategy). Finally, all IANPHI members were involved in offering valuable suggestions to develop the strategy.

THE STRATEGY AT A GLANCE

OUR MISSION

COLLECTIVELY BUILD PUBLIC HEALTH CAPACITY AND CAPABILITIES BY CONNECTING, DEVELOPING AND STRENGTHENING NATIONAL PUBLIC HEALTH INSTITUTES WORLDWIDE

OUR VISION

A GLOBAL COMMUNITY OF INTER-DEPENDENT AND TRUSTED NPHIS AS SCIENTIFIC ADVISORS WORKING TOGETHER TO PROTECT AND IMPROVE THE PUBLIC'S HEALTH AND BUILD A MORE EQUITABLE WORLD

OUR STRATEGIC PRIORITIES



OUR VALUES

AN INCLUSIVE AND INDEPENDENT PROFESSIONAL ASSOCIATION WHICH PROMOTES AN EVIDENCE-BASED APPROACH TO PUBLIC HEALTH AND SCIENTIFIC EXCELLENCE

STRATEGIC PRIORITY

STRENGTHEN THE PROFESSIONAL RELATIONSHIPS WITHIN IANPHI'S UNIQUE GLOBAL FORUM

WHERE WE ARE TODAY

IANPHI's foundations are built on its strong community of members. IANPHI is a professional and independent network of NPHIs which provides a unique forum for peer-to-peer support and strategic exchanges amongst directors and senior staff. Throughout the COVID-19 pandemic, information exchange and direct linkages have enabled rapid sharing of information and access to evidence of effective practice as it is developed; further strengthening institutional and professional linkages is essential for sustainable global health.

The support offered covers all aspects of developing and leading strong public health institutions to protect and improve public health. The creation of many NPHIs across the world since IANPHI's beginnings has been supported by professional relationships developed over time. In particular, IANPHI members exchange leadership, technical and legal advice across continents, which creates lasting connections within the network.

The tools deployed by IANPHI to support members include direct technical peer-to-peer support; indepth peer-to-peer reviews on strategic and institutional areas; and long-term collaborations between NPHIs through twinning and networking. These networks build personal as well as institutional links, they thrive and are sustained through the mutual benefit that they foster, creating long term access to technical collaboration that is distinctly different from other models of technical assistance.

The IANPHI Annual Meeting is the only worldwide forum where NPHI directors, associate members and partners, come together to establish and strengthen relationships and share ideas and best practices on areas of mutual concern. Fostering dialogue among public health leaders is a cornerstone of the network.

AMBITIONS

As IANPHI continues to grow, the close connections developed within the network, which are highly valued by members, will be important to maintain. Whilst strengthening these relationships, IANPHI will also reinforce the coordination of the network's collaborations to support new and developing NPHIs, as well as driving forward quality for established members. Focused working groups, mentorships and partnerships will be key tools to diversify and strengthen IANPHI's close connections.

Hosting events such as IANPHI's annual and regional meetings will continue with a greater focus on topics of innovative and strategic importance for IANPHI's membership. This will include ensuring that meetings enable members to share both their challenges and opportunities within a supportive environment. In addition to debate and knowledge exchange, focus will be given to ensuring continuous learning and development opportunities are integrated systematically into IANPHI meetings. IANPHI's partnerships with associations and schools of public health, such as APHEA and ASPHER, will be important in IANPHI's support of its members' development.

Thought leaders and partners drawn from the diversity of all IANPHI's geographical regions will be invited to offer new perspectives to our members and promote new approaches. IANPHI will map the important public health issues with partners in order to develop meetings that respond to the evolving needs of its membership. Through in person and on-line meetings and targeted support, members will be able to access information and learning opportunities for instance on health economics as well as the impacts of climate change and sustainable development on population health. IANPHI aims to position its members as key actors in national and international landscapes to support all areas of the public's health.

The close professional connections that develop within the network will be maintained and strengthened between annual and regional meetings. IANPHI will seek to support requests from members to build upon virtual meetings and seminars that have been delivered as a consequence of COVID-19. Organizing regular virtual meetings will enable a greater number of IANPHI members to participate in network discussions without the limitations and carbon cost of international travel.

As it is important to build on the outcomes of meetings, IANPHI will enable members to connect in thematic groups that bring institutes together from diverse regional networks. These thematic groups can work towards specific capacity development goals and develop NPHI positions on public health responses to issues such as climate change, social and economic inequities and engaging in public private partnerships, biosecurity, communications and behavioral studies. The discussions and case studies developed in thematic working groups will also support preparations for annual and regional meetings.

IANPHI will build upon its partnerships with ASPPH, ASPHER and APHEA to develop public health education and training programs within NPHIs.

IANPHI CASE STUDY ukraine - norway collaboration

The Public Health Center of the Ministry of Health of Ukraine (PHCU) was established in 2016 through a merger of several institutes and agencies as part of a national health reform. The Norwegian Institute of Public Health (NIPH) has for many years been engaged in technical and scientific collaboration with partner institutes in other countries, so-called twinning, both in broad-based partnerships, and in more targeted collaborations. At the annual meeting for the IANPHI European regional meeting in Ukraine in 2017, the two organizations met and started planning for a long-term twinning collaboration.

With financial support from the Norwegian government, a broad-based partnership was launched in 2019 which also includes the following targeted areas: (1) development and implementation of International Health Regulations (IHR 2005) and emergency preparedness and readiness system; (2) development and implementation of national systems for antimicrobial resistance and infection prevention and control; (3) improvement of immunization information systems; and (4) development and maintaining of national and regional public health profiles.

In addition to the bilateral PHCU-NIPH work, there have been other venues for developing the collaboration, not least through the IANPHI network and support from the main Secretariat in Paris. Back-to-back workshops organized by WHO Europe in connection with the IANPHI European regional meetings in Poland in 2018 and in Moldova in 2019 were fruitful. NIPH also participated in several workshops at PHCU in 2019 organized by WHO Europe, and ASPHER also participated. IANPHI's U.S. office has also conducted workshops with PHCU in 2019 using the Staged Development Tool (SDT).

PHCU and NIPH have frequently visited each other, last time in Kyiv in March 2020 just as Europe locked down due to the COVID-pandemic. Bilateral meetings are conducted on a bi-weekly basis. Implementation of the bilateral collaboration agreement continues despite the challenges of the pandemic.

IMPACT

Strengthening the professional relationships within IANPHI's unique global forum will enable members to further benefit from valuable connections made with peers across the world. As public health and societies evolve, it will be more important than ever to learn from the experiences of the global network of NPHIs and partners. These exchanges will better equip NPHIs to lead in responding to national and international public health challenges. In parallel, a regional approach to strengthening collaboration between members will focus planning, expertise and resources around common public health issues.

Our work in this area will include action to:

- Ensure IANPHI Annual Meetings offer innovative networking opportunities to develop professional connections and identify actions to take forward between meetings.
- Facilitate thematic working groups for strategic development identifying innovations and best practices, including on the public health impacts of inequities and environmental change.
- **Invite thought leaders**, from a broad range of disciplines, to targeted discussions with members to enable NPHIs to access organizational capacity building information and share best practices.
- **Promote participation** opportunities in IANPHI meetings to support the diversity of NPHIs and the involvement of women leaders in public health.
- Develop an annual program of webinars and workshops, at global and regional levels, to build on members' experiences, including NPHI responses to the COVID-19 pandemic.

STRATEGIC PRIORITY

HARNESS THE COLLECTIVE EXPERTISE OF MEMBERS TO DEVELOP PUBLIC HEALTH CAPACITY GLOBALLY

WHERE WE ARE TODAY

NPHIs are key to building and bolstering global public health capacity. To this end, IANPHI provides tools and promotes capacity building opportunities through its network. Using an asset-based approach IANPHI will draw on the capabilities of its members to support NPHIs in developing leadership, organizational and technical capacities that contribute to improving and protecting the health of populations around the world. IANPHI offers strategic and technical reviews of its members through the Peer-to-Peer Evaluation Tool and the Staged Development Tool. Knowledge and technical support generated through joint work are shared within the network through global and regional seminars and the best practice series. Bilateral cooperation between IANPHI members plays a significant role in development NPHI capacities.

Underpinning IANPHI's capacity building support to guide the establishment and strengthening of NPHIs is the Framework for the Creation and Development of National Public Health Institutes. This tool includes core public health functions and attributes shared by NPHIs that take into consideration the essential public health functions developed by the Pan American Health Organization (PAHO) and WHO. The IANPHI Framework reflects regional and international approaches to defining major public health functions. The Framework can be tailored to regional contexts. Following the establishment of Africa CDC, IANPHI supported the development of guidance for the development of NPHIs in Africa and their legal structures based on the IANPHI Framework.

Whilst IANPHI members are linked to government, IANPHI is independent and is therefore able to prioritize its support to members. IANPHI is therefore uniquely placed to identify where it can assist and promote areas of best practice from a global network of experienced NPHI leaders. This benefits institutes who may want to make the case to broaden their functions and pursue capacity building. By connecting experts and expertise with capacity building needs, IANPHI contributes to the development of strong NPHIs that comprehensively improve and protect the health of populations around the world. The network's collective expertise and knowledge from a variety of contexts, enables IANPHI to demonstrate the role and value of strengthening public health institutes in favor of efficient and comprehensive public health systems that improve the public health at national and sub-national levels.

AMBITIONS

Since IANPHI's beginnings over more than a decade ago, both the network and NPHIs have undergone considerable evolutions, most recently in part brought on by COVID-19. Consequently, IANPHI must respond to the evolving nature of NPHI functions as well as to its rapidly growing membership. In view of these developments, IANPHI will ensure that its tools and services continue to align with members' needs and with global public health developments and frameworks. Whilst the IANPHI Framework broadly remains relevant to members, IANPHI's network will embark upon a revision of the Framework's current core NPHI functions and attributes to reflect the increasingly important role of NPHIs in national and international contexts.

Revising the Framework will involve consultations with IANPHI members as well as with the network's partners to ensure due consideration of other international frameworks and relevant guiding documents for achieving strengthened global public health capacity. IANPHI will collaborate with WHO, its regional offices and other global health actors on aligning the various essential public health operations and functions (EPHO/F) with the review of IANPHI's Framework.

IANPHI's members have a breadth of technical expertise across core public health functions, including non-communicable diseases (NCDs), epidemiological surveillance and studying the impacts of inequities and climate change on public health. Addressing the wider determinants of health through the full range of public health functions will build health security in its broadest sense; promoting activities and measures across borders that mitigate the impacts of threats to health to ensure healthy populations. The disproportionate impact of COVID-19 on older, disadvantaged and poorer people has highlighted the importance of promoting health at the same time as strengthening health security, reinforcing the need for integrated approaches to public health development. IANPHI will strengthen its mechanisms to enable members to identify opportunities to share knowledge and wide-ranging expertise from within the network.

IANPHI will reinforce its support to strengthening global health security to address external threats to health. NPHIs are increasingly seen as leaders to support health security program implementation within national health systems and the community. NPHIs are critical to assessing and strengthening IHR 2005 capacity for national, regional and global health security and preparedness and response to public health emergencies. Many NPHIs are IHR (2005) focal points and support WHO in its global public health coordination, including thorough participating in Joint External Evaluations (JEE) and National Action Plans for Health Security (NAPHS).

The continued development of partnerships will also be a priority for IANPHI's capacity building efforts. IANPHI will connect members with a network of dedicated partners, each bringing their specialist expertise and contributions to strengthen NPHIs and public health systems. International and regional organizations, in particular WHO and its regional offices, as well as specialized institutions such as Africa CDC and the European Centre for Disease Prevention and Control (ECDC), will be

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key partners in developing NPHI capacities and in ensuring public health efforts are aligned towards common goals. Close international collaboration to strengthen global health security will be crucial to improve our preparedness and responses to health emergencies. IANPHI's membership can play an important role in supporting reviews of the functioning of the IHR (2005) and its strengthened implementation in light of the COVID-19 pandemic.

In extending our capacity strengthening efforts, IANPHI will ensure that initiatives are pragmatic and adapted to the maturity of organizations and regional contexts. In addition to being a network of diverse members, IANPHI's regional networks represent particular public health contexts. Taking a regional approach will support IANPHI's aim to provide targeted opportunities to all IANPHI members.

Finally, it is increasingly important for NPHIs to broaden their skillsets to comprehensively strengthen public health and serve the evolving public health needs. Responses to COVID-19 have highlighted existing innovations within NPHIs and accelerated connections with the fields of data analytics, behavioral science and health economics. A number of IANPHI members are partnering with diverse actors in these disciplines and integrating such experts into their institutes. Connecting NPHIs with a broad range of partners and disciplines will increase the reach, credibility and impact of NPHIs' roles of protecting and improving public health.

IANPHI CASE STUDY STRENGTHEN NATIONAL ACCOUNTABILITY FOR PREPAREDNESS IN SUPPORT OF GLOBAL HEALTH SECURITY

The International Health Regulations (IHR 2005) and linked Joint External Evaluation (JEE) process are central to the internationally agreed approach to strengthening Global Health Security (GHS) and assessing preparedness. However, robust measurement of preparedness against all hazards to health requires timely access to quality data from disparate sources which means data is often incomplete. National Public Health Institutions (NPHIs) can play an important role in overcoming this data collation and analysis challenge, if given the mandate to do so.

At the IANPHI Annual Meetings in Rome (2017) and London (2018) the need to 'Strengthen National Accountability for Preparedness in support of Global Health Security' (SNAP-GHS) was identified as an IANPHI priority. Researchers were commissioned by PHE to work with IANPHI members to identify data gaps. The NPHIs of Ethiopia, Nigeria and Pakistan collaborated with the researchers to better understand country specific data collection challenges.

SNAP-GHS was presented at the World Health Summit in Berlin in October 2019, in a meeting co-chaired by the vice president of IANPHI, Meerjady Flora, and the president of RKI, Lothar Wieler, and <u>has now been published</u>. The research concluded that NPHIs need a clear mandate and authority to access data from multiple sources across government and the private sector if analysis is to be ready when needed. Whilst Nigeria, Ethiopia and Pakistan had different priorities for data collection, all are committed to timely and transparent synthesis and communication of data to strengthen both national and global health security as something that IANPHI should champion.

IMPACT

By harnessing the collective expertise of its members, IANPHI can have a significant impact in strengthening global public health capacity. NPHIs will continue to benefit from the support of IANPHI and its members when developing the institutional skills needed to work collectively across organizational and international boundaries. NPHIs will be empowered to lead national responses to national and international public health challenges.

Our work in this area will include action to:

- From 2021, undertake a **review of the Framework for the Creation and Development of National Public Health Institutes** and particularly the NPHI Core Functions and Attributes to understand NPHI capacity building needs and the lessons learned from the COVID-19 pandemic.
- Develop new and strengthen existing partnerships at global and regional levels, including with WHO, to facilitate collaboration through joint programs of work to collectively advance public health science to prepare for new public health challenges.
- Raise awareness of, further develop and assess the impact of tools, best practice resources, and guidance produced by IANPHI on a broad range of areas related to public health; and identify options for mutual learning to foster and share knowledge and skills with WHO and partners in the areas of public health systems and services strengthening, preparedness and response.
- Develop **IANPHI training resources** in wide-ranging disciplines that are complementary to existing resources and IANPHI tools and services based on a mapping of needs, in particular for professional development, in collaboration with partners to enhance national public health leadership capacities.
- Facilitate shadowing, mentoring and secondment opportunities, to **enable twinning** between member institutes and partners for NPHI capacity building.

STRATEGIC PRIORITY



WHERE WE ARE TODAY

IANPHI's membership base has seen rapid growth since 2006 when 39 NPHIs founded the network; it is now a diverse network of 110 members in 95 countries. IANPHI has supported the creation of many NPHIs who have gone on to be full members of the network. A broad membership base is therefore an important means to support the creation of NPHIs across the world. Since its foundation, IANPHI has advocated for the creation of NPHIs in all countries to support governments in effectively and efficiently improving and protecting the public's health.

IANPHI's membership is composed of NPHIs and associate member institutions from countries which do not yet have a designated National Public Health Institute or where the functions of a public health institute exist within Ministries of Health or other government structures. The diversity of IANPHI's membership is a strength that enables members to learn from the experiences, institutional positions and strategic positioning and contexts of peers.

There are currently four IANPHI regional networks covering Africa, Asia, Europe and Latin America and the Caribbean. These networks enable members to work closely on public health priorities at regional and global levels and facilitate capacity building initiatives with regional partners and specialized institutions, including WHO, its regional offices, Africa CDC and ECDC.

Growing IANPHI's membership base involves both inviting NPHIs to join the network and supporting public health institutions who are interested in becoming an NPHI. Regional networks bring directors of NPHIs together to develop regional collaboration, facilitate the provision of mutual support, technical assistance and strengthen capacity.



AMBITIONS

To ensure that regional networks benefit from IANPHI's global reach, it will be essential to adapt support according to regional needs. This will enable targeted implementation of tools including the Framework for the Creation and Development of NPHIs to achieve maximum benefit. A proactive approach to communicate the benefits of IANPHI's tools for regional networks will greatly increase the opportunities for all IANPHI members to have equitable access to capacity building opportunities.

Regional networks will be key in implementing many of the strategic priorities outlined in this document strengthening the global impact of IANPHI. The establishment and revision of tools will incorporate a regional approach that will ensure the whole membership base contributes to shaping tools that support the growth and strengthen the position of NPHIs. As IANPHI's membership grows, its support will be based on the collective experiences of all members and it is important we ensure all of IANPHI's members are able to participate on an equal footing. Regional networks enable newer institutes and NPHIs from smaller health systems to access regional and global support from IANPHI and collectively share experiences with the governing bodies and members of IANPHI.

To continue supporting IANPHI's goal to establish and strengthen NPHIs across the world, regional networks will have an important role in identifying and encouraging new members to join the network. IANPHI will strengthen the development of regional networks to enable members to benefit from both regional and global levels of support. Work plans between members of regional networks will coordinate activities and facilitate collaborations with IANPHI's partners, such as WHO's regional offices and Africa CDC.

IANPHI will also ensure that a regional approach will not preclude collaboration between regions who may be tackling similar challenges and can share innovative approaches for the wider IANPHI membership. Inter-regional collaboration enables NPHIs and partners to bring different contexts together around shared priorities.

The organization of public health systems at country level is very diverse, this is reflected in the missions of the NPHIs at national and subnational level. There is an identified need to expand the national level capacities to the subnational level. The practical experiences of NPHIs in the coordination and collaboration with national and subnational levels could be shared in particular in time of health systems reforms.

IMPACT

By harnessing the collective expertise of its members, IANPHI can have a significant impact in strengthening global public health capacity. NPHIs will continue to benefit from the support of IANPHI and its members when developing the institutional skills needed to work collectively across organizational and international boundaries. NPHIs will be empowered to lead national responses to national and international public health challenges.

Our work in this area will include action to:

- Map NPHIs at all stages of development across the world to engage with prospective members and grow the membership base.
- Increase the **visibility of IANPHI services** for new and existing members to enable NPHIs to receive tailored advice and assistance to strengthen their public health functions and their capacities to develop collaboration and coordination with national and subnational stakeholders to have a greater positive impact on population health.
- Develop comprehensive **regional-level work programs** to coordinate collaboration within and between networks.
- Adapt the peer-to-peer evaluation tool to reflect the varied regional contexts and scopes of remits in IANPHI to ensure that members can participate on an equal footing.
- Ensure **interpretation in IANPHI meetings** and translatation services and tools into the network's most widely spoken languages.

STRATEGIC PRIORITY

ADVOCATING GLOBALLY AND AT COUNTRY LEVEL FOR NPHIS AS KEY PUBLIC HEALTH ACTORS

WHERE WE ARE TODAY

The diversity of the network gives IANPHI a unique understanding of the expertise and capacities of NPHIs around the world employed to support health protection and improvement. This diversity informs and reinforces the two pillars of IANPHI's advocacy; promoting NPHIs at international and regional levels and sharing best practices of NPHI leadership and functions within the network of members.

Promoting NPHIs at International and Regional Levels and IANPHI's Role as a Global Actor

At international and regional levels, IANPHI represents its membership in high level summits conferences, technical meetings and in the development of partnerships. In these contexts, IANPHI highlights the critical roles of NPHIs both as agencies that strengthen national public health systems and as institutes that support one another around the world.

IANPHI helps bring members together to collaborate for mutual benefit and development. Members work together to promote the important roles of NPHIs. IANPHI helps amplify the voices and perspectives of members through current collaborations and partnerships with international, regional and specialized organizations, including Africa CDC, ECDC as well as the WHO and its regional offices. Partnerships with public health academia and workforce associations are also integral to IANPHI's work, such as ASPHER, ASPPH and APHEA.

Sharing Examples of Best Practice of NPHI Leadership and Functions with the Network of Members

Within the network, IANPHI strives to share best practices for developing and strengthening NPHIs in different contexts around the word. IANPHI promotes the development and functional growth of NPHIs that comprehensively improve and protect the health of populations and are positioned as trusted and independent national scientific advisors. Such work includes; leading or fostering peer-to-peer discussions and training, creating, curating and sharing tools and resources for and among members (e.g. SDT), the co-development of the Africa CDC NPHI Development Framework and legal framework and a guide to creating NPHIs from institutional mergers. In addition to strengthening members' capacity, these tools provide growth and development models for NPHIs.

For many members, IANPHI communicates the importance of NPHIs at national levels which is an important element of advocating for their strengthening. The network's global voice provides policy makers with frameworks and examples of the critical roles NPHIs can play in strengthening health systems.

AMBITIONS

Accelerated by the COVID-19 pandemic, the roles and scope of functions of NPHIs across the world have been at the center of many national debates. IANPHI will actively amplify the voices of its members to promote the role of strong and scientifically independent NPHIs. Best practice case studies, position papers on global issues and reviews into lessons learned from COVID-19 will both strengthen the capacities of NPHIs and demonstrate how NPHIs promote the efficacy and efficiency of national public health systems. Such publications and shared experience of IANPHI members will be important means to support NPHIs advocacy among policy makers at national levels.

As NPHIs develop and their functions evolve, it will continue to be important for IANPHI to have a deep understanding of its members' areas of expertise. IANPHI will optimize its network mapping activities to ensure that members are best represented at international levels. This will enable IANPHI members to better understand the breadth of functions and expertise within the network and increase their access to knowledge and best practices.

To support IANPHI's advocacy objectives, the network will be encouraged to develop strategies for addressing critical public health matters from an NPHI perspective. IANPHI will support thematic working groups to develop NPHI positions on public health responses to particular issues related to the social and regional health inequities and environmental change. IANPHI's international public health advocacy will be supported by the discussion and case studies developed in these thematic working groups.

IANPHI will voice its positions on public health issues by engaging with key international partners to maximize IANPHI's support for NPHIs.

IANPHI CASE STUDY IANPHI PARTNERSHIP WITH THE AFRICA CENTRES FOR DISEASE CONTROL AND PREVENTION

At the 2019 IANPHI Annual Meeting in Ethiopia, John Nkengasong, director of Africa CDC, and André van der Zande, president of IANPHI, signed a Letter of Intent for a Public Health Partnership. Through this agreement, IANPHI and Africa CDC pledged to support one another's mission and vision, to reduce the international disease burden and improve population health in Africa by helping build and strengthen African NPHIs. The agreement formalized a long-term, fruitful relationship, which began when Africa CDC was founded in 2017.

IANPHI has supported several Africa CDC projects since its creation, including their website, the first two inaugural annual reports in 2017 and 2018, the first few editions of their newsletter, as well as foundational marketing materials. Africa CDC contributed to the organization and cohosted the 2019 IANPHI Annual Meeting along with the Ethiopia Public Health Institute. During this meeting, Africa CDC's Institute for Workforce Development, which was established in 2019 in partnership with Emory University's Rollins School of Public Health, held a leadership and management training for African NPHI directors.

During 2018 and 2019, IANPHI and Africa CDC also collaborated with a number of NPHIs to produce two landmark documents, which serve as essential resources to countries in the Africa region as they work to establish new NPHIs:

- a <u>Framework for NPHI Development in Africa</u>, which includes core aspects of NPHI operations and public health functions
- a guidance <u>providing a legal framework for a national public health institute</u>, which describes the types of legal mechanisms countries are using to establish NPHIs or enhance the stature of existing NPHIs and the issues typically addressed.

IANPHI and Africa CDC are continuing to work together on communications, emergency response, NPHI development, and other topics as needs arise.

IMPACT

IANPHI's advocacy ambitions will support the role of its members as trusted and scientifically independent government and public advisors to improve and protect the public's health. Through this work, IANPHI will ensure that politicians, public administrations, practitioners and international organizations understand the role and impact of NPHIs at national and international levels. For example, IANPHI member institutes are actively engaged in responding to the COVID-19 pandemic. Many NPHIs produce regular COVID-19 surveillance reports for governments and the general public, coordinate a national system of laboratories and support contact tracing efforts, analyze and produce cutting-edge research, and develop social marketing campaigns to protect the population.

Beyond COVID-19 and health emergencies, IANPHI will increase understanding of NPHIs' work to strengthen health systems by supporting public health workforce development, improving health information, health literacy, statistical and analytical systems, generating and promoting evidence based public health interventions, developing and evaluating vaccines and treatments and advancing technologies related to public health.

Our work in this area will include action to:

- Position IANPHI within key international fora to advocate for the **strengthened roles of NPHIs** in supporting healthier populations worldwide.
- Facilitate discussions between members and international, regional and specialized organizations, particularly WHO and its regional offices, to **develop joint collaboration and messaging**.
- Revise the communications strategy to improve internal and external communications and to identify opportunities to **promote the importance of NPHIs** at national and international levels.
- Develop a **NPHI Code of Practice**, in relation to the review of the Framework for the Creation and Development of NPHIs, that includes core values such as scientific independence to support members in their national remits.
- Produce evidence and positions on **roles and impacts of NPHIs** in national contexts, for example the COVID-19 lessons learned initiative, to support broadening and strengthening capacities and NPHIs' scientific independence and excellence.

STRATEGIC PRIORITY

BUILD AN AGILE ASSOCIATION THAT SUPPORTS MEMBERS THROUGH CHANGE

WHERE WE ARE TODAY

Since its beginnings in the early 2000s, IANPHI has ensured its members are able to exchange their experiences of leading and developing NPHIs. NPHIs experience constant change, moving from creation and forming, to development and either expansion or contraction of focus. NPHIs will be supported through these changes through understanding the motives for and consequences of changes across the network. IANPHI has continued to advocate for strong NPHIs with the independence to advise on the basis of science and evidence to improve public health across the world.

The community of NPHIs in recent years has grown in number and diversity. By remaining in close contact with its members, IANPHI is able to bring together newly established institutes with long-standing institutes that were founded over a century ago, such as RKI, Fiocruz, and Colombia Instituto Nacional de Salud founded in 1891, 1900 and 1917 respectively.

As more members have joined, IANPHI has responded with innovative ways to bring institutes together. In addition to the global annual meetings, IANPHI's Secretariat and US Office have developed new methods to connect such as a regular newsletter and regional network meetings.

With the development of new and revised public health frameworks, the functions of NPHIs have broadened and specialized to better serve populations' health. Through this time, IANPHI has supported its members in discussing organizational and functional models of NPHIs. Recently, and has had been the case in past health outbreaks, the COVID-19 pandemic quickly brought light to the roles and scope of functions of NPHIs. IANPHI enabled its members to meet virtually and discuss a range of strategic and operational models to respond to this pandemic. IANPHI has ensured members are supported in their national systems by mobilizing the collective expertise of the network. In times of crisis, IANPHI has sought to respond to the technical and strategic requests of our members by connecting them with their peers across the world.

The legal formalization of the IANPHI Association in 2019 marked a milestone in the network's growth and capacity to support the membership. This status enables IANPHI to strengthen its support of peerto-peer activities between members and coordinate partnerships in support of NPHI development. Strengthening the structure of the IANPHI Association will be integral to meeting the needs and interests of members during times of crises and of functional change for NPHIs. This cross-cutting strategic priority underpins IANPHI's vision and will enable the Association to support its members across regions and through change.

AMBITIONS

IANPHI's unique forum will continue to be enriched by strengthened NPHIs who are able to exchange knowledge and best practices within the network. By harnessing this collective expertise and particularly by seeking out innovative practices, IANPHI will establish itself as a forward-looking hub of innovations in public health and NPHIs. Members will be able to benefit from the consolidation of global NPHI functions and attributions and best practices in a strengthened knowledge management system housed within the Association.

The COVID-19 pandemic is demonstrating the need to plan for the unexpected and respond at pace to changing circumstances. The speed at which governments are responding to the threat clearly shows that change can happen quickly when there is will and intent. It demonstrates that IANPHI, its members and partners can work decisively to achieve our aims of strengthening NPHIs and public health globally.

In times both of crisis and stability, IANPHI endeavors to reach, connect and support each and every member. The strength of the network lies in the collective expertise that can be used to support NPHIs and health systems more widely. This is why IANPHI will develop mechanisms to facilitate joint capacity building support between IANPHI members. NPHIs are part of a global network that contains a wide breadth of expertise, including health security, NCDs and health promotion. By enabling members to easily connect through IANPHI and partners, NPHIs will have access to targeted peer-to-peer support. Members will be able to systematically access and provide support through IANPHI for diverse public health challenges.

Promoting the role that digital technologies play in connecting people, processes, and services will enable IANPHI to continue responding to members' needs. IANPHI quickly adapted to the challenges presented by COVID-19 to bring its members together through webinars and virtual meetings. IANPHI will continue to strengthen its digital tools that can facilitate identifying knowledge and expertise across the network in support of all IANPHI's members.

To ensure that IANPHI can rapidly provide support to our diverse membership in times of significant change, we will develop a fundraising strategy centered on connecting and strengthening our members. Partners and NPHIs will be key actors in ensuring IANPHI members continue to play important roles at national and international levels. This should involve ensuring resources and support are targeted to the priorities of our members. The strength and opportunities presented by the IANPHI Association should also support members' own fundraising strategies.

IANPHI CASE STUDY Human resource development and training in pakistan

In 2016, the Ministry of National Health Services, Regulations and Coordination of Pakistan designated the National Institute of Health (NIH) as the NPHI. Leadership and senior officials from NIH Pakistan, the U.S. CDC, IANPHI, and PHE met at RIVM in November 2017, for discussions about developing and strengthening the Institute. Since then, the NIH has continued to grow in strength and influence.

NIH has played an active role in IANPHI since becoming a member in 2016, including participation in annual and regional meetings and in the Staged Development Tool training workshop in South Africa in 2018. IANPHI plays a key role in sharing NPHI experiences both regionally and globally. Most recently, NIH participated and contributed to an IANPHI Asian network exercise of knowledge sharing of its experience of managing COVID-19.

Highlights included the platforms NIH has developed as national resource for countrywide training as part of NIH's COVID-19 response, including:

- Conducting simulation exercises at six international airports and tertiary care hospitals. More than 300 people were trained on timely COVID-19 case detection, reporting, case referral and response.
- For test and trace, training more than 500 master trainers including, doctors, field epidemiologist and laboratory technicians and producing a manual, resulting in trained staff being able to conduct active case finding and contact tracing successfully at provincial level and district level as per defined SOPs which helped interrupt viral transmission.
- Developing and expanding the network of public health laboratories and enhancing testing capacity from 200 to more than 100,000 tests a day. NIH has also provided technical support in terms of training and dissemination of SOPs/ guidelines to all public and private laboratories in the country on biosafety and biosecurity procedures, disinfection measures and waste management procedures and conducted training of trainer on data understanding and reporting.

IMPACT

This is a cross-cutting strategic priority which enables the delivery of the other four strategic priorities. By harnessing digital solutions and ensuring all members are supported, IANPHI will continue to strengthen its community of NPHIs. With strengthened digital tools, NPHIs will have access to innovative knowledge and best practices. Through IANPHI, members will be able to collaborate in joint capacity building initiatives in support of NPHIs. Reinforcing the role of regional IANPHI networks will also be a key element for providing timely and relevant support to members. As NPHIs interact with and integrate new disciplines into their institutes to support their public health role, IANPHI will accompany members through the broadening and strengthening of capacities. The COVID-19 pandemic has illustrated the importance of connecting NPHIs with diverse experts and partners (environmental, animal and human health) from data analysts, public relations specialists to logistics experts.

Our work in this area will include action to:

- Develop a **fundraising plan**, including NPHIs and partners, to ensure the support of IANPHI's strategic priorities and membership is sustainable.
- Regularly lead horizon scanning activities to identify innovative competencies, emerging public health roles and partners to support the skills base within NPHIs for policy advice and public health practice.
- Organize **NPHI lessons learned exercises** from major international public health events to integrate good practices shared within the network.
- Develop an **online knowledge platform** to set out the functions and areas of expertise of NPHI members and to facilitate twinning processes and partnerships for capacity building projects.
- Continue **strengthening the digital tools** of the Association to communicate with and collect information from NPHIs to optimize IANPHI's membership support.

CONCLUSION AND IMPLEMENTATION

Implementing the IANPHI Strategy 2021-2025 and its priorities will be achieved through a budgeted multi-year action plan. IANPHI's whole network will be involved in its development through the established governance structures of the General Assembly, the Executive Board, Secretariat, U.S. Office and Regional Networks. This action plan will be reviewed on a yearly basis to monitor the progress of the strategy. The IANPHI General Assembly will approve the action plan budget, which will draw on the expertise and support of members and the involvement of partners.

For the next five years, IANPHI's work will be guided by its strategy as established by its global membership. Our priorities reflect IANPHI's core support to its members; a unique global forum to develop lasting relationships, a network of experts to develop NPHI capacity, a wealth of public health experience from across the globe, a unified voice promoting NPHIs and an agile network that can accompany its members through change.

Following successful structural reforms as an international Non-Profit Association and our ever-growing membership, this new strategic vision will position IANPHI as a key actor within the international public health system. New members and partners will clearly recognize the role and added value of IANPHI and its network of NPHIs.

To achieve our new strategy, IANPHI's global membership must continue to work closely together and identify opportunities through IANPHI to enhance collaboration. IANPHI will be responsive to these peer-to-peer initiatives and ensure that they are supported. The expertise, commitment and resources that members bring to IANPHI will continue to be key success factors. A strengthened association will further facilitate and support members' contributions to ensure that all member institutes benefit from sharing knowledge and best practices. IANPHI must facilitate connections not only between NPHIs but also with partners to bring maximum added value to members and global public health.

Underpinning the success of IANPHI's new strategy will be a structure equipped with robust governance policies, infrastructure and technology as well as a strengthened Secretariat and U.S. office. Ensuring that members are supported by the solid foundations of IANPHI's Secretariat and offices will enable NPHIs to grow, connect and strengthen their institutional capacity.

INTERNATIONAL ASSOCIATION OF NATIONAL PUBLIC HEALTH INSTITUTES

This strategy was developed during the COVID-19 pandemic. Despite significant capacity challenges, the IANPHI strategic working group has maintained their engagement and discussions were not curtailed by the pandemic. In addition to the wide range of essential functions carried out by public health institutes, COVID-19 has shone light on how NPHIs are being tested around the world to tackle the virus' impacts on the population's health. The importance of collaborating to ensure NPHIs are responding comprehensively to the public's health needs is more important than ever. IANPHI's new strategy will guide our support to NPHIs as they continue to tackle COVID-19, its impacts and other public health priorities.

APPENDICES

APPENDIX 1: INTRODUCTION TO IANPHI

IANPHI'S BEGINNINGS

Jeffrey Koplan, former director of the United States Centers for Disease Control and Prevention (U.S. CDC) and Pekka Puska, former director general of Finland's National Institute of Public Health and Welfare (THL), first envisioned IANPHI in 2001.

In 2002, 30 directors of NPHIs held a meeting in Italy supported by the Rockefeller Foundation. In 2006, 39 founding members launched IANPHI, supported by a \$20 million grant from the Bill & Melinda Gates Foundation through the Emory Global Health Institute at Emory University in Atlanta.

IANPHI SECRETARIATS AND OFFICES

From 2006, IANPHI established secretariats at Finland's THL and at the Emory Global Health Institute. From 2014 to 2016, the main Secretariat was shared between the Instituto Nacional de Salud Pública of Mexico and Santé publique France. Since 2016, the Secretariat has been solely hosted by Santé publique France and the U.S. Office remains at Emory University.

The U.S. Office, based at Emory University's Global Health Institute, implements capacity building projects globally with external support from donors and a cooperative agreement with U.S. CDC, as well as leads IANPHI's external communications, including a website, social media channels and the IANPHI Insider newsletter.

MEMBERSHIP

IANPHI is a network of NPHIs, convening particularly their directors and executive-level staff. IANPHI fosters a community of public health leaders dedicated to sharing knowledge and experience of developing institutions that are essential for health improvement and protection at population level. IANPHI is currently made up of 110 members across 95 countries. There are four regional networks that connect members; Africa, Asia, Europe, and Latin America and the Caribbean.

IANPHI's membership is composed of national and associate members. The former are NPHIs. The organizations defined as associate members can include research institutes, regional public health institutes and Ministries of Health if the country has not yet established a national public health institute.

INTERNATIONAL ASSOCIATION OF NATIONAL PUBLIC HEALTH INSTITUTES

Members are integral to IANPHI's activities. Membership dues proportionate to the member's country income level support the IANPHI Secretariat's activities in support of the network. In addition, the collective expertise, commitment and resources provided by member institutes contribute to strengthening public health capacity on a global scale. This includes sharing knowledge among members and bilateral agreements between IANPHI members and other partners.

GOVERNANCE

IANPHI is governed by a General Assembly, an Executive Board approves work plans and resources and a Secretary General coordinates the work of the Secretariat. The Executive Board, presided by a President and Vice President, is elected for a 3-year term, renewable once.

LEGAL STATUS

In 2018, the General Assembly agreed plans to legally restructure IANPHI as an International Non-Profit Association under Belgian law. The IANPHI Association was legally established in 2019 with the aim of ensuring greater credibility, security and opportunities to participate in partnerships and projects.

PARTNERSHIPS

IANPHI supports its members through formal and informal collaborations and partnerships with international and regional organizations, including the Africa Centres for Disease Control and Prevention (Africa CDC), WHO and WHO regional offices.

IANPHI has also developed several partnerships with public health academia and workforce associations, such as the Association of Schools of Public Health in the European Region (ASPHER), the Association of Schools and Programs of Public Health (ASPPH) and the Agency for Public Health Education Accreditation (APHEA). IANPHI continues to develop collaborations and partnerships with a wide range of actors to amplify the voice of public health and of NPHIs across the world.

TOOLS

IANPHI Framework for the Creation and Development of National Public Health Institutes

The IANPHI Framework for the Creation and Development of NPHIs, published in 2007, provides a common conceptual basis and language for discussing NPHIs, presents models of how they function, and suggests approaches for countries thinking of creating or expanding their NPHIs. Based on this work, IANPHI developed a framework for the development of a NPHI and a legal framework for a NPHI in Africa, in collaboration with Africa CDC and members.

INTERNATIONAL ASSOCIATION OF NATIONAL PUBLIC HEALTH INSTITUTES

The Framework, translated into four languages, includes an outline of the core functions and attributes of NPHIs. These common functions and attributes were reviewed and remained unchanged in 2011. Broadly speaking, NPHIs are science-based organizations with an influence on major national public health issues which have a diverse set of functions that can include public health surveillance, promotion and security and preparedness.

Staged Development Tool

The U.S. CDC and IANPHI, with the assistance from NPHI leaders from around the world, have created the Staged Development Tool (SDT) to support the organizational development of NPHIs. The SDT is a toolkit and process that helps NPHIs assess their current capacities, identify gaps, prioritize gaps and develop a roadmap for achieving a higher level of functioning. It involves three steps; assessment and identification of gaps, prioritization and work-planning.

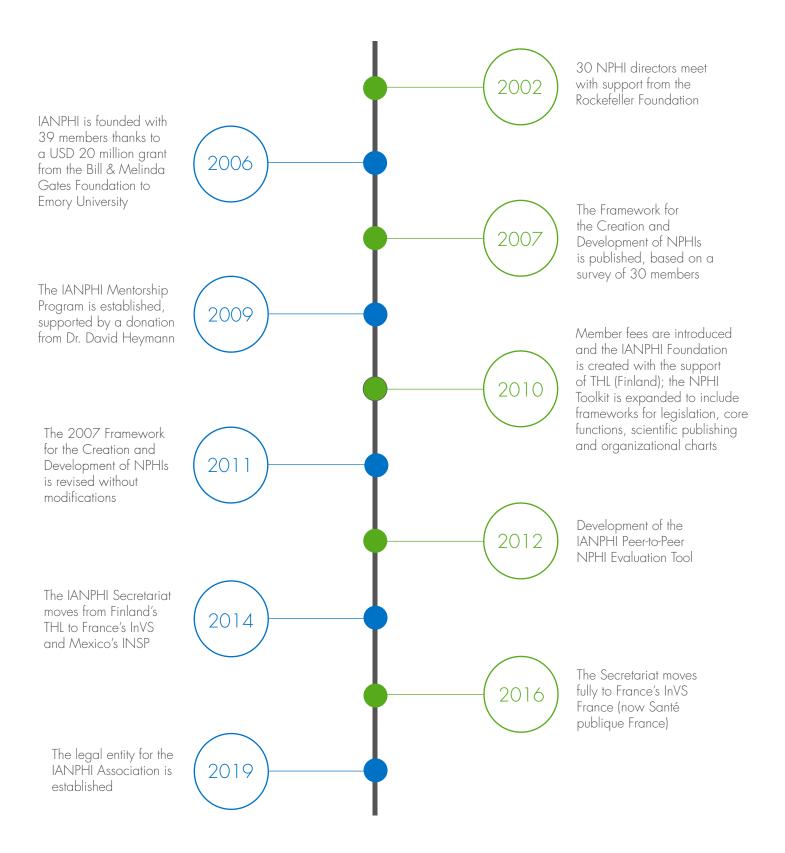
Peer-to-Peer Evaluation Tool

The Peer-to-Peer Evaluation Tool, developed in 2012, enables a high-level strategic review by peers consisting of a panel of directors and executive-level IANPHI members. Its purpose is to provide a practical way to support NPHI directors in demonstrating their respective organization's accomplishments and in identifying areas for development and improvement. Following a successful 2010 evaluation of the Chinese Center for Disease Control and Prevention (China CDC), IANPHI further developed the tool. Peer-to-peer reviews have been conducted with a number of member institutes including the Dutch National Institute for Public Health and the Environment (RIVM), the NPHI of Peru, THL Finland, WIV ISP Belgique (today known as Sciensano), the Public Health Institute of Mongolia, PHE, Public Health Wales, Santé publique France and most recently with Portugal's Instituto Nacional de Saúde Dr. Ricardo Jorge.

Best Practice Series

The Best Practice series shares knowledge with NPHIs on a range of topics related to internal-facing issues, such as those related to leadership and management. The current areas of best practice include; Legal Mandates and Governance, Establishing a NPHI Foundation, Mentorship, Building a Business Case for NPHI Creation, NPHI Staff Retention, Recruiting an NPHI Director and Organizing Peer-to-Peer Visits.

APPENDIX 2: A TIMELINE OF IANPHI'S HISTORY



APPENDIX 3: DEVELOPMENT PROCESS OF THE IANPHI STRATEGY

At the December 2019 IANPHI Annual Meeting, hosted by the Ethiopian Public Health Institute, IANHPHI's Executive Board agreed plans to revise IANPHI's 2017-2022 Strategic Vision. In the weeks following, the Executive Board and Presidency approved the working group that would lead the strategic revision.

The IANPHI Strategic Working Group comprised of members from all corners of the network, including the:

- IANPHI Executive Board
- IANPHI Africa, Asian, European and Latin American and Caribbean Regional Networks
- Secretariat
- U.S. Office
- Associated Public Health Experts

Working group members representing IANPHI's four regions consulted their respective networks throughout the development of the strategy. This ensured that all IANPHI members were able to share inputs during the process and follow progress.

The working group was coordinated by PHE who provided leadership in planning meetings and structuring the strategy. PHE gave regular updates to IANPHI's Executive Board on the strategy's progress.

Along with the valuable contributions from external public health experts from the World Federation of Public Health Associations and WHO in the working group, IANPHI will consult with its partners to receive feedback on its strategic priorities.

APPENDIX 4: MEMBERS OF THE IANPHI STRATEGIC WORKING GROUP

Meerjady Sabrina Flora & Mahbubur Rahman Bangladesh Institute of Epidemiology, Disease Control and Research (IEDCR)

Hervé Hien Burkina Faso Institut national de santé publique

Felix Rosenberg Brazil's Fundação Oswaldo Cruz (Fiocruz)

Jean-Claude Desenclos, Anne-Catherine Viso & Edris Nikjooy IANPHI Secretariat & Santé publique France

Ellen Whitney & Andisheh Nouraee IANPHI U.S. Office

Camilla Stoltenberg & Bjørn Iversen Norwegian Institute of Public Health

Lothar Wieler & Angela Fehr Robert Koch Institute, Germany

Abdullah Al Gwizani, Haleema Al Serehi & Sadaf Lynes Saudi Centre for Disease Prevention and Control

Bettina Borisch World Federation of Public Health Associations (WFPHA)

Rüdiger Krech World Health Organization

IANPHI particularly appreciates the coordination of the working group by Cathy Morgan, Emily Self, Gemma Lien and Julie van der Woude of Public Health England, and Edris Nikjooy of the IANPHI Secretariat and Santé publique France.



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