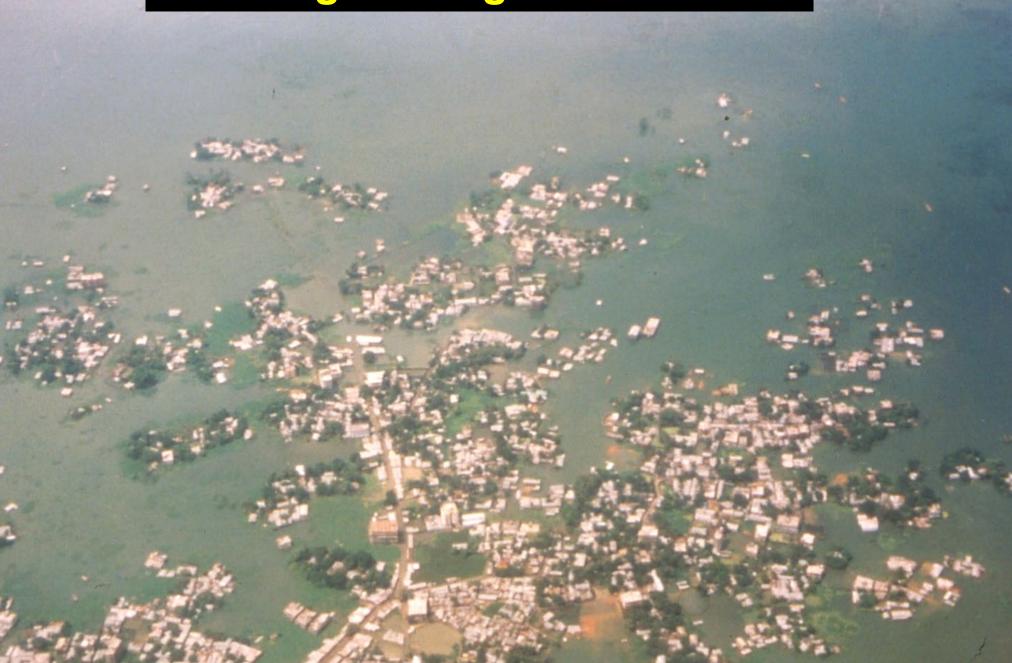
Coordination and collaboration of health crisis prevention, preparedness and response (PPR)

Osamu KUNII Global Health Innovative Technology (GHIT) Fund

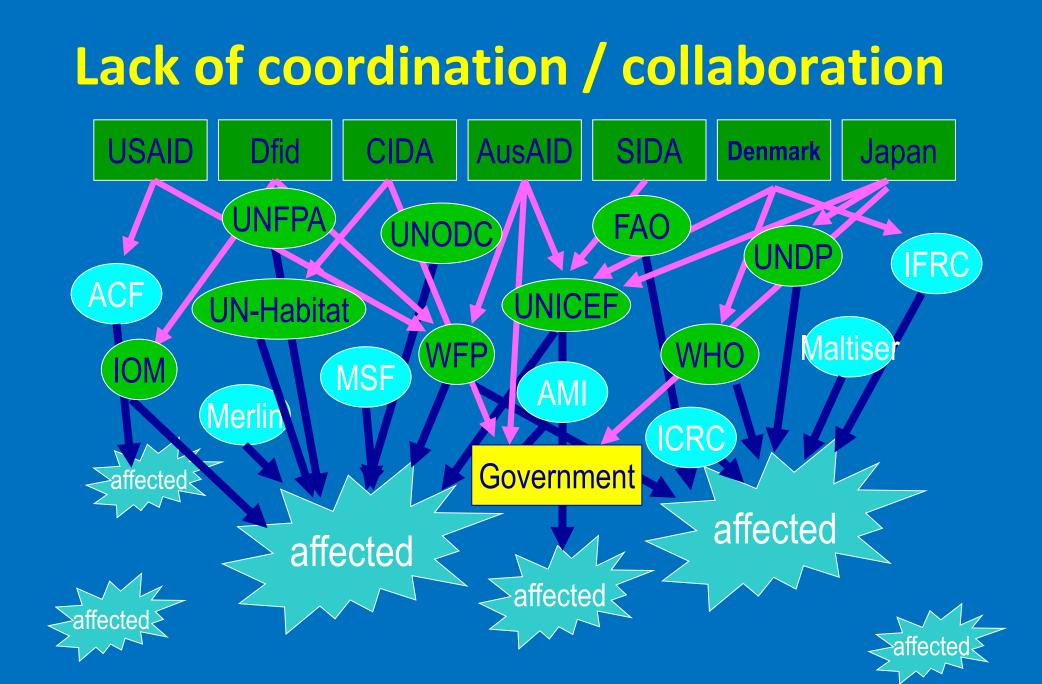
Flooding in Bangladesh in 1998



Indian Ocean Tsunami in 2006



Myanmar Cyclone Nargis in 2008



What are issues?

Duplications and Gaps

Inefficient use of limited resources

Burden on those affected

Coordination is NOT just

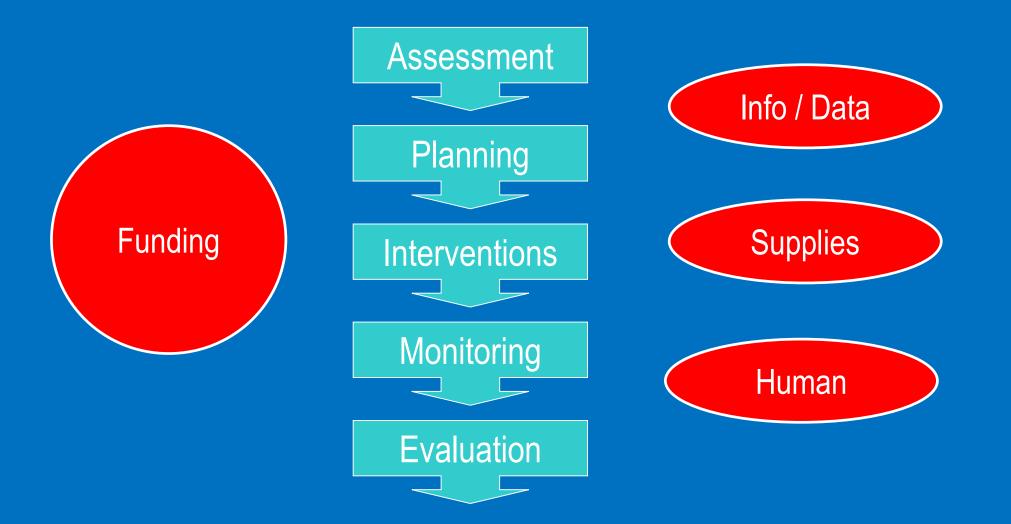
having meetings

information sharing

• BUT actions

to minimize inefficiency and maximize impact of relief/response/recovery/reconstruction

WHAT & WHEN to require coordination



HOW to coordinate

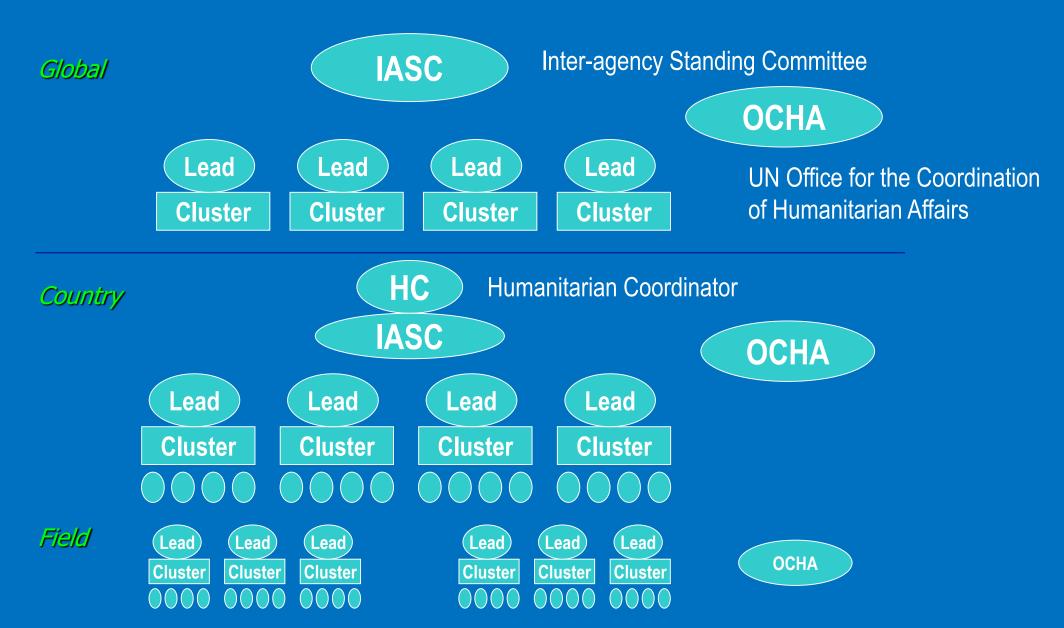
Prepare mechanism/tool/model/module/manuals

at global, regional and country levels

Require "coordinator", mandate/role and skill sets

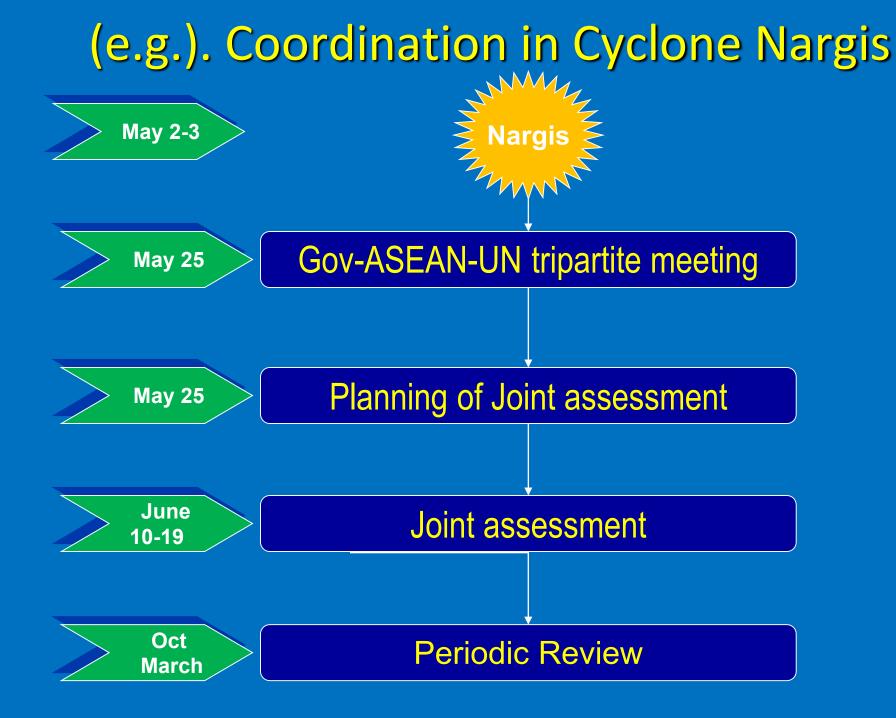
Support/Facilitate coordination to function

(e.g.) Cluster approach



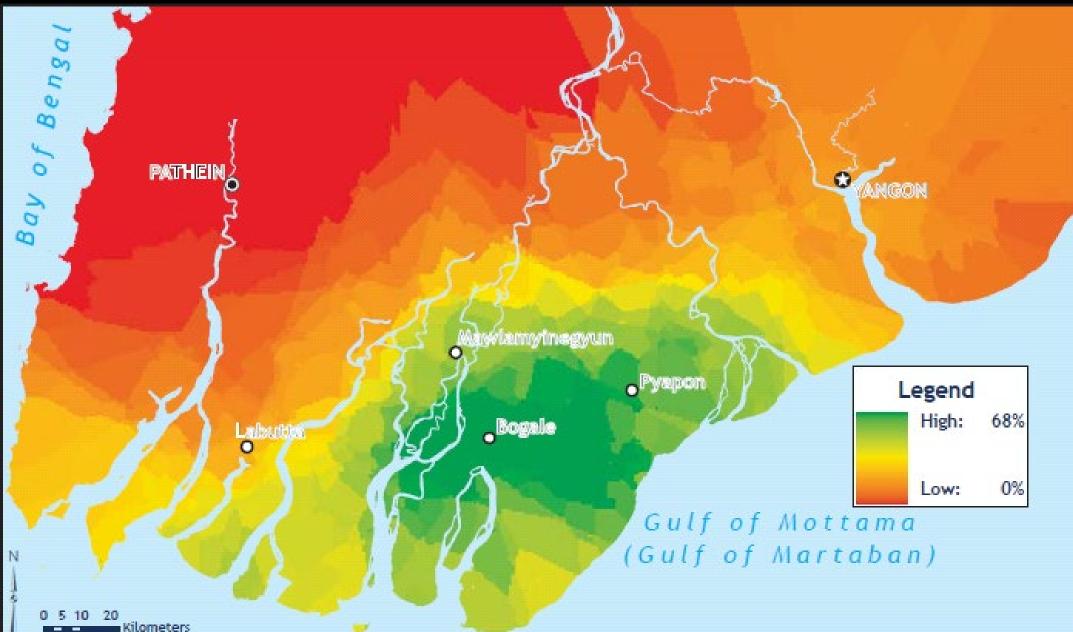
11 Clusters / Lead





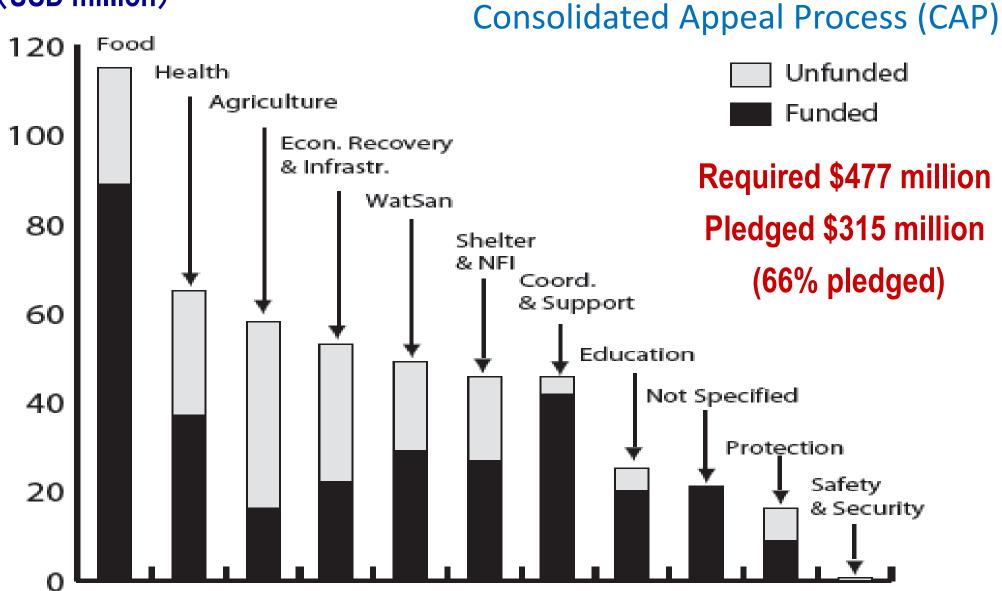


Access to medical services



Funding required and pledged by sector

(USD million)



Hanshin-Awaji earthquake in 1995



CANE Strand





Great East Japan Earthquake and Tsunami in 2011



Lessons learnt

2012



2022



Over 30 experts

Over 70 experts

Coordination required for COVID-19

Access to COVID-19 Tools (ACT) - Accelerator

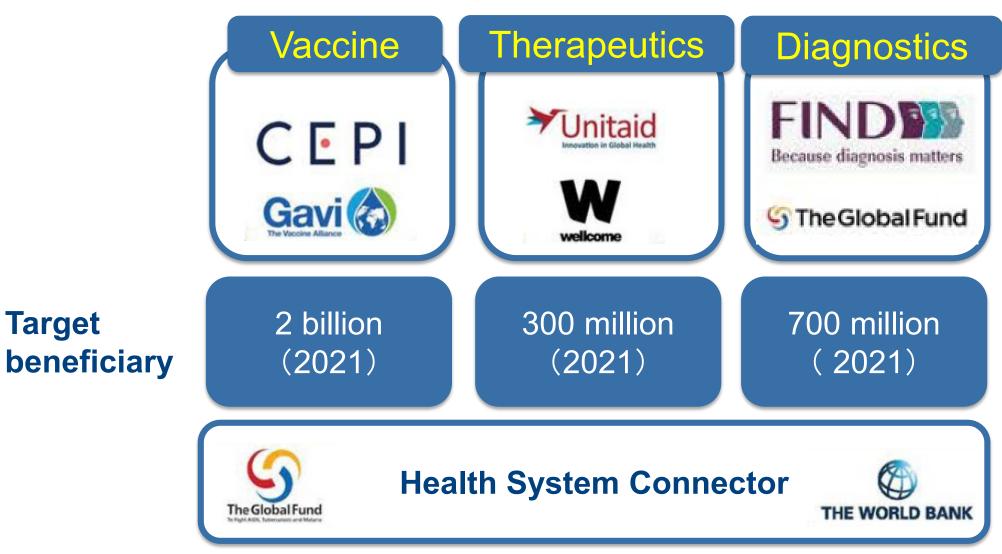
- Global Fund
- WHO
- Gavi
- CEPI
- UNITAID
- World Bank
- Bill & Melinda Gates Foundation
- Wellcome Trust
- FIND



- Governments
- Bilateral assistance
- Pharma
- Private companies
- Academia
- NGOs
- Civil society

Access to COVID-19 Tools - Accelerator (ACT-A)

Target budget: 33 billion USD





- Be prepared for the worst case scenarios
- Clarify who does what, when, where and how for better coordination at which level

Strategy → Operation plans → Training/Simulations