AD HOC VIRTUAL MEETING ON COVID-19 CALLING FOR SOLIDARITY TO ENHANCE THE ROLE OF PARLIAMENTARIANS IN THE COVID-19 RESPONSE

23 April 2020
Manila, Philippines
AD HOC VIRTUAL MEETING ON COVID-19

Calling for Solidarity to Enhance the Role of Parliamentarians in the COVID-19 Response

23 April 2020

MEETING REPORT

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The views expressed in this report are those of the participants of the Asia-Pacific Parliamentarian Forum on Global Health Ad Hoc Virtual Meeting on COVID-19 and do not necessarily reflect the policies of the conveners.
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Keywords: Coronavirus Infections / Infection Control / Disease Outbreaks / COVID-19 / Betacoronavirus
SUMMARY

On 23 April 2020, the Asia-Pacific Parliamentarian Forum on Global Health (APPFGH) convened an ad hoc virtual meeting towards enhancing the role of parliamentarians in the response to coronavirus disease 2019 (COVID-19). In all, 30 parliamentarians participated from 20 countries. The meeting was chaired by the Honourable Professor Keizo Takemi, President of APPFGH, with support from the World Health Organization (WHO).

The meeting objectives were:

1. to obtain updated technical information from WHO on the COVID-19 situation;
2. to share experiences on parliamentary actions relating to COVID-19; and
3. to consider how the Forum can support these efforts.

WHO provided updates on technical issues, the regional response to COVID-19 and support for Member States. Participants, with presentations from Fiji, Japan, Mongolia, the Philippines and the Republic of Korea, shared experiences of parliamentary actions relating to COVID-19 in their countries and considered how the Forum can support these efforts. They encouraged fellow parliamentarians to support national and regional efforts by: developing or amending legislation to address and enable COVID-19 responses; discussing plans and financing for COVID-19 responses, social protection and other economic measures; responding to issues raised by constituents in relation to COVID-19; strengthening institutional mechanisms within parliaments to coordinate COVID-19 issues; and collaborating with ministries to provide oversight on COVID-19 responses, including issues related to limitations on power, human rights, protection of marginalized populations and leaving no one behind. Participants called for solidarity among parliamentarians and countries in responding to COVID-19. Finally, participants emphasized the importance of countries collaborating with one another and with WHO to facilitate an effective, equitable, coordinated and sustainable response.

Moving forward, WHO welcomed engagement and input from parliamentarians on country actions to combat COVID-19 and committed to continue supporting the Forum by sharing technical information, providing technical guidance and facilitating communication between Forum members, particularly on legislative changes related to the COVID-19 response.
1. **INTRODUCTION**

The Asia-Pacific Parliamentarian Forum on Global Health (APPPGH) is a platform for parliamentarians to exchange ideas, build political will, strengthen capacities and foster collaboration in driving sustainable action for health. Established in 2015 with technical support from the World Health Organization (WHO) Regional Office for the Western Pacific (WPRO) and other partners, the Forum is open to the 30 countries comprising the Member States of the WHO Western Pacific Region and the Association of Southeast Asian Nations (ASEAN).

Strategically positioned to help align global health mandates with regional and domestic priorities and to facilitate national implementation of international health commitments, the Forum is an important part of WHO assistance to Member States in the Region in championing health beyond the health sector and taking a whole-of-government approach to enhance the rule of law in health governance and expand the role of law in health policy.

On 7 January 2020, Chinese authorities identified a novel coronavirus from a cluster of pneumonia cases of unknown etiology in Wuhan, the capital city of Hubei province. On 30 January 2020, WHO declared COVID-19 a public health emergency of international concern, then a pandemic on 11 March 2020. As of 22 April 2020, 2,237,511 cases and 165,327 deaths were reported globally.

Measures to control initial cases and localized outbreaks of COVID-19 involve active surveillance, contact tracing, isolation, quarantine and laboratory confirmation of each case. These measures are intense and challenging to sustain over time, particularly in resource-limited settings. Where the virus has spread widely in the general community, control measures are no longer practical. Instead, authorities focus resources on non-pharmaceutical interventions to reduce transmission and measures aimed at mitigating the impact on health-care systems and societies.

WHO has coordinated technical support to countries in responding to COVID-19. Member States of the Region are guided to strengthen core capacities for detection and response by the *WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19* (2020). Strengthening these core capacities, as mandated by the International Health Regulations, or IHR (2005), has enabled the Region to be more prepared to manage the challenges posed by public health emergencies. These capacities and the systems they support will be tested in the months to come as the world prepares to manage large-scale community outbreaks of COVID-19.

### 1.1 Meeting organization

To enhance the role of parliamentarians in supporting the COVID-19 response, the Forum convened an ad hoc virtual meeting on 23 April 2020. The meeting was chaired by the Honourable Professor Keizo Takemi, President of APPPGH, with technical and administrative assistance by the WHO Regional Office for the Western Pacific as Secretariat to the Forum. The meeting was organized as a live videoconference through an online communications platform. The meeting programme is available in Annex 1.

The meeting was attended by 30 parliamentarians from 20 countries, including Australia, Cambodia, Cook Islands, Fiji, Japan, the Lao People’s Democratic Republic, the Marshall Islands, the Federated States of Micronesia, Mongolia, New Zealand, Palau, Papua New Guinea, the Philippines, the Republic of Korea, Samoa, Solomon Islands, Thailand, Tonga, Tuvalu and Viet Nam. A list of participants is available in Annex 2.

### 1.2 Meeting objectives

The objectives of the meeting were:

1. to obtain updated technical information from WHO on the COVID-19 situation;
2. to share experiences on parliamentary actions relating to COVID-19; and
3. to consider how the Forum can support these efforts.

2. PROCEEDINGS

2.1 Block A: Opening

Dr Liu Yunguo, Director of Programme Management, WHO Regional Office for the Western Pacific, called the meeting to order and gave an overview of the meeting agenda.

The Honourable Professor Keizo Takemi, President of APPFGH, WHO Goodwill Ambassador for Universal Health Coverage and Member of the House of Councillors of the National Diet of Japan, delivered opening remarks. He said that he looked forward to the virtual meeting as a timely opportunity for parliamentarians to strengthen their solidarity to encourage the people and governments to collaborate in the battle against COVID-19. He also noted that the meeting will confirm the important role that WHO must play as a catalyst for government action, as well as a provider of technical assistance and medical supplies to countries.

Dr Poonam Khetrapal Singh, WHO Regional Director for South-East Asia, delivered opening remarks. She thanked parliamentarians for their support and engagement, which will be especially needed as Member States plan for the next phase. The national preparedness and response plans that WHO and Member States developed will be crucial. She urged the Forum to help familiarize and engage parliamentarians on these plans and strategies as part of its ongoing mission in these exceptional times. Given that parliamentarians are familiar with national health priorities and have significant health policy experience, they are well positioned to help ensure essential services are maintained, thereby protecting and defending progress. She encouraged the Forum to mobilize parliamentarians accordingly and to disseminate WHO’s recently published guidelines on this vital need. She also noted that parliamentarians can make positive contributions to policy on the many factors that impact health, such as trade, industry, finance, education, agriculture and population movement. This crisis goes well beyond the immediate threat of the virus and will contribute to a range of health risks, from malnutrition due to food insecurity to the mental health impacts of unemployment and diminished economic prospects. Parliamentarians must be encouraged to marshal the full weight of their knowledge and expertise to get behind national responses. At this unprecedented moment, all countries must come together to identify and develop policy solutions that address the many issues that they face and that will enable them to deal with COVID-19 for as long as they need to. Solidarity is not only a moral good but also an operational imperative. She urged the Forum to continue to leverage the talent and skill of parliamentarians as part of a comprehensive, whole-of-government, whole-of-society approach to combating COVID-19.

Dr Takeshi Kasai, WHO Regional Director for the Western Pacific, delivered opening remarks. He expressed his sincere condolences to everyone who has been affected. He emphasized the need to be prepared should the next epicentre be back in this region, to continue efforts to suppress the outbreak and to prepare for large-scale community transmission. He recalled that the establishment of the Forum was led by Korean parliamentarians, who at the time had just experienced an outbreak of Middle East respiratory syndrome coronavirus (MERS-COV), and that the technical theme of the first APPFGH meeting was global health security. Now, countries are being challenged in ways that nobody could have expected, and health systems are being tested like never before. Since this outbreak began, a clear, common message from Member States has surfaced: We are in this pandemic together, and we can only get out together. Solidarity is needed to support countries that have limited capacity. Governments in the Western Pacific Region are making extremely complex decisions about introducing, enhancing, easing or lifting quarantine restrictions and physical distancing measures. Working together in this difficult time, health systems and approaches to stopping transmission must continue to adapt and evolve, along with the epidemic. This will require strong leadership of parliamentarians. He emphasized the long-recognized role of parliamentarians in achieving effective public health outcomes, which is true now more than ever before.
2.2 Block B: Technical updates on COVID-19

Dr Tran Thi Giang Huong, Director of Programmes for Disease Control and Acting Director of Health Emergencies, WHO Regional Office for the Western Pacific, delivered a presentation on the COVID-19 situation in Asia and the Pacific. She provided an update on global data, as at the time of the meeting, which showed more than 2.5 million cases and 170 000 deaths from 212 countries, the fatality rate reaching 7%. The spread is expanding with no signs of slowing in many parts of the world, the epicentre shifting from China to Europe and North America and likely to shift to other regions. In the Western Pacific Region, over 137 000 cases and 5800 deaths have been reported in 22 countries and areas, representing a fatality rate of 4.2%. In the South-East Asia Region, more than 22 000 cases and 1400 deaths from 10 countries have been reported. The so-called take-off curve in some countries, such as the United States of America, Spain, Italy and China, shows a doubling of reported cases every 3 days, while in other countries, such as Singapore, Japan, the Philippines, Indonesia and Thailand, the curve doubled every 10 days. After a sharp initial increase, countries including China, Australia and the Republic of Korea were able to “flatten the curve”. Guam has reported fewer than 100 cases, which represent nearly 80% as a proportion of the population, while by comparison China has reported over 80 000 cases, which represent less than 6% of the population. Transmission occurs in three stages: Stage 1 includes primarily imported cases with no known epidemiological link; Stage 2 includes localized community transmission, with exported cases, increased cases with increased testing; and Stage 3 includes large-scale community transmission, with high proportion of occupied hospital beds and intensive care units, shortage of healthcare workers, leading to an overwhelmed health system. In some countries, such as China, the Republic of Korea, Australia and New Zealand, the epidemic curve was flattened. Other countries are fluctuating. For example, Singapore initially showed a successful reduction in spread but is now dealing with a second wave affecting foreign workers in dormitories. This reminds us that success still requires continued efforts in surveillance, early detection, contact tracing, isolation and quarantine, and other public health and social measures to prevent and prepare for large-scale community transmission.

Mr Martin Taylor, Director of Health Systems and Services, WHO Regional Office for the Western Pacific, delivered a presentation on WHO support to countries in responding to COVID-19. As set forth in the Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies (APSED III), Mr Taylor described complex factors necessitating a renewed whole-of-health-system and whole-of-society approach for infectious disease control, such as technical innovations, evolution in access to information, urbanization, antimicrobial resistance, international trade, movement of people, social protection of the most vulnerable populations, as well as lessons from the MERS-CoV and Ebola outbreaks in recent years. Countries have taken unprecedented measures in responding to COVID-19, including closure of schools, workplaces, public events and public transportation, which buys critical time to prepare health systems for large-scale transmission. Countries have shown an unprecedented high level of commitment and solidarity between nations, as most recently exemplified at a virtual meeting of health ministers of the Western Pacific Region convened by WHO. Though not unique, Viet Nam is an example of coordinated government action led by the Prime Minister with multisectoral cooperation on surveillance, treatment, communications and logistics. WHO recently published the WHO Western Pacific Regional Action Plan for Response to Large-Scale Community Outbreaks of COVID-19, which includes 10 broad pillars of support: incident management, strategic communications, community engagement, non-pharmaceutical public health measures, care pathways, health care delivery, surveillance and risk assessment, laboratories, operational logistics, and health care costs and financial protection. In addition to rolling out the action plan, WHO is also supporting countries to develop national action plans and mobilize resources to operationalize those plans. WHO is strengthening weekly coordination and experience-sharing through videoconferences with Member States and national IHR focal points. WHO provides technical assistance on case investigation and contact tracing, strengthening all levels of health systems and community engagement, training health workers and deployments of experts to support preparedness, sharing information and data while correcting wrong information, guideline development in collaboration with experts, and research and development of diagnosis, treatment and prevention in connecting research. WHO provides essential supplies, equipment and reagents, as well as personal protective equipment (PPE) to countries. WHO is collaborating with other partners, including the Asian Development Bank (ADB), International
Monetary Fund (IMF), World Economic Forum, and political and business leaders, to develop strategies for addressing the impacts of COVID-19 in the long term. He emphasized the need for leadership from parliamentarians to ensure a cautious approach towards a collective solution against COVID-19.

2.3 Block C: How parliamentarians can foster solidarity to address COVID-19

2.3.1 Country perspective: Mongolia

His Excellency Gombojavyn Zandanshatar, President of the Great State Hural (Parliament) of Mongolia, shared perspectives from his country. He noted that Mongolia, which borders the original epicentre in China, imposed immediate border closures and travel restrictions. With no evidence of local transmissions, Mongolia has had 35 imported cases, all detected during isolation upon arrival. Eight have recovered, and the remaining 27 are receiving medical attention. Current actions are focused on prevention and detection, including guidance on teleworking, rotating work schedules, availability of hand sanitizers, temperature checks and posters on risk communication. The country is prepared for risk scenarios. The Great State Hural is currently debating legislation on COVID-19 to give greater executive power to the government and to provide funding and establish an oversight committee to ensure implementation. The Great State Hural proposes to host the sixth meeting of APPFGH in Ulaanbaatar on the theme of primary health care, which will provide opportunities to exchange views and experiences among parliamentarians in the region, especially with respect to COVID-19 – and also more generally to advance universal health coverage and health in the Sustainable Development Goals. While looking forward to working with WHO and the Ministry of Health in organizing the meeting, he was careful to note that the Great State Hural will continue to consult with WHO in monitoring the COVID-19 situation before confirming the dates.

2.3.2 Country perspective: Republic of Korea

The Honourable Kim Se Yeon, Chair of the Health and Welfare Committee, President of the Korean Parliamentarian Forum on Global Health, National Assembly (Parliament) of the Republic of Korea, shared perspectives from his country. He confirmed that international parliamentary cooperation is urgently needed to protect people from the COVID-19 pandemic, which is why APPFGH was founded in 2015, after 38 Koreans died due to the MERS epidemic. After reflecting that the deaths were preventable, the Korean Government laid the groundwork for the current response to the COVID-19 pandemic. Without implementing a full border shutdown or excessive restrictions on economic activity, the number of confirmed daily cases of coronavirus in the Republic of Korea has now decreased to single digits, and the country’s fatality rate is very low in comparison to that of other countries. The country’s COVID-19 response policies were implemented successfully because: 1) the central government determined the direction of national policies; 2) local governments, private and public medical institutions, and private companies carried out these policies to serve the public; and 3) beneficiaries of these policies, including the public as well as those subject to isolation and quarantine, all worked together to fight the spread of COVID-19. In February 2020, the National Assembly convened in a provisional session to review and revise laws relevant to the work of the Central Disaster and Safety Countermeasures Headquarters, which would allow for an effective and rapid response to the COVID-19 crisis. First, the National Assembly amended the Infectious Disease Control and Prevention Act as follows: to require prompt disclosure of contact tracing, including the information of medical utilization, travel route and immigration records; to designate the Director of the Korea Centers for Disease Control and Prevention (KCDC) as the chairperson of the Infectious Disease Control Committee, rather than the Vice Minister of Health and Welfare; to increase the number of the Epidemiological Intelligence Service officers from 30 to 100; to strengthen mutual cooperation with local governments and educational institutions to prevent the spread of COVID-19; to provide paid leave for patients during isolation and hospitalization, allowing for commitment to the treatment and prevention without financial concerns; and to compensate losses incurred by health facilities and health professionals who treat infectious diseases. Second, the Quarantine Act was amended as follows: to establish the Korea Quarantine Plan every five years; to include the right to know the compensation measures for loss incurred by COVID-19 and the duty to cooperate with government bodies and measures; and to add the people who transfer or are exposed to the areas at risk of infectious diseases to the list for prohibition or suspension of entry into and departure from the Republic of Korea. Third,
the Medical Service Act was amended as follows: to enable patient clinical information available for epidemiological investigation and to establish the Infectious Disease Surveillance System for medical monitoring to investigate the cause of an infectious disease. Future policy considerations must continue to protect marginalized groups within Korean society, such as people with disabilities, undocumented immigrant workers, women who migrated for marriage and foreign citizens. The Republic of Korea actively seeks partnerships with WHO, other international organizations and global civil society to end the COVID-19 pandemic. A survey released the day before the meeting showed 67.5% of Koreans agree with the Government’s plan to support other countries with protective masks, reflecting their support for international cooperation in combating COVID-19. The Republic of Korea has received requests from about 40 countries around the world to share knowledge on all matters relating to their COVID-19 response, including quarantine and prevention, self-isolation, diagnostic testing, and treatment. The Government is planning to establish a so-called International Quarantine Cooperation General Task Force (TF) to share the Republic of Korea’s experience with international partners. The National Assembly will cooperate with WHO in the Western Pacific Region and the APPFGH members to share the country’s experience with COVID-19 prevention and help address COVID-19 in Asia and the Pacific. The global COVID-19 pandemic proves that health security is not determined by the “low politics” of health policies but rather by the “high politics” covering a wide range of fields – from genetic engineering to health policy to macroeconomic policy. Parliamentarians can act as catalysts for the nation, not only demonstrating leadership in disaster response but also providing simple administrative services. He expressed hope that APPFGH members will rise up to be leaders of this unprecedented disaster response and help bring a swift end to the COVID-19 pandemic.

2.3.3 Country perspective: Japan

The Honourable Hanako Jimi, Parliamentary Vice-Minister of Health, Labour and Welfare and Secretary-General of the Japanese Parliamentarian League for the WHO, House of Councillors, National Diet of Japan, shared perspectives from Japan. The country has reported 11,919 cases and 287 deaths, as of 22 April 2020. The overall goal of the Japanese response to COVID-19 is maximization of suppression of transmission and minimization of socioeconomic damage. The three pillars of the strategy include: early detection of and early response to clusters; enhanced intensive care and secure medical service system for the severely ill, including medical equipment (ventilators, ECMO, etc.); and behaviour modification of citizens. A key factor is practising voluntary restraint when gathering in high-risk environments characterized by the three Cs: closed spaces without sufficient ventilation, crowded conditions with people and conversations in close proximity. Japan is concerned with increased new cases in urban areas, increased cases with unidentified sources, and the rapid increase in confirmed cases and deaths worldwide. The response effort to delay and lower the peak of infection needs to control infection while minimizing socioeconomic damage, prevent overwhelming hospitals, and strengthen the capacity of local governments to control the outbreak, considering local situations based on data. Japan will enhance bilateral and multilateral cooperation, including to continue cooperation in enhancement of laboratories and surveillance systems for infectious diseases. Japan will support countries through WHO, including to contribute an additional US$ 46 million to support the WHO COVID-19 Strategic Preparedness and Response Plan. Finally, she noted that Japan, which has actively contributed to the Coalition for Epidemic Preparedness Innovations (CEPI) since its launch in 2017, will support vaccine development and supply by making additional contributions to CEPI in the amount of US$ 96 million and to Gavi, the Vaccine Alliance, in the amount of US$ 100 million.

2.3.4 Discussion (Part I)

Mr Martin Taylor moderated a discussion among all participants of the meeting.

**Palau** noted that the previous experiences of severe acute respiratory syndrome (SARS) and H1N1 influenza are now renewed with COVID-19, which threatens health sector resilience and economic development and challenges basic assumptions relating to the flow of world commodities. This is critical for small island developing states such as Palau, whose domestic resources are limited or underdeveloped. Due to early border closure, Palau remains free of COVID-19, giving time to the health sector to prepare and the Government to plan for the potential economic and social impacts. Congress will pass a bill authorizing a temporary package for private sector relief and additional monies
for general operations relating to COVID-19. Palau thanked international partners and WHO and requested additional assistance, including the provision of medical supplies.

The **Philippines** requested further details on the legislation described by the Republic of Korea, as well as Japan and other countries, to which Mr Taylor confirmed that WHO will facilitate the sharing of legislation among countries.

**Solomon Islands**, taking into consideration the second wave that has hit Singapore, requested information on strategies, plans and preparations that Pacific island countries, especially vulnerable countries that remain free of COVID-19, should consider. Dr Tran advised that countries must stay vigilant to limit the spread to the first or second stage of transmission through active surveillance and early detection, followed by contract tracing, quarantine and isolation, while preparing the health system to deal with large-scale community transmission. In Pacific island countries with limited resources, community engagement and participation are critical, especially when considering to impose and ease social measures.

The **Cook Islands** offered condolences to those who have lost loved ones to the aggressive pandemic. On 16 April 2020, the Prime Minister declared the country to be a COVID-19-free zone. This was made possible through a whole-of-country approach mobilizing communities to implement critical life-saving public health measures, including hygiene measures, physical distancing and robust border control. Parliamentarians should be strong and demonstrate leadership to give hope and reassurance to the people that this will eventually end and that the country will get through it together. Over the past three weeks, the Government has rolled out the first phase of an economic response plan for financial support for those affected. Remaining in “code yellow”, restrictions put in place four weeks earlier on schools, inter-island travel and small business operations have been partially relaxed. The government is working with New Zealand for the safe repatriation of stranded Cook Islanders. However, the country must continue to be vigilant in protecting the borders and establishing strong quarantine measures to minimize the risk of importing COVID-19. The health system is being reoriented to focus on primary health care and community-based health services. The government has enacted the COVID 19 Act, ministerial orders, and regulations to ensure that the COVID-19 free is not compromised. The country must make sacrifices now while waiting for antivirals and vaccines to be developed.

### 2.3.5 Country perspective: Philippines

The Honourable Angelina Tan, Chair of the House Committee on Health, House of Representatives, Congress of the Republic of the Philippines, shared perspectives from her country. She acknowledged that parliamentarians play an exceedingly essential role in the COVID-19 response, notably in providing budget for procurement of test kits and PPE, establishing laboratories and paying personnel salaries. Parliamentarians also enable the Government to carry out its executive functions, including emergency powers. On 23 March 2020, Congress enacted the Bayanihan to Heal as One Act – “bayanihan” means “spirit communal unity and cooperation” – which declares COVID-10 a national emergency, sets forth a national policy on COVID-19 and gives the President special powers for three months to execute the policy. The 30 special powers include powers for appropriations, procurement, social amelioration and national health insurance. For oversight, the President is required to submit a weekly report on activities and usage of funds. The House of Representatives has established the House Special Committee Defeat COVID-19, which: reviews the President’s weekly reports; assesses impact, especially on the economy and the workforce; and makes recommendations for agencies to address potential gaps in the Government’s response. Dr Tan introduced the proposed Philippines Health Security Act, which would establish a Philippine National Health Security Council that will develop a health security national action plan through a country-owned multi-year planning process, which would accelerate implementation of IHR core capacities, capture national priorities for health security, bring sectors together, identify partners and allocate resources for health security capacity development. The plan would include a review of all existing national plans and capacity assessments, a stakeholder analysis, a SWOT (strengths, weaknesses, opportunities and threats) analysis and prioritization of technical areas, including identification of activities based on risk assessment, monitoring and evaluation, detailed costings and mapping of resources. She also introduced a bill to establish additional quarantine stations in anchorage grounds across the country. Congress is looking into organizational reforms to address the
lack of institutional capacity to implement comprehensive public health programmes, making the country vulnerable against emerging infectious disease threats such as COVID-19. During the enhanced community quarantine, Congress though adjourned continues to meet online to discuss potential amendments to legislation, budget and financial plans to address COVID-19. Institutional mechanisms to coordinate and collaborate with agencies and sectors to provide oversight on COVID-19 response efforts, particularly concerns over the proper use of state sanctions, human rights, protection of vulnerable populations and inclusion of marginalized populations, are essential. She acknowledged WHO’s guidance on the COVID-19 Inter-Agency Task Force for the Management of Emerging Infectious Diseases and thanked APPF GH for providing this opportunity to share experiences and promote solidarity among countries.

The Honourable Pia Cayetano, Vice-Chair of the Senate Committee on Health and Demography, Senate, Congress of the Republic of the Philippines, shared additional perspectives from the Philippines. She noted that one key objective of the Bayanihan to Heal as One Act was to provide a monthly subsidy for the poorest of between US$ 100 and US$ 160 for two months. The Act also provides benefits for the families of health-care workers who die of COVID-19 while in service and increases the budget for the treatment of COVID-19 patients. The money was secured through savings and unallocated funds, so the regular budget was left untouched. Due to the urgency, the law was passed in one day. A joint congressional oversight committee was established to receive the President’s weekly report. The Senate comments on the report and sends it back to the President with recommendations. The University of the Philippines issued a report that the enhanced community quarantine has been effective, but the flattening of the curve is not irreversible, so a premature reopening of the country could lead to a spike in infections. During these times, other health matters should not be neglected, such as vaccinations, reproductive health, waste management (for which experiences and guidelines from other countries would be appreciated) and domestic violence. Supply chains, particularly for food and medicines, must be protected. In 2019, Senator Cayetano filed a bill to build on health infrastructure, not specific to COVID-19, but to prepare for pandemics. In her local Taguig City, community-based testing (e.g. drive-thru testing centres) has been rolled out.

2.3.6 Country perspective: Fiji

The Honourable Ifereimi Waqainabete, Minister for Health and Medical Services, Parliament of the Republic of Fiji, shared perspectives from Fiji. He noted that the Fijian context involves responding to multiple threats, including a measles outbreak in late 2019, several tropical cyclones already in 2020 year and now COVID-19. As a regional hub, the country was well aware that it would need to be prepared. To date, from 6 clusters, 18 cases have been confirmed, of which 10 are still active and 8 have recovered. Fiji has taken a whole-of-government approach to ensure multisectoral engagement and buy-in, as well as cooperation with international partners. To reduce entry risks, the Government has imposed border restrictions, bans on flight and cruises, border screening and quarantine services. To prevent and reduce local transmission, the Government has implemented measures to increase community awareness, develop a comprehensive communications plan, implement contact tracing, conduct fever clinics and a massive fever screening campaign. Fiji has closed schools, imposed a targeted community lockdown and limited curfew hours, imposed the closure of night clubs, gyms and pools, and enhanced partner and donor coordination. On clinical management, the Government has strengthened hospital isolation facility planning to develop 30-bed surge capacity. To strengthen health facility surge capacity, the Government has approved a supplementary budget for the purchase of equipment and supplies, as well as community isolation facilities. The country, which has local capacity for testing at the Fiji Center for Disease Control, now has a testing rate of 1 per 1000 population and a recovery rate of 44%. Fiji has amended the Public Health Act to better support the COVID-19 response. The country has developed guidance on workplace safety entitled “Working under the COVID-19 threat – the new normal!” He called on APPF GH and partners for fair distribution of technical assistance on COVID-19, as well as climate change more broadly, in Fiji and other Pacific island countries.

2.3.7 Discussion (Part 2)

Mr Martin Taylor moderated a discussion among all participants of the meeting.
The **Lao Democratic People’s Republic** noted that the Government has allocated budget for the COVID-19 response and identified health as a priority sector. The National Assembly (Parliament) has established a task force to work closely with the National Prevention, Control and Response Committee on COVID-19 to ensure effective and efficient leadership in monitoring and evaluating the implementation of response efforts. The National Assembly also provides oversight on the implementation of the 2017 legislation and related subsidiary laws on communicable disease. In light of the global nature of the pandemic, parliamentarians should commit to cooperation and solidarity in the fight against COVID-19. The country needs close cooperation and participation of all stakeholders to protect the health and life of all people, while leaving no one behind.

**Cambodia** requested information on decision-making for countries to relax aggressive physical distancing measures as well as on regional information-sharing mechanisms. Mr Taylor noted the need to proceed with caution in deciding to relax physical distancing measures, with risk assessment to ensure against further spikes. WHO is developing guidance on this matter and will follow up to share the guidance when available. On information-sharing, Mr Taylor noted that WHO convenes weekly briefings for national IHR focal points and that the Regional Director is in constant communication with ministers of health across the Region. WHO would be open to other ideas.

Mr Taylor recognized a request from **Australia** for information on the introduction of tracing apps and noted that the Secretariat will compile advice on the matter and follow up after the meeting.

### 2.4 Block D: Closing

Dr Liu Yuonguo thanked the presenters, representing the hosts of the prior annual meetings of the Forum, including the Republic of Korea, Japan, the Philippines and Fiji, as well as Mongolia as the proposed host for the next annual meeting. He also thanked all the delegations for their active participation.

The Honourable Professor Keizo Takemi provided closing remarks. The challenge for all countries, even under different contexts with different health system capacities, is to develop a comprehensive framework with two interlinked pillars: universal health coverage and a stable and consistent risk management system to address emerging infectious diseases, with preparedness and prevention to bridge the gap. He thanked WHO for using its convening power to organize this virtual meeting to strengthen solidarity across Asia and the Pacific, even when face-to-face meetings are currently impossible.

Dr Takeshi Kasai closed the meeting. He thanked the Honourable Professor Keizo Takemi for his leadership in calling the meeting as recognition of the critical role that parliamentarians have in responding to the far-reaching impact of COVID-19. He noted that COVID-19 has become the greatest public health threat the world has faced in a century. It has tested everyone and uncovered areas where systems need to be further strengthened. This will be a long fight, and nobody can predict what will happen in the next 100 days. Dr Kasai emphasized that everyone is in this together and can only get out of it together.

### 2.5 Follow-up points

WHO was requested to consider the following:

1. Consult with the Government of Palau on the provision of medical supplies to support the COVID-19 response, as requested by Palau (see 2.3.4).
2. Consult with the National Assembly of the Republic of Korea to facilitate the sharing of COVID-19-related legislation described in the presentation, as requested by the Philippines (see 2.3.4).
3. Consult with the Philippines regarding technical guidance on waste management, including to share experiences and guidelines from other countries (see 2.3.5).
4. Share technical guidance on relaxing physical distancing measures, when available, as requested by Cambodia (see 2.3.7).

5. Consult with Australia regarding technical guidance on the introduction of tracing apps (see 2.3.7).

6. Develop a mechanism for the following: to facilitate the sharing of legislation that has been passed or amended by parliaments in the APPF GH network and/or bills that have been introduced in relation to COVID-19; to identify trends and potential gaps in how APPF GH countries are addressing COVID-19 through law; to provide APPF GH members with technical assistance in strengthening their legal frameworks on COVID-19; and to foster solidarity between parliamentarians and parliaments in the APPF GH network, as well as WHO, towards addressing COVID-19 together at national and regional levels.
## Annex 1. Programme

<table>
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<tr>
<th>TIME</th>
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| 11:00–11:25| BLOCK A: Opening                          | *Moderated by Dr Liu Yunguo*  
  *Director of Programme Management, WHO WPRO*                                                                                   |
|            | Programme Overview                       | Dr Liu Yunguo  
  *Director of Programme Management, WHO WPRO*                                                                                     |
|            | Opening Remarks                          | Honourable Keizo Takemi  
  President, Asia-Pacific Parliamentarian Forum on Global Health  
  WHO Goodwill Ambassador for Universal Health Coverage  
  House of Councillors, National Diet of Japan                                                                                     |
|            | Opening Remarks                          | Dr Poonam Khetrapal Singh  
  WHO Regional Director for South-East Asia                                                                                          |
|            | Opening Remarks                          | Dr Takeshi Kasai  
  WHO Regional Director for the Western Pacific                                                                                        |
| 11:25–11:40| BLOCK B: Technical updates on COVID-19    | *Moderated by Dr Liu Yunguo*  
  *Director of Programme Management, WHO WPRO*                                                                                     |
|            | COVID-19 situation in the Asia-Pacific Region | Dr Thi Giang Huong Tran  
  *Director of Programmes for Disease Control, WHO WPRO*                                                                            |
|            | Issues in responding to COVID-19: WHO support to countries | Mr Martin Taylor  
  *Director of Health Systems and Services, WHO WPRO*                                                                               |
| 11:40–12:55| BLOCK C: How parliamentarians can foster solidarity to address COVID-19 | *Moderated by Dr Liu Yunguo*  
  *Director of Programme Management, WHO WPRO*                                                                                     |
|            | Solidarity across nations: Enhancing the role of parliamentarians in COVID-19 response, Part 1 |                                                                                                                                 |
|            | Country Perspective: Mongolia            | His Excellency Gombojavyn Zandanshatar  
  President  
  Great State Hural of Mongolia                                                                                                       |
|            | Country Perspective: Republic of Korea   | Honourable Kim Se Yeon  
  Chair, Health and Welfare Committee  
  President, Korean Parliamentarian Forum on Global Health  
  National Assembly of the Republic of Korea                                                                                           |
|            | Country Perspective: Japan               | Honourable Hanako Jimi  
  Parliamentary Vice-Minister of Health, Labour and Welfare Secretary General, Japanese Parliamentarian League for the WHO  
  House of Councillors, National Diet of Japan                                                                                        |
|            | Discussion                               | Moderated by Mr Martin Taylor  
  *Director of Health Systems and Services, WHO WPRO*                                                                                   |
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<th>Solidarity across nations: Enhancing the role of parliamentarians in COVID-19 response, Part 2</th>
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| **Country Perspective: Philippines** | Honourable Angelina Tan  
Chairperson, Committee on Health  
House of Representatives, Congress of the Republic of the Philippines  
Honourable Pia Cayetano  
Vice Chairperson, Committee on Health and Demography  
Senate, Congress of the Republic of the Philippines |
| **Country Perspective: Fiji** | Honourable Ifereimi Waqainabete  
Member of Parliament  
Minister of Health and Medical Services  
Parliament of the Republic of Fiji |
| **Discussion** | Moderated by Mr Martin Taylor  
Director of Health Systems and Services, WHO WPRO |

| **12:55 – 13:00** | **BLOCK D: Closing**  
*Moderated by Dr Liu Yunguo*  
Director of Programme Management, WHO WPRO |
| --- | --- |
| **Closing Remarks** | Honourable Keizo Takemi  
President, Asia-Pacific Parliamentarian Forum on Global Health  
WHO Goodwill Ambassador for Universal Health Coverage  
House of Councillors, National Diet of Japan |
| **Closing Remarks** | Dr Takeshi Kasai  
WHO Regional Director for the Western Pacific |
| **Video: 2020 International Year of the Nurse and the Midwife** | WHO Regional Office for the Western Pacific |
Annex 2. List of participants

AUSTRALIA  Honourable Katie Allen, MP
Member - Standing Committee on Health, Aged Care and Sport
House of Representatives, Parliament of Australia
Canberra

CAMBODIA  Her Excellency Lork Kheng
Chairwoman - Commission on Public Health, Social Work, Veteran,
Youth Rehabilitation, Labor, Vocational Training and Women's
Affair
National Assembly of the Kingdom of Cambodia
Phnom Penh

COOK ISLANDS  Honourable Vainetutai Rose-Toki Brown
Deputy Speaker
(Minister of Health)
Parliament of the Cook Islands
Rarotonga

FIJI  Honourable Ifereimi Waqainabete
Member of Parliament
(Minister of Health and Medical Services)
Parliament of the Republic of Fiji
Suva

JAPAN  Honourable Keizo Takemi
President - Asia-Pacific Parliamentarian Forum on Global Health
WHO Goodwill Ambassador for Universal Health Coverage
House Councillors, National Diet of Japan
Tokyo

Honourable Hanako Jimi
Parliamentary Vice-Minister of Health, Labour and Welfare
Secretary General - Japanese Parliamentarian League for the WHO
House of Councillors, National Diet of Japan
Tokyo

REPUBLIC OF KOREA  Honourable Kim Se Yeon
Chairperson - Health and Welfare Committee
President - Korean Parliamentarian Forum on Global Health
National Assembly of the Republic of Korea
Seoul

LAO PEOPLE’S DEMOCRATIC REPUBLIC  Honourable Phonephet Boupha
Deputy Chairperson - Committee of Social and Cultural Affairs
National Assembly of the Lao People’s Democratic Republic
Vientiane

MARSHALL ISLANDS  Honourable Kalani Kaneko
Senator - Majuro Atoll
Legislature of the Marshall Islands
Majuro
FEDERATED STATES OF MICRONESIA

Honourable Wesley W. Simina
Speaker
Congress of the Federated States of Micronesia
Pohnpei

Honourable Ferny S. Perman
Chairperson - Committee on Health & Social Affairs
Congress of the Federated States of Micronesia
Pohnpei

Honourable Paliknoa K. Welly
Chairperson - Committee on External Affairs
Congress of the Federated States of Micronesia
Pohnpei

Honourable Joseph J. Urusemal
Chairperson - Committee on Education
Congress of the Federated States of Micronesia
Pohnpei

Honourable Aren Palik
Vice Chairperson - Committee on Education
Vice Chairperson - Committee on Resources and Development
Congress of the Federated States of Micronesia
Pohnpei

MONGOLIA

His Excellency Gombojavyn Zandanshatar
President (Chairman)
Great State Hural of Mongolia
Ulaanbaatar

NEW ZEALAND

Honourable Michael Woodhouse
Member of Parliament
New Zealand Parliament
Wellington

PALAU

Honourable Stevenson Kuartei
Chairperson - Committee on Health and Education
Senate, Palau National Congress
Koror

Honourable Victoria Kanai
Representative
House of Delegates, Palau National Congress
Koror
PAPUA NEW GUINEA  Honourable Robert Naguri
Chairperson - Permanent Parliamentary Committee on Emergency
National Parliament of Papua New Guinea
Port Moresby

Honourable Walter Schnaubelt
Member - Permanent Parliamentary Committee on Emergency
National Parliament of Papua New Guinea
Port Moresby

Honourable William Nakin
Member - Permanent Parliamentary Committee on Emergency
National Parliament of Papua New Guinea
Port Moresby

PHILIPPINES  Honourable Pia Cayetano
Vice Chairperson - Committee on Health and Demography
Senate, Congress of the Republic of the Philippines
Pasay City

Honourable Angelina Tan
Chairperson - Committee on Health
House of Representatives, Congress of the Republic of the Philippines
Quezon City

SAMOA  Honourable Salausa John Ah Ching
Member of Parliament
(Associate Minister for Women, Social and Community Development)
Parliament of Samoa
Apia

SOLOMON ISLANDS  Honourable Lanelle Tanangada
Chairperson - Health and Medical Services Committee
National Parliament of the Solomon Islands
Honiara

THAILAND  Honourable Jetn Sirathranont
Chairperson - Committee on Public Health
Senate, National Assembly of Thailand
Bangkok

Honourable Wayo Assawarungruang
Member
House of Representatives, National Assembly of Thailand
Bangkok

TONGA  Honourable Amelia Afuhaamango
Minister of Health
Kingdom of Tonga
Nuku'alofa
TUVALU

Honourable Puakena Boreham
Member of Parliament
Parliament of Tuvalu (Palamene o Tuvalu)
Funafuti

VIET NAM

Honourable Pham Khanh Phong Lan
Member - Social Affairs Committee
National Assembly of the Socialist Republic of Viet Nam
Hanoi