

**NEAT Working Group on
Enhancement of Regional Health in East Asia with Special
Reference to the Public Health and Universal Health
Coverage**

Draft Final Report

Tokyo

6th July 2016

1. Introduction

In East Asia, as exemplified by the institutionalization of ASEAN+3 (APT) in 1997 and East Asia Summit (EAS) in 2005, regional cooperation and integration have advanced particularly in such areas as economy, finance, education, and disaster preparedness, etc. Worthy to note is the burgeoning economic interdependence deriving from establishment of an intra-regional supply chain in parallel with the rapid economic development. Under the circumstances, the question of how to maintain and promote health of the people or how to develop cooperation in healthcare appears to be an indispensable agenda for sustainable development in the region, let alone a common issue for humanity at large.

The international society has made efforts for health promotion including improvement of the health condition of pregnant women, prevention of such disease as HIV / AIDS and malaria, etc., as an integral development goal under the framework of the Millennium Development Goals (MDGs) established in 2000. The issue of healthcare has been on the agenda of the summit meetings among major countries, leading to the establishment of the Global Fund to fight AIDS, Tuberculosis and Malaria. These efforts have resulted in many achievements, such as the significant decreases of such disease as malaria and tuberculosis as well as the mortality of pregnant women.

However, the recent changes in people's life habit along with economic development, have induced serious non-communicable disease, such as cancer, diabetes, and heart diseases. In addition, new infectious diseases, such as SARS and MERS, have also emerged. Global disease structure has changed significantly as the vulnerability to epidemics along with globalization has been revealed, as seen in the case of the pandemic of Ebola. Furthermore, these diseases and vulnerability lead to other diseases, causing multi-faceted issues. Hence, the international society requires a new approach to healthcare including enhancement of comprehensive healthcare system, instead of traditional approach based on individual disease.

Especially, Asia is a region inherent of many tropical and infectious diseases. The region also has been facing various issues such as international health problems, environmental health, and aging which significantly change healthcare system of each country. Thus, the region is in need of further cooperation and management in the field of health.

Nevertheless, East Asian countries have not simply left the situation unaddressed.

The APT, for example, has convened health ministerial meetings approximately every two year since 2004 and shared the recognition that the APT is facing two-folded issue of communicable and non-communicable diseases and that it is important to enhance collaboration in the region, which include cooperation in training health experts, as well as universal health coverage (UHC). As a result, the ASEAN+3 UHC Network was established in 2014 by the APT Senior Official's Meeting on Health Development (APTSOMHD). Future development of the regional UHC is expected.

As for Japan-ASEAN bilateral framework, "ASEAN-Japan Health Initiative" was advocated at the ASEAN-Japan Commemorative Summit Meeting in 2013 to make the ASEAN a region of advanced regional health and longevity, which claimed the cooperation to promote UHC, to manage infectious diseases, and to expand health services and medical equipment for non-communicable diseases.

Hence, in the East Asian region, cooperation in the newly-developed health related issues has already been initiated. Should the East Asian region be able to develop cooperation in this field and achieve sustainable development, it would significantly contribute not only to regional prosperity but also to the solution of issues in the field on a global scale. Therefore, there is no emphasizing enough significance of promoting regional cooperation in this field.

2. Objective

With the background and awareness explained above, what is the "cooperation in the field of health" to be focused in the East Asian region? Especially today, because communicable and non-communicable diseases have appeared as multi-faceted issues due to the changes in people's living environment along with globalization and economic development, it is necessary to consider how to promote comprehensively management of public health care rather than an approach targeting individual disease. It is necessary to clarify the public health issues in each country and to share ideas on how to promote cooperation in the field of health care.

Also, as a concrete means to maintain health, securing impartial access to basic medical services in each society would be indispensable and adoption of universal health coverage is thus an immediate task.

Besides, research and development in health related issues, including the

management of emerging diseases, would be indispensable. Cooperation for technological innovation and human resource development are also necessary.

Based on these backgrounds and awareness and with the understanding of the current situation of regional cooperation in East Asia with a broad perspective, this Working Group aims to make concrete and detailed policy proposals for “Cooperation in the field of healthcare in East Asia” and to submit the proposals to the APT Summit.

3. Discussions on Enhancement of Regional Health in East Asia

Twenty three experts from ASEAN +3 member countries and the sponsoring organization, the Japan Forum on International Relations (JFIR), took part in a working group meeting in Tokyo on 5 – 6 July 2016 which was organized in three sessions.

In Session I “Trend on Public Health in the 21th Century”: the WG discussed various issues and challenges related to the public health in East Asia, including secure human and financial resources for providing appropriate public health services and achieving UHC. It is necessary for improving health among countries in East Asia to consider further health systems reform with various options including to reduce out-of-pocket payment, to expand coverage of national health insurance schemes, to improve social protection, and to improve health governance. The WG discussed the importance for considering similarities and differences of the determinants of health among East Asian countries for understanding and promoting health systems strengthening. The WG also discussed the importance of a common analytical framework for understanding health system in each country.

In Session II “Promotion of Public Health in the Age of Universal Health Coverage in East Asia”: the WG discussed various issues and challenges related to public health and health systems among East Asian countries, including the aging societies, increase burden of non-communicable diseases etc. The WG discussed various options to tackle these issues and challenges, including enhancing international collaborations among various stakeholders, to promote health, to share best practices, to promote communicable and non-communicable disease prevention, to enhance public/private mix, to improve quality and coverage of health data, and to develop human resource for public health researches. The WG also discussed establishing a public health research network in East Asia.

In Session III “How to Further Enhance Regional Health in East Asia”: the WG discussed about setting up regional priorities and the goals for enhancing regional health. For doing it, it is important to understand the current status of health and health system among East Asian countries, to collaborate between countries including establishing research networks, setting up common framework for the monitoring and evaluation of health systems and UHCs.

4. Policy Recommendations

Based on the discussions above, this Working Group on “Enhancement of Regional Health in East Asia with Special Reference to the Public Health and Universal Health Coverage” summarized the following policy recommendations:

1. Strengthen health systems in East Asian countries to enhance regional health, reduce health inequities, and promote health and achieve/sustain universal health coverage. It should be done for each component of health system including financing, governance and human resource with appropriate transferability.
2. Seek the possibility of financing public health facilities either from the viewpoint of social development program at national level, or from that of basic infrastructure development program at regional level.
3. Jointly advocate for the need of policy and program support among health and non-health sectors to address social determinants of health that have strong impact on the regional health priorities.
4. Jointly promote health among East Asian countries for preventing and detecting both communicable and non-communicable diseases at early stages, with equitable allocation of health resources, as well as to cope with the aging society, eventually, if possible, through establishment of a regional center or its equivalent under APT framework.
5. Establish a framework of cooperation and cross-sectoral information sharing among the East-Asian countries in the areas of public health and health system.
6. Enhance utilization of health data in collaboration with East Asian countries as well as other stakeholders such as international organizations, NGOs and communities. To improve abilities of data collection, to improve quality of data, to develop and expand

health database into 'big data' in each country, and to enhance capability of data management and analysis.

7. Strengthen health services research networks among research institutions in East Asia, and build a network of health services research specialists, eventually, if possible, through establishment of a regional committee or its equivalent under APT framework.
8. Develop human resources for public health and health services research towards evidence-based health policy.

[END]

List of Participants

Cambodia

IR Por

Chief of Technical Bureau, National Institute of Public Health,
Ministry of Health

China

WANG Yu

Director-General, China Center for Disease Control and Prevention

MIAO Ji

Research fellow, Institute of Asian Studies, China Foreign Affairs University

Japan

[WG Members] *Director of the WG

SATO Teiichi*

Professor, International University of Health and Welfare

FUKUDA Takashi

National Institute of Public Health

IGARASHI Ataru

Associate Professor, the University of Tokyo

IKEDA Shunya

Professor, International University of Health and Welfare

OGAWA Toshio

Associate Professor, International University of Health and Welfare

WATANABE Kozo

Deputy Director General, Japan International Cooperation Agency

[The Japan Forum on International Relations]

ISHIGAKI Yasuji

Trustee, JFIR

WATANABE Mayu

Executive Director, JFIR

KIKUCHI Yona

Senior Research Fellow, JFIR

YANO Takuya

Research Coordinator, JFIR

HARADA Hiroyasu

Research Fellow, JFIR

Korea

KANG Minah

Professor, Ewha Womans University

Laos

Phimmasone KOTSAYTHOUNE

Deputy Director General of Finance Department, Ministry of Public Health

Malaysia

LEE Kah Seng

Principal Assistant Director, Pharmaceutical Services Division, Ministry of Health

LIM Yen Wei

Principal Assistant Director, Pharmaceutical Services Division, Ministry of Health

Myanmar

San SHWE

Senior Technical Consultant, Myanmar Institute of Strategic and International Studies

Philippines

Ida Marie PANTIG

Supervising Research Specialist, Philippine Institute for Development Studies

Singapore

PHUA Kai Hong

Associate Professor of Health Policy & Management,
the Lee Kuan Yew School of Public Policy

Thailand

Wiwat ROJANAPITHAYAKORN

Director, Center for Health Policy and Management,
Faculty of Medicine, Ramathibodi Hospital, Mahidol University

Vietnam

Do Duy CUONG

Head of Infectious Department, Bachmai Hospital

In Alphabetical Order of Country Names