

**MBDS Resource Mobilization Committee (RMC) activities  
in Singapore on 15-16 August 2012**

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Team Leader: Dr. Bounlay Phommasack, Chair, MBDS Foundation

Team Member: Dr. Sok Touch

Team member: Dr .Nguyen Dang Vung

Secretary: Dr. Moe Ko Oo

RMC Objectives: Study about the structure, mission, vision and strategies of other Foundations on how they mobilize resources / funding support using prepared questionnaires.

**15 August 2012.** From 0930 to 1200 at Singapore MOH

Meeting participants: MBDS RMC team and

1. Dr Joanne Tay (Deputy Director) Surveillance and Response
2. Dr. Pengiran Hishamuddin( Assistant Director)
3. Dr. NgoonTek ( Consultant) Department of ID
4. Prof: Richard Coker( London School of Hygiene and Tropical Medicine &NUS)

Singapore MOH kindly welcome MBDS RMC Team and presented about history of Disease Surveillance, challenges, future direction and S-FETP program.( Attached with those 2 presentations)

MBDS RMC Team asked the questions and clarification based on those presentations and sharing experience of Cambodia HFMD.

RMC Team explored the collaboration mechanism/opportunity with Prof .Richard Coker about syndromic surveillance with NUS and MBDS. Prof. Richard Coker proposed to have an MOU between MBDS and London School of Hygiene and Tropical Medicine (LSHTM) and MBDS and Saw Swee Hock School of Public Health (SSHSPH). Prof Coker also provided MOU template to MBDS RMC Team for consideration and further collaboration. (Please see another documents for draft MOU and related documents)



*Picture of RMC Team, MBDS Foundation, MoH Singapore and Prof. Cooker.*

RMC Team take opportunity to discuss about PMAC Jan 2013 preparation during Lunch time concerning the idea of participants from MBDS, invitee list, documentation, other activities to share with other Board members.

Proposed participants from MBDS Countries: 1 person from each member country

Proposed invitees list from partners:

1. ADB
2. ACMEC
3. AFD France
4. ASEAN
5. ASEF
6. AusAID
7. CAREID
8. KIA
9. US CDC
10. WB
11. USAID ( BKK)
12. USAID (Dr Ariel Pablo)
13. EU
14. JICA
15. Pasteur Institute
16. RAND

17. NTI
18. Fondation Merieux
19. Wellcome Trust
20. Skoll global threat
21. Dr.Sarah Macfarlane
22. Dr. Katherine Bond
23. Dr. Ann Marie Kimball
24. Dr. Richard Coker
25. Dr. Suwit
26. WHO ( WPRO)
27. WHO ( SEARO)
28. Safety Net
29. TELFINET
30. Dr Terry Taylor
31. Dr. Louise Gresham
32. RF
33. ProMED
34. Dr Pratap
35. Dr. Sandra
36. TLL

#### Documentation for MBDS Foundation Launching Ceremony

- 3 documents from Lao P.D.R Advocacy and resource mobilization purpose (allocated budget from MBDS Secretariat)
- 2 documents from Cambodia (MBDS & IHR and lessons learned) (allocated Budget from MBDS Secretariat)

#### Poster presentation:

Each member country has to prepare one poster with MBDS related activities for that ceremony

#### Market strategy:

Questionnaire/games/souvenir/T-Shirt or refreshments (Budget need to be reallocated)

Those information have to be shared with all Board for comments and suggestions

## 15 August 1500 to 1615 at ASEF

Meeting of MBDS RMC teams and ASEF delegates:

1. Mr. Karsten Warnecke ( Deputy Executive Director)
2. Mr. Paul Koh ( Director) Public Affairs
3. Ms. Anjelu Narandran ( Deputy Director) Intellectual Exchange
4. Ms.Sunkyoungh Lee ( Project Manager) Intellectual Exchange



ASEF welcomed MBDS RMC Team and introduced each participant.

First, ASEF requested MBDS to brief on its background, program and Foundation plan. RMC Team leader explained about their requested information and clarified some discussion points with Deputy Executive Director.

RMC Secretary had sent the following questionnaires to ASEF before this meeting and ASEF staffs were trying to answer all those questionnaires with their experiences and lessons learned.

- Purpose of the acquired information: For internal reference
- Which development partners are they working with and partnership agreement?
- Mechanism of fund allocation? How to prioritize?
- What are governance structure and collaboration mechanism?
- Sustainability and working relationship with Government system?

ASEF was established in 1997 with 49 member countries from Asia and Europe.

WHO, EU, ASEAN are main partners of ASEF and they are also involved in Advisory Committee of ASEF. That Advisory Committee and Steering Committee decide fund allocation and prioritize the program implementation. Implementing program from ASEF

is complementary to Government plan and added value to existing government system. ASEF is funded by 5 means of external sources:

1. Member country contribution (annual)
2. Grant for specific project implementation in some countries from donors and from interested countries themselves
3. Development partners
4. In-kind contribution/support from member countries/partners
5. Applying for external grants from some donors with other collaboration networks.

They strongly encourage MBDS as a well established network with unique and pioneering regional experiences through the implementation of its strategies and plans to continue its momentum in light of emerging infectious diseases that recognize no borders and the One Health approach to engage with other relevant stakeholders. Finding donor support will not be complicated if MBDS strategies and plans could be compartmentalized and/or tailored to prospective regional and global development agenda. ASEF and MBDS share similar challenges as development partners perceive our institutions technical capacity as limited to the public health area as inferred in the name of our project or collaboration.

Advisory Committee is good example from ASEF that first made tangible relation with some development partners by doing small commitment and later building collaboration to set up a win-win situation/mechanism. They support the principle of multi-sector approach, diversification of funding sources.

The MOH Singapore also kindly hosted a welcome dinner at Holiday Inn Hotel where the following distinguished MOH officials were in attendance:

1. Dr .Derrick Heng , Group Director ( Public Health Group)
2. Dr.Jeffery Cutter. Director ( Communicable Disease Division)
3. Dr Joanne Tay ,Deputy Director( Surveillance and Response )
4. Dr. Joanna Teo. Deputy Director ( International Co-operation Branch)
5. Dr. Ooi Peng Lim Steven , Deputy Director ( Policy and control Branch)

6. Dr. Pengiran Hishamuddin, Assistant Director( Surveillance and Response)

Practical experiences in domestic and regional surveillance and response activities were also exchanged.

**16 Aug 2012** 0930 to 1230 at Temasek Life Science Laboratory

MBDS RMC team with TLL delegates:

1. Mr. Peter Chia ( Chief Operating Officer)
2. Ms. Chook Mee Lan ( Head, faculty service and Biosafety)
3. Dr. TM Chua ( Biosafety consultant)

MBDS RMC briefly introduced Foundation background and 7 strategies to TLL team. Temasek Holding Trust is providing research, training, education and disaster management.



TLL is supporting Lab capacity building especially Biosafety / Biorisk / Biosecurity and training in Laos (from 2011) and Myanmar (this year) and planning to support Cambodia and Vietnam in the next year. TLL is planning to support national trainees to training at mother countries and then choose 3-4 staff from each country to be trained intensively in Singapore for 1-2 weeks (ToT training at TLL). TLL has showed their willingness to collaborate with MBDS in the field of Lab capacity strengthening and advisory roles.

## **Conclusions:**

1. From the MOH Singapore, it is very good opportunity for MBDS to introduce the MBDS Foundation and MBDS cooperation, throughout the discussion, there is a good willingness from MOH to identify the opportunity to collaborate with the MBDS. The type of collaboration will depend on the availability of varieties of detailed plan of MBDS. Then there is an urgent to formulate the next 3 years plan of MBDS.

2. From ASEF, it is good that MBDS Foundation was introduced to the knowledge of ASEF. ASEF suggested very good advices to MBDS Foundation to start in the beginning by trying to follow up the following principle: Share information to development Partners and involve them into regular meetings, at the same time share with them the difficulties MBDS Foundation are facing.

3. Temasek Life Sciences laboratory is pleased to collaborate provided that the Master plan of MBDS is available.

In conclusion, the tour for introduction of MBDS Foundation and seek for opportunities to collaborate, to get support is the preliminary step for further resource mobilization. Resource mobilization can start with getting to know each other, share information and agree on the common issues to work together for the benefits of the region and for the individual country.

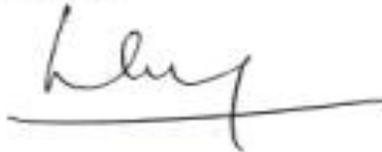
Such kind of visit is very useful for the initial introduction of MBDS Foundation and for further bringing the MBDS Foundation into the reality of the ground.

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This is preliminary trip for RMC and learned the experience and structure especially resource mobilization and sustainability of other organization. We would like to recommend other Board may consider another RMC trip would be good movement for future of MBDS.

Prepared by RMC Team

Approved by

A handwritten signature in black ink, appearing to read 'Bounlay', with a long horizontal line extending to the right from the end of the signature.

Dr. Bounlay Phommasack  
Chair, MBDS Foundation