

HM Government Response

14 March 2018

HM Government Response to the Independent Commission for Aid Impact learning review on: The UK aid response to global health threats, January 2018

HM Government welcomes the Independent Commission for Aid Impact's learning review of the UK aid response to global health threats and its recommendations.

The review and its recommendations are timely. Drawing on lessons learnt from the outbreak of Ebola in West Africa in 2014 and the Independent Review on Antimicrobial Resistance (AMR) led by Lord Jim O'Neill in 2016, the UK Government significantly scaled up its efforts to enhance the ability of countries and international institutions to prevent and detect health threats, and to promptly and effectively respond to outbreaks when they occur.

The programmes that were started at that time are now underway. ICAI's review is positive about the progress made so far – including the development of a strong portfolio of programmes, work on WHO reform and success in securing global policy commitments on AMR. This has been a strong cross-government effort, with government departments working closely together on an issue which affects global poverty and the UK's domestic interests. The review also contributes to our assessment of what more needs to be done to consolidate these achievements.

Recommendation 1: The UK government should build on the success of the *Stronger*, *Smarter*, *Swifter* framework by developing a refreshed global health security strategy with a clearer focus on strengthening country health systems, a broader set of research priorities and clearly defined mechanisms for collaboration both across departments and with external actors. The strategy should be published and communicated widely.

Accept

We are pleased that ICAI considers that *Stronger*, *Smarter*, *Swifter* provided a coherent and evidence-based framework for addressing global health threats, and that the portfolio of programmes that the UK government has established in order to implement that ambition is relevant and pioneering. We also recognise that now is a good time to refresh the framework, and welcome the suggestion that it should be made available to others. We are therefore reviewing and updating our approach to build upon its strengths and ensure that it is fully relevant and available to a wider audience.

Government departments have developed a joint theory of change document which sets out how our work on global health security leads to its intended impact. It uses the internationally-recognised terminology of anticipating, preventing, detecting and responding to health threats which have the potential to cross national boundaries.

The refreshed framework will align with this terminology and include information on the

links between health systems strengthening and global health security, the processes for prioritising and coordinating research, and the mechanisms for ensuring effective collaboration between government departments and with external partners. We will make the refreshed framework available on the internet so that it can be accessed across government, and also by other donors, multilateral institutions and the public.

<u>Recommendation 2</u>: The Department of Health and DFID should strengthen and formalise cross-government partnership and coordination mechanisms for global health threats, broadening their membership where relevant. This should include regular cross-government simulations to rehearse how the UK government might coordinate and respond internationally to a future global health threats crisis similar to Ebola, and engage with other actors such as the WHO.

Partially Accept

The Department of Health and Social Care (DHSC) and DFID work closely with each other and with other government departments and agencies on global health security and AMR. As ICAI recognises, the Global Health Oversight Group (GHOG) provides a formal mechanism to enable the two departments to jointly oversee global health policy and programmes. The Scientific Advisory Group for Emergencies (SAGE) is an established structure that brings together Chief Scientific Advisors across government and other experts to inform government decision-making during actual or potential emergencies such as Ebola and Zika.

There is also effective joint working on specific aspects of global health security. There has been close collaboration between DHSC, DFID, the Government Office for Science (GOScience), Public Health England (PHE) and the UK Diplomatic Mission in Geneva to develop mechanisms for routine sharing of information about global health threats, and for assessing whether responses to outbreaks are timely and appropriate. Similarly, DHSC, DFID, the Department for Environment, Food and Rural Affairs (Defra), Cabinet Office and the Foreign and Commonwealth Office (FCO) worked as a One HMG team to successfully negotiate G20 commitments on AMR. The team was shortlisted for a 2017 Civil Service Award in recognition of this work.

However, we take on board ICAl's view that the arrangements for cross-government partnership and coordination for global health security could be made clearer, in order to fully bring to bear the expertise of all relevant departments in line with a One Health approach (which brings together human, environmental and animal health). We are examining how this could be achieved by enhancing the existing structures, for example by inviting a wider range of government departments to the GHOG. Any changes that are made will be set out in the framework.

The government carries out regular cross-government simulation exercises as an integral part of preparing for a range of potential threats including pandemic influenza. Internationally, the G20 leaders held a simulation exercise in 2017.

Recommendation 3: The government should ensure that DFID has sufficient capacity in place to coordinate UK global health security programmes and influencing activities in priority countries, including around the objective of strengthening national health systems.

Accept

We share ICAI's view that effective coordination of programmes and influencing activities is essential, and that DFID has an important role in supporting this at country level. The EpiThreats group is a good example of how this is already happening: it brings together PHE and relevant staff across DFID, and provides a regular mechanism

for country-based DFID health advisers and others to review and share information on responses to disease outbreaks.

DFID will continue to use its presence in priority countries to support coordination. DFID will also continue to further develop health adviser competence in health security so that this can be deployed in-country to support integration of global health security into health systems strengthening at national and local levels (e.g. through integrated disease surveillance and response).

Recommendation 4: DFID and the Department of Health should work together to prioritise learning on global health threats across government, overseeing the development of a broad evaluation and learning framework, regular reviews of what works (and represents good value for money) across the portfolio, and a shared approach to the training and development of health advisers.

Accept

The new enhanced portfolio of global health security programmes already has a strong emphasis on the use of evidence and evaluation. Nonetheless, we recognise that more can be done to support the generation, sharing and use of learning across the full scope of the portfolio. We also note ICAl's observations that the timeframe of programmes (typically 3-5 years) is relatively short for large-scale research and development projects, and that emerging research findings and learning will be crucial to inform programmes as they evolve.

Refreshing our approach in line with the cross-government theory of change will facilitate cross-departmental coordination and give greater strategic direction to evaluation and learning. We will map evaluations in relation to the refreshed framework, ensuring that individual programmes and departments are clear about how they contribute to the government's overarching objectives for addressing global health threats. We will use the government-wide *Strategic Coordination of ODA – Research* (SCOR) mechanism to review current research, to identify approaches to strengthening research coordination and prioritisation, and to ensure that existing systems have sufficient flexibility to respond to new outbreaks. We will continue to disseminate evidence and learning beyond the individual programmes and departments from which they emerge, in order to enable these to be drawn upon by others and inform existing activity. Information about all DFID-funded research is published on the GOV.UK website.

We note ICAI's recommendation that DFID and DHSC should develop a shared approach to the training and development of health advisers. We will continue to seek opportunities for joint learning between DFID and DHSC. These may for example consist of joint simulation exercises and visits (such as the recent joint DFID, DHSC and PHE visit to WHO AFRO's office in Congo-Brazzaville), and joint Continuing Professional Development (CPD) programmes.