9th Meeting of the One Health High-Level Expert Panel (OHHLEP) 2 & 3 March 2023

Note for the record

Day One-2 March 2023

12:30 – 13:00: Welcoming Remarks

**OHHLEP Chairs, Prof Thomas Mettenleiter** and **Prof Wanda Markotter** welcomed the participants to the 9th OHHLEP full panel meeting and gave the floor for the welcoming remarks.

**Dr Sylvie Briand**, Director Epidemic and Pandemic Preparedness and Prevention Department, at the World Health Organization (WHO) emphasized the critical role of One Health (OH) in disease prevention and the importance of intersectoral collaboration and data sharing. The Quadripartite (QPT) collaboration has been a good example of this, through bridging efforts to initiate joint collaborations across sectors. The work of OHHLEP especially with the definition of OH and the prevention of zoonotic spillover, has been an important contribution to advance the collective OH agenda and bring together partners and stakeholders for a better convergence of efforts. **Dr Sylvie Briand** concluded by thanking the OHHLEP panel for their important contribution to global health and global health security.

The four technical leads of the Quadripartite (QPT) organizations thanked OHHLEP members for their dedication and the value they add through their advisory role to the QPT and through their delivered work which influences different stakeholders working in One Health. OHHLEP is considered a crown jewel in the OH network. The QPT Partners echoed the positive feedback received by the Inter-governmental Negotiating Body (INB) for the Prevention Definition developed by OHHLEP, in the negotiations for the ‘Pandemic Treaty’. The QPT is looking forward to the future work of OHHLEP to continue to advance One Health; the work on the drivers of spillover, that fits perfectly into the prevention piece of the pandemic puzzle; the feedback of OHHLEP on the implementation guide for the OH Joint Plan of Action (JPA); as well as the OH assessment tools review, that will guide the JPA implementation. The broadening of scope for OHHLEP activities is highly desired to address additional OH issues in the future. The Partners reiterate their commitment to support OHHLEP in their mission and will work on mobilizing additional efforts to further support the panel in accomplishing their ongoing and future achievements.

**Dr, Maria Neira**, Assistant Director-General of the Healthier Population Division at WHO, presented her welcoming remarks. As the Director of the Environmental and Social Determinants of Health at WHO, she highlighted the importance of the environmental dimension of OH as it is often underrepresented. As well as considering upstream risk factors in the prevention of disease emergence, she is pleased with the work of OHHLEP on this topic and is looking forward to the coming deliverables.

**Prof Wanda Markotter** and **Prof Thomas Mettenleiter** gave an overview of the agenda of this meeting before handing over to **Prof Dominique Charron, OHHLEP rapporteur**, for updates on the progress of OHHLEP Annual report.
13:00 – 15:00: Panel Session One: OHHLEP Thematic Group Updates and Products

OHHLEP Annual Report

- The Annual Report 2021 was publicly very well received and the provision of information on OHHLEP’s work was considered very useful.
- The Annual Report for 2022 is currently being drafted. The structure will be the same as the previous one.
- It reports on the progress in the work plan for the different activities, including OHHLEP representation in high-level events in the year 2022 by the panel members, as well as an outlook for the next steps.
- Forewords still need to be collected and TG co-leads need to review and confirm their parts respectively.

**Action point/next steps:**

- A reminder will be sent to OHHLEP members to share their representation of the panel in high-level events.
- Following a review from the co-chairs of OHHLEP, the report will be circulated among panel members and partners for comments.
- Timeline for the report finalization is end of March.

TG1: Publication of the theory of change

Dr Catherine Machalaba and Dr Osman Dar, TG1 co-leads, thanked everyone for their efforts and input provided.

- They informed the panel that OHHLEP’s Theory of Change was successfully published as a commentary piece in The Lancet Series on One Health and Global Health Security. This has proven to be a great platform to elevate the work of OHHLEP on One Health and share more widely, and the feedback was very positive. Some of OHHLEP members also presented in the panel discussions during the launch of this special Lancet series.

**Discussion:**

- TG1 has had the opportunity to provide input to different global frameworks that are currently being drafted, like the pandemic instrument and the pandemic fund, to ensure that the underlying principles of One Health are being recognized and included. This was considered also very successful.
- With the help of OHHLEP members, the underlying principles have been translated into different languages. WHO Secretariat will collect those translations and publish them on the OHHLEP website.
- The creation of an additional figure for OHHLEP’s One Health definition which includes the underlying principles was discussed to make them more accessible for the public.
- The Technical Advisory Panel (TAP) to the Pandemic Fund’s Governing Board of the World Bank has also expressed their interest in OHHLEP’s work, trying to encourage countries to include items focusing on prevention in their applications. One OHHLEP panel member is sitting on the Technical Advisory Panel of the Pandemic Fund.
- For administrative purposes, it would be helpful if each panel member provides some additional contact details to the WHO Secretariat to facilitate rapid follow up for publications, meetings, etc.
- A draft implementation plan for the One Health Joint Plan of Action (JPA) has been circulated to the panel members, however, responses are still insufficient.
- Therefore, it was agreed that review of the Implementation Plan would be coordinated by TG1 to ensure better follow-up and accountability.

**Action point/next steps:**

- The WHO secretariat will collect the translations of the OH definition and underlying principles and publish them in OHHLEP website.
- TG1 will lead the review and input on the One Health JPA implementation guide.
TG2: New focus and update on the current state of advancement

Dr Casey Barton Behravesh, TG2 co-lead, presented an overview of the current state of the inventory of OH tools for capacity assessment and OH operationalization.

- The TG has identified many more tools than originally anticipated; however, this has led to a current delay in the deliverable. All members and partners who have submitted and reviewed tools were thanked.
- This inventory will be providing a framework with guidance for countries to use OH tools that will support implementation of the JPA and National OH plans. Additionally, gaps and priorities will be identified and guidance on collaboration between implementation partners will be shared.
- The importance of not using these tools in siloes but maximizing their potential by linking and coordinating the implementation of all available OH tools for maximal benefit and impact was highlighted.
- Inclusion criteria for the inventory were drafted and all identified tools will be mapped against them. Tools matching the inclusion criteria were further categorized in 6 different categories each with a tab in the Excel database as well as an additional tab containing the originally identified 12 tools and the inclusion criteria.
- A short overview of the structure and information gathered in the database for each of the tools was presented.
- The timeline is tight as the aim is to submit the work as a publication in May/June 2023. The database will be shared with the full panel for their input in the middle of March before a reviewed version will be distributed more widely to the QPT Partners for their review.

Discussion:

- It was suggested to also map the tools against the different outcomes of OHHELEP Theory of Change to link up the different outputs. TG2 will assess them accordingly with help from TG1.
- Tools could further be mapped around the 4 C’s (Communication, Coordination, Collaboration, Capacity building) or organized by the pathways of the OH JPA to link them to the JPA Implementation plan which is currently being drafted.
- In addition, generic tools as a form of enabling tools that can achieve outcomes could be considered as well (e.g., some tools that are used for Evaluation (M&E) of the International Health Regulations (IHR) are already included in the database).
- TG2 designed a living data base that can be updated periodically with additional tools, following a coordinated system, to catalyze what tools are being used.
- Some description headers were not clear to all panel members, and they should be revised accordingly.
- Focus currently is on finishing the inventory with the tools that have been identified to date in order to publish in May/June. The co-chairs will then discuss mechanisms for periodic updates of the database.

Action point/next steps:

- Database will be shared for review and input with the panel 14/03 until 26/03 COB.
- Final version of the database will be ready the 31/03.
- The final product is scheduled to be ready for publication in May/June 2023.

TG3: OH aligned surveillance system, peer review manuscript and recommendations

Prof Marion Koopmans and Prof David Hayman provided an overview of TG3 work progress.

- The Surveillance paper is finished; however, the submission was delayed due to other on-going publications. Some minor comments from the Quadripartite will be considered, a few references required updating (including inclusion of the prevention of spillover publication and some new initiatives) and then it will be submitted for publication.
- Considering length and scope, a suitable journal still needs to be identified.
- It was decided that specific examples would be removed as this was considered to be better published separately. The TG intensively discussed how an ideal surveillance system might look like in the future in accordance with the more holistic approach that is described in the paper including through the information obtained through the survey with the OHHELEP members.
• There are only very few systems currently available that would fit. A list of collected best practices and how they align with the descriptions in the publication could be the next step.
• OHHLEP has prepared some case studies showing OH best practices, lessons and learnings on things that have brought successes but also failures. These case studies have already created interest and need to be published. Having practical examples for One Health implementation is crucial and the knowledge exchange will create a benefit for implementors.
• It was proposed to organize the case studies in accordance with the 6 different Action Tracks of the One Health Joint Plan of Action (JPA).
• It was further suggested to group the case studies by prevention, preparedness, or response.
• CABI is also publishing case studies in a standardized format where OHHLEP could publish theirs.
• Other options like linking up with already established One Health Newsletters, publication on OHHLEP website, independent websites or other journals will be discussed in the next weeks.
• The importance of considering the target audience was highlighted, as scientific publications in respective journals probably won’t reach national implementors. All case studies should further be accessible open access.
• The case studies need to be formatted and unified more, as without a specific template or instructions the submitted case studies vary tremendously in length and style. A template can be generated for future usage.
• The 17 best practice examples available so far will be summarized by the WHO Secretariat and shared with the co-leads of TG3 and they will discuss together with panel co-chairs and the WHO secretariat the different options.

**Action points/next steps:**
- The surveillance paper will be submitted by Prof Wanda Markotter for publication, the journal needs to be determined.
- TG3 to lead the One Health case studies piece with support from Constanze Boenig GIZ supporting the WHO secretariat.
- The available case studies will be formatted to a unique template by the secretariat.

TG4: Way forward on the Drivers of spillover

**TG4 co-leads Andrew Cunningham** and **Salome Bukachi** together with the WHO secretariat, updated on the progress of the systematic review of the upstream drivers of spillover previously identified by OHHLEP, and the status of the review of existing reviews on the subject.

• As a reminder, each driver identified by OHHLEP is subject of a different systematic review of evidence, considering the important number of references generated by the search and the heterogenous character of the evidence found.
• The screening of the references of four derivers was completed and two others are close to being completed. The remaining six drivers made no progress and have yet to be screened.
• The review of reviews screening has been completed and the papers are ready for a full text review.

**Discussion:**
• This work requires considerable effort and time to complete and required a strategic rethinking.
• An automated approach to the systematic review was discussed.
• The screening of all the drivers was suggested to be completed for the end of the term. As a considerable number of drivers still need support for the screening to be completed, the panel members were encouraged to step in for support to complete the screening.
• For the following steps of full text review, data extraction, etc. An outsourcing is considered, the costing needs to be determined for the activities. Specialized post-doctoral researchers are desired for this task.
• A way forward for the systematic review will be discussed and a framework designed.

**Action points/next steps:**
- The priority for the current term will be on the review of reviews.
- The systematic reviews of the drivers will be maintained and further discussions on the next steps will follow in the thematic group meeting.
- The review of reviews will be updated with the latest references from 2023.
- The screening of the evidence for the systematic review of the drivers to be finalized by the end of the term and a framework / template will be determined to guide the next steps.

Closing of the Day One
Day Two-3 March 2023

12:30 – 12:40: Reflection on Day One

A summary discussion of day one took place to review the key action points.

12:40 – 14:15: Panel Session Two: Updates from QPT Partners

Mapping of Spillover and Amplification of Pathogens with Epidemic and Pandemic Potential

Dr Maria Van Kerkhove, (WHO) Epidemics and pandemics prevention and preparedness, presented an overview of the project conducted within the department on the Mapping of Spillover and Amplification of Pathogens with Epidemic and Pandemic Potential.

- The project addresses the risk factors/drivers, increasing the occurrence of emergence and re-emergence of pathogens, by layering the data in geo-maps to identify areas of (re-) emergence risk, to ultimately locate and prevent initial occurrence.
- The risk factors are addressed with a public health lens, using appropriate public health tools and activities covering the 5Cs of the global health surveillance (Collaborative surveillance, Community protection, Safe and scalable care, Access to medical countermeasures, and Emergency coordination) and in line with a OH integrative approach.
- This collaborative work involves different groups around the world that are studying different data sets for the mapping of:
  - Pathogen specific risk.
  - Risk from aggregates of pathogen families such as viral families and bacterial families.
- The example of aggregate map presented shows the areas of for high threat pathogens (re)emergence, and currently includes Dengue, Chikungunya, Hendra, Nipah, MERS-CoV, Plague, Ebola, and Marburg virus diseases.
- The covariates considered are specific to each pathogen and transmission pathways and include environmental factors, meteorological factors, factors related to vector distribution and many others.
- The map will be updated regularly, and the final maps will be linked to WHO emergencies dashboard, used to inform surveillance activities, capacity building, and lab algorithms.
- Once the maps are developed, two countries within each WHO region will be worked with closely to verify the proper incorporation in the system of the data available from each country as a control.
- As a next step more pathogens will be added like coronaviruses, influenza viruses (highly pathogenic avian influenza), other viral hemorrhagic fevers (e.g., Lassa virus), etc.
- Timeline for the publication of a first version of the maps, will be published for the broader public in June 2023.
- The project is seeking feedback from different groups and experts including OHHLEP, to support the improvement of this project.

WHO-Prezode Working Group

Prof Benjamin Roche of Prezode, updated on the activities of the recently established Prezode working group.

- The pluri-disciplinary working group of 20 experts will hold its first meeting Tuesday 7 March 2023.
- Their activity will not rely on the Mapping of spillover and pathogen amplification, but rather on defining a cutting-edge framework to develop quantitative indicators for zoonotic disease emergence.
- This project was developed from the initial idea of developing prevention strategies against zoonotic disease emergence by operationalizing a OH approach and establishing a OH surveillance systems.
- The lack of quantitative indicators for prevention strategies was the starting point of the project as the development of the framework of indicators could support public health agencies and funding agencies, understand the value of prevention in reducing the risk of zoonotic disease emergence.
For this first one-year term of the Prezode working group, a framework will be established to develop simple indicators for zoonotic disease emergence. Starting with an extensive review of all available tools, then, the development of a scoring system and finally, a testing phase to validate the scoring system.

Two main deliverables are expected for the working group:
- First, a methodology draft, for knowledge/data identification and gaps to determine the first set of indicators.
- Second, draft sets of measurable preliminary indicators, that can easily be used for the implementation of prevention strategies.

They are aiming to go further in the hotspot project and include animal and environmental surveillance.

Discussion:
- A first discussion addressed the current concern around the influenza H5N1 and WHO emergencies program on this matter. There currently is no increase in human cases, but all the countermeasures are ready to initiate rapid action/response and a statement will be issued accordingly.
- The importance that the prevention is at the front center of the ‘Pandemic treaty’ was echoed, the work in development presented, could support the advocacy for the prevention in the future.
- Further investment on the workforce development and on the political level is required.
- The mapping exercise was built on existing initiatives, the modeling team could explore previous models even though they need updating.
- It was emphasized that this is a tool for engagement and the guidance of OHHLEP could be helpful on the academic base side.
- On SAGO, the group continues to meet regularly, the next and 16th plenary session will take place on Tuesday 7 March 2023, they are looking at the global framework as part of their mandate, to understand how to study and investigate spillover. SAGO issued a Monkey pox statement end of 2022 underlining the studies needed to better understand the risk of emergence of Monkey pox. They are active. The communication between the two groups can be initiated.

Action points/next steps:
- Prof Marion Koopmans will draft a recommendation from OHHLEP on H5N1, with support from Prof Casey Barton Behravesh and Prof Serge Morand. The draft will be circulated with the co-chairs and panel members for inputs.

Second: Update on ‘Pandemic Instrument’
Dr Chadia Wannous (WOAH), updated on the ongoing negotiation at the INB for the ‘Pandemic Instrument’.
- The QPT Secretariat is trying to establish more engagement with the drafting committee for the INB to advise on the aspects related to One Health and pandemic prevention in the zero draft.
- For the IHR, 307 amendments have been proposed by Member States for 33 articles and 6-9 annexes.
- The main issues noted by Member States center around:
  - Notification and reporting of information, and how this can be verified.
  - Collaboration and coordination
  - Some of the proposed amendments have also been proposed for the ‘Pandemic Treaty’. There is a need for further clarification on the difference between the IHR amendment and ‘Pandemic Treaty’.
  - There is a proposal to change the scope of the IHR, so that is not restricted to public health risk but to ‘all risk with a potential to impact public health’.
- INBS will finish on 6 April and Member States will then have one week to provide written inputs to both INB4 and INB5.
- The first draft of the pandemic treaty will be released end of May/early June.

Action points/next steps:
- QPT to provide written inputs on INB4 and INB5, through the One Health Group of Friends, by 6 April 2023.
Third: OH at the UNGA High-level Meeting on Pandemic Prevention, Preparedness and Response (PPR)

Dr Chadia Wannous (WOAH) provided additional updates on the United Nations General Assembly (UNGA) High-level Meeting on Pandemic PPR.

- Last year the UNGA adopted the resolution which mandated to convene a high-level meeting on Pandemic PPR.
- There is a need to coordinate the work on the INB and IHR amendment with this high-level meeting, particularly concerning the exchange of ideas on the Pandemic PPR political declaration which is the main outcome of this meeting.
- The modalities of this meeting include:
  - Recognizing the urgency for preparing and preventing future global health emergencies
  - Recognizing the value of the One Health approach
- The meeting will take place in New York on 20 September 2023, with the goal to further mobilize political momentum towards PPPR. Participation should be at the highest possible level.
- The multistakeholder hearing in New York will take place on 8-9 May 2023. Online registration is possible through the registration link.
- There will also be a session during the World Health Assembly in Geneva between 21-30 May 2023.
- After this the negotiations on the political declaration will start between June to July 2023.

Discussion:

- Prof Andrew Cunningham attended a briefing by ambassadors from Israel and Morocco held at WHO, Geneva, earlier this week. Stakeholder input was requested before June, with a preference for physical presence of Stakeholders in New York. Written inputs may also be possible. He suggested the possibility of OHHLEP to have a chair at the stakeholders hearing. The QPT will drive forward this request.

Fourth: Update on Pandemic Fund

Dr Abigail Wright (WHO), shared information on the pandemic fund.

- The Pandemic Fund emerged from discussions within the finance and health working group process under the G20.
- It was launched on 13 November 2022 and now has USD 1.7 billion pledges available.
- The Quadripartite has been actively engaged in the G20 processes and advocated for the inclusion of the One Health approach.
  - WHO and FAO are two of the 13 implementing entities.
  - UNEP and WOAH will likely be implementing entities in the second round.
- The objective of the fund is to bring additional financial resources for Pandemic PPR, incentivizing low-and middle-income countries to invest more. The idea is to fill gaps at all levels, including to:
  - Strengthen country-level Pandemic PPR capacity.
  - Build regional and global capacity.
  - Support technical assistance.
- The first call for proposals prioritizes high-impact investments, in early warning and holistic disease surveillance; laboratory systems and strengthening human resources and public health workforce capacity.
- The proposals will be country led with implementing agencies supporting and coordinating.
- For the first call of proposals USD 300 million will be available. The proposals will be assessed by the Technical Advisory Panel, following the below criteria:
  - Complementary to Pandemic PPR landscape
  - Catalytic impact of proposal
  - Ownership and inclusivity of proposal
The first call for proposals will open on 3 March 2023 and close on 19 May 2023.

Discussion

- WOAH have requested to be considered as observers for the pandemic fund and have been part of the discussions with the World Bank and the QPT.
- WOAH has sent a letter of interest across all their regions to submit a joint proposal across public and animal health.
- Dr Osman Dar confirmed there have been over 1000 expressions of interest thus far, with many trying to adopt a One Health approach. An initial screening of these is taking place.

OH JPA implementation Process

Mr Cheng Liang (WHO) provided information on the implementation process of the OH JPA.

- The proposal to develop an implementation guide for the OH JPA followed after the 28th Tripartite Executive Annual Meeting in March 2022.
- Following a consensus reached by the QPT on the components for the implementation, WHO QPT secretariat developed a zero draft for the implementation guide which was circulated amongst the QPT and OHHLEP for inputs. Based on the inputs WHO has revised the draft and shared it for a second round of inputs with the QPT and OHHLEP.
- The guide outlines the guiding principles for implementation, it is based on the three pathways of changes of the OH JPA, which can be applied to different technical programs.
- The guide follows five key stages:
  1. Situational analysis – stakeholder mapping, review of on-going/complete assessments to identify gaps and opportunities.
  2. Multisectoral coordination mechanism – countries are encouraged to develop or adapt their own multisectoral coordination mechanism.
  3. Implementation planning – countries are encouraged to develop or adapt their implementation frameworks and link to existing plans. Also develop and adapt a MEL framework.
  4. Implementation
  5. Review, sharing and incorporation of lessons learned.

- The Quadripartite is also planning to organize a series of regional stakeholder workshops to support Member States to use the OH JPA and guide for implementing a One Health approach. The workshop will run for approximately 3 days:
  - Day 1 will introduce the global and regional One Health related frameworks.
  - Day 2 will focus on stakeholder mapping, and governance and coordination structure within countries.
  - Day 3 will be a discussion on the gaps and opportunities, following which countries can choose to organize their own national and sub-national workshops.

The workshops will also provide an opportunity to share best practices and provide feedback on the guide.

Key milestones:
  - 27-28 March: approval of draft by QPT principals during the QEAM
  - April to June: wider stakeholder consultations including regional stakeholder workshops.
  - July to August: finalization
  - September and onwards: roll-out, launch and implementation.

OHHLEP is expected to:
  - Provide feedback during the development process of the guide.
  - Provide guidance and recommendations for designing the MEL framework to track the progress of OH JPA implementation. The UK Health and Security Agency have already expressed their interest to support the development of the MEL framework.
- Review the templates and materials for the roll-out of the guide.

Discussion:
- It was emphasized that the implementation guide should build on existing One Health activities in countries.
- OHHLEP confirmed support with the development and feedback on the implementation guide, with TG1 agreeing to focus on this.
- Prof Natalia Casas informed panel members that a similar 2 day workshop to the regional stakeholder workshops was organized by USAID to strengthen OH in Latin America, a link to the recordings was shared.
- OHHLEP will still have the opportunity to provide feedback on the implementation guide after the Quadripartite Executive Annual Meeting.

Action points/next steps:
- Follow-up TG1 meeting will be organized, OHHLEP co-chairs and the QPT Secretariat to further discuss the support needed from OHHLEP on the implementation guide.
- The QPT Secretariat will share the revised version of the draft implementation guide with OHHLEP on 10 March 2023, for feedback by 17 March 2023. (This was later postponed to a circulation after the QEAM).

QPT Executive Annual Meeting (QEAM)
- Mr Cheng Liang informed that the meeting will take place on 27-28 March 2023, in a hybrid format. It will be attended by the DGs of the four Quadripartite organizations, Quadripartite secretariat, regional and technical colleagues.
- The purpose of the QEAM is to review the progress since the 28th Tripartite Executive Annual Meeting last year, highlighting the key achievements of the Quadripartite collaboration, and review the on-going activities. The meeting will seek to gain the approval of the Principals of the four QPT organizations for these activities.
- During this meeting WHO will hand over the chair of the QPT secretariat to UNEP.
- There will be a dedicated 40 minute presentation on the achievements of OHHLEP and discussions on the next term. The OHHLEP co-chairs will join virtually to represent OHHLEP.

11:00 – 11:45 Panel Session Three: OHHLEP Second Term

Process and timeline to prepare OHHLEP second term
Dr Abigail Wright introduced the discussion on the process of preparation of OHHLEP next term.
- A reflection from an initial QPT discussion on the second term was shared.
- The discussion include:
  - How OHHLEP can better address all the action tracks of the OH JPA.
  - The interplay of OHHLEP and other scientific advisory panels.
  - How can OHHLEP be positioned in relation to policy bodies.
- The Quadripartite organizations need to align on their vision for OHHLEP – further meetings are required. The panel may also need to be reconstituted to support this vision, with need for additional expertise and regional representation.
- Consensus on the importance of the work OHHLEP is doing on the drivers.
- How can the Quadripartite assist OHHLEP to ensure that there is an efficient flow of work, i.e.,
  - Establishing a standard method for bringing requests to OHHLEP from the Quadripartite.
  - Establishing a mechanism for which deliverables should be generated directly by OHHLEP and which should be outsourced.
- Periodically reviewing deliverables to see if they remain appropriate for OHHLEP to carry out.

Discussion:
- Continued QPT discussion was suggested to review OHHLEP’s progress over the past two years, and the future role of OHHLEP.
- A budget for OHHLEP was suggested to ensure priorities are being met.
- A fund raising could be envisaged as a possibility to finance the workplan of OHHLEP.

Action points/next steps:
- Further discussions will take place amongst the QPT in April to establish a process for the discussed points and align their vision.
- OHHLEP composition will be reviewed in April to aligned with the vision for the next term.

14:15-14:25: Closing remarks

- The work and outputs of the panel are widely recognized and appreciated, and the panel co-chairs Prof Wanda Markotter and Prof Thomas Mettenleiter, thanked everyone for the continuous support.
- Additionally, they highlighted the need to have all 26 panel members to be active and provide contributions, the panel will be restructured to ensure this.
- The next in-person panel meeting is proposed to be held in Geneva on 8-9 June 2023.

Closing of Day Two
List of participants

**OHHLEP members**
Wanda Markotter; Thomas Mettenleiter; Dominique Charron, Casey Barton Behraresh, Abhishek Chaudhary, Baptiste Dungu, Catherine Machalaba, David Hayman, Andrew Cunnigham, Elmoubashar Farag, Janice Zanela, John Mackenzie, Margaret Khaitsa, Marion Coopmans, Natalia Casas, Natalia Cediel, Nitish Debnath, Osman Dar, Salama Almuhairi, Serge Morand, Wiku Adisasmito

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