MEETING SUMMARY

Global Work Group (GWG)
Advisory Committee to the Director (ACD)
Centers for Disease Control and Prevention (CDC)

Roybal Campus, Building 19
9:00 AM – 3:30 PM
October 24, 2012
Meeting #5

David Fleming, GWG Chair

Anne Schuchat, CGH Acting Director and GWG DFO

Robert Spengler, CGH Senior Science Advisor
Last Updated: January 10, 2012
I. Global Work Group (GWG) Background

Completing its second year of activity, the GWG under the Advisory Committee to the Director (ACD) of CDC provides guidance, advice and recommendations to the ACD regarding the CDC Center for Global Health (CGH). The GWG first met in October 2010, and has focused on several key areas including Strategy and Structure, Science and Program, and External Relations. The fifth meeting of the GWG was held on October 24, 2012. Dr. David Fleming began his new role as the GWG Chair and provided an overview of the GWG meeting at the ACD meeting held the following day on October 25, 2012. The GWG meeting was conducted using a 2-hour teleconference call.

II. Fifth GWG Meeting Participants

GWG Members Attending
David Fleming (Chair, ACD member), Alan Greenberg (ACD member), Kelly Henning (ACD member), Herminia Palacio (ACD member), David Brandling-Bennett (BMGF), Walter Dowdle (Task Force for Global Health), Willis Akhwale (Kenya MOH), Ambassador Jimmy Kolker (OGA), and Anne Schuchat (CGH, DFO).

GWG Members Unable to Attend
Joseph McCormick (U Texas), Mickey Chopra (UNICEF), Ariel Pablos-Mendez (USAID), Andrew Weber (DoD), and Yu Wang (China CDC).

CDC Presenters (Center)
Anne Schuchat (CGH), Pattie Simone (CGH), and Marsha Vanderford (CGH).

Other Attendees:
Wade Warren (for Ariel Pablos-Mendez, USAID), Richard Gordon (for Andrew Weber, DoD), Steve Albert (CGH), Peter Bloland (CGH), Joanne Cono (OID), Kendra Cox (Cambridge Communications), Scott Dowell (CGH), John Fitzsimmons (CGH), Bill Levine (CGH), Jay McAuliffe (CGH), Jenny Parker (CGH), Donald Shriber (CGH), Larry Slutsker (CGH), Nicole Smith (CGH), Bob Spengler (CGH), and Terri Still-LeMelle (CGH).

III. Meeting Format

The meeting was called to order at 10:00 AM. Following introductions, the group members welcomed Dr Fleming as the new Chair and Dr Schuchat as Acting Director of CGH. Three presentations were provided: CGH Update (Anne Schuchat), Communication and Marketing of CDC’s Global Work (Marsha Vanderford), and CGH Organizational Improvement Review (Anne Schuchat). Brief summaries of these presentations are presented below along with the GWG discussion. Final comments from GWG members were elicited and the meeting was adjourned at 12:00 PM.

IV. Highlights of Presentations

Additional details of CGH presentations and GWG discussions can be found in the meeting minutes. This document briefly summarizes some of the pertinent highlights.
A. Center for Global Health Update

Anne Schuchat noted that it was World Polio Day and she acknowledged that the CDC Emergency Operations Center Polio Eradication combined with WHO and UNICEF partner activities are making important progress in the field. She thanked the GWG members for their valuable input and advice on the Global Health Strategy report which is now completed and being implemented. She provided updates and highlights for each of the four global health strategy goals:

Health impact included lower incidence of cholera in Haiti in 2012, a coalition that advocates for a call to action on improving water, sanitation and hygiene for Haiti, and strengthening with partners the immunization programs in Haiti.

Health security included an update on an outbreak of Marburg virus and the conclusion of recent Ebola virus outbreaks in Uganda, working with regional experts on an outbreak of Enterovirus 71 in Cambodia, and investigation of novel Coronavirus in Saudi Arabia.

Health capacity included FETP graduating first class from Central African Republic, Cameroon and Chad, and the extraordinary progress in scaling up PEPFAR treatment and prevention strategies in countries.

Organizational capacity included changes in human resources to better support CDC, and activities to hire for key positions for the Office of the Director including the Center Director, Associate Administrator for Science and the new TB Coordinator.

GWG Discussion. A questions was raised on the upcoming budget issues including the potential for sequestration. The budget for CDC and CGH are currently operating under a 6-months Continuing Resolution and it is uncertain what impacts, if any, may result. In preparation, CDC has implemented a number of administrative efficiencies and has been conservative with spending. The PEPFAR program evaluations by the Office of Inspector General are very helpful in supporting progress and results. GWG was delighted with progress being made on the Global Health Strategy with 17 areas being addressed. CGH is currently developing indicators and targets for the priority areas and these will be regularly assessed through annual reports. The status of a written implementation plan and involvement with external partners was requested.

B. Communication and Marketing of CDC’s Global Work

Marsha Vanderford presented an overview of how CGH creates a unified vision of diverse programs, addressed communication opportunities to raise visibility and create a bridge between global and domestic work, and provided examples of core CDC global health messages. She also provided important information and recent examples using social media to get global health messages out quickly and widely disseminated.

GWG Discussion. The GWG was impressed with the analytic work that supports the strategic director for CGH communications. The CGH innovative approaches for increasing coverage of global health topics by the media and social networks were noted by several members. It would help to have a written communications plan for global health and then progress could be monitored. Increasing the public and partner awareness and support of CDC’s value is also important. CDC partners could do more to promote the value of CDC. A global focus on non-communicable diseases is important. The case for NCD economic impacts in countries and health security value for the US (e.g., new NCD innovations or models of delivery) need to be made. Closer alliances with CUGH and other strategic partners could help with CDC messaging.
C. **CGH Organizational Improvement Review**

Anne Schuchat discussed how the recent Organizational Improvement (OI) report overlaps nicely with the previous advice provided by the GWG on the Global Health Strategy. Dr. Frieden directed formal assessment of the newly established offices and CGH. The OI Review was led by Drs. John Roadie and Tom Quinn and included surveys of CGH staff and interviews with stakeholders and CDC leadership. Overall the OI report was positive and provided findings that supported the reorganization for the new center, as well as recommendations for strengthening CGH and the work of the Divisions. The recommendations are organized into four categories: communication and coordination, cross-center and cross-division activities, human and other resource management, and partnerships. Workgroups have been formed to address the OI report recommendations and CGH will benefit from implementation of action items.

**GWG Discussion.** The GWG members were pleased with the OI report, the sensible recommendations, and the actions underway by CGH. CGH will need to integrate and streamline with the Global Health Strategy activities/implementation already begun. CGH will need to prioritize the OI report recommendations and take action to ensure improvements in specific areas. The report can provide a good response for any further Lancet concerns. The scope of work is large and it will be a challenge to address the numerous recommendations and build the needed organizational capacity. CGH should consider taking the “one CDC” concept to the next level and work with partners towards a “one USG” or “one HHS” approach, much like what is being done for polio eradication.

**Potential Future GWG Meeting Topics**

The GWG suggested that the next meeting should have updates presented on the Global Health Strategy and OI report. Other suggested agenda topics included: global NCD and injury prevention including the WHO indicators, status of a written implementation plan for the Global Health Strategy, an update on the written communications plan, increased visibility and work with partners, and a Kenya and China “case study” on their NPHI/CDC development and challenges faced in country.

**VII. Summary**

The fifth GWG meeting was conducted successfully on April 25. Updates on major CGH activities were presented by senior CGH leadership. The major focus areas of GWG discussions were the Communication/Marketing Plan and the Organizational Improvement Review. The next GWG meeting will be held in person in Atlanta on April, 2012.