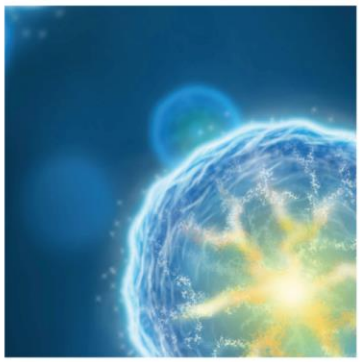
POLICY LEARNING AND RECOMMENDATIONS FOR IMPROVING BI-REGIONAL COOPERATION



PACE-NET PLUS

PACIFIC-EUROPE NETWORK FOR SCIENCE, TECHNOLOGY AND INNOVATION

Deliverable 1.4

Sociedade Portuguesa de Inovação - SPI

PACE-NET Plus is a project funded by the European Commission under the 7th Framework Programme.
Grant agreement: 609490 | Project Lifetime: 2013 – 2016

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1. PACE-Net Plus

The research and innovation landscape of the Pacific is extremely diverse, ranging from Pacific Island Countries and Territories (PICTs) with limited Science, Technology & Innovation (ST&I) capacity, Overseas Countries and Territories (OCTs) with strong capacities, to New Zealand and Australia, which have numerous networks of research and innovation institutions. The European Union (EU), which maintains a long standing relationship with the Pacific, aims for enhancing its profile and reinforcing cooperation in ST&I with the region, in the perspective of the Horizon 2020 programme, and promote the development of mutually beneficial partnerships.

Considering the results of past and ongoing initiatives supporting the EU-Pacific ST&I cooperation, PACE-Net Plus aims to support the EU-Pacific policy dialogue in ST&I, including dialogue on innovation issues. It plans to reinforce the EU-Pacific ST&I cooperation, focusing on 3 major societal challenges which are:

1. Health, demographic change and well-being;
2. Food security, sustainable agriculture and forestry, marine and maritime and inland water research, and the bioeconomy; and
3. Climate action, environment, resource efficiency and raw materials.

It also aims to encourage the coordination between the EU and Member States´ ST&I programmes and policies targeting the Pacific by promoting the implementation of joint actions. It also intends to enhance the cooperation on innovation issues, by helping in bridging the gap between public and private sectors. The project expects to promote the idea of innovation as an essential mean for tackling global challenges and will respond to the objectives of the Europe 2020 strategy and its Innovation Union Flagship initiative. Last but not least, it proposes to strengthen the Pacific-EU research cooperation partnerships, through the promotion of EC's, Member States' and Associated Countries' programmes, especially Horizon 2020, among the Pacific research community, as well as the Pacific opportunities for European researchers.

2. Policy learning and recommendations for improving bi-regional cooperation

This document has been developed under the Task 1.4 of the PACE-Net Plus project - Policy learning and recommendations for improving bi-regional cooperation - which aimed to develop and apply a methodology for monitoring and evaluating the process of preparation and implementation of joint

initiatives and other mechanisms of bi-regional collaboration, withdraw lessons learned and use them effectively to ensure improved bi-regional cooperation and to encourage active policy learning.

In order to achieve the objective of Task 1.4, two different outputs have been produced. This document includes both the outputs:

- **Section B -** A policy brief for high level policy makers, including research and policy action recommendations to improve bi-regional cooperation and integration with Social Sciences and Humanities (SSH) dimension;
- **Section C** - A set of guidelines for innovative joint initiatives in the medium and long term which will target not only policy makers but also institutions in position of implementing or funding joint initiatives (e.g. research funders, NGOs).

2.1. Policy Brief on Health, Demographic Change and Wellbeing: The Case of Zika Virus Disease

The Social Sciences and Humanities (SSH) dimension on Health, Demographic Change and Wellbeing is one of the Societal Challenges of the European Commission (EC) Programme for Research and Innovation (R&I) Horizon 2020. During the first four years of the Programme (Work Programmes for 2014/15 and 2016/2017), the EC has invested more than 2 billion Euros in this Challenge.[1]

The EU perceives the Health, demographic change and wellbeing of the Pacific territories to be a key element of the EU-Pacific partnership, mainly because in the pacific region/ Asia: life expectancy is increasing; there are still many challenges concerning sanitation in rural areas; the health supply capacity is low; Asian economies spend just over 650 Euros per person per year on health, compared to 3,100 Euros in European countries: and share of public spending in total health spending in Asia is of 48.1%, compared to 72.7% in European countries.[2]

Currently, one of the major challenges on Health, demographic change and wellbeing of the Pacific territories is the increasing incidence of Zika virus disease. Although most infections due to the Zika virus disease are mild and cause few or no symptoms, there is a suspected link between Zika disease and microcephaly cases in babies.

The WHO has analysed the current distribution of the Zika Virus between 2013 and 2016 and concluded that the Zika virus is currently spreading heavily in Latin America and with higher incidence in the Pacific Region. According to Dr. Salanieta Saketa, the acting deputy director for public health

1 https://ec.Europa.eu/programmes/horizon2020/en/h2020-section/health-demographic-change-and-wellbeing

2 Health at a Glance: Asia/Pacific 2014, © OECD/WHO 2014

for the Pacific Community, the lack of clinical resources for the disease diagnosis and the poor awareness of the precautionary measures advised by the WHO are the key factors causing the incidence increase of Zika virus in the Pacific Region.

In order to fight the recent increase in the disease incidence in Pacific countries, further cooperation between EU and the Pacific countries is required. Although several EU-funded initiatives have been implemented to combat the emerging Zika outbreaks in Europe and Latin America, there are still no initiatives for EU to cooperate with the Pacific countries in order to fight the recent increase in the disease incidence in those countries.

It is therefore recommended that in the future EU-funded initiatives are implemented in the Pacific countries aiming at:

- Engaging communities to communicate the risks associated with Zika virus disease and promote protective behaviors, reduce anxiety, address stigma, dispel rumors and cultural misperceptions;
- Providing guidance and mitigate the potential impact on women of childbearing age and those who are pregnant, as well as families with children affected by Zika virus;
- Encouraging community participation to reduce mosquito breeding sites and to protect individuals, particularly those at highest risk, from mosquito bites;
- Fast-tracking the research and development of new products (e.g. diagnostics, vaccines, therapeutics);
- Facilitating shipment of samples to WHO reference laboratories or delivering diagnostic tools for local testing;
- Supporting the national planning of the health service available to the Zika Virus in the region;
- Strengthening vector control plans to avoid introduction of mosquitoes, detect mosquitoes at points of entry, prevent their spread and reduce their density;
- Assessing the equipment needs and provide the requested supplies to prepare healthcare facilities and conditions specialized for complications associated with the Zika virus;
- Strengthening clinical and disease surveillance to detect early transmission of Zika virus disease (including early warning systems for clusters of fever and rash).

2.2. Guidelines for implementing and monitoring Joint Initiatives on Health, Demographic Change and Wellbeing

EU and the Pacific have been developing a long-term relationship based on the legacy of a shared history, common values, economic and trade cooperation. The partnership between the EU and the Pacific involves 15 countries from the Pacific, Overseas Countries and Territories (OCT), as well as Australia and New Zealand.

According to the framework of the EU-ACP Partnership signed in 2000, the relationship was based in a 20-year period from 2000 to 2020. In 2012, a renewed EU-Pacific development partnership was announced, and the EU rebuilt the partnership with the Pacific by external actions.

Several EU-Pacific joint initiatives have been already implemented on Health, demographic change and wellbeing. In this section of the document, we provide the detailed information regarding methodology to strengthen cooperation of joint initiatives, as well as the methodology for monitoring and evaluating the process of preparation and implementation of joint initiatives. The table below includes a description and recommendations of the most common tools to implement and monitor Joint Initiatives:

Table 1: The most common tools to implement and monitor Joint Initiatives

Goal	Tools	Description	Recommendations
To strengthen cooperation of joint initiatives	**Policy Dialogue**	EC established a number of policy dialogues on different thematic areas with countries and regions outside of the EU. The EU exchanges best practice, increases cooperation and supports the partner country or region in their efforts to reform STI cooperation.	• Organise the workshops shortly before policy dialogue meetings, providing inputs to the dialogue meetings on health issues and future cooperation opportunities, assisting in focusing the dialogue meetings and increasing their visibility. • Raise awareness of the health issues from international perspective. By organizing the workshop, it will help create awareness among the policy makers, experts, researchers and other stakeholders.
	Strategic Roadmap	Strategic Roadmap is usually considered a comprehensive process of implementing the activities. For example, EU-LAC HEALTH, a project promoted by the EC, has the strategic divided in three main phases that include preliminary roadmap, roadmap and Implementation of the Joint Initiative on Health Research and Innovation (JIHRI). On the other hand, in ACP-EU Partnership, Gavi's strategy is a roadmap designed to implement in four phases from 2000 to 2020.	• Identify areas or research activities from the counterparts. • Identify the potential for, and encourage the development of, synergies with EU collaborative programs and the Pacific in the Health field. • Consider the need from the cooperative health system. • Define the detailed procedures for research to be undertaken jointly in the area of health.
	Cooperation priorities	The initiatives aim to improve the cooperation between the EU and other countries. This should be further building on the achievements of previous projects in identifying cooperation priorities and recommendations. Therefore, the initiatives should focus on important topics of mutual interests.	• Identify relevant interests for other countries in the EU programmes on health. • Provide transparent information on potential differences in rules between the EU and other countries markets to facilitate cooperation. • Provide needed legal and administrative frameworks to engage in cooperation, also including lessons learnt from previous cooperation.

	Networks	Establishing expert networks to manage the existing and future challenges, the network can be created on the previous database or other existing platforms.	• Create a network between the EU and other stakeholders by organising awareness-raising actions. These actions can better promote cooperation between EU and other countries through best practices. • Ensure that the network plays a role in awareness-raising about the advantages of participation in programmes.
To evaluate and monitor Joint Initiatives	**Monitoring and Evaluation (M&E) frameworks**	The initiative partners should agree on an M&E framework at the end of the planning stage so that monitoring and evaluation are carried out systematically.	Indicators: • Ensure that Indicators are aligned with the initiative objectives; accepted by partners, stakeholders and beneficiaries; are credible and objective; feasible and practical to measure; and robust against manipulation to ensure that they are not shifted towards any interests. Targets: • Ensure that the partners responsible for implementation play a key role in the setting of targets. • Ensure that targets are realistic and aligned with the objectives. • Ensure that the operating context is taken into consideration, as well as the available human and financial resources. • Ensure that targets are reviewed regularly to ensure their continued relevance. Baseline information : • Plan the collection of information carefully to ensure that the collected information is relevant. • Ensure that the partners, stakeholders and beneficiaries´ opinion and perspective is taken into consideration. • If possible, conduct secondary data collection, since information is often already available through existing sources.

			• Focus on the minimum required information, as more information adds complexity and cost to the collecting process. • Ensure a balance between the cost and the benefits of the approach used to collect the baselines.
	Annual work plans (AWPs)	AWPs are plans detailing the annual activities of the initiatives, as well as the planned inputs and funding sources. AWPs and their accompanying monitoring tools are particularly important tools in monitoring joint initiatives, as they require multi-country, multi-year and multi-partner efforts.	• Include a summary of the initiative objectives, planned outcomes and expected impact. • Conduct a brief analysis of the initiative progress. • Include a summary of the initiative annual objectives. • Develop a work plan with the rationale and the expected outcomes of each work component. • Develop a plan of how each activity will be conducted, including a reference to who are the partners responsible for each activity. • Include the budget allocated to each activity or/and task. • Create a procurement plan. • Develop a contracted services plan (any required assistance to be contracted). • Include a Gantt chart of the annual plan.
	Field Visits	Field visits are conducted to ensure that the reported progress is accurate by validating the results reported by the initiative partners. Therefore, they are particularly important to evaluate and monitor joint initiatives which involve numerous partners.	• Conduct visits based on challenges identified during previous visits. • Ensure that the initiative human and financial resources are maximized. • Ensure that the visits provide information which cannot be obtained through other ways (e.g., reports, conversations etc.). • Ensure that the visits encourage dialogue and cooperation between partners. • After the visit, produce a report with recommendations for future actions.

PACE-NET PLUS

PACIFIC-EUROPE NETWORK FOR SCIENCE, TECHNOLOGY AND INNOVATION

Policy Brief on

Health, Demographic Change and Wellbeing

The Case of Zika Virus

Sociedade Portuguesa de Inovação - SPI

PACE-Net Plus is a project funded by the European Commission to reinforce EU-Pacific cooperation on Science, Technology & Innovation, and to promote the development of mutually beneficial partnerships. Grant Agreement no.: 244514

1. Status of Science, Technology and Innovation (STI) Cooperation between EU-Pacific

The EU has a long-standing development partnership in the Pacific, involving 15 independent countries and four Overseas Countries and Territories (French Polynesia, New Caledonia, Wallis and Futuna, and Pitcairn), as well as Australia and New Zealand, two like-minded strategic partners and donors.

In 2004, Pacific Leaders adopted a Vision encapsulating Pacific Islanders' aspirations. The Pacific Plan (2005) gives effect to the Pacific Leaders' Vision and to the goal of regional integration. The EU Strategy for the Pacific, adopted in 2006, was the initial EU response to the Plan, through increased development assistance and enhanced political dialogue, both with the Pacific Islands Forum (PIF) and with Australia and New Zealand[3].

Currently, the EU perceives the Health, demographic change and wellbeing of the Pacific territories to be a key element of the EU-Pacific partnership, mainly because in the Pacific region/ Asia[4]:

- Life expectancy is increasing.
- There are still many challenges concerning sanitation in rural areas.
- The health supply capacity is low
- Asian economies spend just over 650 Euros per person per year on health, compared to 3,100 Euros in European countries.
- Share of public spending in total health spending in Asia is of 48.1%, compared to 72.7% in European countries.

The Ministers of Health for the Pacific Island Countries are committed to meeting in a biennial basis to discuss health promotion and health protection topics between the Pacific Islands. The last meeting, hosted by the Government of Fiji, was convened in April 2015. During the meeting, some relevant actions where agreed: to accelerate the progress to face current health challenges; to focus on health information systems to provide the data and evidence needed for monitoring and decision-making in the country; and to advocate multisector actions to help solve current health challenges in the Pacific[5].

[3] http://ec.Europa.eu/research/iscp/index.cfm?lg=en&pg=pacific
[4] Health at a Glance: Asia/Pacific 2014, © OECD/WHO 2014
[5] http://www.wpro.who.int/southpacific/pic_meeting/2015/en/

2. Zika Virus – challenges and EU-Pacific coordination

Figure 1: Mosquitoes, including Aedes aegypti, are responsible for the spread of Zika virus

Source: Science [6]

The Zika fever is a mosquito viral disease caused by the Zika virus that has spread through the South Pacific and in recent months through large parts of Latin America.[7] The symptoms last for 2–7 days and usually include mild fever, skin rash (exanthema) and conjunctivitis. Ever since the 1950s, it has been reported that it occurred in Africa and spread to Asia. In 2013-2014, the virus started to be transmitted across the Pacific Ocean and reached to the Americas and the Caribbean. So far, the illness cannot be prevented by medications or vaccines[8], and it can spread from a pregnant woman to the baby, which may result in microcephaly and other severe brain problems.[9]

Figure 2: Symptoms and prevention of the Zika virus disease

Source: Lifesystems[10]

[6] http://www.sciencemag.org/news/2015/12/fast-spreading-virus-may-cause-severe-birth-defects
[7] http://ec.Europa.eu/research/health/index.cfm?pg=area&areaname=Zika
[8] Symptoms, Diagnosis, & Treatment". Zika virus. Atlanta: Centers for Disease Control and Prevention. 3 March 2016. Retrieved 4 March 2016.
[9] Rasmussen, Sonja A.; Jamieson, Denise J.; Honein, Margaret A.; Petersen, Lyle R. 2016. Zika Virus and Birth Defects — Reviewing the Evidence for Causality. New England Journal of Medicine
[10] https://www.lifesystems.co.uk/news/the-Zika-virus-what-you-need-to-know

Outbreaks were reported for the first time from the Pacific in 2007 and 2013 in Yap Island (Federated States of Micronesia) and French Polynesia, respectively. There was subsequent spread of the virus to other Pacific islands[11]. Autochthonous cases of Zika virus infection have been reported from Samoa and Solomon Islands, New Caledonia and Fiji in 2015[12]**.** An outbreak has been ongoing in the Solomon Islands, with 302 cases reported from February to May, 2015. 82 confirmed cases of Zika disease were reported in New Caledonia from January to May, 2015, with 10 imported cases. In the same year, an unspecified number of confirmed cases of Zika were reported for the first time in Vanuatu[13,14]

As the Zika virus disease continues spreading in the world, especially in the American region, the risk of imported Zika virus with infected tourists entering Europe is increasing. Imported cases of Zika virus infection have been reported in several European countries. However, so far the virus has only been found in travelers returning from countries affected by the virus in Europe[15]. Meanwhile, many European oversea countries and territories are near/in the infected areas, which have higher risk in disease out-breaking, i.e. Anguilla, Aruba, Bermuda, Bonaire, British Virgin Islands, Cayman Islands, Montserrat, Curacao, Saba, Sint Eustatius, Sint Maarten, and Turks and Caicos Islands in the Caribbean region as well as French Polynesia, New Caledonia, and Wallis and Futuna in the Pacific region.

Regarding the expectation of outbreak in Europe, the risk of a Zika virus disease outbreak in the European Region is moderate to low because Aedes mosquito is not widely present in Europe. However, the risk in the European Region should not be underestimated. The WHO guidance is based on the likelihood of virus spread. In other words, to prevent Zika virus transmission, countries at higher risk should closely follow WHO guidance. For other regions to prepare for and respond to health risks, three levels of the Organization have been considered by WHO, which are global, regional and country. The preparation was conducted by regional meetings, country missions and capacity assessments[16].

Fact Figures from WHO

As of 29 June 2016, 61 countries and territories report continuing mosquito-borne transmission of which:

- 47 countries are experiencing a first outbreak of Zika virus since 2015
- 14 countries reported evidence of Zika virus transmission between 2007 and 2014
- four countries or territories have reported evidence of Zika virus transmission between 2007 and 2014, without ongoing transmission: Cook Islands, French Polynesia, Isla de Pascua – Chile and YAP (Federated States of Micronesia)

Figure 3: Fact Figures on the Zika virus, as of 29 June 2016

Source: WHO[17]

On February 2016, the WHO declared a Public Health Emergency of International Concern (PHEIC) regarding clusters of microcephaly cases and neurological disorders in some areas affected by

[11] http://reliefweb.int/sites/reliefweb.int/files/resources/WHO_ZIKV_SRF_16.2_eng.pdf
[12] Zika virus disease epidemic, first update – 21 January 2016
[13] Zika virus infection outbreak, Brazil and the Pacific region – 25 May 2015
[14] http://apps.who.int/iris/bitstream/10665/204420/1/ZikaResponseFramework_JanJun16_eng.pdf?ua=1
[15] http://ec.Europa.eu/health/Zika/index_en.htm
[16] http://www.Euros.who.int/en/health-topics/emergencies/Zika-virus/Zika-virus/frequently-asked-questions-Zika-virus-expected-to-spread-in-Europe-in-late-spring-and-summer-overall-risk-is-low-to-moderate#308948
[17] http://www.who.int/emergencies/zika-virus/situation-report/30-june-2016/en/

the Zika virus, requiring coordinated action to improve detection and accelerate work on a vaccine and better diagnostics for the disease. Although most infections are mild and cause few or no symptoms, there is a suspected causal link between Zika and clusters of microcephaly in babies born in Northeastern parts of Brazil. Similarly, in French Polynesia, central nervous system malformations cases have been reported between 2014 and 2015 following the Zika virus infection. As a result, the WHO issued warnings for pregnant women travelling to affected regions but said curbs on travel or trade were not necessary[18].

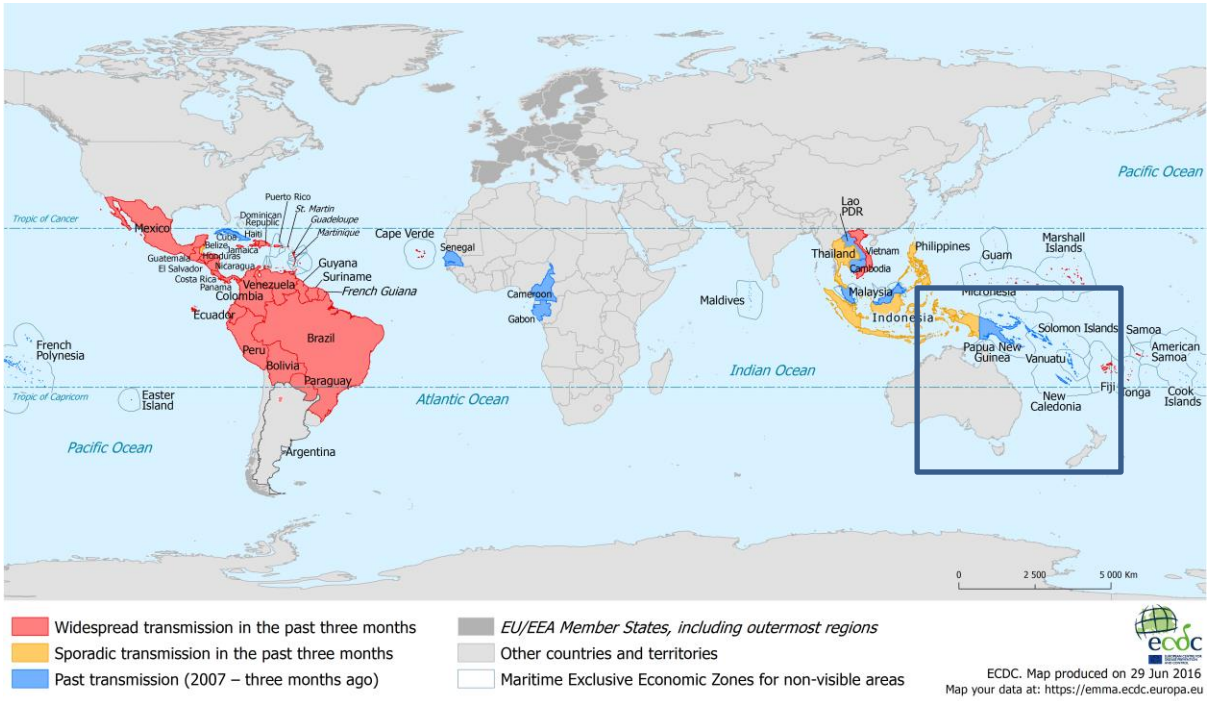

Figure 4: Countries and territories with reported confirmed autochthonous vector-borne transmission of Zika virus infection in the past three months, as of 29 Jun 2016

Source: ECDC[19]

The WHO has analysed the current distribution of the Zika Virus between 2013 and 2016. As shown in the figure above, the Zika Virus is currently spreading heavily in Latin America and with higher incidence in the Pacific Region[20]. According to Dr. Salanieta Saketa, the acting deputy director for public health for the Pacific Community, the lack of clinical resources for the disease diagnosis and the poor awareness of the precautionary measures advised by the WHO are the key factors causing the incidence increase of Zika virus in the Pacific Region[21].

[18] http://www.who.int/mediacentre/news/statements/2016/1st-emergency-committee-Zika/en/
[19] http://ecdc.europa.eu/en/healthtopics/zika_virus_infection/zika-outbreak/Pages/Zika-countries-with-transmission.aspx
[20] http://www.who.int/emergencies/Zika-virus/situation-report/12-may-2016/en/
[21] http://www.radionz.co.nz/international/programmes/datelinepacific/audio/201792858/pacific-community-in-support-of-who-zika-findings

2.1. Western Pacific Regional Office

As a result of the increasing incidence of Zika disease, the Western Pacific Regional Office (WPRO) had a partially activated Incident Management System and Emergency Operations Centre already running prior to declaration of the Public Health Emergency of International Concern. This was then fully activated and adapted to the WHO headquarters IMS structure on 1 February 2016 to coordinate the response and share guidance documents and key information with Member States. WPRO initially requested 3.4 million Euros and have received just under 530,000 Euros, leaving a gap of 2.8 million Euros. WPRO has provided technical assistance to eight countries and areas through the deployment of 11 experts in epidemiology, entomology and risk communications. Laboratory testing equipment and vector control supplies have been provided to six countries and areas within the region[22].

2.2. European Commission

The opportunities for European and Pacific researchers to collaborate are diverse. EU policy and scientific strategies aim at reinforcing these collaboration opportunities, notably through Horizon 2020, the European framework programme dedicated to Research and Innovation.

3. H2020 & Other Relevant Programmes

The Social Sciences and Humanities (SSH) dimension on Health, Demographic Change and Wellbeing is one of the Societal Challenges of the European Commission (EC) Programme for Research and Innovation (R&I) Horizon 2020. During the first four years of the programme (Work Programmes for 2014/15 and 2016/2017), the EC has been investing more than 2 billion Euros in this Challenge.[23]

The main aim of the EC is to promote the development of new models and tools for health, support the ageing European population, increase monitoring techniques for health and prevention of diseases, as well as to provide a higher understanding of the causes and mechanisms underlying health, healthy ageing and disease [dtt].

In response to the recent Zika outbreaks, there are also several funding opportunities under the EC Work Programme for 2016 and 2017:

Horizon 2020 Programmes

- SC1-PM-22-2016: Addressing the urgent research gaps against the Zika virus and other emerging threats in Latin America
  A 10 million Euro project for research on the Zika virus, in response to the upsurge in cases of severe congenital brain malformations across Latin America, and their suspected link to Zika

[22] http://reliefweb.int/sites/reliefweb.int/files/resources/WHO_ZIKV_SRF_16.2_eng.pdf
[23] https://ec.Europa.eu/programmes/horizon2020/en/h2020-section/health-demographic-change-and-wellbeing

virus infections. If the link is proven, this fund could be used to combat the Zika virus, for example, by developing diagnostics and testing potential treatments or vaccines[24].
Opening date: 15 March 2016; Deadline: 28 April 2016

- SC1-PM-06-2016: Vaccine development for malaria and/or neglected infectious diseases
  A 40 million Euro call for research on vaccine development for malaria and neglected infectious diseases, which includes the Zika virus[25].
  Opening date: 20 October 2015; Deadline: 13 April 2016

- INFRAIA-01-2016-2017: Integrating Activities for Advanced Communities
  Under this call, 10 million Euros were attributed for research infrastructures for vector control, including the mosquitos that spread Zika. This project aims at integrating specialised facilities in Europe for the study of insect-transmitted disease with the objective to validate and roll out new control measures targeting insect vectors that pose the greatest threats to human health and animal industries[26].
  Opening date: 10 November 2015; Deadline: 30 March 2016

Other Programmes/ initiatives

- ERA-NET programme under 7th Framework Programme for Research and Technology Development (FP7)

ERANet LAC

ERANet-LAC is a FP7 project that supports the implementation of the Joint Initiative for Research and Innovation (JIRI) between the EU Member States and Associated Countries and the Community of Latin American and Caribbean States (CELAC). To strengthen the bi-regional partnership in Science, Technology and Innovation, the project focused on planning and implementing concrete joint activities and establishing an innovative and sustainable framework for future bi-regional joint activities. It includes a call entitled “Research in prevention of infectious diseases and promotion of well-being” aiming to promote the prevention of infectious diseases, including the Zika disease, in Latin America and the Caribbean[27].The duration of the project: 2013-10-01 to 2017-03-31.

- PREPARE: Platform for European Preparedness Against (Re-) emerging Epidemics

PREPARE Platform for European Preparedness Against (Re-)emerging Epidemics

Apart from the new funding for Zika research, EC contacted a number of ongoing research projects on dengue fever and other diseases related to Zika, covering projects on

[24] http://ec.Europa.eu/research/health/index.cfm?pg=area&areaname=Zika
[25] http://www.vph-institute.org/news/new-horizon-2020-calls-for-personalized-medicine-now-open.html
[26] http://ec.Europa.eu/research/participants/data/ref/h2020/wp/2016_2017/main/h2020-wp1617-infrastructures_en.pdf
[27] http://eranet-lac.eu/assets/moxiemanager/Call%20Text-final_190116.pdf

preparedness research. The network prepared by PREPARE intends to collect crucial clinical data in case autochthonously-transmitted Zika arrives in Europe. The duration of the project: 2014-02-01 to 2019-01-31.

- The PREPARE ARBO virus study has been modified in the Balkans. Therefore, adult Zika cases may be identified with heavily presenting and GBS. The project study is to expand to Italy, France, Spain, Slovenia and Montenegro, areas. These areas are where Aedes albopictus mosquito is present, depending on how the Zika epidemic evolves.
- PREPARE has cooperated with ISARIC to establish Zika research tools in public to collect clinical standardised neonate and maternal clinical and laboratory data
- Based on the ECDC Zika questionnaire, the information regarding European laboratory preparedness to detect Zika infection has been collected from PREPARE and COMBACTE LAB-Net laboratory contacts and is currently being analysed[28].

- <u>GloPID-R: Global Research Collaboration for Infectious Disease Preparedness</u>

The EC has established the GloPID-R with funding organisations from other countries. The infectious diseases constitute a cross-border public health threat and can spread rapidly, GloPID-R works on improving global collaboration of funders. The goal is to create a rapid and effective research response to any rapidly spreading infectious disease epidemic within 48 hours of an outbreak. GloPID-R has mobilized against Zika since early December 2015 that aimed to coordinate the research response of its members to the outbreak, to facilitate synergies and to prevent duplications in funded research[dtt]. The duration of the project: 2015-01-01 to 2019-12-31.

Despite the several EU-funded initiatives to combat the emerging Zika outbreaks in Europe and Latin America, there are still no initiatives for EU to cooperate with the Pacific countries in order to fight the recent increase in the disease incidence in those countries. In this sense, an opportunity and need for further cooperation on this topic is identified.

[28] http://ec.Europa.eu/research/health/index.cfm?pg=area&areaname=Zika

4. Recommendations for Enhancing EU-Pacific Cooperation on the Zika Virus

General

- Support actions for raising awareness: dissemination of material on Zika, its risks and potentially effects for key target-groups such as women of reproductive age, pregnant women, health workers, clinicians, and travel and transport sector stakeholders.
- Engage communities to communicate the risks associated with Zika virus disease and promote protective behaviors, reduce anxiety, address stigma, dispel rumors and cultural misperceptions[29].
- Provide guidance and mitigate the potential impact on women of childbearing age and those who are pregnant, as well as families with children affected by Zika virus[30].
- Encourage community participation to reduce mosquito breeding sites and to protect individuals, particularly those at highest risk, from mosquito bites[31].
- Fast-track the research and development of new products (e.g. diagnostics, vaccines, therapeutics) [dtt].
- Expand efforts to educate health workers in the EU member states, especially obstetricians, pediatricians and neurologists, about the disease [dtt].
- Facilitate shipment of samples to WHO reference laboratories or delivering diagnostic tools for local testing [dtt].
- Support the national planning of the health service available to the Zika Virus in the region.
- Strengthen vector control plans to avoid introduction of mosquitoes, detect mosquitoes at points of entry, prevent their spread and reduce their density[dtt].
- Assess the equipment needs and provide the requested supplies to prepare healthcare facilities and conditions specialized for complications associated with the Zika virus[dtt].
- Strengthen clinical and disease surveillance to detect early transmission of Zika virus disease (including early warning systems for clusters of fever and rash) [dtt.]

Specific

- Support the capacity and needs of the health system in the Pacific, providing technical and expert support on health service delivery.
- Provide training on clinical management, diagnosis and vector control in the Pacific, including through a number of WHO Collaborating Centers[32].

[29] http://apps.who.int/iris/bitstream/10665/204420/1/ZikaResponseFramework_JanJun16_eng.pdf?ua=1
[30] http://eeas.Europa.eu/delegations/brazil/press_corner/all_news/news/2016/20160205_01_en.htm
[31] http://goo.gl/REu913
[32] http://www.wpro.who.int/mediacentre/factsheets/en/

- Encourage countries of the Pacific region to develop and maintain the capacity to detect and confirm cases, manage patients, and implement social communication strategies to reduce the presence of the mosquito vectors dtt.
- Investigate the reported increase in incidence of microcephaly and neurological syndromes including their possible association with Zika virus infection[33].

[33] http://apps.who.int/iris/bitstream/10665/204420/1/ZikaResponseFramework_JanJun16_eng.pdf?ua=1

Guidelines for Implementing and Monitoring Joint Initiatives on Health, Demographic Change and Wellbeing

Sociedade Portuguesa de Inovação - SPI

Pacific-Europe Network For Science, Technology and Innovation

PACE-Net Plus is a project funded by the European Commission to reinforce EU-Pacific cooperation on Science, Technology & Innovation, and to promote the development of mutually beneficial partnerships. Grant Agreement no.: 244514

1. Overview on Bi-regional Cooperation/ Joint Initiatives

This section provides background information on the bi-regional joint collaboration initiatives between the EU and the Pacific by describing the partnership built and the major areas of cooperation. The existing implemented initiatives between the EU and the Pacific countries and other regions are provided in order to have a vision of these initiatives in terms of policy dialogue, the objectives and the major impacts. The initiatives address the main issues on Science, Technology and Innovation (STI) cooperation, especially concerning health.

1.1. Defining Bi-regional Cooperation/ Joint Initiatives

The EU and the Pacific have been developing a long-term relationship based on the legacy of a shared history, common values, economic and trade cooperation. The partnership between the EU and the Pacific involves 15 countries from the Pacific, Overseas Countries and Territories (OCT), as well as Australia and New Zealand.

According to the framework of the EU-ACP Partnership signed in 2000, the relationship was based in a 20-year period from 2000 to 2020. In 2012, a renewed EU-Pacific development partnership was announced, and the EU rebuilt the partnership with the Pacific by external actions. These actions were mainly focused on the following key points.

Pacific Island Countries and Territories (PICTS) are the main concern of the EU about sustainable development and are considered as the important natural resources, since its function of carbon sink, biodiversity and ecosystems. In regard to opportunities for the EU business sector, Pacific and Papua New Guinea are potential regions. EU has responsibility to support Pacific Islands Countries and Territories (PICTS) to attain the Millennium Development Goals in order to address issues on biodiversity and climate change.[34]

The EU has involved civil society, local authorities, the private sector and research communities through supporting regional networking and Pacific-EU partnerships and promoting public interest and debate in Europe on issues of common concern for the Pacific Islands Countries and Territories and its people.

In this sense, the areas of cooperation between the EU and the Pacific are environment, good governance, energy, climate change, fisheries, human rights and health.

[34] http://ec.europa.eu/research/iscp/index.cfm?lg=en&pg=pacific#projects

1.2. Existing EU-Pacific Joint Initiatives

There are a number of EU-Pacific joint initiatives that have been already implemented. Within these initiatives, the STI cooperation is the overall objective in which some of the initiatives have contained health.

1.2.1. Initiatives on health

ACP-EU Partnership[35]

ACP-EU Partnership Agreement was signed for a 20-year period from 2000 to 2020. In 2010, ACP-EU cooperation has been adapted to new challenges such as climate change, food security, regional integration, State fragility and aid effectiveness. In terms of S&T cooperation, ACP Science and Technology Programme (ACP S&T) is an ACP-EU co-operation programme in the field of science and technology funded by the European Union and implemented by the ACP Secretariat. The objectives of the programme are to address the scientific and technological divide between ACP member states and the most industrialised countries.

Other major challenges faced by ACP countries are Millennium Development Goals, food security, HIV-AIDS and sustainability of fisheries. Race poverty-related diseases including HIV/AIDS, malaria and tuberculosis has become the key focus of EU cooperation with African, Caribbean and Pacific (ACP) countries. The overall objective of these activities is to enhance health systems in ACP countries to deliver basic universally available healthcare and to address specific priorities in the region, including the implementation of international health regulations and conventions.

Some related programmes from ACP are the Gavi Alliance and the Global fund. The Global Alliance for Vaccines and Immunisation (GAVI) is a public-private global health partnership to help children's lives and protect people's health by increasing equitable use of vaccines in lower-income countries. With the partnership in ACP countries, the funding from Gavi has been provided for the vaccination. From 2011 to 2015, GAVI planned to spend € 2.5 billion to immunise more than 100 million children in ACP countries.[36]

1.2.2. Initiatives on Science and Technology

European Consortium for Pacific Studies[37]

European Consortium for Pacific Studies (ECOPAS) is a project, addressing climate change and processes in the Pacific Islands region by managing coordination and support to research and policy communities. By creating the platform for knowledge exchanges, the project will identify the potential EU research in the Pacific.

[35] http://www.acp-st.eu/content/about
[36] http://www.gavi.org/
[37] http://www.ecopas.info/

The objectives of ECOPAS are to:

1. Define and strengthen the potential of European research in the Pacific by creating a platform and portal for knowledge exchanges.
2. A long-term plan for capacity building.
3. Strategic plan for Pacific state and non-state involvement.

Forum for European-Australian Science and Technology Cooperation (FEAST) [38]

FEAST is an Australia - EU joint initiative to highlight and promote the international research cooperation between both sides from 2001 to 2012. Supported by International Science Linkages under Australian Government, and hosted by Australian National University, FEAST has achieved several fields regarding analysing policy-making, promotion of strategies in research community and creation of evidence-base on Australian's participation in FP7.

AUS-ACCESS4EU[39]

Australia ACCESS4EU is an initiative to improve the EU and Australia cooperation in S&T. It focused on identifying opportunities for EU researchers to access to research and technology and innovation programmes funded by Australian. The objectives of the project are focused on:

1. Highlighting Australia's distinctive research strengths and resources, where they may complement those of the various regions of Europe;
2. Mapping the current opportunities open to European researchers and provide those to European researchers through the common project database and through information workshops in Europe;
3. Monitoring the current levels of participation of European researchers in Australian programmes. This data will be showcased on the project website and through targeted information days in Europe;
4. Identifying barriers to greater European participation at policy and practical levels;
5. Discussing project data and reflections on it with key Australian programme owners and other stakeholders, providing the opportunity to facilitate further development of cooperative research policies.

The FRIENZ project [40]

The FRIENZ project is built on two projects: ACCESS4EU:NZ and FRENZ, aiming to develop strategic research, science and innovation partnerships between Europe and New Zealand.

The objectives of the project are:

1. Supporting government policy level initiatives;
2. Relationship building at national, organisation and individual level;
3. Programme development to strengthen strategic alliances;

[38] http://www.feastresearch.com.au/
[39] http://www.access4.eu/australia/index.php
[40] http://www.frienz.org.nz/page/about-frienz.aspx

4. Stimulating private sector and commercial engagement in science and innovation;
5. Supporting researcher collaboration and mobility.

ACCESS4EU-NZ project supporting EU access to New Zealand Research Programmes

Under the S&T agreement between the EU and NZ in 2008, the main focus of the cooperation has been on researchers from NZ' participating in the EC Programmes.

The overall objectives of the ACCESS4EU:NZ platform are to increase awareness and dissemination of access opportunities for European researchers in NZ's national research and innovation programmes and to provide outputs in the context of the JSTC meetings and the STC agreement between the EU and NZ.[41]

1.2.3. Existing EU- Other Region Joint initiatives

EU-CELAC Joint Initiative on Research and Innovation[42]

Aiming to establish a bi-regional European Union, Latin America and the Caribbean (EU-CELAC) platform, ALCUE NET involves key actors in R&I orientation, funding and implementation to support the international Science, Technology and Innovation (STI). The project will support the policy dialogue on STI focusing on the following priorities, including energy; information and communications technology; bioeconomy; biodiversity & climate change and will run 54 months from 2012 to 2017.

EU-LAC HEALTH[43]

EU-LAC Health is a project to support cooperative health research between EU and Latin America and Caribbean (LAC) countries through acoordinating action that defines roadmap to guide policy-makers in future cooperation. The roadmap will be developed by policy oriented method to adapt new framework for EU-LAC.

B.BICE+ [44]

B.BICE+ is a project that aims to improve cooperation and policy dialogue in STI between the EU and Brazil. The key activities of the project are focusing on policy dialogue, partnership between the EU and Brazil. Moreover, it will disseminate programmes to facilitate the cooperation.

During the tour of Brazil, FIOCRUZ ToB Event provided the opportunity to discuss cooperation in health, and also highlighted the EU framework programmes in the health sector.

[41] http://www.access4.eu/newzealand/index.php
[42] http://alcuenet.eu/policy.php
[43] http://eulachealth.eu/
[44] http://www.b-bice-plus.eu/

ERA-Can+[45]

The objective of ERA-Can+ is to promote cooperation between the EU and Canada in science, technology and innovation with activities including guides to support applicants on H2020 and Canadian programme and report on Canada-EU STI policies and programmes. The projects structured in three inter-connected pillars:

- Enrich the EU-Canada policy dialogue;
- Identify areas of mutual interest;
- Develop implementation plans to advance cross-Atlantic research activities.

Chile-European Union STI Initiative (CEST+I)[46]

The CEST+I project (Chile-European Union STI Initiative), funded by EC 7TH Framework programme, aims to enhance the STI cooperation between the EU and Chile. The priority areas include polar science and climate change, sustainable mining and renewable energy. The objectives of the project are to jointly tackle societal challenges, promote the creation of networks and joint research projects.

New INDIGO ERA-NET[47]

Under the S&T cooperation agreement between the EU and India in 2001, the joint action plan has been created. New INDIGO aims to provide framework for scientific from India to enter the European research area, and is expected to design a strategy for long-term scientific cooperation between the EU and India. During EU-India STI Cooperation Days 2013 on Affordable Health, the event aimed at networking the existing projects, and presenting the examples of EU-India cooperation in health.

BILAT USA 2.0 Project[48]

BILAT USA 4.0 is a bilateral coordination activity to enhance and develop science, technology and innovation partnerships between the European Union and the United States of America. The goals of the project are to support the political dialogue within the framework of the EU-US STI cooperation agreement. BILAT USA 4.0 includes eHealth, which is one of the areas in health research. The roadmap has been created between the EU and USA in order to improve the cooperation in eHealth and Health information technologies.

[45] http://www.era-can.net/about/
[46] http://www.sti-cooperation.cl/
[47] http://www.newindigo.eu/
[48] http://www.euussciencetechnology.eu/

2. Existing Methodology used in the joint initiatives

This section provides the detailed information regarding the methodology for successful joint initiatives and the methodology for monitoring and evaluating the process of preparation and implementation of joint initiatives.

2.1. To strengthen cooperation

Based on the initiatives mentioned previously, the EU and the Pacific have launched many bilateral initiatives. These have been mainly concluded by bi-lateral S&T agreements with a number of individual countries.

The selected methodology is commonly observed in the EU joint initiatives. Each criterion comprises the specific objective.

2.1.1. Supporting Policy dialogue

Established by the EC, there are a number of policy dialogues on different thematic areas with countries and regions outside of the EU. The EU exchanges best practices, increases cooperation and supports the partner country or region in their efforts to reform STI cooperation. For example, ACP-EU Partnership built bi-regional dialogue platforms on S&T between the EU and the 15 member countries of the Africa Caribbean Pacific (ACP) Group of the Pacific region. EU-LAC HEALTH has implemented ALCUE NET project from December 2012 to support the EU CELAC S&T Policy Dialogue process and the Joint Initiative for Research and Innovation (JIRI).

2.1.2. Enhancing strategy

Strategic Roadmap is usually considered a comprehensive process of implementing the activities. From EU-LAC HEALTH, the strategic divided in three main phases that include preliminary roadmap, roadmap and Implementation of the Joint Initiative on Health Research and Innovation (JIHRI). On the other hand, in ACP-EU Partnership, Gavi's strategy is a roadmap designed to implement in four phases from 2000 to 2020.

2.1.3. Strengthening Cooperation

In general, the initiatives aim to improve the cooperation between the EU and other countries. This should be further building on the achievements of previous projects in identifying cooperation priorities and recommendations. Therefore, the initiatives should focus on important topics of mutual interests. For instance, EU-LAC HEALTH priority areas in health research for cooperation have been identified to guide future cooperative health research actions between EU and LAC. On the other hand, GAVI has provided the partnership model by bringing the key stakeholders in global immunization, so that

partners can contribute to the Vaccine Alliance through participation in strategy and policy-setting, advocacy, fundraising, vaccine development and procurement.

2.1.4. Creating Networks

In order to establish the expert network for managing the existing and future challenges, it can be created on the previous database or other existing platforms. For example, EU-LAC HEALTH launched ERANet-LAC project as a bi-regional network on joint research and innovation activities supporting the five JIRI areas, including health. For GAVI, it is served as Country hub, providing the implementation of effective, evidence-based immunisation programmes. More information of the initiatives on health is listed below:

Table 2: Initiatives on health

ACP-EU Partnership: The Global Alliance for Vaccines and Immunisation (GAVI)[49]
The Global Alliance for Vaccines and Immunisation (GAVI) is a public-private global health partnership that helps to protect children's health by increasing the immunisation and improving health system in low-income countries. According to the statistics, there are 22 million children that are not vaccinated to against threatening diseases. ACP states are considered as key priority for GAVI, and strategic partnership for children's health has been established. In terms of future partnership with the ACP, it was estimated that GAVI needs 3 billion Euros to fund vaccines and strengthen health systems in the ACP States for the 2016-2020 period. In addition, based on the Agenda for Change from the EU, health is a priority of EU support. The EU institutions have co-financed vaccines and health system strengthening (HSS) in ACP states from 2003 to 2012.
EU-LAC HEALTH[50]
In 2009, the Bi-Regional Policy Dialogue Process in Science and Technology was completed. JIRI-Health is a joint initiative between countries of the European Union (EU) and the Community of Latin American and Caribbean States (CELAC) to enhance and coordinate the scientific and technological cooperation between these two regions in the area of health research and innovation. EU-LAC HEALTH has made actions to define a detailed plan to guide policy makers and other stakeholders. The objectives of the EU-LAC HEALTH are to discuss with policy-makers and other stakeholders to coordinate health research policies and funding between EU and LAC. Second, it will create consensus roadmap for cooperative health research. EU-LAC Health promoted the creation of a coordinating body to implement and developed the Roadmap. The strategy implemented in JIRI-Health was to use of already existing funding instruments for projects and actions according to aligned topics between the EU and CELAC countries.

[49] http://www.gavi.org/library/publications/gavi/gavi-alliance-partnership-with-the-acp-states/
[50] http://eulachealth.eu/wp-content/uploads/2015/05/Roadmap-document.pdf

The table below presents the methodology used in initiatives.

Table 3: Methodology applied in initiatives

Initiatives	Policy dialogue	Strategy implemented	Strengthening cooperation	Network creating
EU-LAC HEALTH[51]	Arranged the policy dialogue to coordinate health research policies and funding between EU and LAC.	Stage 1: Analysis of state of play Stage 2: Scenario building Stage 3: Defining the roadmap Stage 4: Implementing EU-CELAC Health	Setting up future framework for collaboration between the EU and LAC	Launch of ERANet-LAC project as a bi-regional network on joint research and innovation activities supporting the five JIRI areas, including health.
The Global Alliance for Vaccines and Immunisation (GAVI)[52]	The policy is aligned with the European Union's Development	The vaccine goal The systems goal The sustainability goal The market shaping goal	Focus on sustainability and enhance national and sub-national political commitment to immunisation	A country hub to support the implementation of effective, evidence-based immunisation programmes

2.2. To monitor and evaluate

The objective of the monitoring and evaluating joint initiatives, as the EU-Pacific cooperation initiatives, is to ensure the efficiency and maintain the sustainability of joint initiatives. In the absence of effective monitoring and evaluation, it is difficult to understand whether the intended results are being achieved as planned and what actions may be needed to be carried out to ensure delivery of the intended results.

Different approaches and tools could be applied to monitor joint initiatives. For each initiative, partners need to determine the correct mix of monitoring tools and approaches to ensure that there is an appropriate balance between the following categories:

- Data and analysis – collecting and analysing data and documentation on the initiative progress
- Validation - checking or verifying whether or not the reported progress is accurate.
- Participation - obtaining feedback from partners and beneficiaries on progress and proposed actions[53].

[51] http://eulachealth.eu/description/
[52] http://www.gavi.org/
[53] http://web.undp.org/evaluation/evaluations/handbook/english/documents/pme-handbook.pdf; http://www.neurodegenerationresearch.eu/uploads/media/Monitoring_and_Evaluation_Framework_1.8Mb_.pdf

Table 3 indicates common monitoring tools and mechanisms. These have been divided into the three aforementioned categories according to their predominant characteristic.

Table 4. Common monitoring tools and mechanisms

Purpose		
Data and Analysis	**Validation**	**Participation**
• Monitoring & evaluation framework • Annual Work Plans • Progress and quarterly reports on achievement of outputs • Annual Project Report • Project delivery reports and combined delivery reports • Substantive or technical documents • Progress towards achieving outcomes and Standard Progress Reports on outcomes	• Field visits • Spot-checks • Reviews and assessments by other partners • Surveys • Evaluations • Reviews and studies	• Sectoral and outcome groups and mechanisms • Steering committees and mechanisms • Stakeholder meetings • Focus group meetings • Annual review

Source: United Nations (UN)[54]

2.2.1. Developing Monitoring and Evaluation (M&E) frameworks

The initiative partners should agree on an M&E framework at the end of the planning stage so that monitoring and evaluation are carried out systematically. Overall, the M&E framework has three main components[dtt]:

- Narrative component - which indicates the monitoring and evaluation approach, as well as the human and financial resources required for its implementation.
- Results framework – which consists in a method to consolidate the information on the initiative outcomes.
- Planning matrices for monitoring and evaluation – which correspond to strategic matrices aiming to consolidate the information required for monitoring and evaluation.

Although there are several ways to produce a M&E framework, its development often comprises the following steps:

- Step 1 – Choose the indicators. The indicators are a quantitative metric which provides information on the performance, achievement and accountability of the monitoring process[55].

[54] http://web.undp.org/evaluation/evaluations/handbook/english/documents/pme-handbook.pdf

Although you can choose more than one indicator for each level, it is important to ensure that the total number of indicators is manageable[56].

- Step 2 – Define how each indicator should be measured. In case you skip this step, there is a risk of not measuring the indicators in the same way at different times which will impede an accurate comparison of the results[57].
- Step 3 – Measure the baselines. Baselines are the starting values of the indicators[dtt], they correspond to the conditions before the initiative start for later comparison[58]. Therefore, baselines are essential to enable the initiative partners to monitor and track the initiative progress[59].
- Step 4 – Set the targets for improvement[60]. The targets are the planned outcomes, each target consist in the specific level of result to be achieved for each indicator within an explicit time frame[61].
- Step 5 – Identify who is responsible for measuring each indicator and decide where the results will be reported[62].

An example of an M&E framework aiming to determining what needs to be monitored in a joint initiative is indicated in Table 4.

2.2.2. Producing Annual work plans (AWPs)

AWPs are plans detailing the annual activities of the initiatives, as well as the planned inputs and funding sources. AWPs and their accompanying monitoring tools are particularly important tools in monitoring joint initiatives, as they require multi-country, multi-year and multi-partner efforts[63].

AWPs function as good references for monitoring progress later in the year. They are commonly developed at the beginning of the year as a planning tool, according to the following steps[64]:

- Step 1 - Decide the initiative partner/s who will be responsible for writing the new WP and schedule work planning meetings several months before the current WP expires.
- Step 2 - Review the current WP with the initiative partners and discuss with the initiative partners whether the current plan requires any changes.
- Step 3 - Conduct a brainstorming meeting so that new activities can be idealized.
- Step 4 - Write out each of the activities to be carried out by the initiative, by taking into account the initiative mission, vision, goals and objectives.

[55] http://www.unaids.org/sites/default/files/sub_landing/files/8_2-Intro-to-IndicatorsFMEF.pdf
[56] http://www.tools4dev.org/wp-content/uploads/how-to-write-a-monitoring-and-evaluation-framework.pdf
[57] http://www.unaids.org/sites/default/files/sub_landing/files/8_2-Intro-to-IndicatorsFMEF.pdf
[58] http://www.ifrc.org/PageFiles/79595/Baseline%20Basics%2010May2013.pdf
[59] http://siteresources.worldbank.org/INTUKRAINE/Resources/328335-1212401346836/2BaselineReconstruction.pdf
[60] http://www.unaids.org/sites/default/files/sub_landing/files/8_2-Intro-to-IndicatorsFMEF.pdf
[61] http://www.ifrc.org/PageFiles/79595/Baseline%20Basics%2010May2013.pdf
[62] http://www.tools4dev.org/wp-content/uploads/how-to-write-a-monitoring-and-evaluation-framework.pdf
[63] http://web.undp.org/evaluation/evaluations/handbook/english/documents/pme-handbook.pdf;
[64] http://charmeck.org/city/charlotte/nbs/ed/financialprograms/Documents/Components%20of%20an%20Annual%20Work%20Plan2.pdf

- Step 5 - Identify the target measures/outcomes for each activity, determine who will be responsible for carrying out each activity on the plan and develop a proposed schedule/time-line for each activity.
- Step 6 - Decide what resources will be required to carry out the proposed activities.
- Step 7 - Ensure that adequate funds are available to undertake the initiative activities.

AWPs can be developed in several ways, one possible AWP format which has the advantage of combining both annual planning and reporting elements is indicated in Table 5.

2.2.3. Conducting Field visits

Field visits are conducted to ensure that the reported progress is accurate by validating the results reported by the initiative partners. Therefore, they are particularly important to evaluate and monitor joint initiatives which involve numerous partners.

Field visits should be planned carefully and accurately to be of maximum use, but they could be held at any time of the year. In case they are carried out in the first half of the year, they are oriented towards the validation of results. If they are carried out in the latter part of the year, they often provide the latest information on progress towards annual and outcome review processes[65].

After a field visit, it is important to prepare a report on the visit findings. These reports should include[66]:

- Any discrepancies between the plan and actual implementation;
- The specific issues/ problems that were identified during the visit;
- The actions which need to be undertaken to solve the identified issues/ problem;
- The specific individuals responsible for taking each action, and the deadline for its completion.

[65] http://web.undp.org/evaluation/evaluations/handbook/english/documents/pme-handbook.pdf;

[66] http://www.tools4dev.org/resources/monitoring-visit-report-template/

Table 5: Example of a Monitoring and Evaluation Framework

Expected Results	Indicators	Baseline	Target	M&E Event with Data Collection Methods	Time or Schedule and Frequency	Responsibilities	Means of Verification: Data Source and Type	Resources	Risks

Source: United Nations (UN)[67]

Table 6: Example of an Annual Work Plan format with monitoring component.

Expected Outputs	Planned Activities	Time-frame				Responsible Party	Budget			Monitoring Framework	
		Q1	Q2	Q3	Q4		Founding source	Budget description	Amount	Expenditures	Progress toward outputs
Output 1 Targets:											
Output 2 Targets:											
Total											

Source: United Nations (UN)[68]

[67] http://web.undp.org/evaluation/evaluations/handbook/english/documents/pme-handbook.pdf
[68] http://web.undp.org/evaluation/evaluations/handbook/english/documents/pme-handbook.pdf

3. Recommendations for Joint Initiatives

3.1. Recommendations for implementing

Based on the successful initiatives, all of these are followed by key steps, including policy dialogue involved, strategy implementation, future cooperation, dissemination and network creatION. The strategies have been utilizing these methods in planning and organising the initiatives. However, there should be further steps to be explained in order to make a comprehensive procedure for implementing joint initiatives.

When implementing a policy dialogue, it is regarded as an important factor the policy maker involvement in the strategy formulating, issues finding, problem solving, and enhancing future cooperation. In order to fulfil the policy dialogue, the organization of policy dialogue is the key facilitator in the initiatives, which helps policy makers from Europe and Pacific to jointly participate in the event. The event should gather not only policy makers, but also the scientists, health research experts and advisory board members.

Within the EU-Pacific initiatives, the strategic plan requires several elements. First, setting strategy is the initial step to conduct a comprehensive action plan, while it requires the understanding of S&T cooperation and learning during the policy dialogue. Second, the roadmap is usually taken as good strategy for implementing the timeline and procedure.

In order to strengthen the cooperation between the EU and Pacific, it is necessary to support the updating of common priorities, encourage mutual policy learning and ensure the proper implementation and effectiveness of cooperation instruments. Moreover, it is necessary have a better collaboration between the public and private sectors, as well as open innovation between different research activities and business sectors.

Network can be built upon the EU and other countries´ own network in the cooperative areas. It is recommended that National Contact Points under EU programmes can play a role in raising awareness about the advantages of participation in programmes.

Dissemination is the key for implementing the initiatives. It will be needed to develop a dissemination plan for the promotion of the initiatives. The dissemination plan will detail the content and procedure of activities. The dissemination should include project information, interaction and networking with relevant researchers and organizations.

More joint initiatives on health are needed. So far, there are only few initiatives focused on health. EU can put more effort on creating more bilateral projects on health.

The recommendations of further activities are listed below.

3.1.1. Supporting policy dialogue

The following recommendations can support the policy dialogue:

- Organisation of workshops shortly before policy dialogue meetings, providing inputs to the dialogue meetings on health issues and future cooperation opportunities, assisting in focusing the dialogue meetings and increasing their visibility.
- Raise awareness of the health issues from international perspective. By organizing the workshop, it will help create awareness through the policy maker, experts, researchers and other stakeholders.

3.1.2. Enhancing strategy

- In order to enhance strategy, it is recommended:
- Identifying areas or research activities from the cooperative counterparts.
- Identify the potential for, and encourage the development of, synergies with EU MS/AC collaborative programs and the Pacific in the Health field.
- Considering the need from the cooperative health system.
- Defining the detailed procedures for research to be undertaken jointly in the areas of health.

3.1.3. Strengthening cooperation

A few recommendations to strengthen and facilitate cooperation are the following:

- Identifying relevant interests for other countries in the EU programmes on health.
- Provide transparent information on potential differences in rules between the EU and other countries markets to facilitate cooperation.
- Provide needed legal and administrative frameworks to engage in cooperation, also including lessons learnt from previous cooperation.

3.1.4. Creating Networks

In regards to networking, it is recommended:

- Creating network between the EU and other stakeholders by organizing awareness-raising actions. These actions can better promote cooperation of EU and other countries through best practices.
- Network from NCP plays a role in awareness-raising about the advantages of participation in programs.

3.2. Monitoring

Monitoring is crucial to ensure that the objectives of joint initiatives are accomplished, as it provides the opportunity at regular predetermined time points to validate the initiative plan, as well as its execution. In

order to ensure the usefulness of the monitoring process (Figure 5), it is important to take into consideration the following characteristics[69]:

- Relevance: ensure that the initiative mission and specific objectives are being achieved, as well as the needs, problems and issues of the beneficiaries;
- Effectiveness: check whether the outputs generated by the initiative activities are aligned with the initiative objectives;
- Efficiency: ensure the optimisation of resources/ inputs by examining whether less inputs could be used to obtain the same outputs;
- Utility: examine the expected and unexpected outputs and ensure that those that are positive are aligned with the initiative mission and objectives;
- Sustainability: ensure that the positive impacts would continue after the ending of initiative.

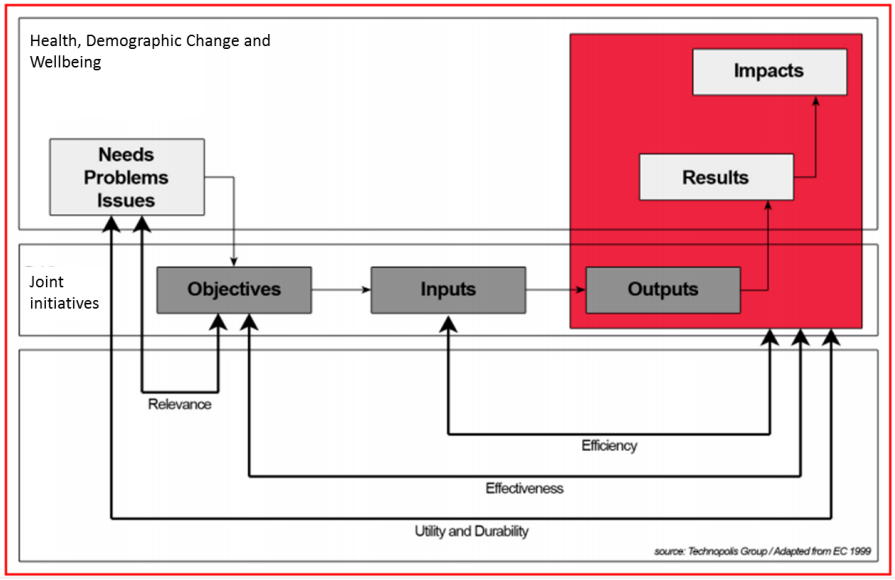

Figure 5: Diagram of an initiative monitoring process.

Source: Technopolis Group[70]

3.2.1. Developing M&E frameworks

As referred in the previous section, M&E framework is a monitoring tool which plays a central role in ensuring a successful monitoring process of a joint initiative and it is therefore required to ensure the efficiency and maintain the sustainability of joint initiatives. However, the design and implementation of M&E framework is complex, comprising several challenges. As a result, in this section we provide recommendations to overcome most of the challenges.

[69] http://www.neurodegenerationresearch.eu/uploads/media/Monitoring_and_Evaluation_Framework_1.8Mb_.pdf
[70] http://www.neurodegenerationresearch.eu/uploads/media/Monitoring_and_Evaluation_Framework_1.8Mb_.pdf

Indicators

Choosing the indicators and identifying how they should be measured is a very important step to develop an efficient M&E framework. The monitoring indicators should be "RACER", which means[71]:

- Relevant and therefore aligned with the initiative objectives;
- Accepted by partners, stakeholders and beneficiaries;
- Credible, unambiguous, unbiased and objective;
- Easy to monitor so that their measurement is feasible and practical;
- Robust against manipulation to ensure that they are not shifted towards any interests.

In order to ensure that indicators are "RACER", it is recommended to:

- Ensure that the overall purpose of the initiative is not forgotten by focusing on the planned initiative outputs.
- Ensure that the partners responsible for the indicators measurement are involved in the indicators choice.
- Involve beneficiaries, the choice and use of indicators must take into account their needs, and their views on the initiative's achievements.
- Select the right mix of quantitative and qualitative indicators taking into account the planned outcomes.
- Ensure that the methods to measure indicators are feasible and practical.

Targets

Targets are the framework elements which ensure that the driving changes are towards the planned outcomes for each of the indicators. In order to conduct an appropriate setting of targets, it is recommended to:

- Ensure that the partners responsible for implementation play a key role in the setting of targets.
- Ensure that targets are realistic and aligned with the initiative objectives.
- Ensure that the operating context is taken into consideration, as well as the available human and financial resources.
- Ensure that targets are reviewed regularly reviewed to ensure their continued relevance.

Baseline information

It is only possible to confirm whether the targets are aligned with the initiative objectives if adequate baseline information is collected. When collecting baseline information, it is recommended to[72]:

- Plan carefully the collection to ensure that the collected information are relevant.
- Ensure that the partners, stakeholders and beneficiaries´ opinion and perspective is taken into consideration.

[71] http://ec.europa.eu/smart-regulation/guidelines/tool_35_en.htm
[72] http://www.neurodegenerationresearch.eu/uploads/media/Monitoring_and_Evaluation_Framework_1.8Mb_.pdf

- If possible, conduct secondary data collection, since information is often already available through existing sources.
- Focus on the minimum required information, as more information adds complexity and cost to the collecting process.
- Ensure a balance between the cost and the benefits of the approach used to collect the baselines.

3.2.2. Producing AWPs

To function as good references for monitoring the progress of a Joint Initiative, AWPs should include the following sections:

- A summary of the initiative objectives, planned outcomes and expected impact;
- A brief analysis of the initiative progress;
- A summary of the initiative annual objectives;
- A work plan with the rationale and the expected outcomes of each work component;
- A detailed plan of how each activity will be conducted, including a reference to who are the partners responsible for each activity;
- The budget allocated to each activity or/and task;
- The procurement plan;
- The contracted services plan (any required assistance to be contracted);
- A Gantt chart of the annual plan.

3.2.3. Conducting Field visits

It is recommended that the field visits of a Joint Initiative:

- Are conducted based on challenges identified during previous visits.
- Are planned taking into consideration the maximization of the initiatives´ human and financial resources.
- Provide information which cannot be obtained through other ways (e.g., reports, conversation).
- Encourage the dialogue and cooperation between partners.
- Aim to produce a report with recommendations for future actions.