# Table of Contents

I. **Introduction** .................................................................................................................. 3  
   A. What is the Global Health Security Agenda (GHSA)? .................................................. 3  
   B. The Value of GHSA ......................................................................................................... 3  
   C. Translating Lessons Learned into the Next Phase ....................................................... 5  

II. **Vision, Mission, and 2028 Target** .................................................................................. 7  
   A. Vision .............................................................................................................................. 7  
   B. Mission .......................................................................................................................... 7  
   C. 2028 Target .................................................................................................................... 7  

III. **Core Principles** ........................................................................................................... 7  

IV. **Overall Approach and Strategic Objectives** .................................................................. 8  
   A. Overall Approach .......................................................................................................... 8  
   B. GHSA 2028 Strategic Objectives ................................................................................... 8  

V. **Membership** .................................................................................................................. 10  

VI. **Governance Structure** .................................................................................................. 10  
   A. Overview ....................................................................................................................... 10  
   B. Steering Group ............................................................................................................. 11  
      i. Mandate ..................................................................................................................... 11  
      ii. Members ................................................................................................................... 11  
      iii. Chair and Support Structure .................................................................................. 11  
   C. Executive Secretariat ..................................................................................................... 12  
      i. Mandate ..................................................................................................................... 12  
      ii. Composition ............................................................................................................. 12  
      iii. Functions ................................................................................................................. 12  
   D. Task Forces ................................................................................................................... 14  
   E. Action Packages ............................................................................................................ 14  
   F. GHSA Spokesperson ....................................................................................................... 14  

VII. **Regional Leadership, Global Leadership, and Global Ministerial Meetings** ............... 15
I. Introduction

The world today is marked by increased global mobility and interactions across the human-animal-environmental interface, including changes due to climate change. These factors have contributed to the rise in threats to health security, including zoonotic diseases and other novel emerging and re-emerging infectious diseases that can rapidly spread across borders. The COVID-19 pandemic and the international spread of diseases like influenza, Ebola virus disease, and MPox made clear that countries are still not fully prepared to effectively respond to infectious diseases. Epidemics and pandemics have taken a devastating toll on lives and livelihoods, with significant and long-lasting economic and societal impacts.

A. What is the Global Health Security Agenda (GHSA)?

The Global Health Security Agenda (GHSA) is a collaborative, multisectoral network to enhance global health security and accelerate implementation of the International Health Regulations (IHR) (2005) and other relevant frameworks by strengthening country capacities to prevent, detect, and respond to infectious disease outbreaks. Launched in 2014 with 14 founding members, by the end of 2023, GHSA has grown to include 71 countries, 12 organizations including international organizations, intergovernmental organizations, and coalitions that respectively represent more than 30 non-governmental organizations and private sector actors. GHSA has sought to spur progress and multisectoral coordination needed to enhance countries’ capacities, aiming to elevate global health security to a national leader-level priority; foster multisectoral engagement and collaboration; and strive towards achieving common measurable targets. Members of the GHSA are collectively committed to strengthening preparedness and response worldwide, including through significant investments in strengthening health security systems and financial mechanisms and supporting evidence-based, collaborative health security policy-making both domestically and internationally. In this way, the GHSA plays and will continue to play a critical role in the global health security architecture. GHSA’s success and the growing global need for multisectoral and technical collaborations to support country-level capacity building and enhance global health security spurred members to extend GHSA in 2019 through 2024, and now for a third phase from January 1, 2024, to December 31, 2028.

B. The Value of GHSA

The launch of GHSA in 2014 presented a key opportunity to address the need to enhance and sustain technical, financial, and political support to address gaps in the world’s ability to respond to infectious diseases before they escalate into deadly epidemics or pandemics. GHSA brought together stakeholders across sectors, disciplines, and geographies, fostering multisectoral and transdisciplinary collaboration, which had never been done before and remains to be seen in other fora. GHSA remains the only multilateral health-related initiative to thoughtfully and purposefully include “non-traditional” health actors, such as actors from the finance, defense, and security sectors. Importantly, GHSA sought to enhance mutual
accountability and innovative solutions to address critical gaps that had hindered country progress towards full implementation of the IHR.

Historically, efforts to implement and comply successfully with the IHR by achieving core capacities and promoting international cooperation to prevent, detect, and respond rapidly and effectively to public health emergencies were slowed by lack of political attention, evaluation and accountability mechanisms, and resource constraints. To address this challenge, GHSA developed and helped launch the precursor to the WHO Joint External Evaluation (JEE) Tool for assessing country health security capacities for IHR, which is now a key element of the WHO IHR Monitoring and Evaluation Framework, established to support countries’ progress and commitment towards common, measurable health security goals. JEE complements other tools in the IHR MEF, including the State Parties Annual Reporting (SPAR) tool facilitating the mandatory annual reporting to the IHR secretariat in WHO along with the After Action Reviews and Simulation Exercise (SimEx). As a result of GHSA’s and partner efforts to support the development of the JEE Tool and promote its use by countries, technical work on key public health capacities (including laboratory, surveillance, zoonotic diseases, financing, and legal preparedness, among others) fostered policy discussions across various ministries on measuring and strengthening these capacities over time. As of the writing of this document, 151 JEE missions have been conducted in 122 States Parties with 25 of them conducting a second JEE. GHSA focused next on promoting the development of multisectoral coordinating offices at the national level, cementing this practice in many countries.

A defining element of GHSA 2024 was the creation of an overarching target for more than 100 countries to achieve “Demonstrated Capacity” in at least 5 health security technical areas as defined by the IHR Monitoring and Evaluation Framework (IHR MEF). In this context, WHO Multisectoral Preparedness Coordination Framework plays an important guide to support the JEE as well as the NAPHS development for the countries. This ambitious goal served to guide GHSA’s efforts, emphasizing the importance of international frameworks for health security and promoting baseline capacity assessments through JEE, monitoring of annual progress through State Parties Annual Reporting (SPAR) and other assessment tools, and planning and resource mobilization to address identified gaps through the development (and delivery) of National Action Plans for Health Security (NAPHS). By the end of 2022, more than 56 countries had met this target and another 16 were close. GHSA also sought to enhance sustainable domestic and international financing to strengthen health security and accelerate progress towards the GHSA target.

The implementation of National Action Plans for Health Security (NAPHS) and other country health security priorities requires identifying needs and gaps, prioritizing decisions and mobilizing financial and technical resources (domestic and external). The WHO Resource Mapping (REMAP) tool and process supports Member States through mapping health security investments and activities at national and subnational levels, identifying financial and technical gaps and needs, engaging multisectoral ministries.

The GHSA has established nine technical "Action Packages," so far and facilitating cross-disciplinary collaboration, breaking down silos and promoting engagement with civil society and the private sector as equal partners. GHSA Action Packages served as a platform for
sharing best practices and lessons learned, fostering networks across sectors globally, tracking commitments, and charting progress on strengthening global health security.

During its second phase, in response to observed lack of attention to critical capacities often neglected in country-level and global preparedness efforts, GHSA launched new Action Packages on Sustainable Financing for Preparedness and Legal Preparedness in 2019 and 2021, respectively. Through these efforts, GHSA contributed meaningfully to building multisectoral networks of experts and driving momentum to develop tools and underscore the importance of these non-traditional capacities globally.

Additionally, through GHSA Leadership and Ministerial Meetings, GHSA fostered multisectoral engagement among leaders at higher levels of government and international organizations, building and enhancing multisectoral collaboration and commitments to global health security.

C. Translating Lessons Learned into the Next Phase

GHSA is entering a new era from January 1, 2024, to December 31, 2028. The COVID-19 pandemic response revealed significant disparities among countries in their abilities to prevent, detect, respond to, and recover from outbreaks. The GHSA 2028 framework acknowledges the transformative impact of COVID-19 and other recent outbreaks and emphasizes the need for enhanced and sustained multisectoral attention and cooperation for disease prevention and preparedness. Recognizing that GHSA is not a response entity, the framework takes this opportunity to build on and strengthen GHSA’s role as an initiative focused on supporting countries to become better prepared to respond to health emergencies, including pandemics, through capacity building. Additionally, despite achievements in catalyzing cooperation and incubating innovative concepts, the COVID-19 pandemic exposed underlying structural and operational challenges at different levels. However, this next phase offers an opportunity to optimize GHSA as a unique multisectoral platform for addressing gaps and needs in global health security and strengthening the evolving global health security architecture.

While GHSA’s diverse membership and devolved structures were intended to facilitate nimble mechanisms to strengthen prevention of and preparedness for threats to global health security, the annual different representation as leadership across all levels of GHSA governance has resulted in improved operations, enhanced stakeholder engagement, and accountability. Despite multiple efforts, there is a need to improve further stakeholder engagement under GHSA and leverage GHSA as a communication mechanism and forum of experts to inform the global health security architecture. Revitalizing and expanding engagement will enable GHSA to achieve more meaningful progress and impact in its next phase to support countries’ efforts to become better prepared to prevent, detect, and respond to emerging and remerging health threats.

Recognizing the value and impact that GHSA has despite these challenges, stakeholders at the 7th GHSA Ministerial Meeting in November 2022 recognized the significant benefits of
GHSA and support the New Seoul Declaration and extending the initiative for a third 5-year phase. This renewed commitment aims to bolster GHSA's valuable and catalytic role in spurring multisectoral action toward a more sustainable global health security architecture. Key changes include establishing a GHSA Executive Secretariat and a "troika" Chair model for consistent operational and leadership structure, elevating GHSA's efforts to coordinate across sectors globally, strengthening and diversifying membership and engagement, enhancing GHSA's role as an incubator for health security innovation, and implementing clear accountability mechanisms, including an independent external evaluation, to strengthen GHSA's capacity to deliver measurable and sustainable results.


In the global health security architecture post-COVID-19, GHSA's strengths lie in its diverse network of experts from various sectors and regions, encompassing governmental, non-governmental, and private sector representatives. This unique collaboration is invaluable for the implementation of the new global health security architecture. Notable initiatives such as the Pandemic Fund, negotiations towards amending the IHR and development of the Pandemic Accord, and the UN General Assembly's High-level Meeting on Pandemic Prevention Preparedness and Response (PPPR) signal a current window of political attention to recognize and commit to health security as a key societal goal that is critical to sustain other forms of security and prosperity.

GHSA is well-positioned to amplify essential information, including countries' experiences and commitments in health security. This can foster greater interest in prevention of, preparedness for, and response to pandemics and other international health emergencies. GHSA can actively support initiatives like the Pandemic Fund by disseminating accurate information, promoting knowledge exchange among members, and encouraging countries to participate in calls for proposals, as demonstrated by the Sustainable Financing for Preparedness Action Package. Drawing from the groundwork laid by the Legal Preparedness Action Package in facilitating technical exchanges with Member States to help them refine positions, GHSA can assist countries in navigating complex issues related to WHO IHR amendments and Pandemic Accord negotiations. GHSA's continued role in facilitating technical work, developing tools, and sharing experiences will be vital in fulfilling obligations under the amended IHR and the Pandemic Accord, ensuring a robust response to global health security challenges. GHSA's multisectoral expertise contributes significantly to achieving international commitments in this domain, making it a key player in the evolving global health security architecture.
II. Vision, Mission, and 2028 Target

A. Vision
A resilient world capable of preventing, preparing for, detecting, and responding to global health threats posed by emerging and re-emerging infectious diseases -- whether natural, accidental, or deliberate -- in a more effective, rapid, transparent, equitable, and accountable manner.

B. Mission
To sustainably strengthen health security at the subnational, national, regional, and global levels by fostering multisectoral and multidisciplinary global collaboration and action.

C. 2028 Target
By 2028, more than 100 countries that have completed an evaluation of health security capacity will have undergone planning that includes identifying resources to support plan components to address post-pandemic gaps and will be in the process of implementing and monitoring activities to achieve impact. These countries will strengthen their capacities and demonstrate improvements in at least five technical areas to a level of ‘Demonstrated Capacity’ or comparable level, as measured by relevant health security assessments, such as those conducted within the IHR MEF by the end of 2028. For those countries that have already met the target, the challenge will be to sustain these high-capacity levels through 2028.
This target is a continuation of the 2024 Target. With the COVID-19 pandemic and other factors affecting countries’ work to build their capacities during the period of GHSA 2024 and given the impact that this target can have in strengthening global health security overall, GHSA remains steadfast in achieving this target.

III. Core Principles
To achieve its mission toward realizing its vision, GHSA 2028 is driven by the following guiding principles:

- **Collaboration** – taking multisectoral action and working jointly to exchange experiences and develop solutions to strengthen global health security, including by promoting open and public sharing of information, developing processes, and fostering trust and confidence among members and other stakeholders.
- **Equity** – the absence of unfair, avoidable, or remediable differences in countries’ ability to build and achieve sustainable capacities to increase preparedness to prevent, detect, prepare for, and respond to future health emergencies, including potential international public health emergencies, based on public health risks and needs.
Inclusion – intentional consideration and integration of diverse perspectives, cultural contexts, capabilities, economic status, and experiences.

Country Driven Solutions and Ownership – approaches to align multisectoral technical actions for advancing health security with country priorities and context (e.g., cultural, social, political, economic) while upholding international norms and standards, as well as to elevate and galvanize countries’ national leadership towards that end.

Multisectorality – participation and engagement of all sectors needed to support country-level capacity building and global health security at all levels (subnational, national, regional, and global), including governments (across ministries), multilateral organizations, civil society, nongovernmental organizations, and private sector, toward advancing whole-of-government, whole-of-society, and One Health approaches.

Transdisciplinarity – simultaneous drawing and integration of knowledge from across various relevant disciplines needed to advance and achieve the common goal.

Measurability – ability to quantify progress of actions toward achieving impact, including through clear targets and indicators.

Sustainability – ability to maintain or support processes and impact over time.

IV. Overall Approach and Strategic Objectives

A. Overall Approach
GHSA, working across its membership and various components, will actively contribute to national, regional, and global efforts to support countries’ efforts to build capacities by:

- developing and sharing technical resources and good practices;
- building networks of experts;
- establishing and leveraging fora for the exchange of experiences and expertise among members;
- promoting the importance of identifying specific, measurable actions and measuring progress and impact in strengthening capacities and technical exchanges;
- galvanizing commitments from members toward strengthening health security nationally, regionally, and/or globally; and
- tracking overall progress toward the 2028 target.

B. GHSA 2028 Strategic Objectives
To foster global collaboration and strategic political and technical action for supporting countries’ efforts to build capacities needed to better prevent, prepare for, and effectively respond to infectious disease threats and to strengthening global health security by building and leveraging integrated multisectoral and multidisciplinary networks of experts from around the world.

To achieve measures of success by December 31, 2028, GHSA intends to pursue the following strategic objectives:
• Facilitate global, multisectoral, and transdisciplinary collaboration and cooperation among its members across regions and sectors (e.g., governments, multilateral organizations, civil society, private sector) to encourage active participation and contribution to GHSA.

• Promote whole-of-government, whole-of-society, and One Health approaches through all aspects of its work to effectively integrate multi-sectoral and multi-stakeholder efforts.

• Facilitate Knowledge Sharing to enhance dissemination of best practices and lessons learned and support creation and adaptation of relevant tools and mechanisms.

• Contribute to the implementation of the new global health security architecture by leveraging GHSA’s strengths, including its members, and its unique ability to facilitate multisectoral exchange of information and perspectives, technical work, and networks of experts.

• Develop and promote the use of new and existing tools to support capacity building efforts at the sub-national, national, regional, and global levels based on members’ best practices, lessons learned, and expertise.

• Encourage and coordinate with members to establish national, regional, or institutional commitments that contribute to the 2028 target and the overall mission and strategic objectives of GHSA.

• Annually track progress toward the 2028 target to demonstrate GHSA’s contributions overtime and encourage member countries to measure and make progress in their capacity building.

C. Tracking Progress and Impact

To achieve its goals, GHSA will focus on leveraging monitoring and evaluation mechanisms, building on the work of the Accountability and Results Task Force during GHSA 2024. GHSA will track annual progress toward the GHSA Target using health security assessments of the IHR MEF and the Global Health Security Index (GHSI) (developed by the Johns Hopkins Center for Health Security, the Nuclear Threat Initiative and the Economist Intelligence Unit). The Joint External Evaluation (JEE) serves as a baseline to measure country's progress towards achieving a Demonstrated Capacity in at least 5 technical areas. GHSA will track and report on annual progress towards the target using data from State Parties Annual Reporting (SPAR) combined with GHSI data and subsequent JEEs. To measure GHSA’s impact on driving progress, GHSA will ensure that all members outline and make public their health security commitments and achievements, including specific actions and timelines in the following categories: identifying and addressing gaps; building political will and coordination; investing in health security; documenting progress and best practices; and advancing steering group priorities.

A mid-term external evaluation will assess the functioning of the GHSA initiative to identify the most impactful opportunities for GHSA to focus its efforts and best support member countries in achieving its goals.
V. Membership

Members join GHSA with a shared commitment to advance progress domestically, regionally and/or globally toward meeting the initiative’s mission and realizing its vision through collaboration across sectors, disciplines, and geographical regions. Members contribute to and benefit from the tools, lessons learned, networks, and other resources that this multi-stakeholder coalition brings together.

GHSA membership consists of governments and non-governmental actors, such as multilateral organizations, civil society organizations (including academia), and the private sector. This diverse composition fosters contributions of different perspectives, experiences, and commitments to advancing health security at all levels. GHSA 2028 aims to strengthen and diversify its membership to support an inclusive and equitable approach toward achieving global health security in accordance with its mission.

GHSA members can actively contribute to the work by:

- Making or reaffirming tangible health security commitments to spur progress domestically, regionally, and/or globally to help achieve GHSA’s vision;
- Regularly reporting their health security commitments and progress toward achieving them;
- Participating in the GHSA governance structure (e.g., Steering Group, Task Forces, Action Packages, Secretariat) and related activities;
- Participating in GHSA Ministerial and working level meetings;
- Providing input during GHSA-wide consultations on GHSA issues;
- Sharing GHSA communications, messaging, and content on their social media platforms, websites, and with relevant partners and stakeholders;
- Contributing to and supporting efforts to share best practices and resources; and/or
- Leveraging relevant international engagements to advance GHSA objectives.

VI. Governance Structure

A. Overview

The GHSA governance structure consists of the following components:

- Chair (with a troika structure: current, immediate past and incoming Chairs)
- Steering Group
- Executive Secretariat (including the Global Health Security Coordination Office (GHSCO))
- Task Forces
- Action Packages
- GHSA spokesperson
B. Steering Group

Mandate
To provide strategic guidance and direction, including identifying overall GHSA priorities and yearly thematic areas, providing leadership and coordination to support the implementation of priorities, tracking of progress and commitments, facilitating target-driven multisectoral coordination and communication among GHSA partners, monitoring developments in the evolving global health security architecture, and identifying opportunities for GHSA to interact with other health security mechanisms.

Members
The Steering Group is led by a Chair, with the support of the Executive Secretariat, and consists of 20-25 members. By the end of 2023, there are 23 members, including 17 countries, 4 international organizations, and/or 2 non-governmental members. Steering Group Chair and Secretariat will ensure the efficient flow of information among the GHSA community by serving as liaisons with the larger membership.

The Food and Agriculture Organization (FAO), the World Organization for Animal Health (WOAH), the World Bank, and the World Health Organization (WHO) serve as Permanent Advisors to the GHSA Steering Group, providing advice to facilitate alignment with multilateral health security efforts supported by these organizations. The GHSA Consortium (GHSAC) and the Private Sector Round Table (PSRT) serve as permanent members of the Steering Group, representing the non-governmental and private sectors, respectively.

The selection of Steering Group members must prioritize the balance of relevant perspectives needed to provide leadership to GHSA, including income level and geographic representation.

Chair and Support Structure
The Chair of the GHSA Steering Group will be a member country of GHSA and the selection of the Chair shall be through transparent and clear process that aims for inclusivity in leadership. To ensure continuity, the GHSA Chair is supported by a “troika” structure made up of current, immediate past, and incoming Chairs. The Chair role is held for a single year and may culminate with a leadership or Ministerial Meeting, if needed and appropriate, to highlight key achievements across GHSA, plans for the following year, and commitments from members (e.g., JEE) as well as formally transition the Chair role.

The Current Chair leads the GHSA Steering Group during their tenure, setting the strategic direction, overseeing initiatives, and, as needed, representing the organization externally in coordination with the GHSA Spokesperson. They facilitate collaboration among member countries, drive progress toward the implementation of GHSA goals, and ensure effective communication within the group. The Current Chair’s primary focus is on advancing progress toward the GHSA's mission and objectives in the present, working closely with partners and stakeholders. They also collaborate with the incoming Chair to ensure a smooth transition of leadership, including sharing insights.
The immediate past Chair provides guidance and mentorship to the current and future chairs based on their experience in leading the GHSA Steering Group. They offer insights into past strategies, lessons learned, and best practices to ensure continuity and informed decision-making. The immediate past Chair helps bridge the gap between different leadership terms and contributes to the ongoing success of the GHSA.

The incoming Chair is responsible for learning from the Current Chair and immediate past Chair in preparation for their incoming leadership role, assisting in the transition process and ensuring continuity of activities and initiatives. The incoming Chair's focus is on succession planning, continuity, and ensuring that the GHSA's leadership transitions are seamless and effective. The incoming Chair leads in the accountability and results work stream of the Secretariat.

C. Executive Secretariat

Mandate
The Executive Secretariat supports the Steering Group and the whole membership by providing support for administrative tasks and operational procedures to ensure inclusive, efficient and effective integration of multi-sectoral, and multi-stakeholder efforts toward ensuring the overall functioning of the initiative.

Composition
The Executive Secretariat is sustained by the Global Health Security Coordination Office (GHSCO) in the Republic of Korea and Secretariat in Indonesia. Other members may contribute to the staff to support the Executive Secretariat.

Functions
GHSCO will facilitate sharing of best practices/lesson learned among members, internal coordination among the various components of GHSA, external communication and, where needed, the technical work of the Action Packages. GHSCO will provide updates on progress and challenges for consideration of the Steering Group. Indonesia will provide support for secretarial functions that support overall management of GHSA.

GHSA members are encouraged to commit staff and/or other resources for a specified time to support Executive Secretariat activities.

The functions of the Executive Secretariat, under the direction of the Steering Group, are:

*Overall Management of GHSA*

- Manage and maintain distribution lists on a regular basis to ensure they are up-to-date
- Manage and maintain meeting materials, records, and other relevant documents
- Arrange meeting logistics, including scheduling meetings, disseminating calendar invitations, meeting agendas, and other meeting materials for meetings hosted by the Chair
● Serve as the focal point of communication between Action Packages and the Steering Group
● Respond to prospective members’ inquiries and interests, and facilitate the induction into membership through the organization of introductory bilateral calls with prospective members and fulfillment of administrative procedures
● Compile and distribute quarterly GHSA Newsletter to the GHSA community
● Assist in promotion of webinars and/or scientific events organized by Action Packages and other relevant global health security stakeholders through outreach and communications to the GHSA community
● Perform other activities, as directed by the Steering Group

**Membership and Multi-Sectoral Stakeholder Engagement**

● Support outreach to and integrate potential members into GHSA
● Hold meetings with all GHSA members to communicate updates and facilitate active engagement on activities across GHSA on a regular basis (e.g., quarterly)
● Track membership
● Respond to inquiries received from members and external stakeholders
● Disseminate information to GHSA members and stakeholders as needed
● Compile and distributing scheduled reports and updates
● Perform other activities, as directed by the Steering Group

**Accountability and Results**

● Data collection from countries and other sources to report on progress of member countries efforts in capacity building on an annual basis in addition to the regular progress reports as and when required by the GHSA steering group
● Perform other activities, as directed by the Steering Group
● Work closely with the Former Chair to evaluate progress towards goals and develop proposals for additional assessment measures

**Advocacy and Communications**

● Provide direct support and coordination for the GHSA Spokesperson
● Maintain, conduct periodic review of, and regularly update GHSA website and social media accounts
● Maintain and collect and develop content for the GHSA website
● Develop advocacy materials for diverse audiences
● Develop communications materials for GHSA stakeholders
● Maintain active calendar for GHSA internal and external events
● Track opportunities for promotion of GHSA and its work
● Perform other activities, as directed by the Steering Group

**Action Package Coordination**

● Facilitate internal coordination among GHSA Action Packages and with the Steering Group
● Promote webinars and/or technical events organized by Action Packages
● Perform other activities, as directed by the Steering Group

D. Task Forces
The Steering Group may establish Task Forces as incubators for health security innovation or to launch initiatives. Task Forces are flexible, time-limited and can be renewed as necessary or transitioned into Action Packages to address specific issues that will support achievement of the GHSA strategic objectives. Task Forces will draw together interested GHSA members to advance Steering Group-determined priorities in a strategic and targeted way to ensure this work leverages and complements the efforts of partners and other health security actors and sets clear objectives and measures of progress and impact to ensure consistent progress towards objectives. All Task Forces will regularly provide updates to Steering Group members and other members as requested by the Steering Group.

E. Action Packages
The Action Packages are multisectoral and multidisciplinary working groups that advance the technical work of GHSA based on the mission, priorities, target, and strategic objectives. Action Package support countries in making tangible progress in strengthening their capacities and building their networks and partnerships through expert communities of practice. Action Packages should collaborate together to further cross-cutting work. Action Packages should be responsive to and help advance common initiative-wide projects, where possible.

F. GHSA Spokesperson
The GHSA Spokesperson serves as global advocate of GHSA and the liaison between GHSA and other initiatives and efforts to strengthen global health security. The GHSA Spokesperson will work closely with the governing bodies and GHSA members as needed. The immediate past Chair is encouraged to and could serve in this role if desired. The spokesperson will perform the following functions:

● Work with the Steering group, Executive Secretariat, Task Forces, and Action Packages to identify key messages and opportunities for advocacy
● Develop communication material in close coordination with the Advocacy and Communications Task Force and Steering Group
● Participate in and provide updates to the Steering Group on important global events and to represent the GHSA
● Conduct outreach to identify new GHSA members with the support of the Secretariat
● Any other assignment by the Steering Group

The spokesperson will be selected based on the following criteria:
● Solid understanding of the principles of GHSA and the history of the partnership framework
● Strong leadership skills (be able to influence, inspire, and be skilled in relationship building)
● Organized and connected to the GHSA Chair and the Executive Secretariat
● Experience in advocacy and high-level engagement
● Availability and time commitment

**VII. Regional Leadership, Global Leadership, and Global Ministerial Meetings**

GHSA will convene high-level meetings to foster GHSA-wide engagement among senior officials and ministers during the 5-year mandate. These meetings will allow members to make and report on progress across the initiative’s work, ensure that global health security remains a focus at high levels of government across ministries, formulate and advance strategies and plans for the following year, and facilitate public commitments from members at high levels. These meetings will also serve to showcase the technical work developed by Action Packages before senior officials and Ministers. Members will ensure strong multisectoral representation at the meetings.

Regional Leadership Meetings, held at the senior official level, will foster more localized cooperation and collaboration and help address region-specific health security challenges, strengthening GHSA’s contributions at the regional level. All members will be invited to participate. These meetings will aim to make global meetings highly impactful and reflective of the collective progress and challenges across all regions.

Global Leadership and Ministerial Meetings will focus on sharing progress at the global level from across GHSA, feature consolidated regional insights derived from the regional meetings, affirm GHSA’s global strategies for the following year and remaining period, feature public commitments from members, and officially make transition of Chairs. Global Leadership Meetings will be held on years 1, 2, 4. Ministerial Meetings will be held on years 3 and 5.