Voluntary Joint External Evaluations (JEE) prompt much-needed multisectoral dialogues for health security
Abstract

More than 100 countries have gone through a Joint External Evaluation (JEE), one of the monitoring and evaluation practices developed in the last five years. A vital requirement of the JEE is the inclusion of multiple sectors during both the initial self-evaluation conducted by the host country itself, and an in-country assessment conducted by a team of external evaluators. It is now evident that undertaking these evaluations has the additional benefit of initiating multisectoral dialogue and collaborative practices required to engage in One Health and whole-of-government strategies for preparing for and preventing infectious disease outbreaks and zoonoses. Such strategies are crucial in preparing for and preventing infectious disease outbreak and zoonoses.

Description

Effective management of IHR (2005) capacities for health security requires the involvement of several key sectors, including human, animal, environmental health, wildlife, security, law enforcement, and finance. This type of multisectoral cooperation and collaboration is a vital component of the One Health approach to implementing programs, policy, and research in order to achieve better health outcomes. The One Health approach recognises importance of the interconnection between people, animals, plants, and their shared environment in achieving optimal health outcomes. This is particularly relevant to food safety, combatting antibiotic resistance and the control of zoonoses.

The IHR (2005) Monitoring and Evaluation Framework (IHR-MEF) has four components; the State Party Self-Assessment Annual Report (SPAR), Joint External Evaluation (JEE), Simulation Exercises and After Action Reviews (AAR). It is mandatory for Member States to submit the SPAR on an annual basis; conversely, Member States voluntarily carry out the other three components. Experience shows that these tools encourage beneficial dialogue, cooperation and collaboration among the key sectors contributing to health security. This is especially so for the JEE that is designed to be carried out in four-to-five-year cycles. A key requirement of the JEE is the inclusion of multiple sectors during both the initial self-evaluation conducted by the host country itself, and an in-country assessment conducted by a team of external evaluators; as pointed out by WHO in a commentary in The Lancet Global Health.1 Over 100 countries have completed voluntary JEEs since 2016. Based on this timeline, 28 countries that completed the JEEs in 2016 are eligible for a second round by 2020. As of 2017, it was already clear that going through JEEs encouraged an additional benefit to evaluating capacities.

Outcomes

Excerpts from participating countries documented in JEE mission reports

Since the introduction of JEEs, paradigm shifts have been observed regarding how sectors relate to each other.

“We thought that we had an excellent coordination and collaboration mechanism in place between sectors; but while going through self-evaluation process and discussion, we realised that we need to collaborate and

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coordinate with other sectors on many other things.” One of the representatives from outside the health sector said during the JEE in the United States of America.

“This is the first time we are meeting together, and we realised the concept of working for the people of Baluchistan and we commit to support and work together with the provincial health office.” A Provincial Animal Health Officer of Pakistan stated during the JEE. He also committed to immediately provide veterinary staff to a provincial health office during the mission briefing.

Experiences documented during the WHO JEE technical meeting in October 2019

The WHO JEE Secretariat convened a three-day technical meeting in Geneva in October 2019 to review the current process and methodology of the JEE. This meeting brought together technical experts from WHO headquarters and regional focal points, representatives from Member States from each WHO region selected by regional offices, and representatives from partner organizations. During this technical meeting, it was apparent that the JEE process was able to support multi-sectoral dialogue and collaboration. One example cited was in Sierra Leone, where they had established a multisectoral working group, that met on a monthly or fortnightly basis, to ensure high level political commitment for a multisectoral whole-of-society approach.

Going through a JEE has succeeded in bringing together national representatives from key sectors, including

- Human and animal health
- Agriculture
- Wildlife
- Finance
- Defense
- Security
- Environment
- Communication
- Disaster management boards
- Transportation
- Customs
- Civil aviation
- Universities or institutes
- Political leadership

Several national institutes and agencies, international organizations, and donors including governments, the World Organisation for Animal Health, the Food and Agriculture Organization of the United Nations, the International Atomic Energy Agency, the World Bank, the Bill & Melinda Gates Foundation, and other public and private partners are key partners in supporting JEEs.
Way forward

The voluntary JEE process has catalyzed dialogue between sectors, helping to shift the health security paradigm from an approach primarily oriented towards human health to a more holistic and integrated, multisectoral, One Health and whole-of-government approach. JEEs are fostering multisectoral dialogue, engaging non-health sectors on their respective roles and responsibilities within IHR, and promoting joint discussions on existing weaknesses within national responses and ways to jointly address them.

Lay Summary

The Joint External Evaluation (JEE), a monitoring and evaluation tool of the IHR (2005), is a voluntary, collaborative multisectoral process that evaluates a country’s capacity to prevent, detect and rapidly respond to public health risks occurring naturally or due to deliberate or accidental events. More than 100 countries have gone through JEEs since 2016, with some countries now preparing for a second round of JEEs. It is now evident that undertaking these evaluations brings the additional benefit of initiating multisectoral dialogue and collaborative practice needed to engage in One Health and whole-of-government strategies for preparing for and preventing infectious disease outbreak and zoonoses. Such strategies are crucial for preparing for and preventing infectious disease outbreak and zoonoses.