



Implementation of the ECDC – ENPI project

Achievements and lessons learnt

Background

As part of its renewed engagement to work towards a stronger partnership with its neighbours, the EU decided in 2012 to further enhance its support for the participation of European Neighbourhood Policy (ENP) partner countries¹ in EU programmes and agencies. In this context, an EU Grant (so-called ECDC-ENPI Project) under the European Neighbourhood Partnership Instrument (ENPI) was allocated to the European Centre for Disease Prevention and Control (ECDC) in 2013 to support the progressive participation of these countries in ECDC activities.

ECDC – ENPI Project	
Timeframe	Feb. 2014 to Dec. 2016
Budget	478,361.15 EUR
Funding	ENPI and ECDC
Coordinator	ECDC
Target audience	Public health authorities in ENP partner countries
Main objective	Progressive integration of ENP partner countries into ECDC activities

Scope and objectives

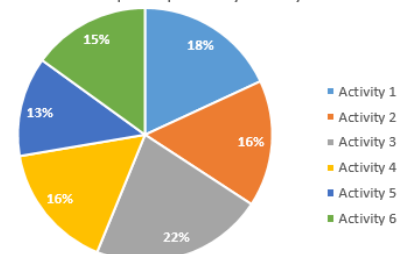
The objectives of this project were to:

- **Familiarise** ENP experts with the EU/ECDC standards and practices against communicable diseases;
- Encourage contacts and **exchanges of best practices**;
- **Strengthen capacities** to control communicable diseases in ENP partner countries;
- **Establish networks** of Contact Points in ENP partner countries.

Focusing on preparedness, capacity strengthening, surveillance, and epidemic intelligence, those objectives were to be achieved through six types of activities:

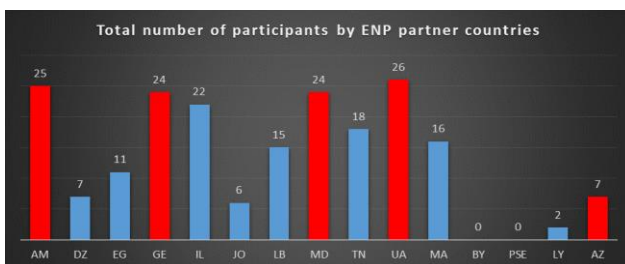
1. Best practice workshops on topics of common interest
2. Participation in ECDC meetings with EU Member States
3. Capacity building and training workshops
4. Establishment of a network of National Correspondents
5. Simulation exercise
6. Integration into ECDC Epidemic Intelligence Information System

Breakdown ENP participation by activity



The target groups were experts at the national authorities responsible for prevention and control of communicable diseases in ENP partner countries.

Achievements



Implemented from 2014 to 2016, the project successfully enabled the **establishment of a mutually beneficial cooperation** between EU and ENP partner countries and the **progressive integration** of those countries into ECDC activities.

In three years, **203 experts** from ENP partner countries were involved in **27 joint activities**

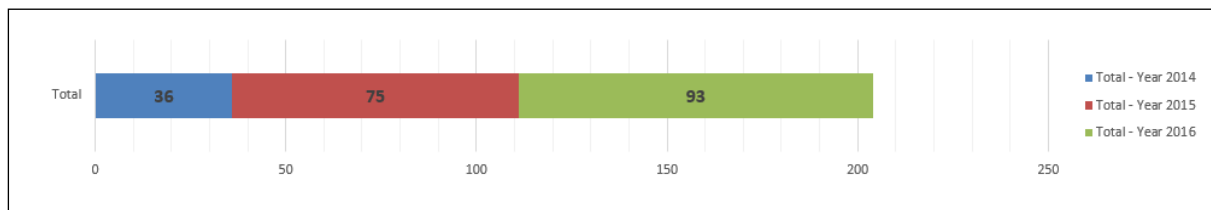
between their respective countries and ECDC. More particularly:

- All 203 experts were **familiarised with ECDC activities, tools, and best practices**;

¹ Algeria, Egypt, Israel, Jordan, Lebanon, Libya, Morocco, Palestine (this designation shall not be construed as recognition of a State of Palestine and is without prejudice to the individual positions of the Member States on this issue.), Tunisia, Armenia, Azerbaijan, Belarus, Georgia, Moldova and Ukraine.

- A **network of National ECDC Correspondents** was established in all 15 participating countries
- **30 additional contact points** on public health issues of common interest were designated;
- 8 ENP partner countries were **integrated into EPIS ELDSNet** the ECDC platform to exchange epidemiological information on Travel-Associated Legionnaires' Disease;
- 7 ENP partner countries were **integrated into EPIS FWD** the ECDC platform to exchange epidemiological information on Food- and Waterborne Diseases;
- **107 experts were trained** through 8 training workshops on epidemic intelligence, rapid risk assessment, preparedness, and outbreak investigation;
- Organisation of the **1st ECDC regional simulation exercise**, and
- **three best practice workshops** were organised on vaccine preventable diseases, vector borne diseases, and preparedness.

This cooperation **continuously deepened and matured** from 2014 to 2016 as demonstrated by the increasing number of ENP experts involved in ECDC activities:

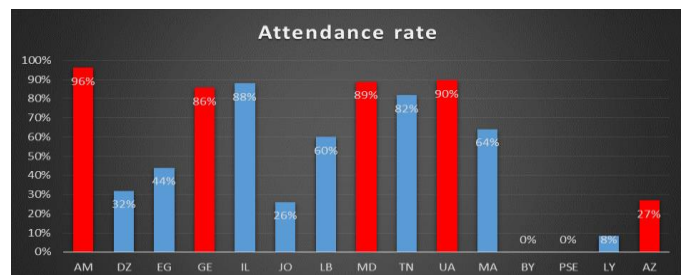


Through capacity building in threat detection and risk assessment, integration into networks and exchange of best practices also our knowledge base on possible cross border health threats grew, and therefore this project resulted in a **mutually beneficial cooperation strengthening health security both in the EU and its neighbours**.

Next steps

Nonetheless, the development of a deep, sustainable and long term cooperation still requires further investment and efforts:

- The **level of involvement from ENP partner countries was uneven** with attendance rate varying from 96% to 0%. This illustrates that countries have various levels of commitment and capacities in participating in this initiative;
- Country **need assessments** conducted throughout the project identified **needs and opportunities for continuation and deepening** of this mutually beneficial relationship in various fields, notably in health security (threat detection, risk assessment, preparedness, bio-security) and other global health threats (e.g. AMR), and
- Like most EU Agencies, ECDC has limited core financial resources for this kind of cooperation, and therefore these activities rely on the **financial assistance provided by the European Union**.



While this project has successfully fulfilled its objectives, follow-up actions with the financial assistance of the European Union are essential to successfully build upon these achievements and deepen the cooperation to ensure a high level of health security in the EU and its neighbours.

ECDC will discuss with the competent EU services and its ENP partner countries on the possibilities and means to continue this partnership.

More information:

- ECDC partnership webpage
- ECDC international relations policy