



**12<sup>th</sup> Annual South-East Asia Red Cross Red Crescent Leadership Meeting 2015**

# Terms of reference: regional health technical working group

TOR: regional health technical working group / **Cambodia** / 25-27 February 2015

## Definition

The Regional Health Technical Working Group (RHTWG) is composed of core members and collaborative members. Health representatives of all 11 national Societies are core members. Representatives of Asian Red Cross Red Crescent HIV/AIDS Network (ART), Voluntary Non-Remunerated Blood Donation (VNRBD) group and Participating National Societies as well as IFRC are the collaborative members of RHTWG. SEARD/CSRU will function as secretariat for the RHTWG.

## Purpose

- To strengthen the advocacy role of South-East Asia National Societies in order to influence policies and developments in the field of health and care.
- To share information, experience, and support among members
- To bring recommendations for Regional Community Safety and Resilience Forum in order to seek the support of leadership on different priority issues
- To facilitate development and harmonization of programme in the region

## Operating guidelines

### Agenda

- The chairperson will contribute in drafting agenda in consultation with SEARD. It will be sent to members for inputs or comments.
- The agenda will be endorsed and revised as necessary before it is adopted on the first day of the meeting.
- Minutes of previous meeting will be shared prior the start of the meeting to be concurred by the attending members.

## Attendance

- The National Society appoints Head/Director of Health Department/Division.

- Representative from ART and VNRBD network<sup>1</sup>.
- Partner National Societies and International Federation

### **Duration**

- The meeting is a three day event that follows with the schedule of the Regional Community Safety and Resilience Forum. One day will be dedicated for the RHTWG meeting while the remaining days will be for joint sessions with the forum.
- In special circumstances or requested by member of RHTWG, the technical meeting can be extended to one more day.

### **Frequency**

- The meeting shall be convened annually in accordance with the Regional Community Safety and Resilience Forum schedule

### **Working language**

- The working language of the RHTWG meeting will be English.

### **Budget and Funding**

The funding for the cooperation related activities comes in principle from two sources; in part from the budgets of the Federation's annual country/regional appeals, and in part from the budgets of the individual National Societies of the region. It is intended that the share coming from the National Societies will gradually increase over time.

### **Tasks and Responsibilities**

#### **RHTWG Chairperson**

- Will be elected among and by the RHTWG members.
- Serves for a period of minimum two years with up to two terms on consecutive basis
- Chairs the annual RHTWG Meeting
- Coordinates the overall activities of the group and represent it at regional and other events that would be of benefit to all RHTWG members. This can be delegated to other members who have further expertise and capacities based on priority area.
- Reports back to the Chair of the Regional Community Safety and Resilience Forum.
- Represents the group when invited as an observer to a meeting of the Health Advisory Body in Geneva (*subject to availability of funding and acceptance of the Health Commission*).
- Reports back to member National Society Representatives after attendance to representation meetings.

#### **RHTWG Vice Chairperson**

- The vice Chair represents and performs the functions of the Chair when delegated upon or in the absence of the latter.

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<sup>1</sup> Representative must be from Southeast Asia National Societies

### **RHTWG members**

- RHTWG members are nominated by SEA National Societies.
- Members of RHTWG need to work in close coordination with its Chair in finalizing the agenda for conducting annual meeting.
- Representative from National Societies need to prepare and present during the meeting, a program summary and lessons learned from health and care activities throughout the year and plan of action for upcoming year.
- Perform other duties requested by the chairperson of RHTWG.

### **RHTWG Main Activity Areas between the Meetings**

#### **Provide support to individual National Societies of the region in health related activities:**

- Provide a platform to consolidate health network or groups so that their effectiveness improves, and existing individual stagnating networks receive a boost.
- Assessment and mapping activities, on the basis of “characteristics of a well-functioning National Society”, for identification of needs, as well as capacities available to meet these needs.
- Training related activities, such as sharing training materials and trainers, as well as provision/facilitation of training courses and management of training programmers.
- Support in development and/or quality improvement of long term planning as well as overall health-related plans, policies and strategies.
- Promotion of peer links between the Health, Disaster Management, Organizational Development, and other relevant Departments of National Societies.

### **Regional Health Technical Working Sub-Groups**

#### **Community Based Health and First Aid and Water and Sanitation**

This sub-group dedicated for all discussion on Community Based Health and First Aid in including program development for Healthy lifestyle promotion (Non Communicable Disease prevention), Maternal, Neonatal, and Child Health, Nutrition Programs, etc. It will also include and Water and Sanitation program discussions on community-based approaches such as Participatory Hygiene and Sanitation Transformation and all other WASH components.

Annual CBHFA and Watsan meetings will be in the Zone/ regional level.

#### **HIV/AIDS**

This sub-group consists of the ART network and its members in SEA and will be represented in RHTWG by its Chair. It will take on discussions and advisory work on HIV/AIDS and bring forward discussions on HIV prevention, treatment, care, and support.

Annual ART Network meeting will take place in any ART member national society.

#### **Emergency Health and Psychosocial Support**

This sub-group is dedicated for discussions and advisory work on matters relating to Health in Disasters and Emergencies including emergency WatSan, Basic Health Care Units, Psychosocial Support, Public Health Emergencies and the development of Pandemic Preparedness Plans and

Contingency plans. It will also bear the advisory function for all Psychosocial Support Programs – in both emergency and development settings - including discussions on caring for beneficiaries, volunteers and staff, and Restoring Family Links.

It shall collaborate all activities relating to resource development and operational activities with Regional Disaster Response Team - Health.

### **Voluntary Non-Remunerated Blood Donation (VNRBD)**

The VNRBD sub-group serves as the advisory group for all matters relating to the issues and development in Voluntary Non-Remunerated Blood Donation. It will lead discussions on Blood donor recruitment and retention programs which include the Club/ Pledge 25. In addition, this group will also see the potential role of Club /Pledge 25 beyond blood services.

### **Health Care Services**

The focus of this sub-group will revolve around clinical health service provision in non-disaster and emergency settings. This includes the subject of First Aid and the Global commitment to Road Safety, Ambulance Services, Home Care and Rehabilitative Services, and Hospital Administration.

This includes advisory work on course developments and implementation of commercial First Aid courses.

### **Reports and Communication**

- Minutes of the meeting will be under the responsibility of the host National Society, with the support of the Secretariat of the meeting (IFRC).
- All relevant documentation will be made available in advance and posted on a specific SEA web page or send via email.

### **Revision of the Terms of Reference**

A review of the Terms of Reference is suggested every year. Amendments to the Terms of Reference must be agreed by majority of member National Societies.