Report of the sixteenth annual meeting of the Global Alliance against Chronic Respiratory Diseases

Virtual meeting
12 December 2023
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Virtual meeting

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## Acronyms and Abbreviations

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<th>Acronym</th>
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<tr>
<td>APSR</td>
<td>Asian Pacific Respiratory Society</td>
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<td>BLF</td>
<td>Bangladesh Lung Foundation</td>
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<td>COPD</td>
<td>Chronic Obstructive Pulmonary Disease</td>
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<td>CRDs</td>
<td>Chronic Respiratory Diseases</td>
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<tr>
<td>FENSA</td>
<td>Framework of Engagement with Non-State Actors</td>
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<td>FIRS</td>
<td>Forum of International Respiratory Societies</td>
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<td>GAAPP</td>
<td>Global Allergy and Airways Patient Platform</td>
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<td>GARD</td>
<td>Global Alliance Against Chronic Respiratory Diseases</td>
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<td>GINA</td>
<td>Global Initiative for Asthma</td>
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<td>GOLD</td>
<td>Global Initiative for Chronic Obstructive Lung Disease</td>
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<td>IPCRG</td>
<td>International Primary Care Respiratory Group</td>
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<td>LMICs</td>
<td>low- and middle-income countries</td>
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<td>NCDs</td>
<td>noncommunicable diseases</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Introduction

Background to GARD

The Global Alliance against Chronic Respiratory Diseases (GARD) is a voluntary alliance of national and international organizations, institutions and agencies committed to the vision of a world where all people breathe freely.

The overarching goal of GARD is to reduce the global burden of chronic respiratory diseases, focusing on low- and middle-income countries (LMICs).

The GARD initiative was set up to respond to a resolution of the World Health Assembly in May 2000 (resolution WHA53.17) that emphasized the need to increase awareness of the growing epidemic of chronic diseases worldwide (1). GARD was officially launched in 2006 in Beijing, with four strategic objectives: 1. Advocacy, 2. Partnership, 3. National plans on prevention and control, and 4. Surveillance (2).

The policies and procedures which govern the way in which the World Health Organization (WHO) can work together with external partners have evolved in recent years. The Framework of Engagement with Non-State Actors (FENSA) was endorsed by the World Health Assembly in 2016 (resolution WHA69.10) (3). The Transformation Agenda was launched in July 2017 and included a new approach to partnerships. In order to work more efficiently, to create synergies, to focus on priority areas aligned with WHO priorities, and to catalyse political will and investment of resources, there have been recent updates to GARD governance structure and the methods of working. Revised GARD terms of reference were approved in September 2022 – these are available on the GARD webpage: https://www.who.int/groups/global-alliance-against-chronic-respiratory-diseases-(gard)/terms-of-reference

GARD has two overarching objectives:

- to undertake advocacy efforts to raise awareness and build support for prevention, diagnosis and management of chronic respiratory diseases (CRDs); and
- to promote networking for knowledge sharing.

Longstanding members were invited to reaffirm their commitment to GARD, in alignment with the revised terms of reference in December 2022.
Opening remarks

Dr Bente Mikkelsen, Director, WHO Department of Noncommunicable Diseases (NCDs), Rehabilitation and Disability, opened the meeting with words of welcome and appreciation to the GARD members and Executive Committee. Dr Mikkelsen highlighted the importance of CRDs within the wider NCD agenda and the need to improve prevention, diagnosis, and treatment of CRDs in order to progress towards global NCD commitments. She recalled the World Health Assembly in May 2023, where Member States endorsed an updated menu of policy options and cost-effective interventions for NCD prevention and management. The menu includes 90 interventions and 22 overarching or enabling actions, a significant expansion of the 2017 compilation. Interventions for the acute and long-term management of asthma and chronic obstructive pulmonary disease (COPD) are listed among the most cost-effective. This is a strong signal to Member States to support the implementation of these interventions, as part of national health benefit packages.

Dr Mikkelsen described the inequities in access to the most basic elements of CRD care that are reported in the 2021 NCD country capacity survey (4). These must be available in primary health care, as part of universal health coverage, to reach the half a billion people that need long-term treatment and monitoring.

A new political declaration on universal health coverage, approved by world leaders at the United Nations General Assembly high-level meeting in September 2023, emphasizes a shift from health systems centred around diseases to systems designed for people. Adopting a comprehensive primary health care approach for NCDs is a key element to building resilient and equitable health systems.

Dr Mikkelsen highlighted several WHO products launched during the past year, to support integrated CRD prevention and control:

- framework for collaborative action on tuberculosis and comorbidities (5);
- package of interventions for rehabilitation, which has a module on COPD (6);
- tobacco knowledge summary on COPD (7);
- online training on “Air pollution and health for health workers” (8); and
- noncommunicable diseases facility-based monitoring guidance, which includes indicators for asthma and COPD (9).

These resources are all available on the GARD community on the WHO Knowledge Action Portal on NCDs, which has been developed during the last few months (10).

Looking ahead to future opportunities, Dr Mikkelsen concluded by highlighting the 2nd global conference on air pollution and health in October 2024, and the 4th United Nations General Assembly high-level meeting on NCDs. GARD members have an important role to play as champions for CRDs across the globe.

Professor Arzu Yorgancioglu (outgoing GARD Chair) opened the meeting by welcoming participants to the GARD Annual Meeting. Commemorating the launch of GARD in early 2000, she provided a brief overview of the goals, vision, governance structure, and the history of past meetings. During her address, she highlighted the most significant achievements of GARD over
two decades, emphasizing the pivotal role of GARD in fostering collaborative partnerships and developing a shared vision within GARD network to effectively address CRDs and related risk factors on a global scale. Professor Yorgancioglu thanked all participants for their contributions to GARD and celebrated the success of previous GARD meetings. She concluded with a call to action, urging collective responses in the fight against CRDs and encouraging all to embrace the opportunities to evolve and adapt to the ever-changing world.
Part 1: GARD updates – membership, governance and communications

Dr Sarah Rylance, Medical Officer, WHO Department of NCDs, Rehabilitation and Disability, provided an update on the progress that has been made during the past year relating to several areas. By updating the way that GARD works, the GARD Secretariat and Executive Committee hope to maximize GARD’s impact to achieve GARD’s vision and goal. The changes include:

- refocusing on priority areas to accelerate progress towards the Sustainable Development Goal targets (11);
- realigning with WHO 13th General Programme of Work (12);
- recruiting and expanding GARD membership; and
- reenergizing to facilitate and strengthen GARD advocacy and networking activities.

Membership

In December 2022, existing GARD members were kindly requested to reaffirm their commitment to GARD and submit applications to review in line with the FENSA requirements. Currently, 34 organizations have been reaffirmed as GARD members, including GARD-Italy and GARD-Türkiye, which are recognized as GARD national alliances embedded within their respective Ministry of Health. The list of these organizations is available on the WHO GARD webpage at https://www.who.int/groups/global-alliance-against-chronic-respiratory-diseases-(gard)/members-of-gard

There are a number of organizations at various stages in the review process. In order to conduct the assessment, it is essential that the organization submits all the required documentation, as detailed in the application, and provides any additional information requested for clarification.

Several previous GARD members have identified themselves as “GARD countries”. GARD countries refer to national alliances that are either represented through a lead organization or fully embedded within the Ministry of Health. Lead organizations in such cases must submit applications to reaffirm their commitment to GARD.

WHO webpage

The GARD webpage on the WHO corporate website is used for formal GARD communications and includes the terms of reference, list of members, and information on how to become a GARD member. It can be accessed at: https://www.who.int/groups/global-alliance-against-chronic-respiratory-diseases-%28gard%29/

WHO Knowledge Action Portal on NCDs

Dr Shamanthi Jayasooriya, Consultant, WHO Department of NCDs, Rehabilitation and Disability, presented a progress report on the development of the GARD community on the WHO Knowledge
Action Portal on NCDs /10/. This on-line platform is open to anyone who is interested in the work of GARD. The GARD community has been developed to facilitate networking and sharing of information and resources. Interested individuals need to create a user account on the Knowledge Action Portal, and then access the GARD community under the “Community” tab.

Dr Jayasooriya highlighted the key areas in the GARD community: events calendar, noticeboard, and resources. Several GARD member organizations have already shared their upcoming events, news and resources on the portal. The community of practice will be developed in response to user feedback and is a work in progress.

Key takeaways

- Organizations that have successfully completed the application and FENSA review process are posted on the WHO GARD webpage.
- GARD members are organizations, not individuals. It is by working as a network of organizations that GARD can be most impactful.
- GARD country activities should be led by a GARD member organization or embedded within the Ministry of Health.
- The GARD community on the WHO Knowledge Action Portal on NCDs is the main platform for sharing events, news, and resources among members.
Part 2: GARD Steering Committee

Dr Jing Han, Technical Officer, WHO Department of NCDs, Rehabilitation and Disability, introduced the new GARD Steering Committee members and invited them to provide a brief introduction to their organization.

In September 2023, all reaffirmed GARD members were invited to apply for the GARD steering committee. A total of 14 applications were received by the closing date. These were reviewed by the WHO GARD Secretariat, considering the following factors: previous connection with GARD, scope of work and alignment with WHO priorities, geographical balance, and representation from LMICs.

Ten organizations were selected for the first steering committee. The list of Steering Committee Members is available on the WHO GARD Steering Committee webpage at: https://www.who.int/groups/global-alliance-against-chronic-respiratory-diseases-(gard)/gard-steering-committee

Several global organizations are included, to maximize the influence of GARD and facilitate outreach to new members: Forum of International Respiratory Societies, Global Allergy and Airways Patient Platform, Global Initiative for Asthma, Global Initiative for Chronic Obstructive Lung Disease, and International Primary Care Respiratory Group.

One regional organization is included to promote engagement of two WHO regional offices (South-East Asia Region and Western Pacific Region), and explore a GARD model for strengthening regional networks: Asian Pacific Society of Respirology.

Members are included from LMICs, in line with WHO and GARD priorities—each is from a different WHO region: Bangladesh (South-East Asia Region), China (Western Pacific Region), Türkiye (European Region), and Syrian Arab Republic (Eastern Mediterranean Region).

The selected organizations have a scope of work covering priority areas for WHO: asthma, COPD, air pollution, tobacco, and primary care.

Although the members are organizations, not individuals, and so representation may change, there is fair gender balance among the current representatives.

Steering Committee member presentations

1. Forum of International Respiratory Societies (FIRS)

Representative: Dr Stephanie Levine

FIRS was established in 2001 and encompasses the world’s leading international professional respiratory societies, presenting a unifying voice to improve lung health. Dr Levine introduced her organization’s vision, mission, and scope of work. FIRS activities currently include a focus
on promoting and advocating for CRDs. The theme of World Lung Day in 2023 was “Access to prevention and treatment for all. Leave no one behind”. Two ongoing projects are the Global Impact of Respiratory Diseases report and expanding access to standardized pulmonary function testing worldwide. She expressed the will of her organization to contribute to GARD through their global network, experts, resources, and communication channels to reach communities and the general public.

2. Global Allergy & Airways Patient Platform (GAAPP)

Representative: Tonya Winders

As the president and Chief Executive Officer of GAAPP, Ms Winders presented the mission and vision of the organization. GAAPP is a global patient platform with 113 patient advocacy member organizations, focusing on four pillars: awareness, education, advocacy and research. GAAPP have conducted a variety of activities to advocate and promote public awareness, including world awareness days, conferences, convening communities and building regional alliances. GAAPP places significant effort into education concerning type 2 inflammatory diseases, oral corticosteroid stewardship, personalized management plans and addressing vaccination hesitancy in CRD communities. GAAPP partners in advocacy campaigns, such as “Speak up for COPD”. GAAPP has over 70 peer-reviewed publications and is working on validated tools for asthma and COPD (CAAT: chronic airways assessment test) to help advance rapid, accurate and timely diagnosis and treatment.

3. Global Initiative for Asthma (GINA)

Representative: Professor Arzu Yorgancioglu

Professor Yorgancioglu (Chair, GINA Board of Directors) provided an overview of GINA, celebrating 30 years since its establishment. She highlighted two priorities, “Asthma Care for All” and planetary health, that are well aligned with the priorities of GARD. The theme for World Asthma Day in 2023 was “Asthma Care for All”. GINA calls on international respiratory communities to work together with colleagues, patients and health care providers to promote the development and implementation of effective asthma management programs in all countries. Their planetary health initiative aims to increase and strengthen links with local and national guideline makers, to consider environmental sustainability with a high priority on patient safety.

4. Global Initiative for Chronic Obstructive Lung Disease (GOLD)

Representative: Professor David Halpin

Professor David Halpin (GOLD Board of Directors and Science Committee) introduced the work of GOLD, a global organization working to raise awareness of COPD and improve prevention and treatment through collaboration with health care professionals, public health
agencies and patients. The GOLD Report is part of the important work, updated annually, providing recommendations covering a wide range of areas in COPD. GOLD disseminates these latest evidence-based updates through its annual global conference. GOLD plans to work with GARD to develop recommendations for countries where first choice medication and diagnostics are not available. Professor Halpin also introduced a collaborative project with the Pan African Thoracic Society, which aims to improve population literacy on COPD in sub-Saharan Africa.

5. **International Primary Care Respiratory Group (IPCRG)**

Representative: Siân Williams

IPCRG is an umbrella organization for primary care with an interest in respiratory health. Currently IPCRG has 38 members – national primary care organizations, working locally and collaborating globally. IPCRG is dedicated to research and education with a well-developed research strategy and a wide range of educational brands and products, including free accredited e-learning for primary care. IPCRG also hosts an annual international conference – this will next take place in Athens, Greece, in May 2024. Ms Williams (Chief Executive Officer) detailed potential opportunities for collaboration between the IPCRG and GARD to promote respiratory primary care across the world, focusing on membership, education and research.

6. **Asian Pacific Society of Respirology (APSR)**

Representative: Dr Chul-Gyu Yoo

Dr Chul-Gyu Yoo (President, APSR), provided a brief introduction of APSR. APSR consists of 13 societies with over 19000 members from the Asian Pacific region. The governance of APSR is composed of 16 assemblies and 4 sections. APSR aims to promote and coordinate activities, foster research, organize meetings, and produce scientific publications in respiratory medicine. Dr Chul-Gyu Yoo introduced the highlighted activities and ongoing projects such as the Annual APSR Congress (next in Hong Kong, China, in November 2024) and collaborative educational activities within and outside the organization. APSR is committed to actively collaborate with GARD in activities and projects, and potentially create a dedicated department to work closely with GARD.

7. **Bangladesh Lung Foundation (BLF)**

Representative: Dr Kazi Saifuddin Bennoor

BLF is an umbrella organization, launched in 2007, to promote lung health in Bangladesh and the neighboring regions. Major activities of BLF comprise a biannual international conference, continued professional development, response to emergency situations, observation of special days related to pulmonology, philanthropic social activities, partnership with other organizations, interactive training on procedures and practice in pulmonology, and advocacy
activities. Dr Bennoor (Joint Secretary, BLF) introduced the plan for collaboration with GARD, including strengthening capacity of health care professionals and advocacy and promotion of CRDs. BLF strongly advocates for a pollution-free environment and cessation of tobacco usage by arranging meetings, symposiums, and media events. BLF is interested to develop a project group that can advocate on avoidance of biomass fuel and expedite access to improved stoves and cleaner fuels to reduce indoor air pollution.

8. Center of research and training on chronic respiratory diseases and comorbidities, Tishreen University, Syrian Arab Republic

Representative: Professor Yousser Mohammad

The centre plays a pivotal role in leading and coordinating multisectoral work on CRDs. This involves collaboration between primary care centers and hospitals across the whole country, working closely with Ministry of Health and enhancing regional collaboration through the WHO Eastern Mediterranean Regional Office. The centre’s work focuses on translating clinical research into practice in primary care and hospital settings, implementing facility-based monitoring guidance for NCDs and publishing a national practical guide for CRD in primary care. They are actively engaged in a program addressing asthma in schools with the Global Asthma Network, developing educational materials for patients, and evaluating the effects of the earthquake in February 2023. Professor Mohammad (Director of the Centre) expressed the centre’s interest to develop collaborative work with GARD based on their current activities and resources. There is interest to develop a curriculum for CRDs in less-resourced countries.

9. Chinese Academy of Medical Sciences and Peking Union Medical College

Representative: Professor Chen Wang

Professor Chen Wang (President, Chinese Academy of Medical Sciences and Peking Union Medical College) introduced his organization, which comprises 19 institutes, 6 hospitals, and 9 schools. As director of the WHO collaborating centre for tobacco cessation and respiratory diseases prevention, he provided a brief overview of the work in this area. This includes integrating brief tobacco interventions into primary care programs and strengthening the tobacco control component of respiratory diseases prevention and management in China to support the work of WHO. Professor Chen Wang suggested potential areas for collaboration with GARD including developing appropriate tools at primary care institutes for CRD screening and evaluation, establishing CRD comorbidity cohort and initiating pilot study project of CRD care guided by population medicine.

10. GARD-Türkiye

Representative: Professor Bilun Gemicioglu
Professor Gemicioglu (Country Coordinator) introduced the history, foundation, and governance structure of GARD Türkiye. It is a major national programme with 63 collaborating parties under the leadership of the Ministry of Health and the Turkish Thoracic Society. GARD-Türkiye has established five working groups under the management of an executive committee. The organization has successfully completed a surveillance study, evaluated asthma and COPD awareness among the public and physicians, and conducted asthma and COPD awareness and education campaigns. Professor Gemicioglu also introduced several ongoing projects and expressed interest in the implementation of programmes to audit air pollution and tobacco control measures, reduce overuse of short-acting beta agonists in asthma patients, and consider ways to minimize the environmental impact of inhalers. GARD-Türkiye is enthusiastic to share awareness and educational materials, after translation, with other low-income countries.

**Key takeaways**

- The new Steering Committee members have been appointed for a 2-year term.
- Selection was made considering: previous connection with GARD, scope of work and alignment with WHO priorities, geographical balance, representation from LMICs.
- The breadth of experience and geographical representation among Steering Committee members will provide great opportunities for wide-reaching collaborative work.
Part 3: Connection and collaboration – future opportunities

The GARD Secretariat is keen to facilitate connection between GARD members and relevant teams within WHO for mutual benefit. Enhancing collaboration between GARD members is also important to increase the profile of CRDs within the global health agenda.

Opportunities for collaboration with departments at WHO headquarters

The GARD Secretariat is actively exploring collaboration opportunities with relevant WHO departments. Some GARD members are already engaged in collaboration, through specific projects. Upcoming opportunities include:

- stakeholder consultation including those who have contributed to the implementation of the WHO practical approach to lung health, and other individuals working in lung health and integrated approaches at the primary health care level (with Global Tuberculosis Programme);
- second global conference on air pollution and health, Accra, Ghana - October 2024 (with Department of Environment, Climate Change and Health); and
- development and dissemination of Tobacco Knowledge Summaries for asthma and COPD (with Tobacco Free Initiative).

Opportunities for collaboration within GARD

During the final session GARD members explored potential collaborative activities and suggestions for the GARD workplan for 2024-25. The discussion focused on two main topics: potential project groups, and activities for CRD promotion and advocacy. Project groups could include national activities or international collaborative projects. GARD members were challenged to think of ways that the GARD network can be maximized, for greater global impact.

Professor David Halpin (GOLD) suggested providing a summary of the potential collaborative activities to all GARD Members. Regarding the Practical Approach to Lung Health, he highlighted the importance of considering differential diagnoses for breathlessness or cough and the need to work together with the tuberculosis team to improve timely and accurate diagnosis of CRDs.

Dr Samantha Pegoraro, Technical Officer, WHO Department of Environment, Climate Change and Health, briefly presented WHO training materials for air pollution including the Air Pollution and Health Training Toolkit, online courses, clinical case scenarios, and supporting materials (10). She also highlighted the upcoming 2nd global conference on air pollution and health in October 2024 as an excellent opportunity for collaboration between the WHO air pollution unit and GARD.

Professor Yuanlin Song (Zhongshan Hospital, Fudan University, China) emphasized the challenges of comorbidities (for example COPD and cardiovascular disease) in China’s ageing population. He suggested focusing on integrating CRDs into other NCDs and educating health professionals in the management of CRDs to reduce mortality in NCD patients. He also recommended strategic and geographic collaborations within GARD, such as linking countries with regional organizations for collaborative projects (e.g. Chinese organizations and institutions and APSR).

Dr Giovanni Viegi (GARD-Italy) and Luis Taborda-Barata (GARD-Portugal) provided a progress report from the GARD working group on lung health and the environment, including activities
since 2021. The first objective was to enhance peer analysis, review and discussion of environmental issues that affect CRDs, and increase awareness among health professionals. The group has published several articles in Pulmonology, and these resources are available in the GARD community on the WHO Knowledge Action Portal on NCDs (10). The group is also interested to consolidate teaching and training on the impact of environmental issues upon CRDs, and raise community awareness regarding this issue. To gather data on existing information made available to patients and the community, they will launch a questionnaire to send out to all GARD members, focusing particularly at country level, to organize simple educational materials that maybe applicable worldwide.

Tonya Winders (GAAPP) described a pilot project to explore CRD diagnosis among those with chronic respiratory symptoms who have screened negative for lung cancer, emphasizing the need to work across siloed disease areas. This point was echoed by Siân Williams (IPCRG), emphasizing the crucial role of the family physician when considering chronic conditions and comorbidities.

### Key takeaways

- GARD is committed to fostering collaboration between its members and relevant WHO departments.
- GARD members are committed to collectively addressing key risk factors, diagnosis, treatment, and management of CRDs at national, regional and global levels.
- GARD members emphasized the importance of avoiding a siloed approach to CRDs, to improve timely diagnosis and appropriate treatment, and facilitate the effective management of comorbidities.

### Closing comments

Dr Sarah Rylance concluded by expressing gratitude to all speakers and participants for their valuable contributions. GARD is now in a strong position to move forwards in 2024 with a new Steering Committee, to develop a workplan for 2024-25, and to grow the network for greater impact.

This document reports on the GARD Annual Meeting in 2023 and is the product of virtual deliberations. It represents the opinions of members of the GARD and is a work in progress. It does not represent the position or opinions of WHO or its Member States, nor the official position of any WHO staff members.
References


Annex 1: Agenda for GARD annual meeting

Annual meeting of the Global Alliance against Chronic Respiratory Diseases (GARD)

Virtual Meeting,
12 December 2023, 13:00-16:00 CET

Agenda

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<th>TIME (CET)</th>
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<th>CONTRIBUTORS</th>
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<td>1300-1315</td>
<td>Opening</td>
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|            | Housekeeping, objectives, agenda | Dr Sarah Rylance, WHO  
|            | Welcome remarks | Dr Bente Mikkelsen, WHO  
|            |                     | Professor Arzu Yorgancioglu, outgoing GARD Chair |
| 1315-1345  | Part 1: GARD governance and communications |              |
|            | GARD updates  
|            | GARD Knowledge Action Portal | Dr Sarah Rylance, WHO  
|            |                     | Dr Shamantii Jayasooriya, WHO |
| 1345-1445  | Part 2: GARD Steering Committee |              |
|            | GARD steering committee presentations  
|            | Q&A session | Organization representative (5 mins per person)  
|            |                     | Facilitator: Dr Jing Han, WHO |
| 1445-1450  | Comfort break |              |
| 1450-1550  | Part 3: Connection and collaboration – future opportunities |              |
|            | Free discussion | Facilitator: Dr Jing Han, WHO |
| 1550-1600  | Close | Dr Sarah Rylance, WHO |


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<th>Organization</th>
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<td>American Thoracic Society</td>
<td>Cristina Braz</td>
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<td>Asian Pacific Society of Respirology</td>
<td>Chul-Gyu Yoo</td>
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<td>Asthma and Respiratory Foundation New Zealand</td>
<td>Letitia Harding</td>
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<td>Austrian Lung Union</td>
<td>Gundula Koblmiller</td>
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<td>Brazilian Association of Allergy and Immunology</td>
<td>Marilyn Urrutia Pereira</td>
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<td>Bangladesh Lung Foundation</td>
<td>Kazi S Bennoor</td>
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<td>Center for Research on Chronic Respiratory Diseases and Comorbidities Tishreen University, Syrian Arab Republic</td>
<td>Yousser Mohammad</td>
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<td>Chinese Academy of Medical Sciences, Peking Union Medical College</td>
<td>Chen Wang</td>
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<td>Epidemiological Laboratory for Research and Development, Sudan</td>
<td>Rana Ahmed</td>
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<td>European Forum for Research and Education in Allergy and Airway Diseases (EUFORIA)</td>
<td>Glenis Scadding</td>
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<td>Finnish Lung Health Association</td>
<td>Tuula Vasankari</td>
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<td>Forum For International Respiratory Societies</td>
<td>Stephanie Levine</td>
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<td>Global Allergy &amp; Airways Patient Platform</td>
<td>Tonya Winders</td>
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<td>GARD-Italy</td>
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<td>Global Initiative for Asthma</td>
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<td>David Halpin</td>
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<td>KDG</td>
<td>Katie Langlefeld</td>
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<td>Georgian Respiratory Association</td>
<td>Nino Maglakelidze</td>
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<td>International Coalition of Respiratory Nurses</td>
<td>Karen Marshall</td>
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<td>Institute of Hygiene and Tropical Medicine, University NOVA Lisboa, Portugal</td>
<td>Claudia Conceicaco</td>
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<td>International Primary Care Respiratory Group</td>
<td>Siân Williams</td>
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<td>Mozambique NCDI Poverty Commission</td>
<td>Ivanilson Abilio</td>
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<td>Pan African Thoracic Society</td>
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<td>ProAR Foundation, Brazil</td>
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<td>Zhongshan Hospital, Fudan University, China</td>
<td>Yuanlin Song</td>
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<td><strong>WHO staff (headquarters)</strong></td>
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<tr>
<td>Director, Department of Noncommunicable Diseases, Disability and Rehabilitation</td>
<td>Bente Mikkelsen</td>
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<tr>
<td>Medical Officer, Department of Noncommunicable Diseases, Disability and Rehabilitation</td>
<td>Sarah Rylance</td>
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<td>Technical Officer, Department of Noncommunicable Diseases, Disability and Rehabilitation</td>
<td>Jing Han</td>
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