

TERMS OF REFERENCE
FOR THE
THE INDO-PACIFIC HEALTH SECURITY ALLIANCE
(IPhsa TORs)

INTRODUCTION

1. The Indo-Pacific health security alliance (IPhsa) is a forum to collaborate and share information on matters relating to global health security between the Australian Defence Force (ADF), as represented by Joint Health Command and the United States Indo-Pacific Command (US INDOPACOM) as represented by Office of the Command Surgeon (J07), hereinafter referred to as the Participants.
2. Additional national defence organisations may join the IPhsa in future, as mutually determined by the Participants. Appendix A provides observers membership status in the event of additional national defence organisations express interest in joining the IPhsa.

PURPOSE

3. This document provides the TORs for the IPhsa.

PRINCIPLES

4. The IPhsa is intended to provide opportunities for multi-lateral, multi-sectoral collaboration between Participants to strengthen health security preparedness in the diverse Indo-Pacific region. The Participants will be guided by the following principles in the development and undertaking of cooperative discussions and activities:
 - a. Participation in the IPhsa does not bind any nation to undertaking any activity or commitment of resources;
 - b. Planning and undertaking of collaborative activities is conducted in an environment of trust and transparency; and
 - c. IPhsa activities will enhance information sharing amongst collaborating like-minded partners to support coordination and synchronisation of Participants' needs and capacities

COMPOSITION AND MANAGEMENT

5. The IPhsa is a cooperative, non-committal construct that consists of representatives of the Participants. Each Participant's national representative(s) and contact details are listed at Appendix A.

6. The IPhsa will mutually select a Chair. The position of the Chair may rotate as mutually determined by the Participants.
7. The Participants will develop and maintain a forward work plan, to be reviewed at each annual in-person meeting or as otherwise mutually determined. The forward work plan will be used to define the goals, planned activities, meetings schedule and other relevant events in support of the IPhsa objectives.
8. The Participants intend to work towards the formulation of a detailed Memorandum of Understanding to provide a robust framework for IPhsa cooperative activities.

OBJECTIVES

9. The objectives of the IPhsa are to foster collaboration on the development of global health security-related capabilities in the Indo-Pacific region, as follows:
 - a. Explore avenues for supporting and coordinating the military and security sector collaboration on health security within countries, as well as with established regional and global health security structures;
 - b. Utilise the IPhsa to provide a sustainable framework of engagement to foster cooperation on regional health security objectives;
 - c. Build regional capacity to respond to health and security threats and climate induced impacts through cooperative or collaborative activities, subject to separate arrangements;
 - d. Cultivate partnerships and collaborative activities between Participants;
 - e. Exchange information to develop and share best-practice for preparing for and responding to health security threats;
 - f. Engage multi-sectoral partners in whole-of-society capacity building efforts, specifically addressing the distinct challenges and opportunities in the Indo-Pacific region;
 - g. Encourage the development of interpersonal connections, mutual understanding, and medical interoperability among Participants; and
 - h. Advocate for increased membership in the IPhsa to enhance extensive regional collaboration on health security.

MEETINGS

10. Each calendar year, the Participants will make best efforts to conduct one in-person meeting of the IPhsa along with one virtual meeting.

- a. The host and location of in-person events will be mutually determined between the Participants before each meeting.
- b. To the extent practicable, and as mutually determined between the Participants, in-person meetings will be scheduled to coincide with larger multilateral health security-focused meetings to allow for greater cross-sectoral representation, and integration of the IPhsa into existing health security initiatives in the region.
- c. The Chair of the IPhsa will prepare a summary record of each meeting and coordinate it with each Participant's national representative.
- d. To the extent practicable, each Participant will make best efforts to have representation from both their national military or security sector and their national civilian health or disaster preparedness sector at IPhsa meetings.

INFORMATION SHARING

- 11. No classified information will be generated, provided or exchanged within or in connection with the IPhsa.
- 12. Each Participant will ensure that any information provided in accordance with these TORs is used only for the purposes for which it has been provided, unless prior written permission is obtained from the originating Participant.

MEMBERSHIP STATUS

- 13. IPhsa is comprised of two types of affiliation: Members and Observers
 - a. Members: members of alliance are actively engaged in, participate in, and contribute to the mission of the IPhsa and its objectives. To gain membership, a country will sign the IPhsa TOR, identify their country Chair and national representative.
 - b. Observers: Additional representatives from other countries or organizations may be invited to serve as Observers. Observers are invited to participate in meetings, share in discussions, and otherwise contribute to related issues. In addition to interested nations, observers may include interagency organizations from their participating countries.
- 14. A formal announcement of new full-time members is to be made publically in the next in person event and presented with a "Certificate of Admittance" signed by all active country Chairs.
- 15. Voting by members are to determine all major alliance decisions. Examples include, but are not limited to, accepting members into the alliance, modifying IPhsa objectives and country suspension.

- a. For all votes, each member country is allowed (1) one ballot, casted by the senior military member in attendance. A two-thirds (2/3) majority vote is to be used to approve the motion for implementation.

16. Membership information is to be updated and distributed annually. Appendix A list each Participant's membership status and identifies national representative(s).

COSTS

17. Each Participant will be responsible for covering the full cost it incurs in creating, making, managing, and administering any information exchange or other cooperative activity undertaken under these TORs for the purposes of the IPhsa, unless otherwise mutually determined in writing.
18. In the event a Participant hosts an IPhsa meeting, that Participant will bear the costs of hosting the event. The financing of co-hosted meetings will be mutually determined in writing by the co-hosts during the planning process. Each Participant will bear their own costs for attendance at IPhsa meetings, unless otherwise mutually determined in writing.

LEGAL

19. These TORs is not intended to establish any legally binding commitments or obligations for the Participants nor create any rights, duties, or responsibilities enforceable against any person or entity.
20. Any dispute arising between the Participants in connection with these TORs will be resolved solely by consultation and negotiation between the Participants, and will not be referred to any national or international court or tribunal, or to any other person or entity for settlement.
21. All activities and information sharing conducted under these TORs will be conducted in accordance with the Participants' respective national laws, regulations, and policies, and will be subject to the availability of funds.
22. This TORs signifies the intention of the Participants to collaborate on matters concerning global health security. Any specific cooperative activity will be conducted under a separate instrument between the contributing Participants.

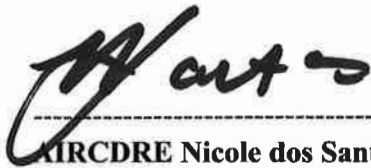
ENTRY INTO EFFECT, WITHDRAWAL AND TERMINATION

23. These TORs will come into effect on the date of the second signature below. For new Participants, these TORs will have effect for that Participant from the date of signature of that Participant's Surgeon General or equivalent.
24. These TORs will remain in effect until the Participants mutually decide to disband the IPhsa. These TORs may be amended at any time by the mutual written determination of the Participants. A Participant may withdraw from the IPhsa by eight weeks written notice to the other Participants.

REVIEW

25. The Participants will review these TORs as necessary, but no less than annually from the date of entry into effect, to determine if mutual objectives are being met.

For Joint Health Command,
Australian Defence Force



AIRCDRE Nicole dos Santos
Director General Operational Health and
Air Force Health Services,
Australia Defence Force

Date: May 8, 2025

For the Office of the Command Surgeon
Surgeon, U.S. Indo-Pacific Command



CAPT Peter Roberts
Command Surgeon
U.S. Indo-Pacific Command

Date: May 8, 2025

**INDO-PACIFIC HEALTH SECURITY ALLIANCE
(IPhsa)**

UNITED STATES OF AMERICA, INDOPACOM

In signing this document, the United States INDOPACOM will endeavor to support and uphold the Terms of Reference of the Indo-Pacific health security alliance, dated June 2024.

Participated in 2019, 2022, 2023 & 2024 events.

National Representative(s) for the Office of the Command Surgeon, U.S. Indo-Pacific Command:

1. Chair

Name: CAPT Peter Roberts

Position: Command Surgeon, INDOPACOM

2. Action Officer

Name: CAPT Elizabeth Garza

Position: IPhsa Lead and CDC LNO to INDOPACOM

Contact details: elizabeth.p.garza.mil@us.navy.mil

Indo-PacificHealthSecurityAllianceIPhsa@us.navy.mil

CAPT Peter Roberts 8 May 2025

Name of Representative



Signature/Date

**INDO-PACIFIC HEALTH SECURITY ALLIANCE
(IPhsa)**

AUSTRALIA, AUSTRALIAN DEFENCE FORCE

In signing this document, the Australian Defence Force will endeavor to support and uphold the Terms of Reference of the Indo-Pacific health security alliance, dated June 2024.

Participated in 2019, 2022, 2023 & 2024 events.

National Representative(s) for the Joint Health Command, Australian Defence Force:

1. Chair

Name: RADM Sonya Bennett

Position: Surgeon General Australian Defence Force, Commander Joint Health

2. Chair

Name: AIRCDRE Nicole dos Santos

Position: Director General Operational Health and Air Force Health Services

3. Action Officer

Name: LTCOL Alyson Auliff

Position: Staff Officer Grade One Force (Health) Option and Integration

Contact details: Alyson.auliff@defence.gov.au

AIRCDRE Nicole dos Santos 8 May, 2025

Name of Representative



Signature/Date

**INDO-PACIFIC HEALTH SECURITY ALLIANCE
(IPhsa)**

PAPUA NEW GUINEA, PAPUA NEW GUINEA DEFENSE FORCE

In signing this document, the PNG Defence Force Surgeon General will endeavor to support and up hold the Terms of Reference of the Indo-Pacific health security alliance, dated 8 May 2025.

Participated in 2019, 2022, 2023, & 2024 events.

National Representative(s) for the Office of the Surgeon General, Papua New Guinea Defence Force:

1. Chair

Name: Lt Col (Dr.) Peter Kaminiel

Position: Director Health Services, Papua New Guinea Defence Forces

2. Action Officer

Name: MAJ William Biau

Position: Medical Planner, PNGDF

Contact details: williebiau34@gmail.com

LTCOL PETER KAMINIEL

Name of Representative



Signature/Date