Using the 7-1-7 Target as Part of Global Health Security Funding Mechanisms

Timeliness is increasingly recognized as an important factor in measuring system performance for detection and early response to infectious disease outbreaks.
The 7-1-7 target uses three timeliness metrics to assess and improve those systems.
In the past year, 7-1-7 was adopted by large donors and funding mechanisms, including:

- **Pandemic Fund**

- **Global Fund Covid-19 Response Mechanism**

- **World Bank Multiphase Programmatic Approach**

- **United States Government Global Health Security Strategy**

This technical brief is aimed at current awardees and prospective applicants of these funding opportunities. It provides actionable guidance on incorporating the 7-1-7 target into proposals, recommendations on situating 7-1-7 within relevant public health systems, cost estimates, and resources to use the 7-1-7 target to assess and improve preparedness and response performance through funding from these large donors.

Adopting and using the **7-1-7 target** routinely in country has three primary benefits:

- **Performance improvement**: Bottlenecks are easily identified, and short and longer-term actions drive rapid, continuous improvement with every outbreak.

- **Advocacy**: Clear data based on simple metrics informs prioritization and shows need for resources and policy interventions.

- **Accountability**: Evaluating performance against simple metrics simplifies monitoring and improves transparency in reporting, making it easier to demonstrate the impact of interventions.

The 7-1-7 target is best applied as part of everyday workflows. It is a low-cost intervention but does require some "startup" funds to support the introduction and socialization of the approach and ongoing coordination to effectively use the results to inform planning and implementation. The following section provides a detailed overview of those costs. Beyond initial startup costs, the main costs are sustainability costs and ensuring prioritized actions are linked to funding mechanisms.

Integrating the 7-1-7 Target for Effective Implementation

When applying to one of the funding mechanisms mentioned above, countries and implementing entities should consider the actions and funding required to **adopt and integrate 7-1-7** into workflows for effective implementation. Recommended steps for 7-1-7 adoption and integration are included below, with initial cost estimates that should be adapted to specific contexts.

1   **Identify a country champion** Select a high-level government official to champion the 7-1-7 target during the early stages of adoption. This champion can be identified during the grant application process or the initial launch of activities. *No cost. Up to two months to identify and ensure buy-in.*

2   **Identify coordination mechanisms** Select a technical team to coordinate 7-1-7 implementation in coordination with the country champion. This should be an existing team with convening power across surveillance and response stakeholders. Coordination mechanisms may vary by country and level of implementation. *Costs may include meetings to identify coordination mechanisms. The timeframe should take place in the first three months of implementation.*

3   **Allocate a dedicated focal point** Though this is not a required step for adoption, based on countries' experience in implementing 7-1-7 so far, it has been important to allocate funding and adequate time for at least one full-time position for a dedicated focal point to support 7-1-7 adoption during the first six months of implementation.

4   **Stakeholder mapping and sensitization** Conduct stakeholder mapping exercises to identify key individuals and organizations involved in public health surveillance and response. Stakeholder identification will also aid in ongoing coordination and collaboration on grant resources. *Allocation of funding for workshop or engagement meetings may be needed at the national level and/or sub-national level.*

5   **Train key stakeholders and technical leads** Provide training for key stakeholders and technical leads to familiarize them with the concepts and methodologies associated with 7-1-7 adoption and use. *Countries should budget for three to four days of training focused on 7-1-7 adoption and use for all key personnel (around 20 hours). Countries may also allocate resources for context-specific training such as those for rapid response teams or field epidemiologists.*

6   **Adopt or modify data reporting and consolidation forms** Modify existing data reporting and consolidation forms to incorporate the specific indicators and metrics of the 7-1-7 target. *This can include simple revisions of reporting forms for rapid response teams but may include high-value activities such as the adaptation of event management systems for data collection and management of outbreaks.*

7   **Pilot 7-1-7 with retrospective analyses or After Action Reviews** Conduct pilot initiatives to test the implementation of the 7-1-7 target within real-world scenarios. *While costs for this should be minimal, countries should allocate adequate time across key stakeholders to ensure the process is aligned to country needs and processes.*

8   **Integrate 7-1-7 processes in workflows** Integrate the 7-1-7 target processes into existing public health surveillance and response frameworks, systems, platforms, and structures. *Examples of workflows include data collection, data verification and consolidation, stakeholder meetings,*

progress tracking, integration into complimentary assessment tools, and national planning, funding, and advocacy.

9 **Incorporate 7-1-7 into annual plans** Host a collaborative meeting at least every six months to review 7-1-7 assessment results, identified bottlenecks and corrective actions. Build flexibility into national budgets and grant funding applications to routinely address prioritized bottlenecks and implement short- to medium-term actions. *Countries should budget routine time for multi-stakeholder review meetings and additional reviews as needed (e.g., early action reviews, after action reviews). Budget flexibility will be critical for responding to identified bottlenecks requiring immediate or short-term solutions. Early evidence from 7-1-7 pilots indicates that many of these short-term solutions can be implemented with minimal costs, but flexibility in allocating funds is essential.*

10 **Build links to National Action Plans for Health Security (NAPHS) and health security systems strengthening planning** Incorporate lessons learned, recommendations and prioritized long-term actions from 7-1-7 reviews into the NAPHS / grant process to support longer-term systems changes, geared toward improved pandemic preparedness and response. Use 7-1-7 data for reporting and advocacy to show impact of investments and support additional resource mobilization.

How the 7–1–7 Alliance can help

The 7-1-7 Alliance is a country-led partnership to accelerate and support the achievement of the 7-1-7 target. It is open to national, regional, and local governments, public health and research institutions, multilateral agencies, civil society organizations, and donors and foundations.

For support on how to include 7-1-7 activities in country planning, or connect with countries that have experience using 7-1-7, contact the 7-1-7 Alliance Secretariat at **contact@717alliance.org**.

For resources on 7-1-7, visit **717alliance.org** or use the quick links below:

7-1-7 Digital Toolkit

Resource Library

Frequently Asked Questions