Annual Declaration of Interest form

European Centre for Disease Prevention and Control

- This form requests details of your personal data and ECDC involvement in part one.
- Part two contains 10 mandatory questions on your interests during the last 5 years.
- Only after you have completed all questions is your Dol considered to be valid.

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[x] External Expert
[] Management Board Member
[] Management Board Alternate
[] Advisory Forum Member
[] Advisory Forum Alternate
[] Director ECDC
[] Member Senior Management ECDC
[] Head of Disease Programme ECDC
[] ECDC Expert

Hereby declares to have or have had in the previous 5 years the following interests¹:

¹ Please complete each table when applicable.

I. Do you have ownership or other investments, including shares?

This is to be interpreted as meaning any financial interests in a company/entity operating in the health
sector, including holding of stocks and shares, equity, bonds, partnership interests in the capital of a
company, one of its subsidiaries or a company in which it has a holding. The holding of financial interests
connected with a pension scheme or an equivalent financial instrument would not be considered a
financial interest, provided that the individual has no influence on its financial management.

[] Yes	If yes, please provide details below.
[x] No	

Starting year	Ending year	Name of the organization	Nature of organization and ownership

II. Are you a member of a Managing Body or equivalent structure?

This is to be interpreted as meaning any participation in the internal decision-making (e.g. board membership, directorship) of a company, trade association or equivalent entity operating in a domain falling within ECDC's remit.

[] Yes	If yes, please provide details below.
[x] No	

Starting year	Ending year	Name of the organization	Nature of organization and involvement

III. Are you a member of a Scientific Advisory Body?

This is to be interpreted as meaning that the person concerned is participating or has participated in the works of a Scientific Advisory Body operating in a domain falling within ECDC's remit with a right to vote on the outputs of that entity (e.g. voting on scientific output adopted by that entity).

[] Yes	If yes, please provide details below.
oN [ĸ]	

Starting year	Ending year	Name of the organization	Nature of organization and involvement

IV. Please fill in employment in the previous five years, including your present employer.

This is to be interpreted as covering all forms of employment, part-time and full-time, either paid or unpaid, in any organisation.

Starting	Ending	Name of the organization	Function
year	year		
Feb 2020-A	ug 2020	Abu Dhabi University	Assistant Professor in Public Health
eb 2012	-Jan2020 Current	United Arab Emirates Univers	ty Medical Research Specialist Assistant Professor

V. Have you offered any consultancy or advice?

This is to be interpreted as an activity in which the concerned person charges or does not charge a fee for providing advice or services in a particular field falling within ECDC's remit. The nature of the activity should only indicate the domain in which the consultancy is/has been active.

[] Yes	If yes, please provide details below.
[x] No	

Starting year	Ending year	Name of the organization	Nature of activity

VI. Have you received any research funding?

This is to be interpreted as meaning any funding for research in relation to a matter or work financed by a private or public entity, including grants, rents, sponsorships and fellowships and received in a personal capacity and falling within ECDC's remit. Please specify the area of research (pathogen, microbiology, epidemiology, biotechnology, vaccination, etc.) and your personal involvement and responsibility if the grant is awarded to your institute.

[x] Yes	If yes, please provide details below.
[] No	

Starting year	Ending year	Name of the organization	Nature of activity	
Jan 2019	Jan 2021	United Arab Emirates Universit	, ,	onogrns
Jan 2020	Jan 2022	United Arab Emirates University	exposure among worker- I am a CoPI Mapping anti bullying interventions in the U	AE- COPI

VII. Do you have any intellectual property rights?

These are to be interpreted as meaning rights granted to creators and owners of works that are the result of human intellectual creativity and that pertain to a domain falling within ECDC's remit. These can be publications or can be in the industrial, scientific, technological and/or artistic domain. They can be in the form of an invention, a manuscript, a suite of software, or a business name (e.g. copyrights, patents, trademarks et cetera)

[] Yes	If yes, please provide details below.
ON [K]	

Starting year	Ending year	Name of the organization	Nature of IP rights

VIII. Do you have any other memberships or affiliations?

This is to be interpreted as any membership or affiliation other than the above that can be perceived as an interest in the field of activity of the ECDC.

[X]	Yes	If ves.	nlease	provide	details	helow.
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[] No

Starting year	Ending year	Name of the organization	Nature of membership/affiliation
2014 Current		Australian Public Health Associa	tion Member

IX. Are there any interests of close family members?

These are to be interpreted as meaning that they include known interests (e.g. ownership of shares or other investments, employment, research funding, etc.) held by family members and relatives belonging to the same household or under the care of the members of the household in a domain falling within ECDC's remit. In order to maintain privacy, their names do not need to be declared. The relationship (e.g. wife) should not be specified.

[] Yes	If yes, please provide details below.
[oN k	

Starting year	Ending year	Name of the organization	Nature of interests

X. Is there any other interest you want to declare?

This is to be interpreted as meaning any activities or interests other than the above that could be perceived as an interest in an activity falling within ECDC's remit and/ or which could be perceived as compromising the ability of the individual to act in an independent manner in the public interest. Such interest can include, for example, participation into activities supported by grants or contracts concluded in the framework of the EU Public Health Programme if not declared above.

[] Yes If yes, please provide details below.						
oN [ĸ]						
Starting year	Ending year	Name of the organization	Nature of interests			
I declare on my honour that, to the best of my knowledge, all direct or indirect interests capable of compromising the objectivity in the context of my responsibilities are listed above. I confirm that I have read and I am aware of the content of the Data Protection Notice. I confirm my understanding that failure to disclose a relevant interest intentionally or negligently shall constitute a breach of trust and result in ECDC taking any necessary action required. Should you need additional space to complete the declaration, please attach extra sheet(s) to the form and sign each one of them. Number of additional sheet(s):						
l ² ,Iffat Elbarazi						
Date:14 Jan 2021						
Place: UAE-AlAin- Signature:						

² Please complete your first name and surname



DATA PROTECTION NOTICE

ECDC shall process any personal data you provide in this Declaration, and any personal data generated by ECDC, such as decisions consequent to, your Declaration, pursuant to **Regulation (EC) No 45/2001** of the European Parliament and of the Council of 18 December 2000 on the protection of individuals with regard to the processing of personal data by the Community institutions and bodies and on the free movement of such data ("the Regulation").

In accordance with Articles 11 and 12 of the Regulation, you are hereby informed of the following:

The data processing operation is performed under the responsibility of the Director of ECDC, who is identified as the Controller, with the purpose of safeguarding the independence of ECDC and its constituent bodies. The legal basis of the processing is Article 19 of Regulation (EC) No 851/2004 of the European Parliament and of the Council of 21 April 2004 as well as the Independence Policy adopted by EDCC.

Data may be disclosed to the Compliance Officer, Chairs of an ad hoc Scientific Panel, the organisers of expert meetings, Corporate Governance Section, the Head of the Human Resources Section, the line manager for staff members, bodies in charge of a monitoring or inspection task in conformity with EU Law, including the European Court of Auditors, the Internal Audit Service, OLAF, the European Ombudsman and the European Data Protection Supervisor, and the Declarations of Interests Review Committee.

For transparency requirements, Annual Declaration of Interests (ADOI) of the Director, members of the MB and AF, external experts, the SMT as well as Heads of Disease Programmes and selected staff members appearing in the organogram on ECDC's website will be published on ECDC's website. When a recruitment procedure is carried out, the vacancy notice shall specify that the selected candidate will be requested to fill an ADOI and that this may be disclosed in accordance with the defined procedure. Specific Declaration of Interests will be disclosed only upon request.

ECDC will not keep Declarations of Interests for any period longer than five years.

You have the right to **access** your personal data at any time and, if needed, have them corrected by addressing a request, in writing, to the Controller. In accordance with Article 18(a) of the Regulation, you have the right to object to web publication of your personal data contained in the Declaration, at any time, on compelling legitimate grounds relating to your particular situation.

You may also contact the ECDC Data Protection Officer (DPO) in case of any difficulties or for any questions relating to the processing of your personal data at the following email address: dpo@ecdc.europa.eu. Without prejudice to any judicial remedy, you may lodge a **complaint** with the European Data Protection Supervisor (edps@europa.eu), if you consider that your data protection rights have been infringed by ECDC.