Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA)

www.CAPSCA.org

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PUBLIC HEALTH AND AVIATION
Plan

• CAPSCA
  – History
  – Achievements
  – Finance
Public health – why worry?

- Diseases are spread by air transport and affect populations in other States
- Passengers and crew can become ill on aircraft from infectious passengers
- Absence of safety critical personnel (during a pandemic) increases flight safety risk
- Public health events severely:
  - Affect aviation and economies relying it
  - Affect aviation efficiency
Prevention of spread of disease

Each contracting State agrees to take effective measures to prevent the spread by means of air navigation of cholera, typhus (epidemic), smallpox, yellow fever, plague, and such other communicable diseases as the contracting States shall from time to time decide to designate, and to that end contracting States will keep in close consultation with the agencies concerned with international regulations relating to sanitary measures applicable to aircraft.

Such consultation shall be without prejudice to the application of any existing international convention on this subject to which the contracting States may be parties.
Challenges

• Aviation is:
  – Focused primarily on prevention of accidents, and
  – Personnel not generally knowledgeable about public health

• Public health is:
  – Focused primarily on non-transport related health issues
  – Personnel not generally knowledgeable about aviation

• And so…..

  Preparedness planning in aviation
  can fall into a gap between both sectors
Some health-related issues
Public Health Events
Affecting aviation since 2003

• **2003**: Severe Acute Respiratory Syndrome (SARS)

• **2009**: Pandemic Influenza A (H1N1) “Swine flu”

• **2011**: Fukushima nuclear accident

• **Ongoing diseases that could affect aviation:**
  – **2005**: Influenza A (H5N1) “Avian flu”
  – **2012**: Middle East Respiratory Syndrome
  – **2013**: Influenza A (H7N9)
Action taken by ICAO

- SARPs/procedures/instructions amended
  - Annex 6 - Operations
  - Annex 9 - Facilitation
  - Annex 11 - Air Traffic Services
    - Procedures for Air Navigation Services-Air Traffic Management
  - Annex 14 - Aerodromes
  - Technical Instructions for the Safe Transport of Dangerous Goods by Air

- May 2013: Questions on public health preparedness planning included in USOAP

- Two Assembly Resolutions: 2004 (A34-12), 2010 (A36-12)

- Council Declaration on H1N1 (2009)
CAPSCA ensures guidelines are harmonized

- WHO global Preparedness
  - Guide to Hygiene and Sanitation in Aviation
  - Case management of Influenza A(H1N1) in air transport
  - IHR 2005

- ICAO Standards & Guidelines for States

- Airports Council International: Airport Guidelines
- International Air Transport Association: Airline Guidelines
CAPSCA Achievements

- CAPSCA regional projects joined by 97 Member States & Territories
- Airport Assistance Visits to individual States/international airports completed in 54 States/Territories
- Training for 20 Technical Advisors, provided for CAPSCA Assistance Visits by States
- The CAPSCA web site (www.capsca.org)
- Expanding CAPSCA’s scope beyond communicable disease (subject to future funding)
COMMUNICATION

COLLABORATION

AFRICA

MIDDLE EAST

PRIVATE

PUBLIC

AMERICAS

ASIA PACIFIC

EUROPE

Bucharest, Romania, November 2013
Economic-Related issues

International Arrivals, Mexico, 2008-2010
Courtesy: Dr Jose Valente Aguilar Zinser, Ministry of Transport, Mexico

Passengers of Hong Kong International Airport, January to August 2003

12 March, WHO Atypical pneumonia alert
2 April WHO travel advisory lifted
23 May Travel advisory lifted

Courtesy: Dr Henry Kong, past Chief Port Health Officer, Hong Kong
Health Related Issues

Pandemic that kills 100,000.....

1% lives saved by action of aviation sector
= 1,000 lives saved

How lives can be saved during a pandemic by action in the aviation sector:

• Traveller screening for disease (in collaboration with public health)
• Identification and management of on-board cases (Annex 9)
• Notification to the public health authority at destination (PANS-ATM)
• Procedures to inform travellers of action to take if they become ill
  • (in collaboration with public health)
• Good preparedness plans should staff be absent (to ensure flight safety) (Annex 11 & 14)
Fukushima nuclear accident
Multi-sector collaboration

Weekly teleconference call: CAPSCA network useful

- ICAO (chair)
- IAEA
- WHO
- IMO
- WMO
- UNWTO
- ILO
- IATA
- ACI

Output

- Three News releases during the initial weeks
- Guidance provided to transport sector

Ad Hoc Working Group on Air and Maritime Transportation established April 2013 within IAEA:
ICAO to provide Secretariat support
CAPSCA Funding: 2006-2012

- Four grants (total $1.3 m) from UN Central Fund for Influenza Action (CFIA)
  - Fund closed December 2012

- In kind support:
  - Part-time loan of *global* technical advisor from CAA Singapore
  - *Regional* technical advisors (for assistance visits) from States and WHO

- Aim - States incorporate public health planning in aviation into routine planning activities
Funding Sources Approached:  
No Success as Yet

- African Civil Aviation Commission
- African Development Bank
- Airports Council International
- AFI Fund
- Asian Development Bank
- German Society for International Cooperation
- US Centers for Disease Control and Prevention
- World Bank

- Typical Response:
  “good project but not sufficiently high priority”
Current Need to Continue

• States are, in general not well prepared for a public health emergency
• CAPSCA Programme is outside the ICAO Regular Programme budget for 2014-16
• Previous primary funding source no longer available
• Global and/or regional donor(s) are needed to continue the efforts
  – Colombia has offered $10k per year for CAPSCA-Americas
• Financial need is:
  – $50k per region per year; which provides for
    • 1 annual regional event per year bringing together aviation and public health
    • 1 global event per year
    • 3-4 assistance visits to individual airports per region per year
  – Total: $250k global total per year
• Without a donor, very limited support can be provided to States
  – Full cost-recovery basis
Improvement of Public Health Preparedness Planning for Aviation

- The Commission reviewed A38-WP/35, presented by the Council, and A38-WP/229, presented by Dominican Republic, and emphasized the **significant benefits to States** and its **support for ICAO to continue the CAPSCA programme** and **encouraged States and international organizations to contribute to CAPSCA financially and/or in kind**. The Commission **recognized ICAO’s collaboration with the World Health Organization** (WHO) and other partners in implementing the programme.
Bottom Line

- CAPSCA saves *lives* and *money*
- CAPSCA is appreciated by States
  - 97 States joined, 54 Assistance visits undertaken
- Public health planning is useful in areas other than communicable disease e.g. Fukushima
- Without CAPSCA, ICAO and the wider aviation sector will:
  - Lose influence in public health matters that impact aviation
  - Fail to achieve/lose expertise in public health preparedness planning
  - Be unable to properly assist States/airports with public health preparedness planning
  - Lack credibility to provide guidance during future public health events
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