



WORKING PAPER

ASSEMBLY — 37TH SESSION

TECHNICAL COMMISSION

Agenda Item 42: Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA)

IMPROVED MANAGEMENT OF COMMUNICABLE DISEASE IN THE AVIATION SECTOR THROUGH MULTI-SECTOR COLLABORATION

(Presented by the Council of ICAO)

EXECUTIVE SUMMARY

The recent outbreaks of Severe Acute Respiratory Syndrome (SARS), avian influenza and, in 2009, the Influenza A (H1N1) pandemic highlighted the need for coordinated action by the global community to help prevent and manage the risk of spread, through air travel, of communicable disease of serious public health concern. Experience of the Secretariat in evaluating public health preparedness plans at international airports in many States has highlighted the need for further action to improve preparedness planning in the aviation sector.

Article 14 of the Convention underpins ICAO's work concerning public health issues. Since the 36th Session of the Assembly, the Secretariat has worked in close cooperation with other international organizations, especially the World Health Organization, to develop guidelines and amend relevant Annex provisions.

The proposed draft resolution, in the Appendix, urges States to support ICAO's efforts and those of its partners in improving preparedness plans in the interest of protection of global health and to help mitigate adverse economic effects.

Action: The Assembly is invited to adopt the Resolution contained in the appendix relating to a public health emergency of international concern.

<i>Strategic Objectives:</i>	This working paper relates to Strategic Objective E: <i>Continuity — Maintain the continuity of aviation operations</i> to assist States to respond quickly and positively to mitigate the effect of natural or human events that may disrupt air navigation and cooperate with other international organizations to prevent the spread of disease by air travellers.
<i>Financial implications:</i>	Resources for the activities referred to in this paper are included in the proposed budget for 2011 to 2013.
<i>References:</i>	A36-WP/22 Doc 4444, <i>Procedures for Air Navigation Services — Air Traffic Management</i> (PANS-ATM) Doc 9902, <i>Assembly Resolutions in Force (as of 28 September 2007)</i> Special Africa-Indian Ocean Regional Air Navigation Meeting (AFI RAN 2008) World Health Organization (WHO) International Health Regulations (2005) ICAO Guidelines for States: http://www.icao.int/icao/en/med/guidelines.htm

1. INTRODUCTION

1.1 ICAO has cooperated with a number of international organizations, first and foremost the World Health Organization (WHO), to improve the preparedness of the aviation sector to the threat from an international public health emergency. Since the 36th Session of the Assembly in 2007, several relevant Standards and Recommended Practices (SARPs) have been introduced to a number of Annexes and, with collaboration from WHO and other stakeholders, guidelines have been posted to the respective websites. Close contact was maintained with Airports Council International (ACI) and International Air Transport Association (IATA) who posted guidelines that are harmonized with information available on ICAO and WHO websites.

2. DISCUSSION

2.1 The SARS outbreak in 2003 and the risk from an avian flu-related pandemic in 2005 resulted in amendments to a number of ICAO Annexes and Procedures for Air Navigation Services. Annex 9 – *Facilitation* was amended in 2007 to include a Standard that requires States to establish a national aviation plan in preparation for an outbreak of a communicable disease posing a public health risk or public health emergency of international concern (paragraph 8.16).

2.2 Annex 9 also requires the pilot-in-command (PIC) of an aircraft carrying a suspected case of communicable disease to report such an event to air traffic control for onward transmission to the public health authority at destination (paragraph 8.15). A process to assist cabin crew identify a suspected case of communicable disease was provided in a Note and the Declaration of Health in the aircraft General Declaration (Appendix 1) was amended to reflect the Note. This guidance provides a simple, harmonized method to identify a case of communicable disease. A public health passenger locator card was added to be used for contact tracing of a potentially exposed traveler (Appendix 13).

2.3 In notifying the public health authority at destination of a public health event, a detailed procedure describing the process to be followed by the PIC, and by the air traffic controller receiving the message from the PIC, was included in *Procedures for Air Navigation Services — Air Traffic Management* (PANS-ATM, Doc 4444) (paragraph 16.6) which became applicable in 2009.

2.4 At the same time, Annex 11 – *Air Traffic Services* was amended so that the effect of public health emergencies on air traffic services should in future be considered in contingency planning (Attachment C, paragraph 4.2 (b)). Annex 14 – *Aerodromes, Volume I — Aerodrome Design and Operations*, was amended in a similar way: public health emergencies should now be included in the aerodrome emergency plan (paragraph 9.1). Annex 6 — *Operation of Aircraft* has been amended regarding the carriage of on-board medical supplies, so they now specifically refer to the management of cases of communicable disease.

2.5 Guidelines concerning implementation of the SARPs and PANS-ATM have been developed in collaboration with WHO, the International Air Transport Association (IATA) and Airports Council International (ACI), and are available on the ICAO public website. WHO also has relevant guidelines on its website (<http://www.who.int/csr/resources/publications/swineflu/en/>) as do IATA and ACI.

2.6 Implementation of the ICAO SARPs, guidelines and relevant aspects of the WHO International Health Regulations (2005) has been facilitated primarily by a series of workshops, seminars and airport evaluations under the Cooperative Arrangement for the Prevention of Spread of Communicable disease through Air travel (CASPCA). A number of evaluations of international airports have been undertaken, some in cooperation with WHO. In addition, CASPCA has provided an opportunity for interaction of experts representing stakeholders at national, regional and international levels, thereby facilitating a global, multi-sector approach to preparedness planning.

2.7 CAPSCA is a joint Air Navigation/Technical Cooperation Bureau project, financed primarily by the United Nations Central Fund for Influenza Action (CFIA), with assistance from States and international organizations. The CFIA is administered by the United Nations Development Programme and the project currently operates in three regions: Asia Pacific, Africa and the Americas. It is planned to shortly commence CAPSCA in the Middle East.

2.8 Whilst international collaboration between UN agencies and other organizations has been effective, it has been a challenge to achieve similar collaboration between stakeholders at a regional and national level. Communication between public health and aviation sectors is essential in order to develop and test plans for managing a public health emergency, yet public health authorities may not consider transport-related issues a high priority. Similarly, whilst regulatory authorities in the aviation sector may regard public health issues of being of importance, their main focus is on safety (referring to prevention of accidents, rather than the health-related safety) security and the environment.

2.9 When the outbreak of Influenza A (H1N1) was announced by WHO in April 2009, it was apparent that many States had not considered how best to manage such an event in the aviation sector. Some States took little action whilst others introduced a variety of measures including cessation of certain flights, implementation of departure and/or arrival screening and quarantine of travellers from particular areas. It is observed that the actions of one State affect the health risks in another, as travellers move between different States. A globally harmonized approach, proportionate to the risk and based on scientific principles, is therefore highly desirable.

2.10 In May 2009, recognizing the critical importance of an emergency response to be commensurate with the level of health risk, the ICAO Council adopted a declaration regarding the health threat from Influenza A (H1N1) reinforcing the WHO recommendation that travel restrictions were not warranted. Fortunately, the generally mild severity of Influenza A (H1N1) meant that the relatively disharmonized response of the aviation sector to the outbreak and later pandemic did not have major adverse effects on the majority of States. With a more severe disease, the effects would likely have been more damaging on both the health and economy of States.

2.11 It is apparent that further work should be undertaken to improve the aviation sector preparedness for a public health emergency of international concern. Aviation is likely to be the main method of propagation of any future pandemic, particularly in the early stages, and the aviation sector needs to ensure appropriate attention. To monitor the implementation of preparedness plans, ICAO intends to include relevant questions concerning public health emergencies along with the proposed introduction of the Continuous Monitoring Approach of the Universal Safety Oversight Audit Programme.

2.12 The CAPSCA project provides a platform for improving and harmonizing preparedness plans for a future public health emergency. The Special Africa-Indian Ocean (AFI) Regional Air Navigation (RAN) Meeting in 2008 recommended that States in the region join the project (Recommendation 6/27 – Pandemic planning in the aviation sector). In regions where it has been introduced, States that have not joined CAPSCA are encouraged to do so as soon as possible.

3. CONCLUSION

3.1 ICAO continues to collaborate with WHO and other stakeholders to develop a set of SARPs and associated guidance material that is harmonized with the WHO International Health Regulations (2005). A challenge remains regarding implementation of such provisions and guidance.

3.2 The CAPSCA project provides an opportunity for States, international organizations and stakeholders to collaborate in order to develop and test preparedness plans. States are encouraged to join.

APPENDIX

DRAFT RESOLUTION FOR ADOPTION BY THE 37TH SESSION OF THE ASSEMBLY

Resolution 42/1: Prevention of spread of communicable disease through air travel

Whereas Article 14 of the Convention on International Civil Aviation states that ‘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’;

Whereas Article 14(1) of the World Health Organization International Health Regulations (2005) states that ‘WHO shall cooperate and coordinate its activities, as appropriate, with other competent intergovernmental organizations or international bodies in the implementation of these Regulations, including through the conclusion of agreements and other similar arrangements’;

Whereas ICAO Resolution A35-12 states that ‘the protection of the health of passengers and crews on international flights is an integral element of safe air travel and that conditions should be in place to ensure its preservation in a timely and cost-effective manner’;

Whereas Article 44 of the Convention on International Civil Aviation states that ‘The aims and objectives of the Organization are to develop the principles and techniques of international air navigation and to foster the planning and development of international air transport so as to ...[m]eet the needs of the peoples of the world for safe, regular, efficient and economical air transport’;

Whereas Annex 6 – *Operation of Aircraft*, Annex 9 – *Facilitation*, Annex 11 – *Air Traffic Services*, Annex 14 – *Aerodromes*, Volume I — *Aerodrome Design and Operations* to the Convention on International Civil Aviation and the *Procedures for Air Navigation Service – Air Traffic Management (Doc 4444)* contain several Standards and Recommended Practices and Procedures relating to health measures that should be taken by Contracting States to manage public health emergencies of international concern and to prevent the spread of communicable disease by air travel;

Whereas the ICAO Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA) project is an appropriate measure to improve and harmonize preparedness plans;

The Assembly:

1. *Urges* Contracting States to ensure that the public health sector and the aviation sector collaborate to develop a national preparedness plan for aviation which addresses public health emergencies of international concern and which is integrated with the general national preparedness plan;

2. *Urges* Contracting States to develop a national preparedness plan for aviation that is in compliance with the World Health Organization International Health Regulations (2005) and which are based on scientific principles and on the guidelines from ICAO and the World Health Organization;
3. *Urges* Contracting States to involve stakeholders such as airport operators, aircraft operators and air navigation service providers in the development of a national preparedness plan for aviation; and,
4. *Urges* Contracting States to join and participate in the Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA) project, where available, to ensure that its goals are achieved.

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