# Advancing International Health Regulations (2005) & International Cooperation

CAPSCA-AP/16

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## **Overview**

- 1 Advancing International Health Regulations (2005)
- 2 WHO-ICAO Memorandum of Understanding





## What are the International Health Regulations (2005)?



Legally binding agreement of 196 States Parties (194 WHO Member States plus Holy See and Lichtenstein) established under Article 21(a) of the WHO Constitution to address "sanitary and quarantine requirements and other procedures designed to prevent the international spread of disease."

First adopted in 1951 as International Sanitary Regulations

- > revised in 1969 (2nd edition), amended 1973 and 1981
- > revised from 1995 to 2005, 3rd edition entered into force in June 2007
- amended in 2014 and 2022.

WHO coordinates and facilitates their implementation.

#### **Purpose and Scope**

To prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with, and restricted to, public health risks, and which avoid *unnecessary interference with international traffic and trade*.





## **Annex 1 - Core capacity requirements**

### Local community response level Capacities

- to detect events for a particular time and place
- to report all available essential information immediately to the appropriate level

**SURVEILLANCE & RESPONSE** 

#### Intermediate public health response level Capacities

- to confirm the status of reported events and to support or implement additional control measures
- to assess reported events immediately and, to report all essential information to the national level If urgent

#### **National level Capacities**

- to assess all reports of urgent events within 48 hours
- to notify WHO immediately
- Public health response capacities: control measures, surge, investigations, etc.
- Communication/collaboration structure PoE & NFP

#### DESIGNATED AIRPORTS, PORTS AND GROUND CROSSINGS

#### At all times Capacities

- Access to medical service
- Ill travellers transport
- Safe environment for travellers
- Control of vector & reservoir

#### Responding to events of PHEIC Capacities

- appropriate public health emergency response
- assessment of and care for affected travellers or animals
- appropriate space, to interview suspect or affected persons
- quarantine of suspect travellers, separate facilities
- measures to disinsect, derat, disinfect, decontaminate
- entry or exit controls
- specially designated equipment, and to trained personnel for the transfer of infected/ contaminated travellers



### Travel and trade measures during outbreaks under the IHR (2005)

State Party required to inform WHO of public health rational and scientific evidence within 48h

WHO required to share measure and rationale with other States Parties

Additional health measures

significantly interfering with international traffic (Article 43)

Refusal of entry or departure\*, or their delay for more than 24 hours

- Travel ban
- Closing borders
- Visa refusal for passengers originating from affected countries

Allowed for public health purposes

**WHO** monitors

**Health measures** 

Advisory

- Entry screening
- Exit screening
- Information health declaration
- Other travel related risk mitigation measures informed by risk assessment for travelers, cargo, conveyances,
  - Avoid unnecessary travel to affected country
  - Vaccination recommendations
     Personal protective measures



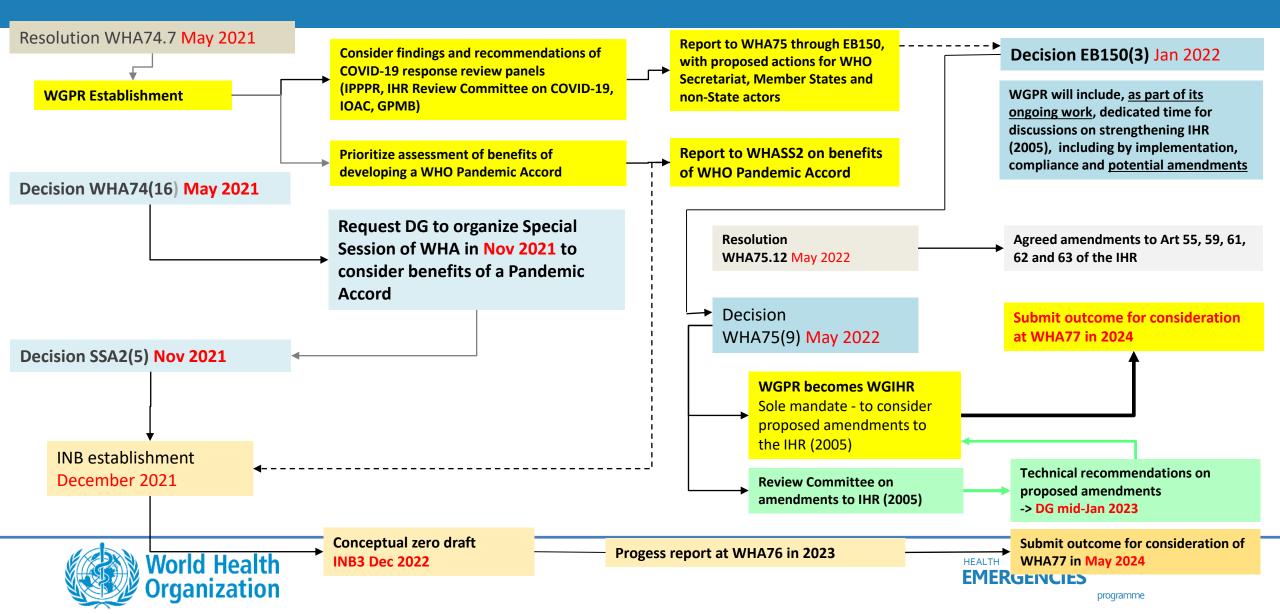


## Did IHR(2005) meet expectations during the Pandemic?

- . Provisions under IHR (2005) were not sufficient for COVID-19 Response
- . Assessed capacities did not match quality of response / mitigation measures
- . Findings & recommendations of following entities highlighted need to further strengthen IHR:
  - Independent Panel for Pandemic Preparedness and Response,
  - Review Committee on the functioning of the International Health Regulations (2005) during the COVID-19 Response
  - Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme
- Key issues, challenges, and strengths captured by country & regional IAR, summarized at the <u>global level</u> and lessons learned summarized at the regional level revealed the urgent need for **several amendments to the IHR** being undertaken by the member states through the **Working Group on IHR (WGIHR)**
- Issues related to restrictions in travel & trade, vaccine nationalism, and inequity in access & distribution called for the pandemic treaty or similar instrument being negotiated by the Inter-governmental Negotiation Body (INB)



## Member States asks for amendments to the IHR (2005)



## WGIHR - Working group facilitated by Bureau of 6 Member States from each WHO Region, supported by WHO Secretariat





https://apps.who.int/gb/wgihr/

#### **Previous amendments to IHR (2005)**

- 2014 Annex 7 –> extend validity of yellow fever vaccination certificate for life of vaccinated person
- 2022 Articles 55, 59, 61, 62, 63 –> reduce duration of entry into force of future amendments from 24 to 12 months; amendments enter into force in May 2024







## **Analytics of proposed amendments**

## **EXISTING articles and annexes: + 300 amendments** proposed for 33 of the 66 articles and 6 of the 9 annexes

Article/ Annex	# proposed
	amendments
Article 01	5
Article 02	4
Article 03	5
Article 04	7
Article 05	18
Article 06	16
Article 07	1
Article 08	2
Article 09	2
Article 10	12
Article 11	18
Article 12	21
Article 13	18
Article 15	5
Article 16	1
Article 17	1
Article 18	7
Article 19	1
Article 23	4
Article 24	1

Article/ Annex	# proposed
	amendments
Article 27	1
Article 28	3
Article 31	1
Article 35	3
Article 36	1
Article 42	4
Article 43	14
Article 44	38
Article 45	4
Article 48	11
Article 49	11
Article 54	1
Article 56	3
Annex 01	45
Annex 02	1
Annex 03	1
Annex 04	1
Annex 06	13
Annex 08	2

#### **Proposals for NEW articles and annexes:** 6 new articles and 2 new annexes

----> Two NEW Article 13; One NEW Article 44; Three NEW Article 53

----> NEW Annex 2 (to replace existing one); and NEW Annex 10

#### All proposed amendments and related documentation are available on the WHO website:

• <a href="https://www.who.int/teams/ihr/working-group-on-amendments-to-the-international-health-regulations-(2005)">https://www.who.int/teams/ihr/working-group-on-amendments-to-the-international-health-regulations-(2005)</a>

https://apps.who.int/gb/wgihr/index.html



SECOND MEETING OF THE WORKING GROUP ON AMENDMENTS TO THE INTERNATIONAL HEALTH REGULATIONS (2005) Provisional agenda item 6

A/WGIHR/2/6 6 February 2023

#### Proposed amendments to the International Health Regulations (2005) submitted in accordance with decision WHA75(9) (2022)

The Working Group on Amendments to the International Health Regulations (2005) (WGIHR) at its first meeting on 14-15 November 2022 decided that "the Secretariat shall publish the proposed amendments online, as submitted by Member States unless otherwise informed by the submitting Member States.

In furtherance of the WGIHR's decision above, this document includes proposals for amendments to the International Health Regulations (2005) (IHR), as submitted by Member States.

The proposals are listed in alphabetical order by Member State.



SECOND MEETING OF THE WORKING GROUP ON AMENDMENTS TO THE INTERNATIONAL HEALTH REGULATIONS (2005) Provisional agenda item 6

A/WGIHR/2/7

#### Article-by-Article compilation of proposed amendments to the International Health Regulations (2005) submitted in accordance with decision WHA75(9) (2022)

The Working Group on Amendments to the International Health Regulations (WGHRI) at its first meeting on 14-15 November 2022 decided that "the Secretariat shall also publish online an article-by-article compilation of the proposed amendments, as authorized by the submitting Member States, in the six official languages, without attribution of the proposals to the Member States proposing them." !

In furtherance of the WGIHR's decision above, this document provides an article-by-article compilation of the proposals for amendments to the International Health Regulations (IHR) (2005) submitted in accordance with decision WHA75(9) (2022).

roposed amendments are presented as follows:

- · Strikethrough = proposal to delete existing text
- Underlined and bold = proposal to add ter
- (...): existing text in the IHR (2005) in relation to which no proposals for amendments we submitted and which is therefore omitted from the compilation

The compilation is not intended to replace the proposed amendments to the IHR (2005) in the original submission



**EMERGENCIES** 



## WGIHR Bureau's proposal for potential groupings of proposed amendments

Public health response and core capacities

Articles 5 (para 1-3), 13, 2x new 13A, and Annex 1

Collaboration and assistance
Article 44, 44A, and new
Annex 10

WGIHR3 17-20 April 2023 Compliance/Implementation – new Art 53A, new Art 53 bisquarter, Art 53 bis, Art 53 ter, Art 53 quarter, Art 54, new Art 54 bis

Responsible authorities
Article 4

Notification, verification, and provision of information Articles 6-11, Annex 2 and new Annex 2

WGIHR4 24-28 July 2023

The Emergency Committee Articles 48, 49

Determination of public health emergency of international concern – Article 12

Temporary and standing recommendations – Articles 15, 16, 17, 18

Points of entry, provisions for conveyances, provisions for travellers

Articles 19, 23, 24, 27, 28, 31, Annexes 3, 4 Health documents, Additional health measures
Articles 35, 36, 42, 43, 45, 56,

Annexes 6, 8

WGIHR5
2-6 October 2023

Definitions, Purpose and Scope,
Principles
Articles 1, 2 and 3



### How are WHO's MS negotiating the pandemic accord?

#### INB's work to date:

- First meeting (plus two resumed sessions) Feb-Jun 2022
  - Annotated outline of instrument
  - Working modalities
- Second meeting: Jul 2022
  - Working draft of instrument presented
- Third meeting: Dec 2022
  - Conceptual zero draft presented
  - Agreement to provide draft at fourth meeting
- Fourth meeting: Feb-Mar 2023
  - Zero draft presented
  - Commence discussions, review and negotiations
- Fifth Meeting: Apr 2023
  - Continue discussions, review, negotiations of Zero Draft
- Sixth Meeting: Jul 2023
  - drafting group consideration of the Bureau's text of the WHO CA+
- Seventh Meeting: Nov 2023
  - Negotiation text

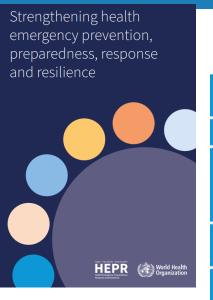






## Director General's 10 proposals to build a safer world together

Strengthening the Global Architecture for Health Emergency Preparedness, Response & Resilience (HEPR)



Independent Panel for Pandemic Preparedness and Response report

GPMB and IOAC reports

IHR Review Committee on the Functioning of the International Health Regulations (2005) during the COVID-19 Response

Pan-European Commission on Health and Sustainable Development

High Level Independent Panel on Financing the Global Commons for Pandemic Preparedness and Response report

Other reports

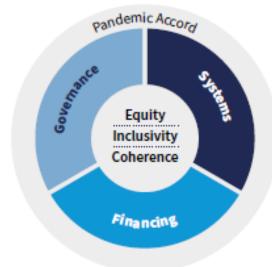
INB and WGPR processes

G20 and G7 processes

Other processes

More than 300 recommendations





#### Governance

- International legal instruments
- Sustained political leadership
- Driving accountability

## Sustainable, coordinated & innovative financing for HEPR

- The Pandemic Fund
- Expanding surge financing to save lives during health emergencies

#### **Strengthening HEPR systems**

• 5 C's



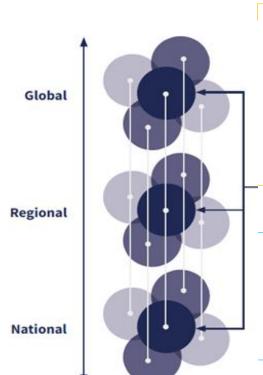




### **Systems** strengthen Capacity, Coordination and Collaboration



Ecosystem of partners & networks across the systems capacities and inter-connected capabilities



- Strong national integrated disease, threat & vulnerability
- Effective diagnostics and laboratory capacity for pathogen & genomic surveillance
- Collaborative approaches for event detection, risk assessment, & response monitoring
- Fast tracked research & development
- Scalable manufacturing platforms
- Coordinated supply chains & emergency distribution



- Community engagement, risk communication & infodemic management
- Population & environmental public health Interventions
- Multisectoral action for social and economic protection
- Scalable clinical care during emergencies
- Protection of health workers and patients
- Maintenance of essential health services
- Strengthened workforce capacity for health emergencies
- Strengthening health emergency preparedness, readiness, & resilience
- Health emergency alert and response coordination











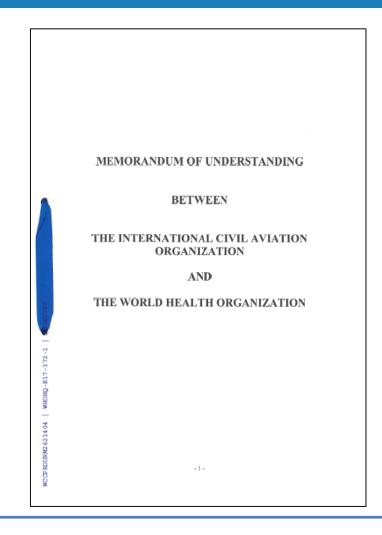
## **Key challenges during the COVID-19 pandemic**

- Lack of harmonization in the policy and technical recommendations on international travel being issued by various international organizations.
- Lack of sufficient scientific evidence on the effectiveness of travel-related measures and need to balance health gains and socioeconomic impact.
- Lack of definition of 'essential workforce', leading to the disruption of essential services (e.g. repatriations, transport of humanitarian/emergency workforce and essential supplies) and negatively impacting on workers' conditions.



## WHO-ICAO Memorandum of Understanding

- Signed by the Director Generals of the World Health Organization (WHO) and the International Civil Aviation Organization (ICAO) in November 2022.
- Provides a framework of cooperation and understanding to facilitate collaboration between the two organizations in the following areas:
  - 1. Provision of **evidence-informed and risk-based advice** on policy and technical matters related to civil aviation and public health during the preparedness and response to health emergencies.
  - 2. Joint **advocacy and risk communication** efforts on risk-based approaches to international travel in the context of health emergencies.
  - 3. Share **information and tools** to facilitate **technical cooperation and risk assessment** efforts in the areas of public health and civil aviation.
- A joint workplan is under development to facilitate and monitor the implementation of this MoU.







## DRAFT - Joint WHO-ICAO workplan on public health emergency preparedness and response in the civil aviation sector

- To agree on the technical forms & modes of collaboration, facilitate implementation of the MoU
- Initial period of 2 year(s)
- Creating better systems through the expansion of partnerships and networks that promote a whole-of-government and whole-of-society approach to health emergency management
- Monitoring and evaluation framework (MEF)
- Expected outcome/s:
  - Countries are better prepared to prevent, detect and respond to public health threats.
  - Public health and aviation sector stakeholders are better prepared to collaborate and respond to public health events in a coherent and aligned manner.
  - Travellers, transport workers, and cross-border communities are better protected from exposure to and the impacts of public health events.



## **Way Forward**

- AP Region continues increasingly frequent health security threats consequences becoming more complex.
- Continuous health security threats reiterate importance of our collective efforts & innovation to further strengthen resilient capacities
- Risk-based approaches for appropriate response, while reducing impact on systems/society
  - > Joint Risk Assessment
  - Joint Simulation Exercises
  - Development of Contingency Plan & SOPs
  - Capacity Building





## **THANK YOU**



