



Outcomes of the 42nd ICAO Assembly (AVMED)

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**INTERNATIONAL
CIVIL AVIATION
ORGANIZATION**





The assembly and why it is important

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- Assembly is the meeting of all ICAO representative states
- Held from 23 Sept to 3 Oct 2025
- 192 of 193 ICAO contracted states attended
- Any State can present a Working Paper or an Information Paper
- Medical 1st batch: health promotion & mental well-being
- 2nd batch: data-based risk management & decision making
- Council determines ICAO activities & priorities for the next 3 years
- Need to report back in 2028.



Health Promotion & mental well-being Australia (WP/167)

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- Mental health peer support programs were mandated by European aviation authorities, but not by other national aviation authorities or ICAO
- It can make a contribution in the context of medical certification
- From a global perspective, efficacy for medical certification purposes is dependent on standardization.
- Australia and sponsors acknowledge that ICAO governance is necessary to ensure support for the standardization and wider adoption of peer support programs.



Health Promotion & mental well-being Australia (WP/232)

- Comprehensive technical guidance is available for preventative health activities.
- ICAO expects that preventative health activities with relevance to aviation are implemented by all States under Annex One to the Chicago Convention.
- Effective implementation require ICAO support to ensure consistent application and the evolution of medical examination and assessment processes to prevent them from being entirely disease focused
- Also include considerations of well-being, prevention and early detection



Health Promotion & mental well-being ITF (WP/334)

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- Presented together with IFALPA & IFATCA.
- The mental well-being of the workforce is a critical component of aviation.
- Concerns about license revocation or loss of livelihood can deter individuals from seeking help.
- ICAO laid important groundwork through guidance materials such as EB 2020/55 and Doc 10185, which promotes peer support systems.
- It should be more widely implemented— pilots, cabin crew, ATC, security screeners and ground operation staff.
- Encourage collaboration within the aviation industry to develop peer support systems for all safety sensitive workers and develop additional guidance.



Health Promotion & mental well-being

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- The Commission supported the papers
- Acknowledged the importance of health promotion and peer support programs in aviation.
- Noted the ongoing work by the relevant expert groups
- Noted that guidance will be included in:
 - the revised ICAO Manual on Prevention of Problematic Substance Use in Aviation Workplace
 - a forthcoming new Manual on Health Promotion and Mental Wellbeing
- Caution expressed about linking medical certification and PSP programmes.



Health Promotion & mental well-being Kazakhstan (WP/403)

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- The aviation industry is developing at a fast pace & we are faced with new threats, technological challenges and operational complexities.
- Aviation security personnel constitute the first line of defence with enormous responsibilities is enormous.
- Need a unified approach to assess mental health and psychological readiness.
- Requirements exist for pilots and ATCOs, but not for security personnel.
- Proposes ICAO develop global guidance on the assessment of the mental health risk factors for aviation security personnel.



- The Commission supported developing mental health risk assessment guidelines for aviation security personnel, noting the exclusion of a requirement for psychological or medical screening by aviation medical examiners.
- Noted the Information paper provided by India WP/214
 - Guidance framework for evaluating psychoactive substance use among aviation personnel, is noted
- Noted the Information paper provided by ITF WP/501
 - Summary of Evidence for Peer Support in Aviation is noted



Data based decision-making Canada (WP/291)

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- Presented together with Australia, New Zealand and the United Kingdom
- Advancing evidence-based policy through standardized data collection
- Be collaborative and proactive in generating a minimal standardized data set
- The continued updating and modernization of guidance and SARPS based on strong data and evidence
- Additionally use data to identify potential regulatory gaps and identify opportunities to explore innovative policy approaches.
- Imperative that the collection of data be respectful of privacy & sovereignty



Data based decision-making Canada (WP/291)

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- We therefore invite the Assembly to
 - Support the development of a core set of essential data points
 - Support ICAO in the development of a user-friendly process for the collection of this data
 - Member States to participate in the periodic submission of this data on a schedule determined by ICAO.



Data based decision-making Kazakhstan (WP/344)

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- In flight medical emergencies present unique and complex challenges due to:
 - the constraint of the cabin environment
 - variable training level among the cabin crews
 - absence of standardized coordination with ground based medical support
- There is a need for a globally harmonized framework for responding to such events onboard commercial aircraft
- ICAO to develop international guidelines in coordination with WHO, IATA & other relevant bodies
- States & operators to collect and share medical incident data to support evidence based regulatory development.



Data based decision-making

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- The Commission supports A42-WP/291 and A42-WP/344, acknowledging the importance of defining and collecting standardised data to inform the development of ICAO SARPs and guidance material.
- It will be referred to the relevant expert groups
- States are encouraged to participate in data collection and submission, consistent with applicable state requirements.



Data based decision-making China (WP/383)

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- Due to rapid developments in aviation and the emergence of new technologies, aviation health management is facing new challenges.
- ICAO requires Member States to apply safety management principles to aviation medical examinations and the examination process.
- Proposes the implementation of a four-cycle multidisciplinary aviation health management system involving a continuous process that spans
 - from initial & periodic medical examinations assessments
 - through ongoing health promotion
 - Health monitoring
 - to the investigation of health-related incidents.



Data based decision-making China (WP/383)

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- The system would require the application of the SMS framework
 - to identify and control medical risks, and
 - multidisciplinary collaboration to achieve its goals.
- This will effectively
 - enhance aviation safety,
 - promote pilots physical and mental health,
 - extend their professional careers and
 - reduce operational costs for airlines.



Data based decision-making China (WP/383)

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- We call on the Assembly to
 - recognize the importance of this system
 - support developing a global implementation framework
 - and encourage the development of a new health risk assessment tools and methodologies



Data based decision-making China (WP/383)

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- The Commission supported the paper
- Noted the work being done in the relevant expert groups
- Recalls Assembly Resolution A41-12:5 referring to the Aviation Health Management Plan.



Data based decision-making IATA (WP/349)

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- Proposes to raise the upper age limit for pilots engaged in multi-pilot international commercial air transport operations from age 65 to 67 years.
- This cautious and evidence-based step has no impact on aviation safety & reflects modern medical understanding, improved population health and the exceptional health standards maintained by commercial pilots.
- We urge States to strongly support this proposal and to collaborate on the development of harmonized medical oversight frameworks that ensure safety whilst enabling experienced, medically fit and competent pilots to continue contributing to our industry with our valuable experience.



Data based decision-making

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- The Commission noted the support for continuing work on pilot age
- Acknowledged that current medical science is inconclusive regarding the increase in upper age limit
- Recognised diverse state practices and capacities, data challenges and deficiencies identified in the Age Survey which was discussed in the Air Navigation Commission.
- Noted the ongoing work within ICAO regarding harmonization, expressed broad support for data generation & collection efforts, and the strengthening of the aviation medical system to support a global increase in age limit in a safe manner.
- The commission urges States to support ICAO in these activities.



Information Papers

- Information paper provided by China WP/597, on Aviation Public Health in Response to Pandemics, is noted
- Information paper provided by United Arab Emirates WP/613, Aviation Pathology in Aircraft Accident Investigation, is noted

Thank You

