Global and regional updates on border health activities

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Preparedness and IHR capacities

Health Security Division

WHO Regional Office for Europe

World Health Organization

European Region

Outline

- WHO support on PoE capacity strengthening
- Border Health Capacities as reported under State Party self-assessment Annual Reporting (SPAR) in the WHO European Region
- Recommendations for PoE capacity strengthening based on Joint External Evaluations conducted in the WHO European Region
- Upcoming activities

World Health Organization
European Region

WHO European Region

53 Member States

55 IHR States Parties

~1 billion population

17 time zones

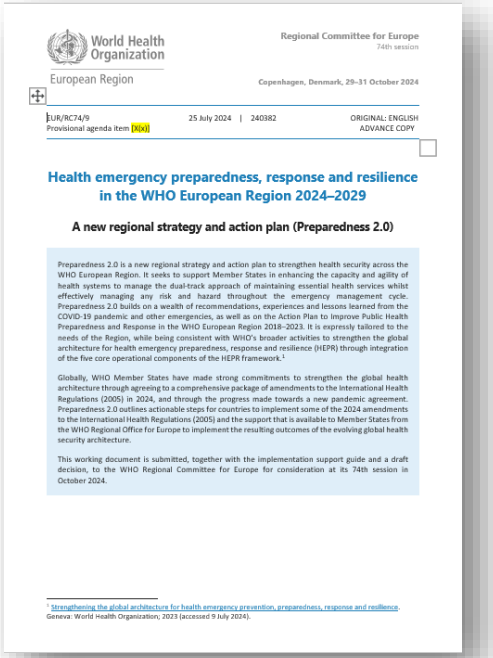
over 200 languages



World Health Organization

European Region

Preparedness 2.0: Strategy and Action plan on Health emergency preparedness, response and resilience in the WHO European Region 2024–2029


World Health Organization
European Region
Regional Committee for Europe
74th session
Copenhagen, Denmark, 29–31 October 2024

EUR/RC74/9 | 25 July 2024 | 240382 | ORIGINAL: ENGLISH
Provisional agenda item [X(x)] | ADVANCE COPY

Health emergency preparedness, response and resilience in the WHO European Region 2024–2029

A new regional strategy and action plan (Preparedness 2.0)

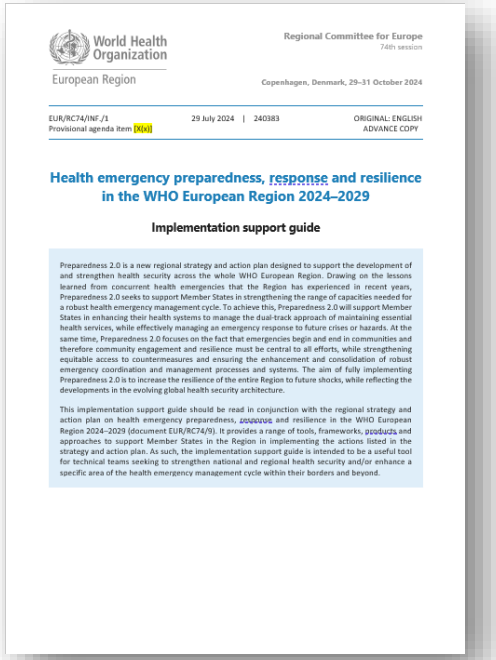
Preparedness 2.0 is a new regional strategy and action plan to strengthen health security across the WHO European Region. It seeks to support Member States in enhancing the capacity and agility of health systems to manage the dual-track approach of maintaining essential health services whilst effectively managing any risk and hazard throughout the emergency management cycle. Preparedness 2.0 builds on a wealth of recommendations, experiences and lessons learned from the COVID-19 pandemic and other emergencies, as well as on the Action Plan to Improve Public Health Preparedness and Response in the WHO European Region 2018–2023. It is expressly tailored to the needs of the Region, while being consistent with WHO's broader activities to strengthen the global architecture for health emergency preparedness, response and resilience (HEPR) through integration of the five core operational components of the HEPR framework.[1]

Globally, WHO Member States have made strong commitments to strengthen the global health architecture through agreeing to a comprehensive package of amendments to the International Health Regulations (2005) in 2024, and through the progress made towards a new pandemic agreement. Preparedness 2.0 outlines actionable steps for countries to implement some of the 2024 amendments to the International Health Regulations (2005) and the support that is available to Member States from the WHO Regional Office for Europe to implement the resulting outcomes of the evolving global health security architecture.

This working document is submitted, together with the implementation support guide and a draft decision, to the WHO Regional Committee for Europe for consideration at its 74th session in October 2024.

[1] Strengthening the global architecture for health emergency prevention, preparedness, response and resilience. Geneva: World Health Organization; 2023 (accessed 9 July 2024).

Preparedness 2.0 Strategy & Action Plan


World Health Organization
European Region
Regional Committee for Europe
74th session
Copenhagen, Denmark, 29–31 October 2024

EUR/RC74/INF./1 | 29 July 2024 | 240383 | ORIGINAL: ENGLISH
Provisional agenda item [X(x)] | ADVANCE COPY

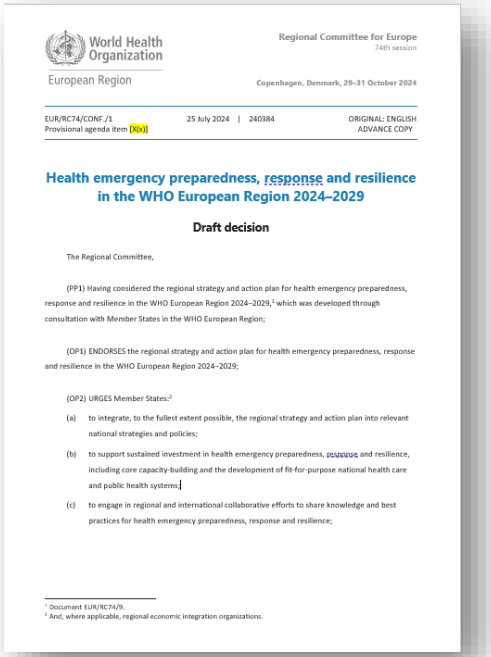
Health emergency preparedness, response and resilience in the WHO European Region 2024–2029

Implementation support guide

Preparedness 2.0 is a new regional strategy and action plan designed to support the development of and strengthen health security across the whole WHO European Region. Drawing on the lessons learned from concurrent health emergencies that the Region has experienced in recent years, Preparedness 2.0 seeks to support Member States in strengthening the range of capacities needed for a robust health emergency management cycle. To achieve this, Preparedness 2.0 will support Member States in enhancing their health systems to manage the dual-track approach of maintaining essential health services, while effectively managing an emergency response to future crises or hazards. At the same time, Preparedness 2.0 focuses on the fact that emergencies begin and end in communities and therefore community engagement and resilience must be central to all efforts, while strengthening equitable access to countermeasures and ensuring the enhancement and consolidation of robust emergency coordination and management processes and systems. The aim of fully implementing Preparedness 2.0 is to increase the resilience of the entire Region to future shocks, while reflecting the developments in the evolving global health security architecture.

This implementation support guide should be read in conjunction with the regional strategy and action plan on health emergency preparedness, response and resilience in the WHO European Region 2024–2029 (document EUR/RC74/9). It provides a range of tools, frameworks, products and approaches to support Member States in the Region in implementing the actions listed in the strategy and action plan. As such, the implementation support guide is intended to be a useful tool for technical teams seeking to strengthen national and regional health security and/or enhance a specific area of the health emergency management cycle within their borders and beyond.

Implementation Support Guide


World Health Organization
European Region
Regional Committee for Europe
74th session
Copenhagen, Denmark, 29–31 October 2024

EUR/RC74/CONF./1 | 25 July 2024 | 240384 | ORIGINAL: ENGLISH
Provisional agenda item [X(x)] | ADVANCE COPY

Health emergency preparedness, response and resilience in the WHO European Region 2024–2029

Draft decision

The Regional Committee,

(PP1) Having considered the regional strategy and action plan for health emergency preparedness, response and resilience in the WHO European Region 2024–2029,[1] which was developed through consultation with Member States in the WHO European Region;

(OP1) ENDORSES the regional strategy and action plan for health emergency preparedness, response and resilience in the WHO European Region 2024–2029;

(OP2) URGES Member States:[2]

(a) to integrate, to the fullest extent possible, the regional strategy and action plan into relevant national strategies and policies;

(b) to support sustained investment in health emergency preparedness, response and resilience, including core capacity-building and the development of fit-for-purpose national health care and public health systems;

(c) to engage in regional and international collaborative efforts to share knowledge and best practices for health emergency preparedness, response and resilience;

[1] Document EUR/RC74/9.
[2] And, where applicable, regional economic integration organizations.

Decision

World Health Organization
European Region

[Seventy-fourth Regional Committee for Europe: Copenhagen, 29–31 October 2024: health emergency preparedness, response and resilience in the WHO European Region 2024–2029: a new regional strategy and action plan (Preparedness 2.0)]

WHO/Europe support to strengthening PoE capacities

Updated evidence on health and health systems impact

After action reviews



Coordination & Collaboration
- **UN Agencies & Partners**
- **Multisectoral collaboration**

PoE assessments

PoE contingency planning & SOP development

Regional and national PoE simulation exercises

Capacity building of PoE staff

Risk communication, community engagement and infodemic management

Risk- based approach & guidance for decision making on international travel measures & monitoring of ITT (Art. 43)

World Health Organization
European Region

Simulation Exercises

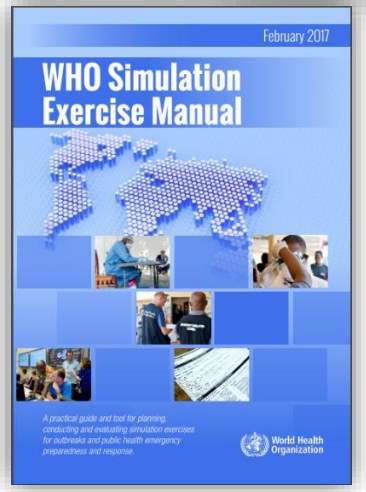
Regional exercises

- JADE is an annual regional functional simulation exercise. Each IHR State Party in the WHO European Region is invited to participate in one of three identical exercise days
- The exercise is designed to practice National IHR Focal Point's (NFP) assessment of public health events and communication between IHR State Parties and the WHO IHR Regional Contact Point, as part of the mandatory functions under the IHR

Off- the shelf exercise packages

- Points of entry package developed





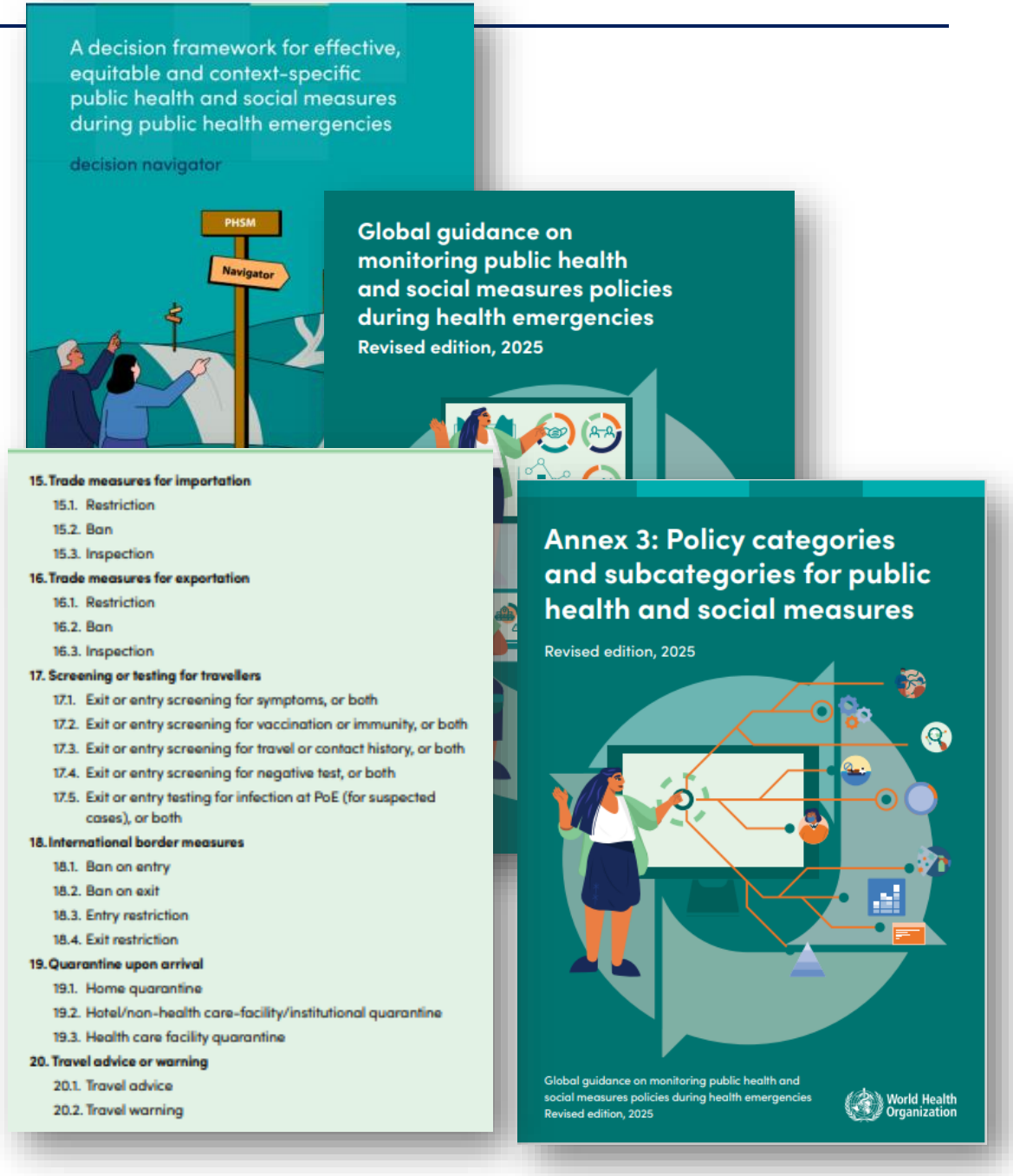


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Exercise JADE

Initiative on strengthening PHSM during health emergencies

- PHSM knowledge Hub- database of global, multidisciplinary PHSM research and other resources which is continuously updated by automated feeds and experts.
- PHSM taxonomy including on international travel measures
- Guidance on monitoring of PHSM during public health emergencies
- Decision framework for PHSM during public health emergencies.



World Health Organization
European Region

Joint ECDC-WHO PH advice for international travellers to mass gathering events



World Health Organization
European Region

BZgA
Federal Centre for Health Education

ecdc

Public health advice for travellers attending UEFA EURO 2024

The UEFA EURO 2024 final tournament will take place in Germany from 14 June to 14 July 2024. If you are travelling to attend, we encourage you to follow this health advice to protect your health and well-being.

Before attending the event

Vaccination

Check your vaccination status and consult your doctor on whether you need to get or renew any vaccinations. Depending on factors such as your age, the place you live, any underlying health conditions and previous vaccination status, these may include vaccinations against measles, pertussis, tetanus, diphtheria, polio, coronavirus disease 2019 (COVID-19) or other diseases.

More information on recommended vaccines in Germany: here.

Vaccinations against COVID-19

The emergency phase of COVID-19 is over, but the virus continues to spread and endanger people's lives, particularly those who are older, have chronic diseases, are immunocompromised or pregnant. Vaccination lowers the risk of severe illness and death. If you are at risk of severe COVID-19, check your COVID-19 vaccination status and consult with your health-care provider for any needed doses.

More information on COVID-19 vaccination in Germany: here.
WHO information and recommendations on COVID-19 vaccination: here.

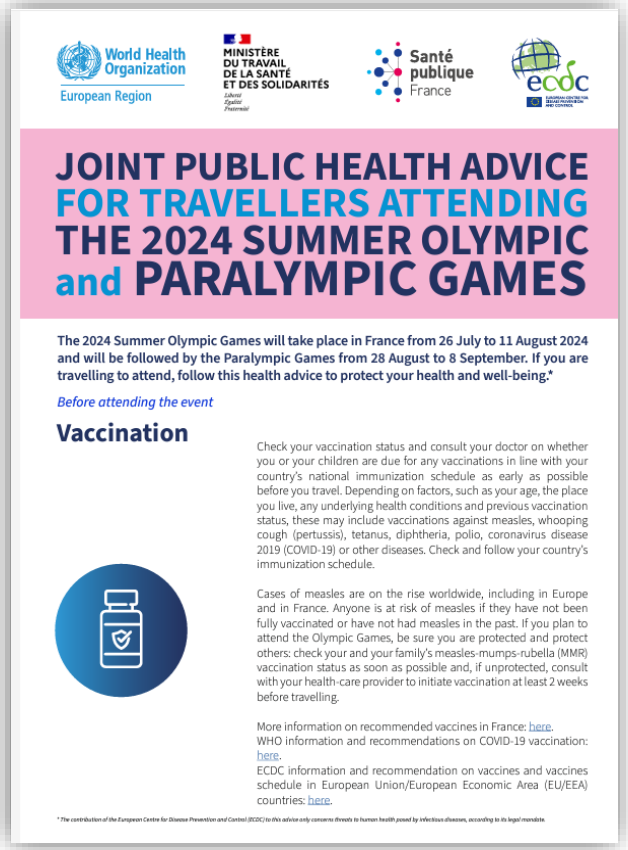
https://www.ecdc.europa.eu/en/publications-data/public-health-advice-uefa-euro-2024



JOINT PUBLIC HEALTH ADVICE* FOR TRAVELLERS ATTENDING THE JUBILEE 2025

Vaccination

https://www.ecdc.europa.eu/en/publications-data/joint-public-health-advice-travellers-paris-games-2024



World Health Organization
European Region

MINISTÈRE DU TRAVAIL DE LA SANTÉ ET DES SOLIDARITÉS

Santé publique France

ecdc

JOINT PUBLIC HEALTH ADVICE FOR TRAVELLERS ATTENDING THE 2024 SUMMER OLYMPIC and PARALYMPIC GAMES

The 2024 Summer Olympic Games will take place in France from 26 July to 11 August 2024 and will be followed by the Paralympic Games from 28 August to 8 September. If you are travelling to attend, follow this health advice to protect your health and well-being.*

Before attending the event

Vaccination

Check your vaccination status and consult your doctor on whether you or your children are due for any vaccinations in line with your country's national immunization schedule as early as possible before you travel. Depending on factors, such as your age, the place you live, any underlying health conditions and previous vaccination status, these may include vaccinations against measles, whooping cough (pertussis), tetanus, diphtheria, polio, coronavirus disease 2019 (COVID-19) or other diseases. Check and follow your country's immunization schedule.

Cases of measles are on the rise worldwide, including in Europe and in France. Anyone is at risk of measles if they have not been fully vaccinated or have not had measles in the past. If you plan to attend the Olympic Games, be sure you are protected and protect others: check your and your family's measles-mumps-rubella (MMR) vaccination status as soon as possible and, if unprotected, consult with your health-care provider to initiate vaccination at least 2 weeks before travelling.

More information on recommended vaccines in France: here.
WHO information and recommendations on COVID-19 vaccination: here.
ECDC information and recommendation on vaccines and vaccines schedule in European Union/European Economic Area (EU/EEA) countries: here.

* The contribution of the European Centre for Disease Prevention and Control (ECDC) to this advice only concerns threats to human health posed by infectious diseases, according to its legal mandate.

https://www.who.int/europe/publications/m/item/joint-public-health-advice-for-travellers-attending-the-2024-summer-olympic-and-paralympic-games

World Health Organization
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Facilitating peer-to-peer exchange



brought together more than 700 ship inspectors, port health officers, and public health authorities

Case study presented by the Netherlands, Morocco and Tanzania

World Health Organization
European Region

SPAR C11 – Points of Entry and Border Health



- **SECTION 1. Information by type of Points of Entry**
  - Number of designated ports/airports/ground crossings

- **SECTION 2. Core Capacities at PoE and International Travel Related Measures**
  - **C11.1** Core capacity requirements at all times for PoEs (airports, ports and ground crossings)
  - **C11.2.** Public health response at points of entry
  - **C11.3.** Risk-based approach to international travel-related measures New indicator since 2021

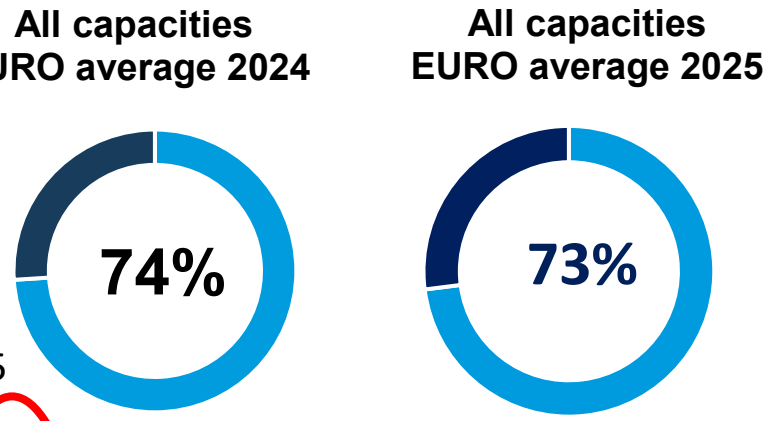
World Health Organization
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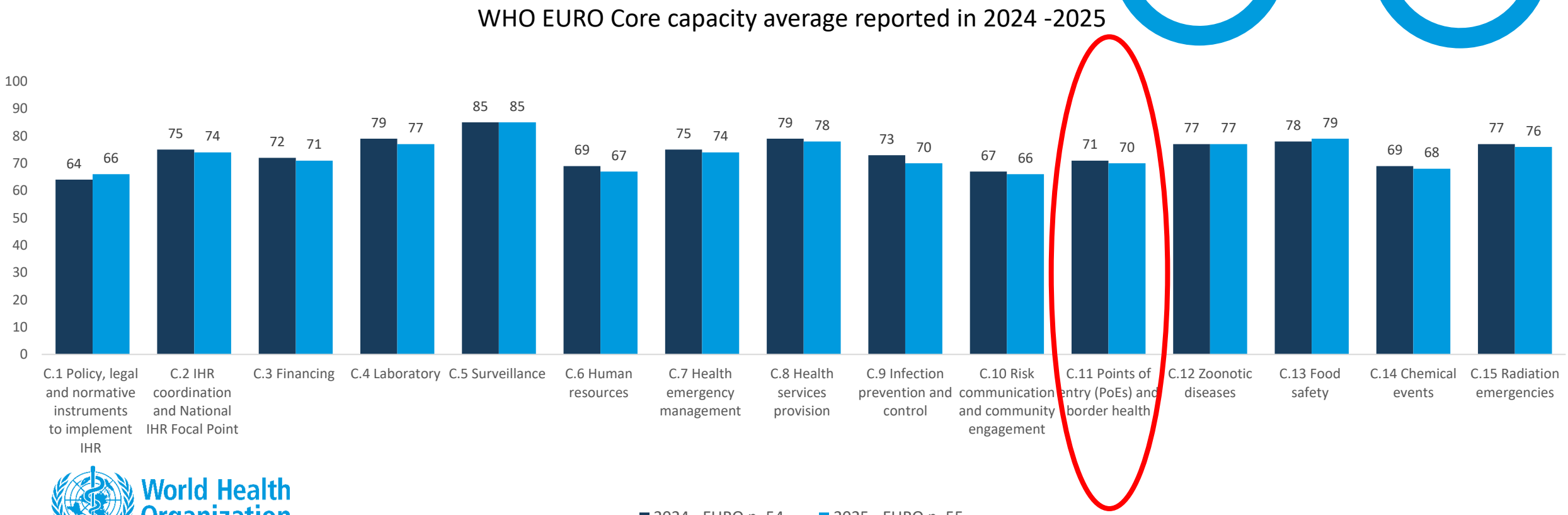
Level	C11.1 Core capacity requirements at all times for PoEs (airports, ports and ground crossings)	
Level 1	Strategic risk assessment for individual PoE as an integral part of a national risk assessment has not been completed	❑
Level 2	Some designated PoE are implementing routine core capacities based on a completed associated strategic risk assessment	❑
Level 3	Some designated PoE are implementing routine core capacities AND These are integrated into the national surveillance system for biological hazards/all hazards (e.g., event-based and early warning surveillance)	❑
Level 4	All designated PoE are implementing routine core capacities with an all-hazard and multisectoral approach integrated into the national surveillance system	❑
Level 5	Routine core capacities implemented at all designated PoE are exercised (as appropriate), reviewed, evaluated, updated and actions are taken to improve capacity on a regular basis	❑

Level	C11.2. Public health response at points of entry	
Level 1	PoE designated based on a strategic risk assessment are in the process of developing a PoE public health emergency contingency plan	❑
Level 2	Some designated PoE have developed a PoE public health emergency contingency plan for events caused by biological hazards	❑
Level 3	All designated PoE have developed PoE public health emergency contingency plans for events caused by biological hazards and integrated into national emergency response plans[88]	❑
Level 4	All designated PoE have developed PoE public health emergency contingency plans for events caused by all hazards[89] and integrated into national emergency response plans	❑
Level 5	All PoE public health emergency contingency plans for events caused by all hazards all designated PoE are exercised (as appropriate), reviewed, evaluated and updated on a regular basis	❑

Level	C11.3. Risk-based approach to international travel-related measures	
Level 1	National multisectoral process with mechanisms to determine the adoption of international travel-related measures,[90] on a risk-based manner, is not available or under development	❑
Level 2	National multisectoral process with mechanisms to determine the adoption of international travel-related measures, on a risk-based manner, is developed including guidelines and SOPs for their implementation	❑
Level 3	National multisectoral process with mechanisms to determine the adoption of international travel-related measures, on a risk-based manner, is developed and being implemented at national level	❑
Level 4	National multisectoral process with mechanisms to determine the adoption of international travel-related measures; on a risk-based manner, is developed and being implemented at national and intermediate levels	❑
Level 5	National multisectoral process and mechanisms to determine the adoption of international travel-related measures are being implemented at national, intermediate and local levels and exercised (as appropriate), reviewed, evaluated and updated on a regular basis, in response to an event or emergency	❑

WHO EURO 2024-2025 SPAR overview





World Health Organization
European Region

Capacity area 11 - Points of entry (PoE) and border health

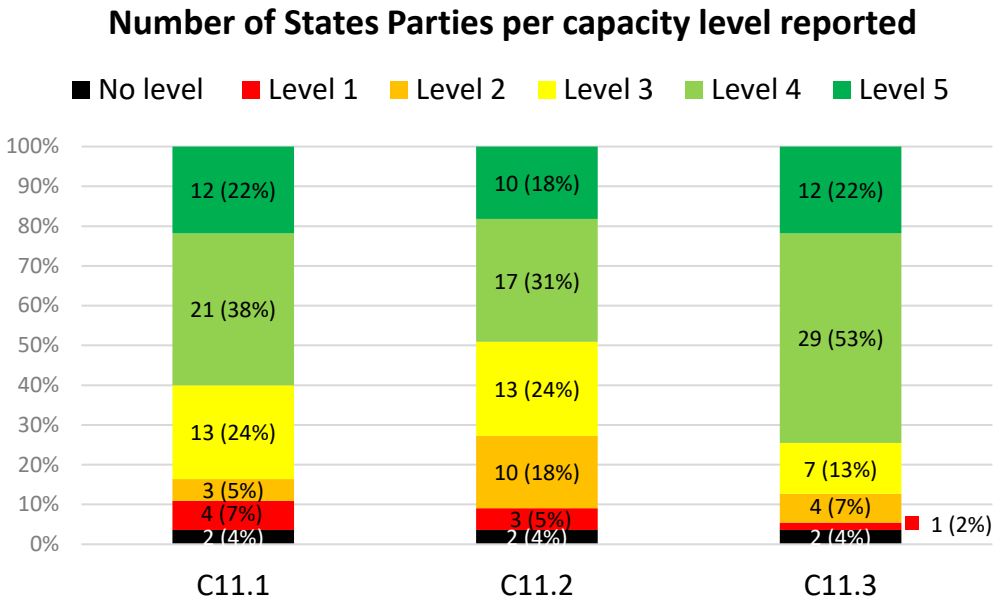
C11.1. Core capacity requirements at all times for PoEs (airports, ports and ground crossings)
C11.2. Public health response at points of entry
C11.3. Risk-based approach to international travel-related measures

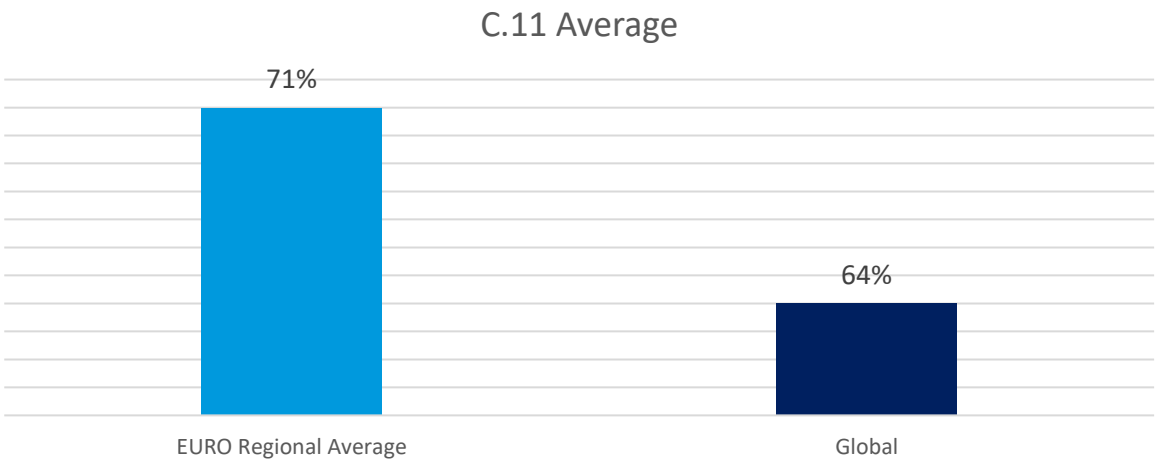
- **12 States Parties** (22%) reported having the routine core capacities implemented at all designated PoE, and being exercised, reviewed, evaluated, and updated, and that actions were taken to improve capacity on a regular basis (C11.1).

- **27 States Parties** (49%) reported all designated PoE having an all-hazards public health emergency contingency plan which was also integrated into the national emergency response plans (C11.2).

- **41 States Parties** (75%) reported having a national multisectoral process developed with mechanisms to determine the adoption of international travel-related measures (in a risk-based manner), and implemented, at the national and intermediate levels (C11.3).

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WHO EURO SPAR 2025 – Points of entry (PoEs)and border health

71%

Average capacity reported under area 11, Points of Entry (PoEs) and Border Health

713

Total number of designated Points of Entry (PoEs) were reported in 2025

76%

PoEs reported to have a public health emergency contingency plan

251



Designated ports were reported in 2025

235

Designated airports were reported in 2025

227



Designated ground crossings were reported in 2025

World Health Organization
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SPAR 2025 – reported strengths and challenges

- **Core capacities exist but are uneven and/or not fully assessed**: Many PoEs report routine capacities largely in place (often level 4–5), but with gaps due to expansion/structural changes, variability between ports/airports, or lack of formal designation and completed assessments.
- **Contingency planning is present but needs strengthening**: Plans often exist (sometimes not written/approved), are not consistently all-hazards, and are not always fully integrated with national emergency response arrangements; many are under revision.
- **SOPs and implementation/testing need improvement**: Written procedures for ill travellers and sanitation/vector measures commonly exist, but countries note the need to finalize, harmonize, and routinely test SOPs (including multiagency use).
- **Workforce and resources are recurring constraints**: Limited human resources (inlcuding staffing shortages) affect routine implementation, oversight, and the ability to run trainings/exercises and sustain capacities.
- **Coordination and information-sharing are central issues (and strengths in some cases)**: Several entries highlight good multisectoral coordination and strong communication channels (sometimes developed during COVID-19) but also note weaker links with private sector actors and, in some settings, insufficient cross-border agreements/procedures and/or digital connectivity to surveillance/alert systems.

JEE in the WHO European Region (as of 8 October 2026)

Completed JEEs (30)
In the **pipeline** (2)

1. Albania, 2016
2. Armenia, 2016
3. Belgium, 2017
4. Finland, 2017
5. Kyrgyzstan, 2016
6. Latvia, 2017
7. Liechtenstein, 2017
8. Slovenia, 2017
9. Switzerland, 2017
10. Turkmenistan, 2016
11. Republic of Moldova, 2018
12. Serbia, 2018
13. Lithuania, 2018
14. North Macedonia, 2019
15. Montenegro, 2019
16. Georgia, 2019
17. Tajikistan, 2019
18. Germany, 2019
19. Ukraine, 2021
20. Uzbekistan, 2022
21. Azerbaijan, 2023
22. Kyrgyzstan, 2023
23. Estonia, 2023
24. Armenia, 2023
25. Georgia, 2024
26. The Netherlands (JEE/PHEPA), 2025
27. Tajikistan, 2025
28. Albania, 2025
29. Moldova, 2026
30. Germany (JEE/PHEPA), 2026
31. **Türkiye, 2026**
32. **Turkmenistan, 2027**



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European Region

- **30 JEE missions in 23 States have taken place in the WHO/European Region since 2016**
- **7 States have completed their second JEE (ALB, ARM, GEO, GER, KGZ, TJK, MLD)**

Summary of JEE recommendations for points of entry (2023-2026)

- Conduct a comprehensive national risk assessment for decision making on designation of points of entry
- Regularly assess/ review capacities of designated points of entries
- Conduct regular coordination meetings between all stakeholders in health at points of entry
- Strengthen and institutionalize expertise and standardized competencies both at designated and non-designated ports and airports
- Develop and implement multiagency public health emergency plans for points of entry outlining roles and responsibilities of relevant agencies
- Test PoE plans and SOPs through simulation exercises
- Improve routine and response capacities as set out in IHR (2005) Annex 1b
- Create a tailored training and capacity-building programmes for the public health staff at PoEs
- Revise existing strategies and mechanisms for decision making on international travel measures and risk communication for international travellers and test these regularly.
- Strengthen cross-border collaboration with neighbouring countries, through agreements on mutual information exchange, joint assessments and designations (ground crossing)
- Organize lessons learnt/ experience sharing exchange between PoE professionals
- Implement a schedule of regular maintenance for devices used at points of entry to detect CBRN risks

World Health Organization
European Region

Priority activities 2026/2027

- **Facilitation of Peer- exchanges**
  - Sub-regional workshop on points of entry in light of IHR amendments- Q4 2026 & Q2 2027
  - Twinning between IHRNFPs- ongoing
  - Regional Annual Detection and Assessments of Events (JADE) exercise- November 2026

- **Revision of IHR Monitoring and Evaluation tools to align it with the 2024 amendments to better reflect IHR provisions related to PoE and border health**
  - Revision of the IHR States Parties Annual Reporting (SPAR).- Launch this October
  - Revision of the JEE tool- 2027 TBC

- **Technical guidance development & updates**
  - Digitalization of the ICVP and MS consultation- Q2/3 2026
  - Review of PoE technical guidance (i.e. PoE assessment tool)- ongoing
  - Technical guidance for National IHR authorities- ongoing

World Health Organization
European Region

Thank you!

For further questions on WHO EURO activities please contact:

Tanja Schmidt

Programme Manager

Preparedness and IHR capacities

Health Security Division

WHO Regional Office for Europe

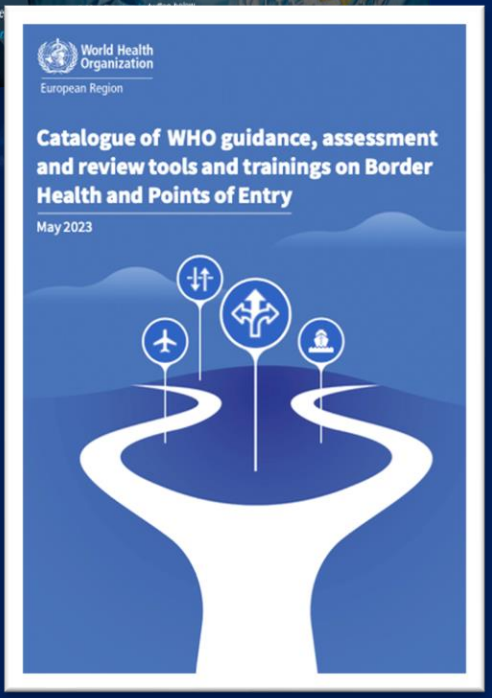
schmidtt@who.int

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Catalogue of WHO guidance, assessment tools and trainings on Border Health and Points of Entry

https://extranet.who.int/e-spar

Minimizing health risks at airports, ports and ground crossings