Global IHR implementation update

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Purpose and scope of IHR(2005)

" 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" (*Article 2*)

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What do the IHR call for?

Strengthened national capacity for surveillance and control, including at ports, airports and ground crossings, and travel and transport

Prevention, alert and response to international public health emergencies

IHR (2005)
A commitment of
195 States Parties

Global partnership and international collaboration

Rights, obligations and procedures, and progress monitoring

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INTERNATIONAL HEALTH REGULATIONS (IHR)

– from policy to people's health security

What are the IHR?

The IHR are legally binding and help countries work together to protect lives threatened by the spread of diseases and other health risks, including radiation and chemical hazards

INTERNATIONAL HEALTH REGULATIONS 2005

5 reasons why the IHR matter

HEALTH THREATS HAVE NO BORDERS

The IHR strengthen countries' abilities to control diseases that cross borders at ports, airports and ground crossings

TRAVEL AND TRADE ARE MADE SAFER

The IHR promote trade and tourism in countries and prevent economic damage

GLOBAL HEALTH SECURITY IS ENHANCED

The IHR establish an early warning system not only for diseases but for anything that threatens human health and livelihoods

DAILY THREATS ARE KEPT UNDER CONTROL

The IHR guide countries to detect, assess and respond to threats and inform other countries quickly

ALL SECTORS BENEFIT

The IHR prepare all sectors for potential emergencies through coordination and information sharing

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REGIONAL OFFICE FOR **Europe**

Until all sectors are on board with the IHR, no country is ready

www.euro.who.int/ihr

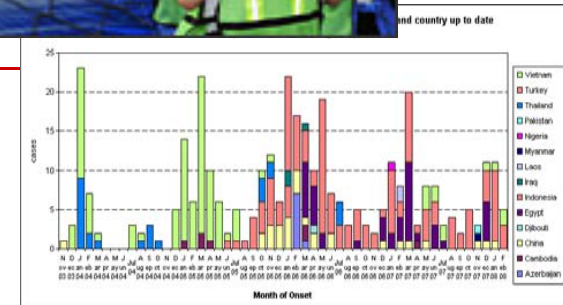# TWO MAJOR AREAS FOR IMPLEMENTATION

► **Global "event" management**

  ✓ **Global information system**

  ✓ **Coordination of international response**

► **National core capacity requirements**

  ✓ **National surveillance and response systems**

  ✓ **Capacity at points of entry**

   (Ports, airports, ground crossings)
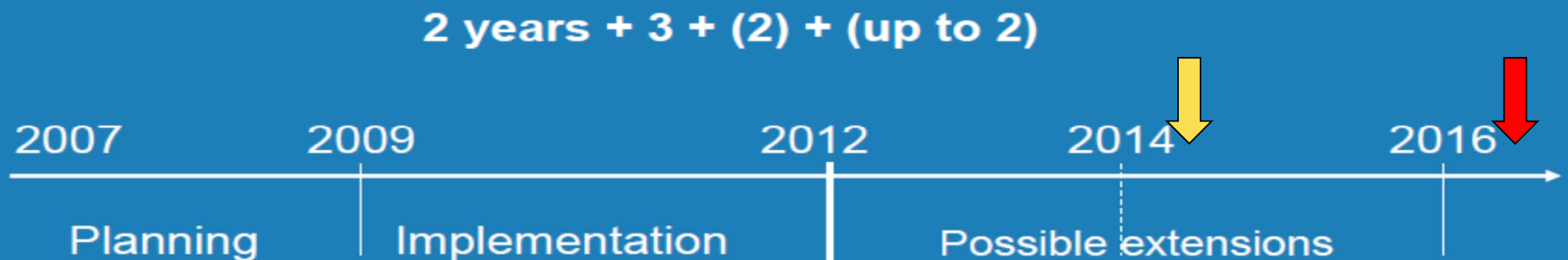
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IHR Requirements for Core capacities

States Parties shall utilize existing national structures and resources to meet their core capacity requirements under these Regulations, including with regard to:

✓ their surveillance, reporting, notification, verification, response and collaboration activities;

✓ their activities concerning designated airports, ports and ground crossings. Including inspections of conveyances

- **Timeline**

2 years + 3 + (2) + (up to 2)

| 2007 | 2009 | 2012 | 2014 | 2016 |

Planning | Implementation | Possible extensions

"As soon as possible but no later than five years from entry into force …"

IHR Monitoring
National Core Capacity Requirements

Annex 1

8 Core Capacities

- Legislation and Policy
- Coordination
- Surveillance
- Response
- Preparedness
- Risk Communications
- Human Resources
- Laboratory

Potential hazards

- Infectious
- Zoonosis
- Food safety
- Chemical
- Radio nuclear

Points of Entry

-Routine

-PH emerg.

IHR 2005

	STRENGTHEN NATIONAL CAPACITY	
2	**Strengthen national disease surveillance, prevention, control and response systems**	Each country assesses its national resources in disease surveillance and response and develops national action plans to implement and meet IHR (2005) requirements, thus permitting rapid detection and response to the risk of international disease spread.
3	**Strengthen public health security in travel and transport**	The risk of international spread of disease is minimized through effective permanent public health measures and response capacity at designated airports, ports and ground crossings in all countries.

- Ports

- Airports

- Ground crossings

All hazards

Intersectoral

- **Health system**
    - Epidemiology
    - Laboratory
    - Preparedness
    - Case management
    - Infection control
    - Social mobilisation
    - Communication
    - …

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IHR Core Capacities at Points of Entry

Annex 1

- **Coordination and communication**

- **At all times (routine)**
  - **Access to medical service**
  - **Transport of ill travellers**
  - **Inspection of conveyances (e.g. Ship Sanitation Control Certificate)**
  - **Control of vectors / reservoirs**

- **For responding to public health related events**
  - **Emergency contingency plan**
  - **Arrangement for isolation (human, animal)**
  - **Space for interview / quarantine**
  - **Apply specific control measures**

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IHR AT POE

Main goals

- Protect the health of travellers (passengers and crew) and protect the health of the population (avoid-reduce spread of disease)

- Keep airports, ports and ground crossings terminals running and aircrafts flying, ships sailing and land crossings and ground vehicles in a sanitary condition and free of sources of infection and contamination, as far as practicable.

- Capacity for detection, containment at source and to respond to emergency and implement public health recommendations, limiting unnecessary health-based restrictions on trade and travel

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Status of global IHR core capacities

- Data were collected and reported using a self-administered questionnaire sent to States Parties annually.

- Bar graphs display data for 4 years (6 years when data were available) and <u>include only countries that have reported every year.</u>

- There can be regression in terms of achievement of certain capacities, which may be due to various reasons, e.g. an actual regression of a certain capacity, or correction of previously stated capacities etc.

- *Due to the addition of more detailed questions on the capacities at each Point of Entry in 2011, scores for Point of Entry decreased for some States Parties between 2010 and 2011.*

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Status of Global IHR Capacities 2010-2013
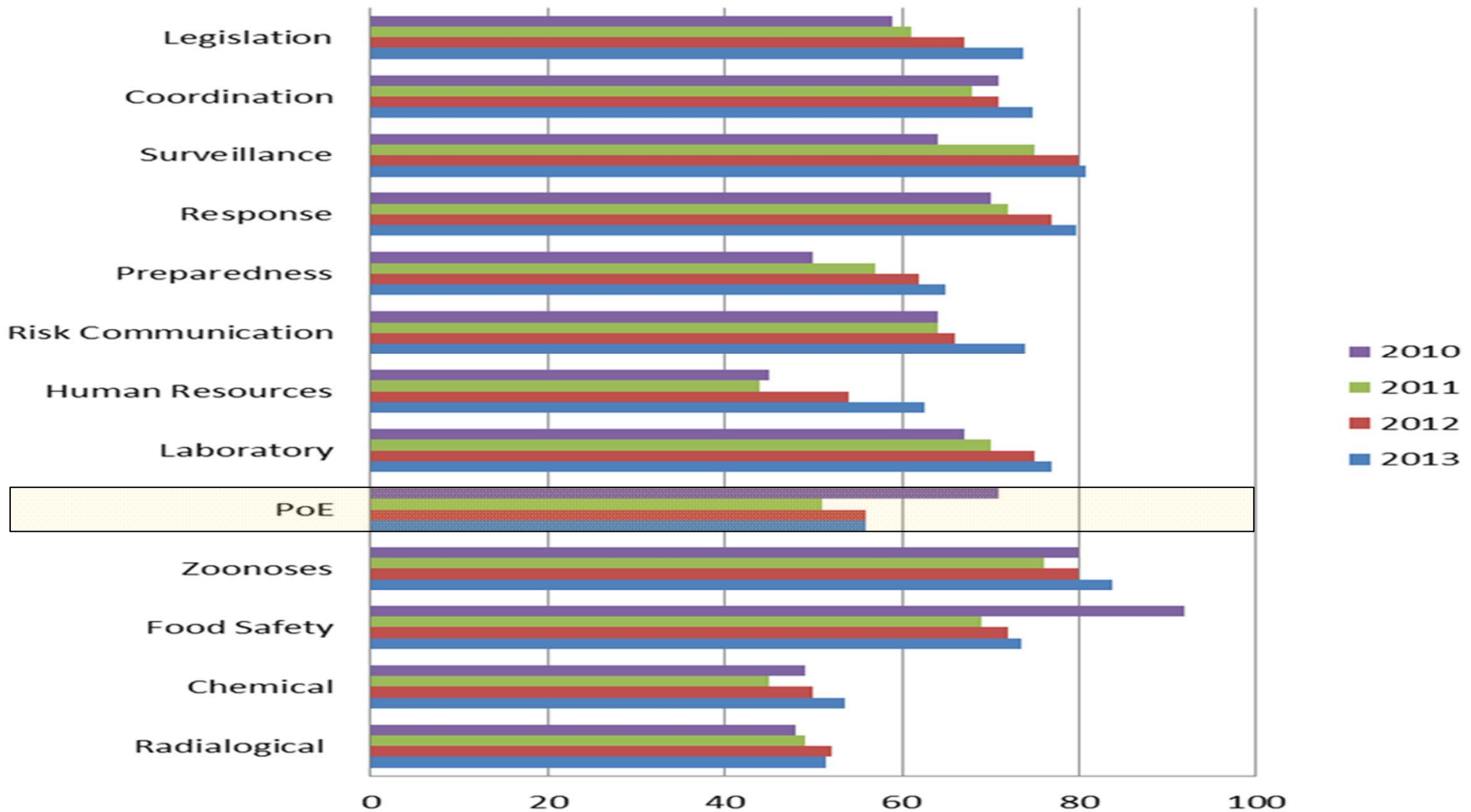
Summary of Extensions

- In all, 63 States Parties across the regions have indicated that they have met the minimum core capacity standards;

- 79 (40%) States Parties have requested an additional two year extension of the implementation deadline,

- 51 (26%) have not communicated their intentions to WHO.

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Table 1

	Region (number of States Parties)							
	AFR (47)	AMR (35)	EMR (21)	EUR (55)	SEAR (11)	WPR (27)	Total (196)	Percent of SP
By June 2012, capacity requirements have been met and no extension requested	0	5	1	23	0	13	42	21%
By June 2014, capacity requirements have been met and no additional extension requested	0	7	7	0	2	1	20	10%
Informally indicated that a further extension will not be sought	0	0	0	0	0	1	1	1%
Total: requirements have been met by 2014 deadline	**0**	**12**	**8**	**23**	**2**	**18**	**63**	**32%**
Second extension request	16	22	13	10	9	9	79	40%
Not applicable*	1	0	0	2	0	0	3	2%
No communication to WHO re intentions	30	1	0	20	0	0	51	26%

Circumstances cited in extension requests

Circumstances	Number of times cited
More time needed	36
Financial or economic issues	17
Lacking human resources	14
Protracted emergencies	10
Internal or external politics	8
Natural disasters	7
Multisectoral coordination required	4
Legislation required	3
Overseas territories	2
Unavoidable circumstances	1
No information	1

Extension Capacities

- Globally, the most frequently requested capacity in the extension requests was Points of Entry (60), followed by Laboratory (53), Surveillance (52), and Legislation (50). The core capacity requested least frequently was Zoonotic Events (34).

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Requested capacity	AFR	AMR	EMR	EUR	SEAR	WPR	Total*	% States Parties requesting extensions
Points of Entry	13	17	10	7	8	5	60	76%
Laboratory	9	17	10	2	8	7	56	67%
Surveillance	11	17	8	1	8	7	52	65%
Legislation, Policy and Financing	9	18	7	5	8	3	50	63%
Response	7	19	5	1	8	8	48	61%
Coordination and NFP Communications	11	13	9	3	8	5	49	62%
Chemical Events	7	16	11	1	5	5	45	57%
Preparedness	6	17	5	1	8	7	44	56%
Radiation emergencies	7	18	7	1	5	4	42	53%
Food Safety	6	12	8	1	6	7	40	51%
Human Resources	9	12	4		9	5	39	49%
Risk Communications	5	15	5	0	7	6	38	48%
Zoonotic events	4	11	6	1	6	6	34	43%
States Parties requesting all 13 capacities and hazards	2	9	3	0	5	1	20	25%
Number of States Parties requesting extension	15	22	13	10	9	9	79	

Challenges in implementing IHR (1)

● New phase – after Jun 2014: Not only the minimum requirements (Annex 1 IHR) should be in place for those States that achieved the core capacities, but also the daily use of the IHR with available capacities;

● Multi-sectoral coordination

● Advocacy for (the benefits of) the IHR

● **Test and maintain capacities** and new monitoring approach, including « soft » capacities such as information sharing and reporting – not just « hard » capacities

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Challenges in implementing IHR(2)

- Awareness gaps: turn-over of staff, and the NFP functions not been institutionalized

- Training gaps: the NFPs and generally the States Parties (how to manage the capacities they have).

- WHO resources to follow-up requests for support, cooperation needed (e.g. CAPSCA).

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Challenges in implementing IHR (3)

To provide appropriate PH emergency response at points of entry, in a multi-sector approach:
  - Emergency contingency plans
  - Case detection and management at PoE / on board conveyances.
  - assessment and care of ill travellers
  - adoption of health measures (quarantine, isolation, contact tracing…)
  - Infection prevention and control

Capacity for inspection of conveyances and adoption of control measures

Communication and coordination with IHR NFP & health surveillance

Implementation of WHO temporary recommendations during PHEIC (e.g. EBOLA), in a Regional and Global Approach.

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Perspectives for long term

- The "implementation" of the IHR will never be over. States should "maintain" core capacities and be able to use it effectively, when and where needed. (e.g. Ebola PHEIC)

- WHO will continue its leading role on public health and supporting better information sharing and collaboration for strengthening health security

- The efforts to control public health threats require all stakeholders to continuously improve the way they coordinate and collaborate, to stay dynamic and to adapt to new challenges.

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WHO Support for Strengthening Public Health Capacity at Points of Entry - POE

MISSION

❖ **Provide technical support and advice for preventing, detecting, controlling Public Health risks**

❖ **Foster international collaboration in a multisectoral approach**

ACTIVITIES

Trainings

Guidelines

Networking

Activities in WHO Regions

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Exchange and dissemination of knowledge and information

➤ IHR Information, guidance and tools:

  ➤ Document Center
  ➤ IHR multilingual web site
    www.who.ihr/int/fr/index

Many documents and tools available in the 6 WHO languages

Publications:
  ➤ IHR news – quarterly information bulletin
    ➤ Main target audience: NFPs but also other public health actors and stakeholders

➤ Ihrinfo@who.int : Information exchange with technical partners and general audiences

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Alert, response, and capacity building under the International Health Regulations (IHR)

Ports, airports and ground crossings

- Alert, response, and capacity building under the International Health Regulations (IHR)
- About IHR
- Alert and response
- Laboratory
- Public health concerns
- International travel and health, & mass gatherings
- Ports, airports and ground crossings
- IHR procedures and monitoring
- Document centre

While international travel and trade bring many health benefits linked to economic development, they may also cause public health risks that can spread internationally at airports, ports and ground crossings through persons, baggage, cargo, containers, conveyances, goods and postal parcels.

The IHR (2005) provide a public health response in the form of obligations and standing or temporary non-binding recommendations in ways that avoid unnecessary interference with international travel and trade.

States Parties to the IHR (2005) must strengthen public health capacities at designated airports, ports and ground crossings in both routine circumstances and when responding to events that may constitute a public health emergency of international concern.

IHR authorized list of ports
List of ports and other information

Ship sanitation inspection and issuance of ship sanitation certificate Learning Programme
IHR training site

PAGNet
About PAGNet

Guidance, advice and tools
— access the documents

Related links
WHO works in close collaboration with other UN and international organizations to provide guidance to States Parties in the implementation of the IHR (2005).

- About Global Capacities Alert and Response
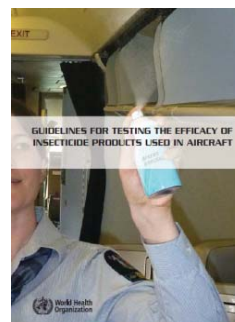- WHO Lyon office
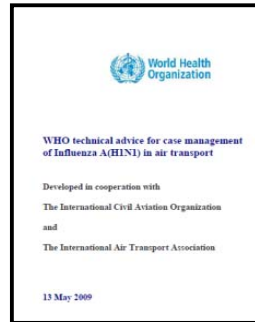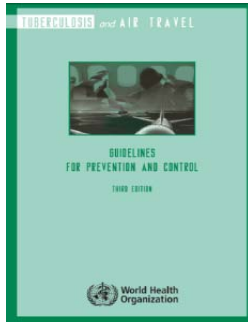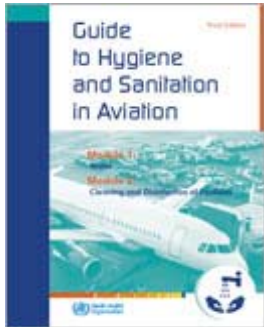- IHR news
- Collaborating centres
- WHO regional offices
- IHR portal
- E-mail: ihrinfo@who.int

3 mins Advocacy movie to bring you into the operational work on the ground

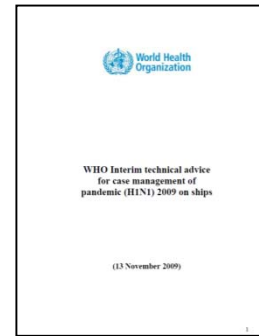**World Health Organization**

WHO PoE Guidance and tools - PUBLISHED

Air travel

Public health emergency Preparedness & Response

Ebola
Event management at Poe
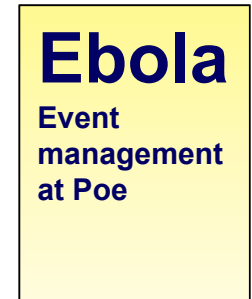
Ports and Ships
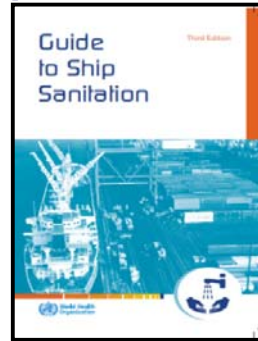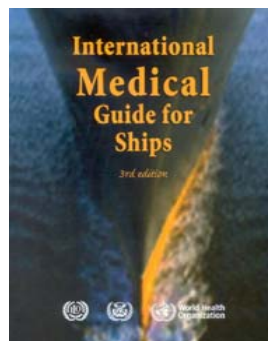
PoE core capacity checklist
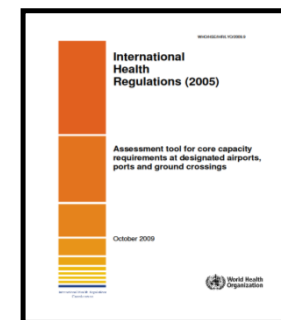
WHO Learning Program for Ship Inspection and Issuance of SSC under IHR 2005

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WHO PoE Guidance and tools under development

Event management

WHO Technical Advice for Event Management in Air Transport

WHO Technical Advice for Event Management on board ships

Strengthening Coordinated Surveillance at points of entry

Others

Procedures for Airport and Port Certification

Ground Crossings

WHO/HSE/IHR/GC...........
Draft

International Health Regulations (2005)

Technical Recommendations for the implementation of the IHR at ground crossings and cross border collaboration for the prevention and control of international spread of diseases

DRAFT VERSION NOT FOR DISTRIBUTION
Jun 2011

Vector

Vector Surveillance and Control at PoE

Handbook
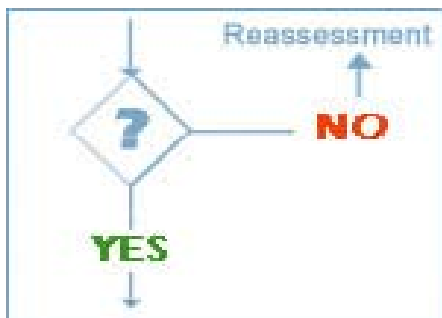Vector Surveillance and Control at Ports, Airports and Ground Crossings

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Project on PoE Vector Identification Platform

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WHO Online modules on IHR

https://extranet.who.int/ihr/training

Self-learning modules

10 minutes to 15 hours

Several languages

Ebola new

► **Quiz**
► **Introduction to IHR**
► **Introduction to IHR for WHO staff**
► **Introduction to the Decision Instrument (Annex 2)**
➢ **Ship Sanitation Inspection and Issuance of SSC**

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Opportunities
Networks

- WHO (host)
  - GOARN - Global Outbreak Alert and Response Network
  - IHR 2005 EIS/EMS
  - PAGnet - Global Ports, Airports and Ground Crossing Network

- ICAO CAPSCA (PH Emergency planning for air travel)

- EU AIRSAN Network

- EU SHIPSAN Network

- EU EPISOUTH

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PAGNet Ports, Airports and Ground Crossings Network

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  - All
  - Events
  - News
  - Publications
- **Guidance and Tools**
- **Helpful Links**

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News and events

Video- International Health Regulations: Implementation in Uzbekistan

An informative video related to implementation of Interntional Health Regulations in Uzbekistan, particularly at Points of Entry is now available in Russian and English at the webpage for Uzbekistan, WHO Regional office for Europe. Watch it at:

Publication Date: Fri, 2014-04-11
Topic: Publications

WHO - World Health Day – 7 April 2014 (click here to read more)

WHO will be drawing attention to a group of diseases that are spread by insects and other vectors, the health and economic burdens they impose, and what needs to be done to reduce these burdens. WHO will be reaching out to travellers, one of the target audiences for this campaign, at special installations at London's Heathrow and Washington DC's Dulles airports.

Publication Date: Tue, 2014-04-01
Topic: Events

SHIPSAN ACT Newsletter Issue 6, Feb 2014

EU SHIPSAN ACT has newly released Newsletter Issue 6, you can read this round-up on latest news at
http://www.shipsan.eu/Home/NewsandEvents/TabId/116/ArtMID/527/ArticleID/55/EU-SHIPSAN-ACT-JA---Newsletter-Issue-6.aspx

Publication Date: Tue, 2014-02-11
Topic: News

Update on Avian Influenza on WHO Website

An update on Avian Influenza has been posted on the WHO's International travel and Health Website
http://www.who.int/ith/updates/20140123/en/index.html

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PUBLIC HEALTH

↑ Baggage Claim Terminal

Thank you

شكرا

Merci

Gracias

谢谢

спасибо

Obrigado

www.who.int/ihr/ports_airports/en/

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