



ICAO

International Civil Aviation Organization  
North American, Central American and Caribbean Office

INFORMATION PAPER

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**Tenth North American, Central American and Caribbean Directors of Civil Aviation Meeting  
(NACC/DCA/10)**

Martinique, France, 21 to 23 June 2022

**Agenda Item 3: Status of Aviation Recovery and 2022 and new 2023-2025 Triennium Priorities for the NAM/CAR Regions**

**IATA VIEWS ON RESPONSE TO PANDEMICS AND PUBLIC HEALTH EMERGENCIES**

(Presented by IATA-the International Air Transport Association)

**EXECUTIVE SUMMARY**

IATA recognizes the work undertaken by ICAO and CAPSCA in responding to the challenges of the COVID-19 pandemic. IATA also recognizes the importance of aviation in health emergencies, not only as a means of spread of infectious disease from one country to another, but also in responding to the outbreaks in facilitating the shipment of vaccines, medicines and medical equipment and in maintaining essential trade and commerce to continue to support the economy in affected areas.

The global response to COVID-19 has shown the limitations of the current International Health Regulations (IHR) framework. The actions taken by States have been fragmented leading to a complex patchwork of border restrictions and health measures. In particular, measures have apparently been designed to limit movement and contact with very little attention to avoiding “unnecessary interference with international travel and trade”.

<b>Action:</b>	Take note of the information presented in this working paper.
<i>Strategic Objectives:</i>	<ul style="list-style-type: none"><li>• Safety</li><li>• Air Navigation Capacity and Efficiency</li><li>• Security &amp; Facilitation</li><li>• Economic Development of Air Transport</li><li>• Environmental Protection</li></ul>

**1. INTRODUCTION**

1.1 Air transport can have a role in accelerating the spread of disease outbreaks from one region to another, as was the case particularly during the early stages of the COVID-19 pandemic. Aviation has also played a vital role in responding to the pandemic by facilitating the supply of medical expertise

to the affected regions, by permitting the transport of vaccines, medicines, and laboratory reagents and specimens for analysis, and by ensuring that commerce and trade is maintained to the greatest extent possible.

1.2 IATA laments the serious public health impacts of COVID-19 and extends sympathies to those affected and their families. IATA regrets the devastating consequences of the pandemic for travel and tourism including the loss of as many as 46 million jobs supported by air travel and a reduction of \$1.8 trillion in the economic activity supported by aviation.

1.3 As the trade association for the global airline industry, IATA reaffirms the continuing commitment of airline members to implementing globally agreed biosafety protocols to ensure that air travel is not a meaningful vector for further international spread of COVID-19 or other communicable diseases. IATA is a non-State actor with the WHO and as such has a workplan agreed with the WHO, the current edition of which is valid until end of 2023.

## 2. THE RESPONSE TO COVID-19

2.1 The WHO publishes and administers the IHR which provide the overarching legal framework that defines countries' rights and obligations in handling public health events and emergencies that have the potential to cross borders. The IHR are an instrument of international law that is legally-binding on 196 countries, including the 194 WHO Member States.

2.2 The purpose and scope of the IHR are “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.”

2.3 The IHR call on the WHO to make recommendations based on “scientific principles as well as *available* scientific evidence and information” and sets an expectation that any recommended measures should “on the basis of a risk assessment appropriate to the circumstances, [be] not more restrictive of international traffic and trade and are not more intrusive to persons than reasonably available alternatives that would achieve the appropriate level of health protection.”

2.4 The global response to COVID-19 has shown the limitations of the IHR framework. In particular, there has been a lack of: effective coordination at national level, with aviation and public health not always working well together; international cooperation, with States not applying measures on a consistent basis; and collaboration between public and private sectors, leading to challenges with the practical implementation of measures.

2.5 Accordingly, the actions taken by States have been fragmented leading to a complex patchwork of border restrictions and health measures, with little or no consistency in the measures themselves or how they are implemented. This situation has been exacerbated by a lack of clear and timely guidance from the WHO. In particular, the WHO has been very slow to acknowledge the important role that testing and vaccination can have in reducing the cross-border spread of the SARS-COV2 virus and has also failed to put in place in a timely manner, a standardized set of health credentials and a process for digital issuance and verification of such certificates.

2.6 The consequence of the uncoordinated imposition of border closures and quarantine measures has been catastrophic. The inconsistent and fast changing measures have created widespread confusion for travellers, crew and aviation industry stakeholders. Border restrictions have resulted in a 90% reduction in international air travel, threatening the significant economic and social benefits created by global air connectivity.

2.7 In this context, IATA appreciates the efforts of ICAO and CAPSCA to foster cooperation between the air transport and public health communities. IATA also welcomes the work of the ICAO Council Aviation Recovery Task Force (CART) in rapidly developing a multi-layered set of biosafety protocols for managing the health risks associated with cross-border travel as well as the work of the ICAO Health Issues and Outbreak in Aviation Task Force (HIOATF) in reviewing the health-related framework provided for in ICAO Annex 9 – Facilitation.

2.8 In order to enhance coordination at national level, IATA considers that it will be important to make much better use of and leverage more effectively States' National Air Transport Facilitation Programme (NATFP) and to strengthen the role of National Air Transport Facilitation Committees (NATFC).

2.9 Effective cross-sectoral coordination and reliable public-private cooperation are essential to an effective global response to pandemics and public health emergencies and the experience of COVID-19 has shown that much work needs to be done along both of these dimensions to ensure that air transport is not affected by future health emergencies in the way it has been devastated by COVID-19.

### 3. **SUGGESTED ACTION**

3.1 The Meeting is invited to take note of the information presented in this paper.