

Workshop on

Challenges for IHR (2005) implementation in Mediterranean and Balkan countries

Participant

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Background

Adopted in 2005 and entered into force on 15 June 2007, the revised International Health Regulations (IHR 2005) represent the framework for international measures to prevent the trans-national spread of infectious diseases.

The implementation process covers a two year period for assessment of the national capacities for surveillance of and response to public health emergencies of international concern (PHEIC) as well as at the points of entry and another three years period to meet the recommended requirements under IHR (2005).

According to the article 54 (1) of the IHR (2005), State Parties and the Director General should report annually at the World Health Assembly (WHA) on the implementation of these Regulations. According to the same article 54 (3), the WHO should review and evaluate the functioning of the annex 2 and submit the results to WHA, for consideration.

Among the EPISOUTH participating countries which responded to an assessment done in June 2007, seventeen out of the 19 respondents have an IHR (2005) focal point established/designated in their countries. In two countries, the establishment was still in progress at that time. Most of the IHR focal points were established within Ministries of Health (12 out of 19), the others being located within national public health institutes or other surveillance centres.

In the same assessment, the existence of bilateral agreements for cross-border surveillance was mentioned by 40% of respondents. An “in progress activity” is reported by 10% institutions. A bilateral system was considered useful for urgent information exchange regarding cross-border epidemiological threats by nine responders (42.9%). All respondents stated reporting surveillance data to WHO by their respective institutions.

Activities

- **Round Table 1: Challenges for IHR (2005) implementations (1h)**
 - Presentations: Lebanon, Romania, Spain, WHO

- **Round Table 2: Integration of the alternative information on the national surveillance system (1h)**
 - Presentations: Israel, Morocco, Bulgaria



- **Focus Group: Challenges for IHR (2005) implementations (3h)**

- **Presentation of the key problems discussed and conclusions of the group (1h)**
 - **10 minute presentation**
 - **powerpoint support**
 - **presenter elected by the group**

Objective: to identify difficulties that Mediterranean and Balkan countries encountered in the implementation of the IHR (2005) at different levels in the countries and in different related fields: legislation, surveillance and response, points of entry, communication, integration of alternative information.

Specific objectives:

1. give a short update of assessment of the IHR (2005)-related national capacities in their country
2. list at least two constraints on the implementation of the IHR(2005) in different fields: legislation, surveillance and response, point of entry, communication
3. discuss strengths and weakness of using different alternative sources for health-related information are used in the EpiSouth countries (other than routine surveillance and outbreak reports) for detection of events that may constitute public health emergencies at national level (i.e. weather reports, environmental, agriculture sources, media reports, Internet, blog discussions, non-governmental organization reports, etc)
4. identify strengths and weaknesses of IHR (2005)-related activities at one year after entry into force

Key issues to be discussed on IHR(2005):

- article 4: establish or designate the National Focal Point (NFP) for IHR (2005) and make it functional according to the National Focal Point Guide; and establish the relevant sectors in the country responsible for surveillance and reporting, points of entry, public health services, clinics and hospitals and other government departments (article 4, point 2b);
- articles 5, 13, 19 and annex 1A: national core capacities in surveillance and response of events that may constitute PHEIC should be assessed and developed until 2012; legislation had to be modified and financial resources identified for implementing the core capacities requirements?
- articles 19-22, 39, annex 1B and 3: implement the point of entry requirements;
- articles 6-10 and annex 2: communication to the WHO and verification of events that may constitute PHEIC.
- articles 44 and 57: participation to the regional arrangements.

Check list of topics to be addressed:

1. Functionality of the National Focal Point
2. Legislation
3. Surveillance and response
4. Early warning
5. Regional/bilateral arrangements
6. Points of entry



References

1. WHO – Resolution WHA 58.3: Revision of the International Health Regulation
<http://www.who.int/csr/ihr/WHA58-en.pdf>
2. WHO - IHR (2005) web-page <http://www.who.int/csr/ihr/en/>
3. WHO - IHR Guidance for national policy-makers and partners
<http://www.who.int/csr/IHR%20Guidance%20for%20national%20policy%20makers%20and%20partners.pdf> accessed on 12 May 2008