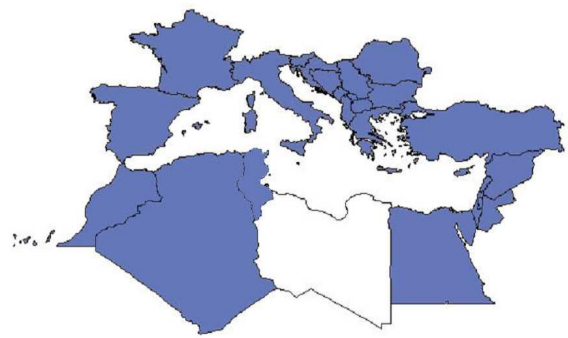


Challenges in the implementation of International Health Regulations (2005) among EPISOUTH countries, in the Mediterranean and Balkan regions

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BACKGROUND



EpiSouth Region 2008

The revised International Health Regulations (IHR2005) urge all countries bound by them to strengthen their national systems for surveillance and response to prevent the trans-national spread of infectious diseases.

The EpiSouth project, co-funded by European Commission (DG SANCO) and supported by the Italian Ministry of Health (EpiMed Project), aims at setting up a framework of collaboration on epidemiological issues to improve communicable disease surveillance, communication and training in the Mediterranean and Balkan regions.

One year after IHR2005 entered into force, a workshop on "Event-based risk assessment on Public Health: Challenges for IHR2005 implementation" was held in Madrid (June 2008) under the auspices of EpiSouth, involving 29 participants from 18 countries.

METHODS

Short country presentations (4/session) regarding:

- *Achievements and challenges in implementing IHR2005*
- *Integration of alternative information on the national surveillance system*

Focus group discussions: participants were distributed into four groups of similar decision-making level.

Participants: IHR2005 focal points (7), Ministries of health (9), National health institutes (18), intermediate / regional level (2)

Logistic:

- a common discussion-guide was developed
- 6-8 participants in each group
- moderator led discussions
- one "recorder" / group assisted the moderator

Discussions covered IHR2005-related **topics** such as: legislation, surveillance and response, points of entry, communication and integration of alternative sources of information.

Groups summarized discussions in a plenary session.

RESULTS

- **General:** limited awareness of the implementation and poor communication between levels have been noticed, mainly in the groups that did not include IHR2005 focal points.
- **Legislation:** groups including IHR 2005 focal points perceived that only minor changes were necessary, but those including professionals from national and regional level felt that major changes are needed in the current legislation.
- **Surveillance and Response:** all groups expressed a need for strengthening national surveillance systems requiring additional funds which might not be available.
- **Early warning:** all groups agreed on the need to make better use of alternative sources in event-based surveillance.
- **Points of entry:** since various institutions are involved in the related activities, procedures for coordination and collaboration between all of them are needed.
- **Challenges:** groups differ on urgent needs: High-level decision making groups perceived that human resources, salaries, multisectorial cooperation and the efficient response were the priorities; however, low-level decision making groups perceived that keeping high motivation among peripheral level teams, better communication and including multi-sectorial teams in the action plans were the priorities for better implementing IHR2005.
- Only 4 participants were aware whether their countries notified any risk of international concern to WHO during the first year of IHR2005 application.

CONCLUSIONS

- Understanding of IHR2005 principles and knowledge on its implementation process varied widely between groups according to decision-making level.
- IHR2005-related awareness on the intermediate level was perceived at the central level as higher than it actual is.
- Among IHR2005 focal points, main concerns were external communication, quality and capacity for efficient response.
- Main obstacles to IHR2005 implementation mentioned in central-level groups were weaknesses in national surveillance systems, difficult inter-/intra-institutional communication and poor dissemination of IHR2005-related information on the intermediate level.

RECOMENDATIONS

- As proper implementation implies commitment of national surveillance systems to IHR2005 principles, homogeneous awareness and active involvement of all actors across various country levels is essential.
- Our results may complement WHO's annual assessment of the first year of IHR2005 implementation.

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