

International Health Regulations: A Tool for Monitoring and Harmonizing Global Health Security



Dr Alissar Rady, NPO, WHO

Global Health security has become not only a population health issue, but also a global developmental concern, in view of the worldwide economic interdependence and trade, the risks of fast transmission of infectious diseases incurred by ease and frequency of travel as well as rising violence conflicts and subsequently potential threats to chemical biological and radiological exposure.

In this context, the paradigm shift in the International Health Regulations (IHR) defines public health events of international concerns (PHEIC) as “an extraordinary event which is determined:

- to constitute a public health risk to other States through the international spread of disease; and
- to potentially require a coordinated international response” (IHR WHO, 2005).

In 2005, the IHR became a binding legal document. Accordingly, all 194 countries are mandated to control and contain the public health risks that may be encountered on the day- to- day events , or unexpectedly. The international community is also bound to specific measures related to global surveillance and monitoring, risk reduction, rapid response and measures for containment. However, timeliness, appropriateness

and efficiency of the measures to mitigate and contain risks necessitate understanding the nature of the risk, and a cross sectoral collaboration and communication. **The IHR are the tool that would allow countries to improve their readiness for early detection, generating alerts, and standardization of the response.** Inter-country collaboration and coordination, and coordination and complementarity with various non health sectors such as transport and trade, water and energy institutions, research labs, food safety and environmental safety institutions and authorities with the Health authorities at global and international levels is requested under the IHR. Often the private – public partnership is instrumental for adequate stockpiling of critical supplies and design of appropriate preparedness and response.

WHO has established over the past five years mechanisms and procedures to assist countries in IHR preparedness and response. One mechanism is the IHR Emergency Committee. This committee advises the Director General on the recommended measures to be promulgated on an emergency basis, known as temporary recommendations. Temporary recommendations include health measures to be implemented by the State Party experiencing the PHEIC, or by other States Parties, to prevent or reduce the international spread of disease and avoid unnecessary interference with international traffic (ref WHO IHR web site 2014).

Another mechanism is the establishment of the web based list of authorized ports and airports. Recently, WHO established the PAGnet, which provides a web based learning platform for experts and IHR focal points with focus Points of Entry;

In order to ensure that laboratories release results in a safe, secure, timely and reliable manner, WHO provides

frameworks, tools and expertise to improve specimen transport systems, combined with strong laboratory biorisk management measures and laboratory quality monitoring systems.

With mass gatherings increasing over the past few decades, the risk of potential importation or international spread of infectious disease presents additional challenges. WHO provides guidance to the needs of event organizers and local and national authorities.

With almost 10 years after their coming into effect, the IHR have been an important tool to tailor the global response to two pandemics: the novel influenza and

the avian influenza; over this one last year, two PHEIC have been observed: the MERs CO V and currently the EBOLA outbreak. Despite the fact that countries have accelerated the reinforcement of their capacities in several aspects, more efforts are required to adopt comprehensive integrated approaches at country level, and to ensure that preparedness and readiness is considered in the overall country planning and management of public health emergencies. Emerging and re-emerging infectious diseases, as well as chemical, biological and nuclear/ radiological threats whether intentional or non intentional remain a reality of global health security concern that warrant continued vigilance for a wider and more sustained implementation of the IHR.

