Overview of
International Health Regulations 2005
(Ghana, 2017)
OUTLINE

- What is IHR?
- Scope and Purpose
- Key Activities
- Capacities needed at various levels
- What is a PHEIC?
- Milestones
The International Health Regulations (2005) ("IHR (2005)" or Regulations”) are an international legal instrument designed to help protect all States from the international spread of disease.

The IHR (2005) entered into force on 15 June 2007. They are currently legally binding on 196 States Parties around the world (including all WHO Member States).
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.
The IHR (2005) cover a wide range of public health risks of potential international concern: irrespective of origin or source (which may include biological, chemical or radio-nuclear events) whether potentially transmitted by:

- person (e.g. SARS, Influenza, Polio, Ebola),
- goods, food, animals (including zoonotic disease risks),
- vectors (e.g. plague, yellow fever, West Nile fever),
- environment (e.g. radionuclear releases, chemical spills or other contamination).
The Principles Embodying the IHR (2005) are guided by

- Full respect for the dignity, human rights and fundamental freedom of persons;


- The goal of their universal application for the protection of all people of the world from the international spread of disease.
List of IHR Core Capacities

- Legislation, policy and financing
- Coordination & NFP
- Communications
- Surveillance
- Response
- Preparedness
- Risk Communication
- Human Resources
- Laboratory
RELEVANT SECTORS

- Environment
- Public Health
- International Ports, Airports, Ground Crossings
- Customs
- Food Safety
- Agriculture (including Animal Health)
- Radiation - Nuclear Safety
- Chemical Safety
- Transportation (including dangerous goods)
- Etc.
Core capacities of IHR are important at country level to detect, assess, notify, report events and respond to public health risks and emergencies of both national and international concern.

The public health emergencies include continuous threat from potential hazards.
- Infectious Disease Hazards
- Zoonotic Events
- Food Safety Events
- Chemical Events
- Radiological and Nuclear Events
Achievements - 1

- Establishment of a National IHR Focal Point located at the Disease Surveillance Department of GHS
- Regular monitoring of progress of implementation and annual reporting to the WHO Secretariat which reports to the World Health Assembly
- Core capacity assessment conducted in August 2011
- The passage of the Public Health Bill into an Act with IHR (2005) as the 8th Schedule
Achievements - 2

- Ghana has adapted the Second Edition IDSR Guidelines which also promotes IHR (2005) implementation
- Development of IHR Website-www.ihrghana.org
- Training of staff at designated Points of Entry on IHR Core capacity requirements
- IHR Steering Committee inaugurated in 2013
Capacities at the C’ty/District Level:

A. To detect events involving disease or death above expected levels for the particular time and place in all areas

B. To report all available essential information immediately to the appropriate level of healthcare response.
   - At the community level, reporting shall be to local community health-care institutions or the appropriate health personnel (CHPS Compound/Health Center)
   - At the District response level, reporting shall be to the regional response level

C. To implement preliminary control measures immediately
Capacities at the regional Level:

A. To confirm the status or reported events and to support or implement additional control measures, and
B. To assess reported events immediately and, if found urgent, to report all essential information to the national level. The criteria for urgent events include serious public health impact and/or unusual or unexpected nature with high potential for spread.
Capacities at the National Level - 1:

Assessment and notification:

A. to assess all reports of urgent events within 48 hours; and

B. to notify WHO immediately through the National IHR Focal Point when the assessment indicates the event is notifiable
Capacities at the National Level - 2

Public Health Response:

A. To determine rapidly the control measures required to prevent domestic and international spread;

B. To provide support through specialized staff, laboratory analysis of samples (domestically or through collaborating centers) and logistical assistance (e.g. equipment, supplies and transport);

C. To provide on-site assistance as required to supplement local investigations;

D. To provide a direct operational link with senior health and other officials to approve rapidly and implement containment and control measures;

E. To provide direct liaison with other relevant government ministries;
Capacities at the National Level - 3

Public Health Response:

F. to provide, by the most efficient means of communication available, links with hospitals, clinics, airports, ports, ground crossings, laboratories and other key operational areas for the dissemination of information and recommendations received from WHO regarding events in the State Party’s own territory and in the territories of other State Parties;

G. to establish, operate and maintain a national public health emergency response plan, including the creation of multidisciplinary/multisectoral teams to respond to events that may constitute a public health emergency of international concern; and

H. to provide the foregoing on a 24-hour basis.
What is a Public Health Emergency of International Concern (PHEIC)?
Public Health Emergency of International Concern (PHEIC)

PHEIC is an extraordinary event which is determined as provided in IHR (2005)

- To constitute a public health risk to other States through the international spread of disease and
- To potentially require a coordinated international response
- PHEICs can only be declared by the Director General of WHO
Making a PHEIC determination

In determining whether an event constitutes a PHEIC, the WHO DG must consider:

- Information provided by the State Party;
- The decision instrument in Annex 2
- The advices of the Emergency Committee
- Scientific principles and evidence etc.
- An assessment of the risk
  (1) to human health
  (2) of international spread; and
  (3) of interference with international traffic.

- The WHO Director-General makes the decision
**Decision Instrument for the Assessment and Notification of Events That May Constitute a Public Health Emergency of International Concern**

Any event of potential international public health concern, including those of unknown causes or sources and those involving other events or diseases than those listed in the box on the right shall lead to the utilization of the algorithm.

**Is the event unusual or unexpected?**

- Yes
- No

**Is the public health impact of the event serious?**

- Yes
- No

**Is there a significant risk of international spread?**

- Yes
- No

**Is there a significant risk of international travel or trade restrictions?**

- Yes
- No


- Smallpox
- Polio (wild-type Poliovirus)
- Human influenza caused by a new Subtype

Insufficient Information: Reassess
Serious Impact on Public Health?

- There is potentially high morbidity and/or mortality
- The geographic scope is large (e.g. multi-state or regional); is in area of high population density
- The agent is highly transmissible/pathogenic
- The event has compromised containment or control efforts
- Therapeutic/prophylactic agents are unavailable, absent, or ineffective
- Cases occurring among health care staff
- Assistance for investigation & response required
  - If we answer YES for at least 1 of the above then the event has a serious impact on public health
Unusual or Unexpected?

- The disease causing agent is yet unknown or a new (emergent) pathogen
- The population affected is highly susceptible
- The event is unusual for the season, locality or host
- There is a suspicion that this may have been an
- Agent had been eliminated or never reported in the country

- If we answer YES for at least 1 of the above, then the event is unusual or unexpected
Significant Risk for International Spread?

- Epidemiologic lint to a similar event outside the States Party.
  - International travel or gathering
  - Contact with traveler or mobile population
- Potential cross-border movement of pathogen/agent/host
- Conducive transmission vehicles: air, water, food or environmental

If we answer YES for at least 1 of the above, then the event has a significant risk for international spread
Risk for Trade or Travel Restrictions?

- There is a history of similar events in the past that have resulted in restrictions
- The event is associated with an international gathering or a tourist area
- The event is or has gained significant government or media attention
- There is a zoonotic disease or the potential for an epizootic event, or exported/imported food/water-related

- If we answer YES for at least 1 of the above, then the event has a risk for trade or travel restriction.
Essential Information

Essential information when writing reports include:

- Clinical descriptions,
- Laboratory results,
- Sources and type of risk,
- Numbers of human cases and deaths,
- Conditions affecting the spread of the disease and the health measures employed
- Reports of national events should be sent to the National IHR Focal Point immediately;
  ihr.ghana@ghsmail.org; 0302 675142; 026 8157618
Responsibilities of Stakeholders

- Report all potential Public Health Emergencies of International Concern to the Ghana IHR Contact Point
- Establish SOPs with linkages with relevant sectors
- Identify staff that can serve in a pool of IHR experts to assess/investigate Public Health events
- Give orientation to all workers on importance of IHR
- Plan and seek resources to implement activities that are relevant to IHR
Thank You