



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



52nd DIRECTING COUNCIL **65th SESSION OF THE REGIONAL COMMITTEE**

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Provisional Agenda Item 4.8

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IMPLEMENTATION OF THE INTERNATIONAL HEALTH REGULATIONS

Purpose and Background

1. With reference to Articles 5 and 13 of the International Health Regulations (1) (IHR; hereafter also referred to as the “Regulations”), the purpose of this document is to facilitate the consolidation of a common position by States Parties in the Region of the Americas regarding the criteria proposed by the WHO Secretariat for granting an additional two-year extension, until 15 June 2016, for establishing core capacities detailed in Annex 1 of the Regulations and institutionalizing the mechanisms to maintain them after that date.
2. In addition, with reference to Article 54 of the IHR and recalling Resolution WHA61.2, “Implementation of the International Health Regulations (2005)” (2), this document is intended to initiate the process for consolidating the position of States Parties in the Region regarding the procedures, methods, and tools to monitor and report on the status of the IHR, in particular beyond 15 June 2016.

Situation Analysis

3. A comprehensive account of the status of IHR implementation in the Americas was presented to the Pan American Health Organization (PAHO) Executive Committee at its 152nd session (3). The table in the annex of the present document shows the status of core capacities across States Parties in the Region. As noted in the table, 29 of the 35 States Parties (83%) were granted an extension until 15 June 2014 (from the initial deadline of 15 June 2012) to establish core capacities.
4. However, meeting the June 2014 deadline for establishing core capacities poses substantial challenges to States Parties and to PAHO/WHO. The criteria proposed by the

WHO Secretariat for obtaining an additional two-year extension for establishing core capacities are the following (4, 5):

- (a) A State Party makes a formal request in writing to the Director-General at least four months in advance of the target date (which for most countries is 15 June 2014). This request must include a statement explaining the exceptional circumstances that have prevented the development and maintenance of the national International Health Regulations (2005) capacities.
- (b) Any such request must be accompanied by a new implementation plan that includes the following elements: (i) a clear and specific identification of those capacity elements that are missing or inadequate; (ii) a description of the activities and progress made in establishing those capacities up until that date; (iii) a set of proposed actions that will be undertaken and a specified time frame to ensure the capacities are present; and (iv) an estimation of the technical support and financial resources required to implement these activities; the proportion of these resources that will be invested from national budgets; and the extent of any external support required.

Action by the Directing Council

6. The Directing Council is requested to: (a) review the information provided in this document; (b) to make recommendations that it considers pertinent regarding the criteria proposed by the WHO Secretariat for granting an additional two-year extension, until 15 June 2016, for establishing core capacities; and (c) to provide a consensus position to be presented to the Executive Board at its 134th session in January 2014.

7. In addition, the Directing Council is invited to present its suggestions, if any, regarding the procedures, methods, and tools used to monitor and report on the status of the IHR implementation, in particular beyond 15 June 2016.

Annex

References

1. World Health Organization. International Health Regulations (2005): Second edition [Internet] Geneva: WHO; 2008 [cited 2013 Jul 12]. Available from: http://whqlibdoc.who.int/publications/2008/9789241580410_eng.pdf.
2. World Health Organization. Implementation of the International Health Regulations (2005) [Internet]. World Health Assembly, 2008 May 19-24, Geneva (Switzerland);


Geneva: WHO; 2008 (Resolution WHA61.2) [cited 2013 Jul 12]. Available from: http://apps.who.int/gb/ebwha/pdf_files/WHA61-REC1/A61_Rec1-part2-en.pdf.

3. Pan American Health Organization. Implementation of the International Health Regulations [Internet]. 152nd Executive Committee; 2013 Jun 17-21; Washington (DC), US. (Document CE152/INF/7-H, Rev.1) Washington (DC): PAHO; 2013 [cited 2013 Jul 12]. Available from: http://www.paho.org/hq/index.php?option=com_docman&task=doc_download&gid=21610&Itemid=270&lang=en.
4. World Health Organization. Implementation of the International Health Regulations (2005), report by the Director-General [Internet]. 132nd Executive Board; 2013 Jan 21-29; Geneva (Switzerland). Geneva: WHO; 2013 [cited 2013 Jul 12]. Available from: http://apps.who.int/gb/ebwha/pdf_files/EB132/B132_15-en.pdf and http://apps.who.int/gb/ebwha/pdf_files/EB132/B132_15Add1-en.pdf.
5. World Health Organization. Implementation of the International Health Regulations (2005), report by the Director-General [Internet]. 66th World Health Assembly; 2013 May 20-28; Geneva (Switzerland). Geneva: WHO; 2013 [cited 2013 Jul 12]. Available from: http://apps.who.int/gb/ebwha/pdf_files/WHA66/A66_16-en.pdf.

Summary Table: State Party Annual Report to the 66th World Health Assembly and National IHR Extension Action Plan 2012-2014, Region of the Americas

State Party	Requested and obtained 2012-2014 extension	Submitted State Party Annual Report to 66th WHA	Legislation Policy	Coordination	Surveillance	Response	Preparedness	Risk Communication	Human Resources	Laboratory	Points of Entry	Zoonotic Events	Food Safety Events	Chemical Events	Radiation Emergencies
Antigua and Barbuda	Yes	Yes	100	66	95	70	60	43	100	66	77	89	80	62	29
Argentina	Yes	Yes	50	73	80	83	100	86	100	73	NA ²	67	60	69	86
Bahamas	Yes	No													
Barbados	Yes	Yes	50	40	95	66	40	86	80	96	97	100	93	54	0
Belize	Yes	Yes	25	36	85	76	10	71	40	77	58	78	67	8	0
Bolivia (Plurinational State of)	Yes	Yes	50	56	75	83	60	43	0	86	51	78	60	31	71
Brazil	No	No													
Canada	No	Yes	100	83	100	100	100	100	100	100	94	100	100	100	100
Chile	No	Yes	50	46	85	94	70	57	20	67	87	89	93	23	79
Colombia	No	Yes	100	73	70	65	50	86	80	90	97	33	80	62	21
Costa Rica	No	Yes	100	100	95	94	60	86	100	80	91	100	100	38	21
Cuba	Yes	Yes	100	100	100	100	100	100	100	96	97	100	100	100	93
Dominica	Yes	Yes	75	100	85	65	50	29	0	71	87	78	73	31	0
Dominican Republic	Yes	Yes	75	90	80	48	70	86	40	39	21	44	27	23	57
Ecuador	Yes	Yes	0	56	35	47	20	43	20	35	45	56	60	38	71
El Salvador	Yes	Yes	75	90	100	100	50	71	100	100	97	67	73	46	86
Grenada	Yes	Yes	50	83	90	52	0	57	0	41	64	100	67	23	0
Guatemala	Yes	Yes	75	66	85	76	20	86	100	91	38	89	47	62	29
Guyana	Yes	Yes	100	83	80	94	90	71	80	100	50	100	67	62	7
Haiti	Yes	No													
Honduras	Yes	Yes	50	26	90	71	20	29	60	91	22	100	67	0	7
Jamaica	Yes	Yes	50	73	100	100	90	86	100	90	91	100	93	54	0
Mexico	Yes	Yes	100	53	80	89	60	43	80	96	54	89	87	69	86
Nicaragua	Yes	Yes	25	100	95	87	80	100	20	81	62	100	80	92	71
Panama	Yes	Yes	100	73	90	89	50	43	100	96	77	100	93	54	43
Paraguay	Yes	Yes	50	80	55	82	10	100	60	96	37	33	60	46	71
Peru	Yes	Yes	100	50	100	87	50	57	80	77	27	78	93	8	0
Saint Kitts and Nevis	Yes	Yes	100	66	60	52	40	29	20	59	97	78	93	31	14
Saint Lucia	Yes	Yes	0	73	80	65	50	29	20	43	12	67	40	15	0
Saint Vincent and the Grenadines	Yes	Yes	0	46	75	60	10	0	0	81	41	100	40	0	0
Suriname	Yes	Yes	50	66	35	66	50	43	0	90	51	56	67	54	0
Trinidad and Tobago	Yes	Yes	50	56	80	76	50	71	0	77	74	89	87	46	57
United States of America	No	Yes	100	100	100	100	100	100	100	60	100	100	100	100	93
Uruguay	Yes	No													
Venezuela (Bolivarian Republic of)	Yes	Yes	25	73	80	94	80	86	80	90	50	100	87	85	86
Core capacity score (%) - Regional average			64	70	82	78	55	65	57	79	65	83	75	48	41
States Parties that identified need for action to attain core capacity in IHR Extension Action Plans 2012-2014			26	26	25	27	21	20	25	24	25	16	16	21	21

Legend:

: Actions needed in order to attain the core capacity, but not considered a priority for the National IHR Extension Action Plan 2012-2014.

¹ Argentina submitted the report using the MERCOSUR tool and subsequently migrated data from the relevant sections to the format proposed by WHO, pursuant to agreement with UNASUR-GTVR.

² Information related to points of entry from Argentina was submitted in a format that could not be converted into the WHO format.