



Global, Regional and Country Mechanism on Strengthening of Health Security

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Historical Perspectives of Health Security-1



14th Century

- 'Quarantine' was officially issued at the seaport of Ragusa in an attempt to prevent bubonic plague from crossing borders



20th Century

- International Sanitary Convention, 1926 (Notification of plague, cholera, yellow Fever, Epidemic Typhus, small pox)
- International Sanitary Regulations, 1951



20th Century

- International Health Regulations, 1969 (Maritime Declaration of Health, Deratting Certificate, Aircraft Declaration of Health)
- Legal Binding for 194 countries

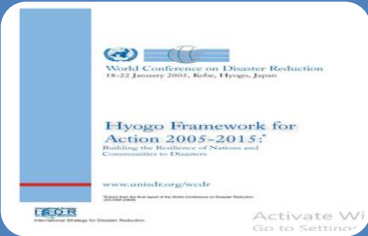


Historical Perspectives of Health Security-2



21st Century

- International Health Regulations (2005)
- PHEIC Declaration, Multi hazards approach, Containment at Source



21st Century

- Hyogo Framework for Action 2005-2015: International Strategy for Disaster Reduction
- Building the Resilience of Nations and Communities to Disasters



Health Cluster Coordination Mechanism, 2005



21st Century

- Asia Pacific Strategy for Emerging Infectious Diseases (2010)
- Asia Pacific Strategy for Emerging Infectious Diseases and Public Health Emergencies (2020)



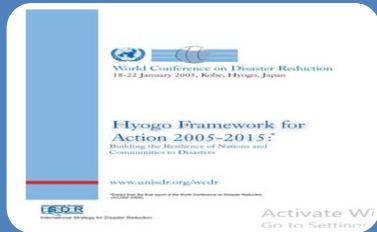
Historical Perspectives of Health Security-3

21st Century



- **Pandemic Influenza Preparedness (PIP) Framework, 2011**
- implement a global approach to pandemic influenza preparedness and response

21st Century



- **Hyogo Framework for Action 2005-2015: International Strategy for Disaster Reduction**
- **Building the Resilience of Nations and Communities to Disasters**

21st Century



- **Global Health Security Agenda, 2014**
- build and improve country capacity and leadership in the prevention and early detection of, and effective response to, infectious disease threats.



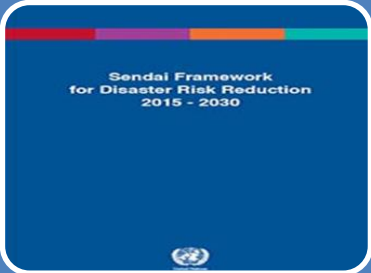
Historical Perspectives of Health Security-4

21st Century



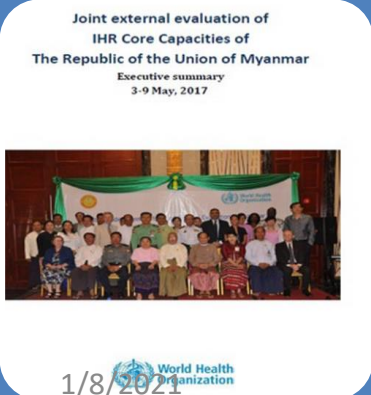
- Framework for Public Health Emergency Operation Centers, 2015
- EMT Initiative, 2017
- Emergency Response Framework, 2016

21st Century



- Sendai Framework for Disaster Risk Reduction 2015 – 2030 to Disasters

21st Century



- Joint External Evaluation, 2016
- a voluntary, collaborative, multisectoral process to assess country capacities to prevent, detect and rapidly respond to public health risks



Regional Mechanism (ASEAN)



Cluster	Goal 2020	Health priorities
1. Promoting healthy lifestyle	a) To achieve maximal health potential of ASEAN Community through promoting healthy lifestyle b) To ensure healthy lives and promote wellbeing for all at all ages	i. Prevention and control of NCDs
		ii. Reduction of tobacco consumption and harmful use of alcohol
		iii. Prevention of injuries
		iv. Promotion of occupational health
		v. Promotion of mental health
		vi. Promotion of healthy and active ageing
		vii. Promotion of good nutrition and healthy diet
2. Responding to all hazards and emerging threats	a) To promote resilient health system in response to communicable diseases, emerging infectious diseases, and neglected tropical diseases b) To respond to environmental health threats, hazards and disaster, and to ensure effective preparedness for disaster health management in the region	viii. Prevention and control of communicable diseases, emerging infectious diseases and neglected tropical diseases
		ix. Strengthening laboratory capacity
		x. Combating antimicrobial resistance(AMR)
		xi. Environmental health and health impact assessment (HIA)
3. Strengthening health system and access to care	a) ASEAN Community has universal access to[essential]health care, safe and good quality medical products including traditional and complementary medicines b) To achieve the unfinished health related MDGs, in light of the SDG	xii. Disaster Health Management
		xiii. Traditional Medicine
		xiv. Health related MDGs (4, 5, 6)
		xv. Universal health coverage (UHC)
		xvi. Migrants' health
		xvii. Pharmaceutical development
		xviii. Human Resources Development
4. Ensuring food safety	a) To promote access to safe food, safe drinking water and sanitation	xix. Health Financing
		xx. Food safety



GMS Health Security Project



- 125 million USD Regional Loan Project for Cambodia, Lao PDR, Myanmar and Vietnam from 2017-2022
- It is a third project cycle for CLV countries and 1st cycle in Myanmar

Output 1: Regional cooperation and communicable disease control in the border areas improved.

Output 2: National disease surveillance and outbreak response systems strengthened.

Output 3: Laboratory services and hospital infection prevention and control (IPC) improved.





Regional Mechanism (MBDS)



- Cambodia, China (Yunnan and Guangxi Provinces), Lao PDR, Myanmar, Thailand and Vietnam
- To reduce morbidity and mortality caused by outbreak-prone diseases in the sub-region since 2001
- Build local capacity, share information, and cooperate in outbreak response and pandemic influenza preparedness



International Health Regulations (IHR)

Global health security legal instrument to:

- Prevent
- Protect against
- Provide a public health response

...for ALL public health threats

INTERNATIONAL HEALTH REGULATIONS (IHR)

– from policy to people's health security

What are the IHR?

The IHR are legally binding and help countries work together to protect lives threatened by the spread of diseases and other health risks, including radiation and chemical hazards



5 reasons why the IHR matter

 <h4>HEALTH THREATS HAVE NO BORDERS</h4> <p>The IHR strengthen countries' abilities to control diseases that cross borders at ports, airports and ground crossings</p>	 <h4>TRAVEL AND TRADE ARE MADE SAFER</h4> <p>The IHR promote trade and tourism in countries and prevent economic damage</p>	 <h4>GLOBAL HEALTH SECURITY IS ENHANCED</h4> <p>The IHR establish an early warning system not only for diseases but for anything that threatens human health and livelihoods</p>	 <h4>DAILY THREATS ARE KEPT UNDER CONTROL</h4> <p>The IHR guide countries to detect, assess and respond to threats and inform other countries quickly</p>	 <h4>ALL SECTORS BENEFIT</h4> <p>The IHR prepare all sectors for potential emergencies through coordination and information sharing</p>
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A legally-binding global health security framework agreed to by 196 States Parties, including all World Health Organization (WHO) Member States.



IHR Core Capacities

- **Eight “core capacities”**
 - National legislation, policy and financing.
 - Coordination and National Focal Point (NFP) Communications.
 - Surveillance.
 - Response.
 - Preparedness.
 - Risk communication.
 - Human resources.
 - Laboratory.
- **Points of Entry**
- **Capacities for IHR-relevant hazards (infectious diseases, zoonoses, food safety, chemical, radio-nuclear).**



Selected Articles in IHR (2005)

- Article 4: Designated IHR Focal Point
- Article 5-6: Surveillance and Notification
- Article 7-12: Risk Assessment Process to PHEIC
- Article 13-18: Public Health Response and Recommendations
- Article 19-34: PoEs Obligations, Responsibilities, Health Measures
- Article 44: Collaboration and assistance
- Article 45: Assessing and Managing Public Health Risks
- Annex 1 A: Core Capacity Development for Surveillance and Response
- Annex 1 B: Core Capacity Development for POES
- Annex 2: Decision Making Tool for PHEIC
- Annex 5: Vector Control
- Annex 6: Vaccination





Decision instrument (Annex 2) of IHR (2005) for Assessment and Notification

4 diseases that shall be notified
**polio (wild-type polio virus),
smallpox, human influenza new
subtype, SARS.**

Disease that shall always lead to
utilization of the algorithm: **cholera,
pneumonic plague, yellow fever,
VHF (Ebola, Lassa, Marburg), WNF,
others....**

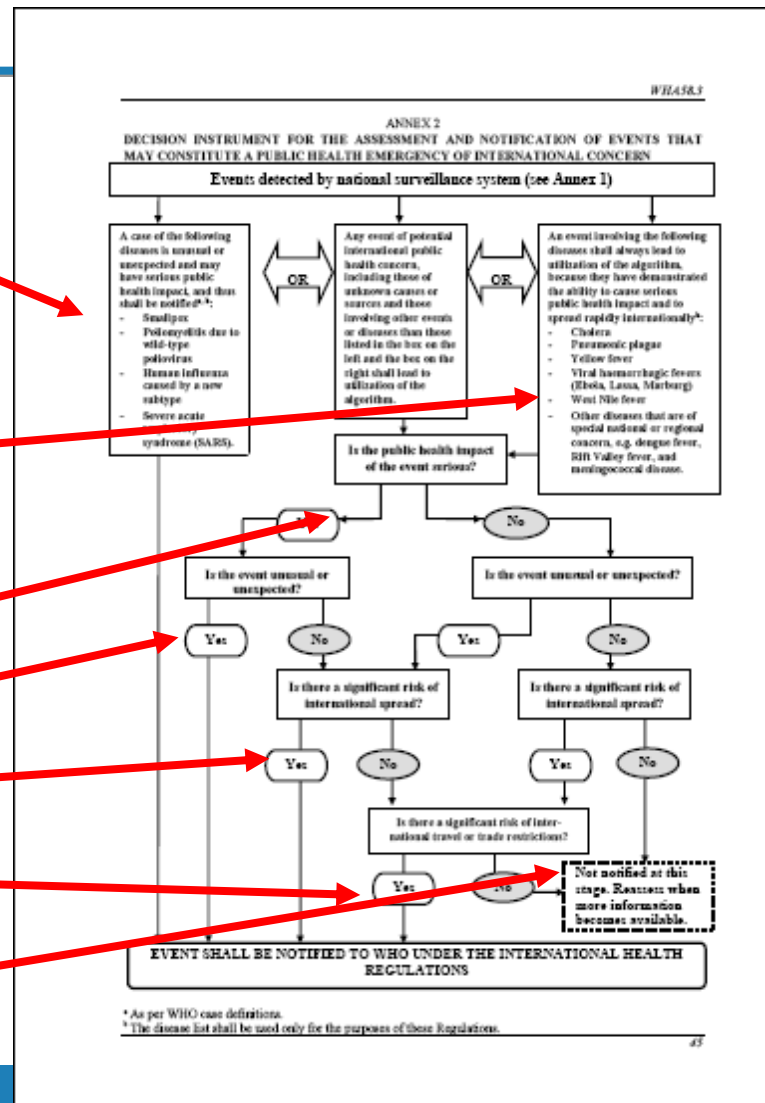
Q1: public health impact serious?

Q2: unusual or unexpected?

Q3: risk of international spread?

Q4: risk of travel/trade restriction?

Insufficient information: reassess

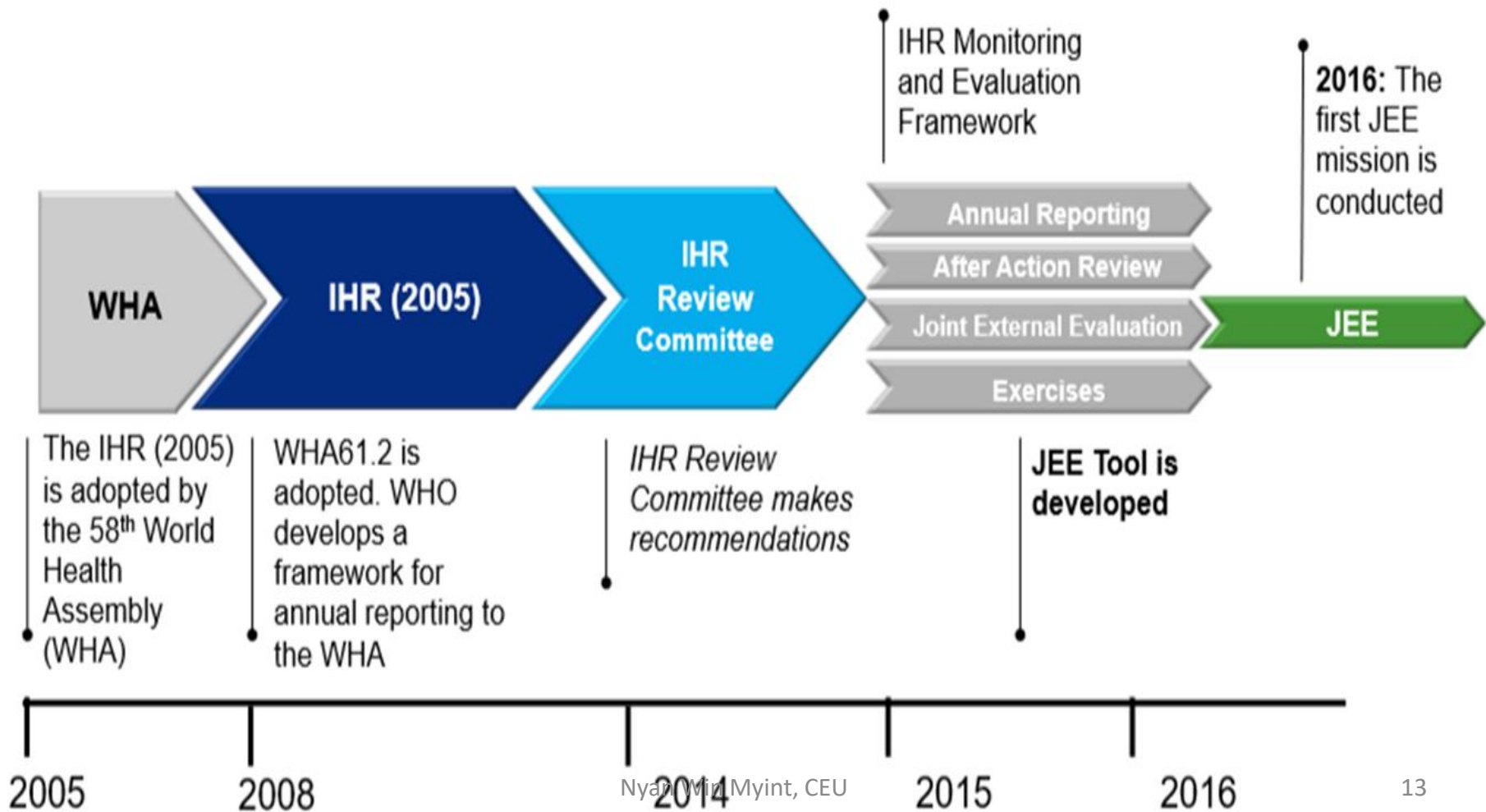




Joint External Evaluation Background

JEE History

The Joint External Evaluation is the first of its kind and has a short history.



The 19 Technical Areas (TA)

The JEE Tool examines 19 technical areas in four categories: Prevent, Detect, Respond and Other Hazards.

PREVENT

1. National Legislation, Policy and Financing
2. IHR Coordination, Communication and Advocacy
3. Anti-microbial Resistance (AMR)
4. Zoonotic Disease
5. Food Safety
6. Biosafety and Biosecurity
7. Immunization

DETECT

8. National Laboratory System
9. Real-Time Surveillance
10. Reporting
11. Workforce Development

RESPOND

12. Preparedness
13. Emergency Operations Centres
14. Linking Public Health and Security Authorities
15. Medical Countermeasures and Personnel Deployment
16. Risk Communication

OTHER HAZARDS

17. Points of Entry (PoEs)
18. Chemical Events
19. Radiation Emergencies



U.S.-Burma Relations

Fact Sheet, Office of the Spokesperson, Washington, DC
September 14, 2016

President Obama & State Counselor Aung San Suu Kyi





External Team Assessment Mission on Joint External Evaluation





JEE Scores, 2017

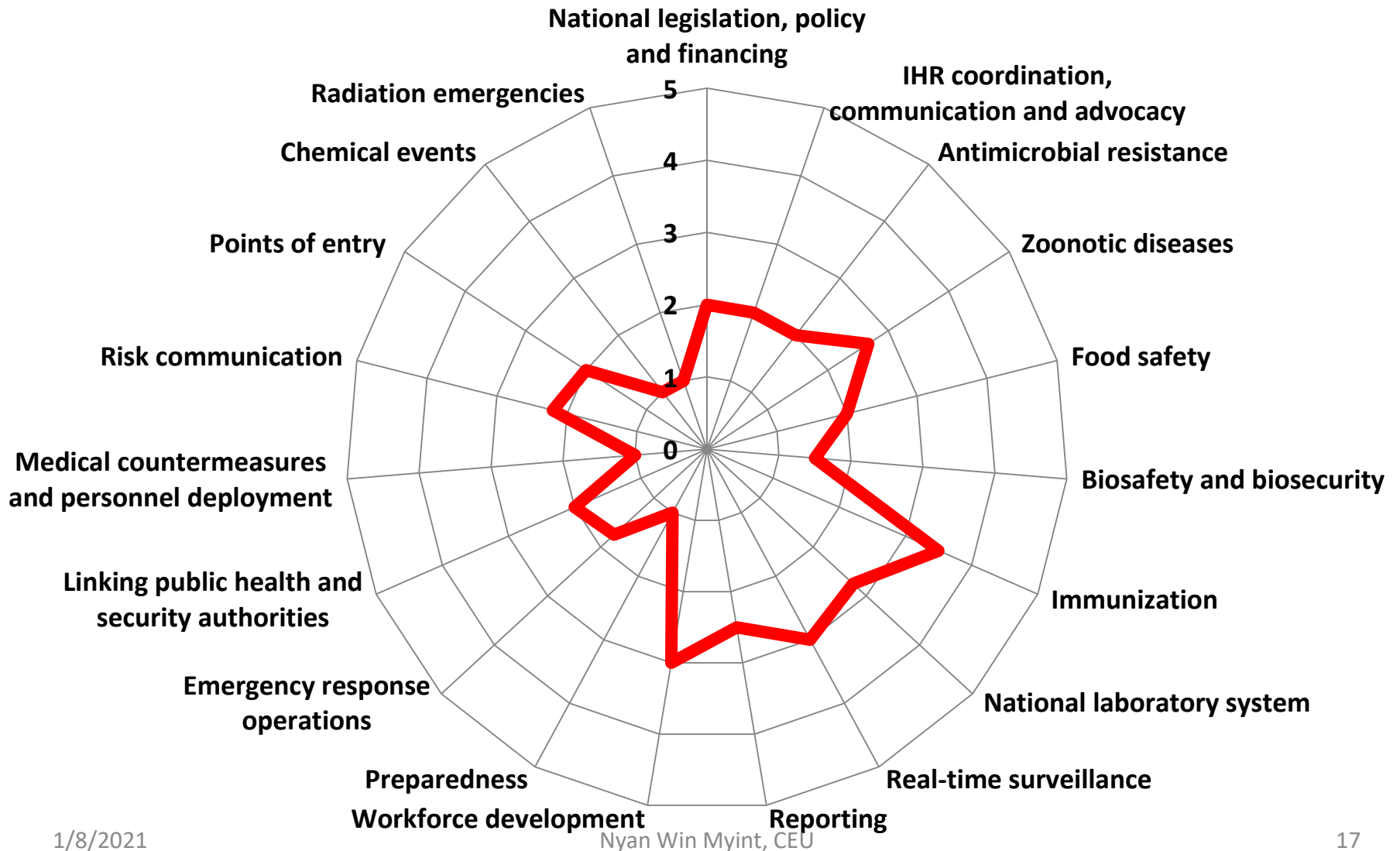
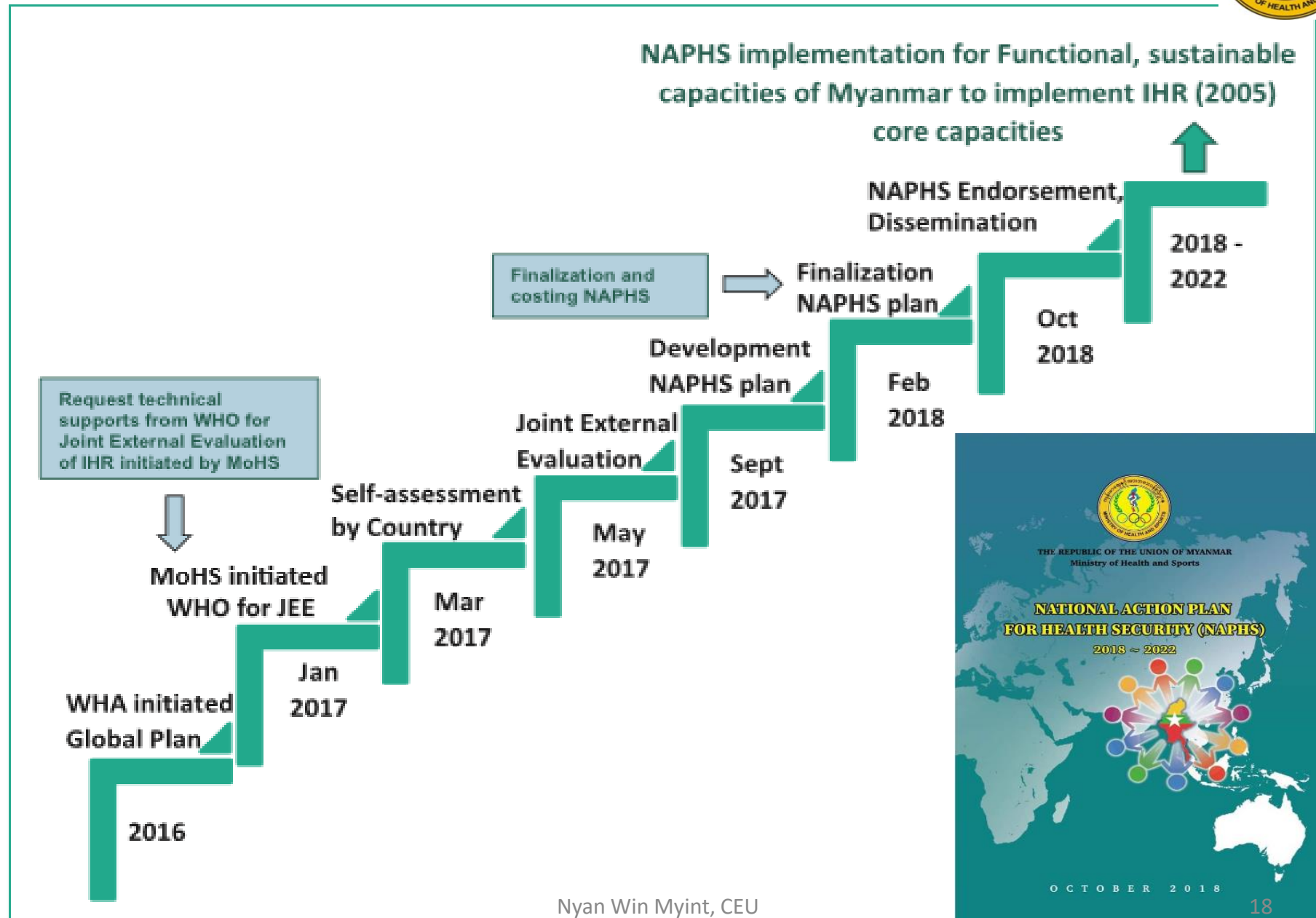


Figure 2. Milestones of NAHPS Development, Myanmar





CEU Role in Health Security in Myanmar

- **IHR Focal Point to coordination with other units and department, WHO and other countries**
- **IHR, MBDS Reporting Mechanism**
- **CD Law**
- **Indicator Based Surveillance (VPDs, ILI, EIDs, zoonoses)**
- **Event Based Surveillance**
- **Risk Assessment**
- **One Health Strategic Plan Implementation**
- **Risk Communication in cooperation with HLPU**
- **FETP**
- **RRT Team Deployment**
- **EOC Strengthening and Disaster Management**
- **Health Cluster mechanism**
- **Construction Project for Myanmar CDC and Training Center**

- › IHR
- › IHR Monitoring & Evaluation Framework
- › One Health
- › Ship Sanitation Certificate
- › Laboratory
- › Event Management at Points of Entry
- › IDSR
- › Mass Gatherings
- › Public Health Event Management in Air Transport

CONNECT & SHARE

Online learning programs

Select a learning program that will help enhance your knowledge on specific issues related to the implementation of the International Health Regulations (2005).



COVID-19 National Rapid Response Teams Online Learning Programme

- Self-paced learning
- English, French, Spanish, Russian
- Certificate of completion



COVID-19 at Points of Entry

- 60-90 minutes per course
- 5 languages
- Certificate of completion



Tools and Resources for a one Health Approach

- 2 hours
- English
- Certificate of completion



Public Health Event Management in Air Transport

- 3 to 4 hours
- English
- Certificate of completion

<https://extranet.who.int/hslp/training/#courses-carousel>

<https://extranet.who.int/hslp/training/>

Thank You