

Short report: 2014 Pacific meeting on implementation of the International Health Regulations (2005)

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From 24 to 26 November 2014, 44 delegates representing 20 of the 22 Pacific island countries and areas, programme directors and technical experts from the World Health Organization (WHO) Regional Office for the Western Pacific and development partners met in the tranquil setting of Denarau Island, Fiji to attend the third biannual *Pacific Meeting on Implementation of the International Health Regulations (2005)*.

The Pacific region covers one third of the earth and is home to approximately 11.4 million people (excluding Australia and New Zealand).¹ Pacific populations are dispersed over many thousands of islands and atolls that make up the region's 22 countries and areas. Fourteen Pacific island countries are states parties to the International Health Regulations (IHR 2005),² and seven are territories for which IHR (2005) responsibilities are delegated to other countries.

As the title indicates, the meeting's purpose was to discuss progress in meeting the global public health security objectives of IHR (2005) in the Pacific, and to explore avenues to strengthen infectious disease (and other public health emergency) surveillance and response capacities required to achieve IHR (2005) compliance.

The meeting's programme was ambitious, aiming to provide delegates with an update on global public health infectious disease emergencies; to review the progress of Pacific islands' core capacity-building activities under the IHR (2005); to review the Pacific Syndromic Surveillance System (PSSS) to identify its strengths and limitations;

to explore the role of Pacific Public Health Surveillance Network in supporting IHR (2005) implementation; and to recommend common IHR (2005) capacity-building priorities that focus over the 2014–2016 period. Due to global concern about the Ebola virus disease (EVD) epidemic in West Africa at the time of the meeting, specific discussion about EVD preparedness was also included. Finally, the meeting was an opportunity to undertake preliminary consultation with delegates about the future direction of the Asia Pacific Strategy for Emerging Diseases (APSED)³ and the roadmap for IHR (2005) implementation in the Western Pacific.

The first day of the meeting focused on global and Pacific emerging and re-emerging infectious diseases. The discussion centred on the EVD situation in West Africa and the risk posed to populations in the Pacific. WHO reiterated that the risk of EVD importation to the Pacific was low, however emphasized that the impact, if imported, would potentially be devastating and hence pre-emptive preparedness was encouraged.⁴ Further, discussion about the emergence of Zika and chikungunya viruses, and the re-emergence of dengue virus in the Pacific islands in recent years was held.⁵ Pacific island countries and areas were advised to prepare for ongoing transmission of all three arboviruses over the coming two to five years. The afternoon of day one was spent for reviewing the PSSS, the premier early warning surveillance system for infectious disease outbreaks used by countries and areas in the Pacific. The PSSS is performing well and meeting IHR (2005) obligations for indicator-based early warning surveillance; however, it was noted that the event-based surveillance component

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of the system needs to be formalized and strengthened to ensure rapid identification of events that cannot be captured by the system's indicator component. While increasing the number of PSSS reporting sites (to increase system coverage and function) was a topic of discussion, it was noted that given the resource limitations in most Pacific islands, redistribution of human, material and financial resources for additional surveillance activities may affect other health programmes and therefore needs to be rationalized and justified.

The second day of the meeting focused on enhancing Pacific islands' EVD preparedness plans. Delegates discussed key issues related to Ebola virus epidemiology with WHO staff recently returned from West Africa. Time was allocated for peer discussion to refine national EVD preparedness plans. The day concluded with a simulation exercise that reinforced the importance of national preparedness for major public health events, both for known and unknown nature.

The third day of the meeting focused on future priorities for IHR (2005) core capacity-building in the Pacific. Delegates identified infectious disease surveillance and response; public health workforce development; and public health preparedness at international points of entry as the core capacity areas on which to focus in the period of 2014 to 2016. The meeting continued with a consultation on future directions of APSED and determination of its usefulness in the Pacific. Delegates expressed strong support and appreciation of APSED in endorsing the strategy as the leading framework for infectious disease and IHR (2005) public health core capacity-building.

As a key outcome of the meeting, Pacific island countries and development partners agreed to support the three priority IHR (2005) core capacity-building areas mentioned above; to work collaboratively for strengthening the PSSS, including enhancement of the event-based surveillance component of the system; and to continue to develop, test and refine national public health emergency preparedness and response plans.

Pacific islander delegates and partners articulated the value of IHR (2005) and APSED as a clear and logical framework within which national public health core capacity-building is, and will continue to be, developed in the Pacific islands. Other outcomes of the meeting are recorded in the meeting report available at http://www.wpro.who.int/emerging_diseases/meetings/docs/report_pacificmeetingonihhr_nov2014.pdf?ua=1.

References:

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