

WHA76 Intervention for Lao Delegation Committee A

Date and time: Tuesday, 24 May 2023

Provisional agenda item number: 14.2

Implementation of the International Health Regulations (2005)
(A76/9 Rev.1)

Main issues and salient points

- This document is submitted in response to resolution WHA61.2 (2008), and to decision WHA71(15) (2018) on Implementation of the IHR (2005): five-year global strategic plan to improve public health preparedness and response, 2018–2023, in which requests the Director-General “to submit every year a single report to the Health Assembly on progress made in the implementation of the IHR (2005).
- The document summarized activities on WHO secretariat’s actions, published reports (e.g. in 2022, 73 event updates posted in the Event Information Site (EIS) for National IHR focal points...), IHR committees’ activities (e.g. Emergency committees for COVID-19 and M-pox), State Parties Annual Review (SPAR), and Point of Entry. Besides, additional health measures implemented during COVID-19, and risk of yellow fever transmission, and vaccination requirements and recommendations are mentioned.
- The consideration of proposed amendments to the International Health Regulations (2005) following decisions EB150(3) (2022) and WHA75(9), which expects to bring further impetus to the implementation of and compliance with the IHR, the Member State is expected to comment on;
 - *How can WHO Member States continue to strengthen implementation of the International Health Regulations (2005) in the next two years, bearing in mind that they will still be considering the proposed amendments to the Regulations, and that those amendments, if adopted by the Health Assembly in 2024, will only enter into force in 2025?*
 - *How can the Secretariat best support Member States in strengthening the implementation of the International Health Regulations (2005)?*

Possible implications (possible intervention from Laos PDR)

- Lao PDR has appreciated the IHR (2005) to facilitate timely information sharing of public health events globally. Thus far, Lao PDR is committed to implementing the IHR (2005), through the five-year National Workplan for Health Security that is guided by the Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies (APSED). APSED is currently under discussion for renewal, as a solid foundation to guide and support strengthening the country’s core capacities to address public health emergencies, including during the COVID-19 pandemic.
- The IHR Monitoring and Evaluation Framework is applied regularly and routinely through the review and submission of the eSPAR, simulation exercises, and intra- and after-action reviews to identify needs and priorities that are incorporated into the National Workplan for Health

Security. These ongoing efforts using the M&E framework is an opportunity to continue to strengthen implementation of the IHR (2005).

- As we learned from COVID-19, health security requires a whole-of-government and whole-of-society approach. It is important to continue to advocate and engage with non-health sector and communities. Our National Workplan for Health Security is multisectoral however there is always an opportunity to strengthen multisectoral coordination and collaboration.
- A resilient health system is the foundation for public health emergency preparedness and response and we believe that having a longer-term investment in system strengthening will support the implementation of IHR (2005).
- Lao PDR appreciates continuous WHO support from country and regional levels on implementing the IHR (2005).

Provisional agenda item number: 15.2
WHO's work in the health emergencies
(A76/11)

Main issues and salient points

- This report is submitted pursuant to the requests contained in resolution EBSS3.R1 (2015) and decision WHA68(10) (2015), which required WHO response in all WHO Grade 3 emergencies, United Nations Inter-Agency Standing Committee Level 3 emergencies and public health emergencies of international concern between 1 January and 31 December 2022, and also responds to the request contained in Health Assembly resolution WHA73.8 (2020) concerning the methodology and the implementation and findings of the Surveillance System for attacks on health care in complex humanitarian emergencies. Also, share updated the report from the Executive Board at its 152nd session in January 2023.
- The document summarized global emergencies, including COVID-19 pandemic as PHEOC and WHO's work, e.g. research and innovation. T
- The Member State is invited to provide guidance on how the Secretariat can best provide support to the Member States in;
 - a) *accelerating their implementation of national action plans for health security (NAPHS), including through implementation of the new five-year NAPHS strategy (2022–2026);*
 - b) *enabling them to make effective use of data-driven tools such as the dynamic preparedness metric to enhance the implementation of the International Health Regulations (2005) and build sustainable preparedness for health emergencies;*
 - c) *expanding their capacities in the priority areas identified in the One Health Joint Action Plan.*

Possible implications (possible intervention from Laos PDR)

- We acknowledge and appreciate the strategies, guidance documents and Action Plans that the Secretariat have supported in developing and disseminating to accelerate the implementation of our National Health Security Workplan.
- As a small country with limited resources, we recognize the challenges in having to review, and align our workplan with global guides and strategies that exist and hence thank the Secretariat for the development of APSED. For Lao PDR, APSED has been and continues to be our roadmap

to strengthening health security capacities whilst ensuring that we are able to align our Workplan in a feasible and practical manner with global initiatives.

- We also welcome using data-driven tools to enhance the implementation of the IHR (2005). There have been ongoing efforts in Lao to digitize surveillance for communicable diseases and improve linkages with different systems. Through these linkages and connecting them with other sources we conduct multisource surveillance assessments to guide response decisions for acute public health events. This approach is embedded with our Public Health Emergency Operations Centre at the central and subnational levels.