Item 17.4: Implementation of the International Health Regulation (2005)

Thank you Moderator,

Madam Chair,

First of all, on behalf of the Delegation of the DPRK, let me extend my solicitude to WHO and State Parties to IHR for their joint efforts to fight against the COVID-19 pandemic.

Madam Chair,

All State Parties have made some contribution to the WHO role as a coordinator of the global response by reporting regularly the epidemiological situation of their countries and technical information of SARS-COV-2, social and public health measures taken by the governments to WHO according to the International Health Regulation by working together in solidarity in the struggle against the COVID-19.

During this period the capacity of the State Parties to respond to the pandemic has been clearly judged and valuable experiences and lessons have been gained in implementing the International Health Regulation.

The current pandemic teaches us that the strong leadership and coordination of the government, timely taken social measures are the most important and essential in responding the pandemic.

In this regard, DPRK Delegation would recommend WHO to update the IHR by adapting the experiences and lessons gained in the fight against the COVID-19 pandemic and the current reality so that it can provide correct and effective way to the State Parties in response to the future pandemic.

Madam Chair,

Since IHR came into force in 2007, the DPRK has made continued efforts to build and strengthen the national IHR core capacities as required.

The National Emergency and Anti-Epidemic Committee and the National Committee on Emergency Preparedness have been operating for coordination among relevant ministries to cope with the threats posed by Public Health
Emergencies of International Concerns and to build operational readiness and capacity to minimize the negative impacts of prospective health emergencies.

A relatively effective disease surveillance system has been set up including zero reporting of notifiable diseases using WHO’s standard case definitions. Surveillance guidelines have been regularly updated and distributed to household doctors and epidemiologists from the central to the county level. Important Public Health Events including those that meet the criteria of International Concern are being reported to the higher level by telephone that is available for 24 hours. This helps decision making or consulting the WHO for deciding whether they need to be reported to WHO under IHR.

Concerning the current COVID-19 pandemic, DPRK has been fulfilling its obligation as a State Party to IHR by regularly reporting WHO the epidemiological situation and social and public health measures taken by the government.

Rapid Response Teams (RRTs) are functional in all provinces and counties. They can be mobilized within 24 hours since the detection of an outbreak, and the preliminary report can be produced within 48 hours.

Cooperation and collaboration between the public health and animal health sectors are comparatively good as well. A mechanism has been established by human and animal health sectors to respond to outbreaks of zoonotic diseases that could affect human health. In times of public emergencies, experts from the animal sector can be mobilized to join the rapid response teams to work together to control and prevent the spread of zoonotic infections.

The country has recorded some achievements in building and maintaining IHR core capacities, especially in respect of National legislations, Policy, Coordination, and Human Resource Capacity.

However, laboratory capacity needs to be strengthened at all levels in terms of quality-assurance for diagnosis, biosafety and biosecurity.

DPRK will continue to intensify the human resources together with materialistic and technical bases step by step for further strengthening of IHR core capacities.

Thank you.