

Health Security in high visibility events

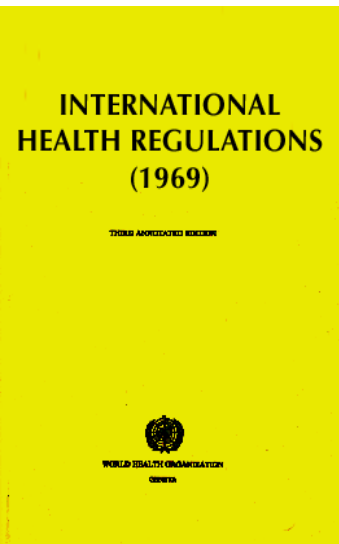
World Health Organisation (WHO)
April , 2019

Context of emerging/epidemic disease in the 21st. century

- Emergence of new or newly recognised pathogens (e.g. Avian flu (H5N1), SARS, Ebola, Marburg, H1N1)
- Resurgence of well characterized outbreak-prone diseases (e.g. cholera, dengue, measles, meningitis, shigellosis, yellow fever)
- Release (accidental or deliberate) of a biological agent (e.g. BSE /vCJD, smallpox, SARS, anthrax).



The legal framework has changed to deal with new threats



International Health Regulations IHR(2005), an international paradigm shift



International traffic, trade and tourism

From **three diseases** to **all public health threats**

From **preset measures** to **risk assessment response**

From **control of borders** to, also, **containment at source**



Mass gatherings challenges

- Health systems are stretched to surge capacity
- MG may require host countries to adopt additional measures to comply with IHR (2005) - under intense media scrutiny
- Business-as-usual behavioural health measures difficult/impossible to implement
- Require holistic approaches to risk mitigation across disciplines/ministries
- Introduction and dissemination of non-endemic diseases
- Communication of risk made difficult by international dimension (languages, cultures, etc) and media pressures



Health risks of mass gatherings

- Importation/exportation of communicable diseases
- Communicable disease outbreaks
- Food and water
- Crime and accidental Injuries
- Temperature-related illness
- Drug/alcohol-related illness
- Deliberate events
 - Chemical
 - Biological
 - Radiation
 - Nuclear
 - Explosive.



Contextual pressure



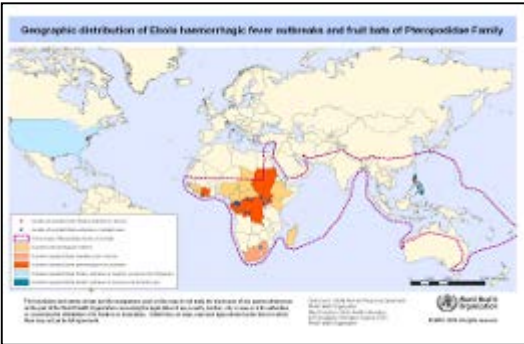
Security perception



Global interconnectedness



High-profile sponsorships



Health security context



Media visibility



Communications and technology

Need for interdisciplinary coordination



Working Definition – "Health Security Interface"

The mandate of the HSI Secretariat is applicable to those public health activities within WHO whose performance involves to some extent the security sector. This includes (but is not limited to) work involving: international organizations, civil defence, military doctors, law enforcement and armed forces.



WHO HSI



Increasing collaboration horizontally .1 through headquarters thus involving all necessary departments and teams whose knowledge will provide vital expertise for HSI activities;

Accelerating and improving .2 coordination between headquarters, regional, and country efforts;

Increasing collaboration with the .3 many external parties involved in response to health emergencies.



BASIC LESSONS

1. HOLISTIC PLANNING

NO MINISTRY HAS ALL THE CAPACITY. YOU MUST ALL WORK TOGETHER

2. START PLANNING EARLY

STARTING EARLY WILL ALLOW YOU TO WORK OUT ANY PROBLEMS AND TRAIN AND IMPROVE ANY PLAN

3. PLAN FOR LEGACY

POSITIVE LEGACY WILL NOT JUST OCCUR – IT MUST BE PLANNED FOR

