WHO-EM/IHR/014/E

Summary report on the

Subregional meeting on mass gathering preparedness and response: cross-border collaboration and coordination between Iraq and neighbouring countries

Beirut, Lebanon
28–30 March 2019

World Health Organization
REGIONAL OFFICE FOR THE Eastern Mediterranean

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1. Introduction

Mass gatherings are highly visible, unique events attended by a sufficient number of people to potentially strain the public health resources of a community, state or nation. Mass gatherings present complex planning and preparedness challenges for the public health infrastructure. Given the fact that mass gatherings have become increasingly international in attendance, natural, accidental and deliberate risks to health security have become increasingly important elements to address during the planning of health measures.

Mass gatherings may stretch health systems beyond their capacity; however, these events can also present opportunities to implement systemic improvements to the overall health system and preparedness after the event. Public health at mass gatherings is therefore focused on prevention and minimizing the risk of injury or ill health, while securing the safety of participants, spectators, event staff and residents. Implementing effective risk reduction measures, which includes ensuring cross-cutting coordination and communication, necessitates having advance mechanisms in place especially considering the collaboration required among countries.

The World Health Organization (WHO) Eastern Mediterranean Region is host to some of the world's largest mass gatherings. Many countries in the Region organize annual mass gatherings of different sizes and natures, each with their own specific risks. Iraq hosts some of the largest Muharram and Arbaeen gatherings globally, which are attended by large cohorts of pilgrims especially from neighbouring countries (Bahrain, Islamic Republic of Iran, Jordan, Kuwait, Lebanon and Pakistan). Hosting of mass gathering events provides a unique opportunity to strengthen implementation of the International Health Regulations (IHR) (2005), considering these are events with the potential for international

public health consequences, as well as the opportunity to increase relevant national public health capacities required under the IHR (2005).

Engaging the diverse sectors involved in national mass gathering preparedness (such as emergency response, points of entry, risk communication, risk assessment specialists, environmental health, transport and so on) is fundamental from both an IHR and a mass gathering perspective. Such an intersectoral platform would facilitate the essential coordination and communication required for such unique events. Increasing mass gathering preparedness and response among these neighbouring countries in the event of a public health event represents an opportunity for improving both the national capacities of the countries and increasing health security in the Region.

The WHO Regional Office for the Eastern Mediterranean organized a subregional meeting on mass gathering preparedness and response: cross-border collaboration and coordination between Iraq and its neighbouring countries, in Beirut, Lebanon, from 28 to 30 March 2019. The meeting was attended by national IHR focal points, key officials responsible for mass gathering arrangements, and key officials representing points of entry, in addition to representatives from the WHO Collaborating Centre for Mass Gatherings Medicine in Saudi Arabia and international organizations. WHO staff from headquarters, regional offices and country offices attended the meeting.

The objectives of the meeting were to:

- share country best practices on mass gathering preparedness;
- prioritize public health issues and associated challenges;
- identify mechanisms and modalities to scale up public health preparedness in the context of mass gatherings;
- enhance collaboration and communication between Iraq and neighbouring countries in the context of mass gatherings.

2. Summary of discussions

Conducting risk assessment for mass gatherings

Proper processes for hazard assessment in relation to mass gatherings were discussed. Most countries have not performed an overall national risk assessment for hosting mass gatherings, and none have performed a targeted risk assessment for a specific mass gathering (such as Arbaeen in Karbala). Risk assessment should be undertaken for all mass gatherings regardless of its size and the number of attendees, given the acute burden placed upon the health system. Challenges associated with the management of non-planned mass gatherings include large crowds of temporarily displaced persons and specific challenges associated with points of entry.

Multisectoral coordination

Structures and enabling platforms are necessary to facilitate the technical and operational exchanges required while preparing for (and during) a mass gathering event. Relevant platforms to enhance intersectoral information exchange include national emergency operation centres (EOCs). There is a need to develop standard operating procedures and identify appropriate triggers on when to activate an emergency response plan during a mass gathering. Cross-country collaboration is as an area that requires improvement, and there is a need for memoranda of understanding to maintain such practices. Reviewing the preparedness and response measures for each mass gathering in a post-event review is encouraged for legacy.

Public health security

The potential for mass gatherings to have security-related incidents necessitates a strong and coordinated response. In the event of an incident, specialized chemical, biological, radiological and nuclear (CBRN) teams and security forces need to be leading and coordinating the investigation and response. Specialized trainings, guidelines and responses among a variety of stakeholders should be considered for this specific element of mass gatherings; for example, conducting table top exercises and drills with a security angle, training for forensic sampling, and even ensuring secured communications in the case of a security-related incident. National gap analysis for CBRN response should be undertaken and a plan of action should be developed to address gaps.

Hospital safety and mass casualty incident management

Hospital emergency response plans must be in place, operational, simple, disseminated, and frequently tested and revised. Guidelines and standard operating procedures should feature: acquisition and maintenance of emergency resources; criteria for major evacuation of the hospital and for hospital relocation; enumerated procedures (alarm activation, resource mobilization, and so on); and delineation of the disaster triage area for all cohorts (incoming patients, staff equipment, triage categories, security, traffic flow, and so on). These plans and standard operating procedures need to adopt an all-hazards approach when it comes to emergency events and mass gatherings. Existing facilities should be mapped and their capacities increased.

Disease surveillance and laboratory diagnostics

There is a need to set priorities and objectives when considering the breadth of surveillance information required for mass gatherings.

Health surveillance is therefore an essential component of evidence-based decision-making practices, and diverse mechanisms should be employed to capture desired cohorts. Coordination of data and reporting lines among countries and the sharing of relevant epidemiological data, including case definitions, is an area for improvement. There is a need to enhance the Early Warning, Alert and Response System (EWARS) in addition to event-based surveillance in neighbouring countries before, during and post mass gathering events.

Food and water safety, sanitation and waste management

It is important to establish a plan for food and water supply, as well as a plan for laboratory referral and transportation of food and water samples, especially for detection of viral diseases. Furthermore, plans for mobile toilets (including hygiene units) and handwashing infrastructure in the long term, and for mobile water purification, should be developed and in place to support mass gatherings. Additionally, enhancement of food and water inspection should be considered. Countries should also use the opportunity of hosting mass gatherings to raise community awareness, and for public health education and promotion.

Risk communication

Risk communication is a major area for improvement in countries, especially when considering an all-hazard approach in light of a mass gathering. Mapping of communication partners with regards to mass gatherings should be undertaken, and standard operating procedures outlining communication with the general public during a crisis should be developed. Establishing trust with the community is the most important element to uphold. Rumour tracking and the management of rumours using event-based surveillance platforms

should be employed. Countries should perform continuous trainings for spokespeople as well as for media personnel to promote responsible coverage.

Points of entry and cross-border collaboration

Points of entry have a unique role during mass gatherings; however, gaps exist in their required IHR implementation including vector surveillance and control. Most pressingly there is a need to develop vaccination requirements for the host country, and to subsequently disseminate these requirements widely to all sending/bordering countries. Ensuring resources are available to perform compliance checks for vaccination is important. Engaging with other countries to enhance cross-border collaboration is highly encouraged; for example, instituting memoranda of understanding or declarations of interest will further support a mutual operational mechanism to facilitate mass gatherings.

3. Recommended actions

1. Risk assessment

- Conduct training on risk assessment and risk management for mass gatherings (upcoming WHO online training on mass gatherings).
- Conduct regular risk assessment for mass gatherings, and share the results and lessons learned.

2. Command, control, coordination and communication priorities

- Develop standard operating procedures/triggers on how/when to activate an emergency response plan during mass gatherings.
- Review national legislation to facilitate the scaling up of public health preparedness and response for mass gatherings.

- Improve internal and external communication through convening meetings between officials and medical teams before, during and after a mass gathering.
- Enhance intersectoral coordination and information sharing using existing platforms, such as the EOC.
- Conduct evaluation (after action review) of management of public health events.
- Plan and organize leadership trainings on preparedness and response for mass gatherings.

3. Security and CBRN response

- Plan and conduct simulation exercises to test preparedness capacities, and conduct training for relevant personnel for the management of CBRN events.
- Develop standard operating procedures on correct handling of forensic samples, and train personnel on how to collect, store and transport samples.
- Develop standard operating procedures on communicating with the public during a CBRN event.
- Conduct national gap analysis for CBRN response (building on joint external evaluation) and develop a plan of action accordingly (including facilities, personnel, decontamination units, guidelines, and so on).

4. Hospital safety and mass casualty incident management

- Conduct assessments of hospital safety and the emergency care system, using WHO assessment tools.
- Implement the triage system for emergency medical services, including at hospitals.
- Ensure that emergency response plans and standard operating procedures address mass casualty incidents.

- Confirm competencies and scope of services for ambulance paramedics, and enhance capacity of health care workers in the different elements related to mass gatherings.
- Establish mechanisms to increase medical capacities during mass gatherings (emergency medical teams, involvement of neighbouring countries, multisectoral rapid response teams).
- Map existing facilities and increase capacity in consideration of resources (outsourcing from private sector, nongovernmental organizations, and so on), and ensure these services are part of the overall public health emergency preparedness and response plan.

5. Surveillance, outbreak, alert and response management

- Establish agreements between countries (such as memoranda of understanding) for information sharing during mass gatherings, including public health surveillance data.
- Enhance surveillance systems (early warning system, including event-based surveillance) in countries during and post mass gatherings.
- Share common case definitions between countries.
- Share surveillance reports and information between countries, including on unusual events; this will also contribute to research and evidence-based practices.
- Establish joint rapid response teams for investigation and response to public health events.
- Map and coordinate laboratory capacities between the host and sending countries.

6. Food and water safety, sanitation and waste management

- Enhance food inspection, handling of food, and water inspection at the source.
- Develop a plan for mobile toilets and handwashing infrastructure in the long term.
- Assess current waste management system and put improvement plans in place.
- Support awareness raising in the community as well as public health education and promotion.

7. Points of entry and cross-border collaboration

- Develop vaccination requirements and widely disseminate to all countries, and ensure compliance with vaccination requirements by all visitors to a mass gathering.
- Engage with other countries to enhance cross-border collaboration (in the form of memoranda of understanding or declarations of interest) as well as to support an operational mechanism for mass gatherings.
- Ensure IHR requirements are implemented at points of entry used by pilgrims to participate in mass gatherings.

8. Risk communication

- Establish a system for rumour tracking and management of rumours.
- Perform trainings for spokespersons to facilitate high-level official communication with the general public, and trainings for media on responsible coverage and reporting.
- Develop standard operating procedures for risk communication with the public during emergencies.
- Map communication partners (official and social media) and enhance collaboration and coordination.
- Ensure a risk communication system is in place for mass gatherings (as a part of the EOC).

4. Next steps

- Support the development of country workplans for mass gathering preparedness and response, and their implementation.
- Organize and support bilateral country meetings on mass gathering preparedness and response.
- Establish a regional network and roster of experts (including national experts, WHO and relevant partners) for the management of CBRN events.
- Support the documentation of countries' experiences and sharing of results and lessons learned.
- Provide training support, including e-learning, on mass gathering preparedness.
- Develop an inventory of laboratory capacities and laboratory collaborating centres in the Region to share with countries.
- Develop advocacy materials highlighting the importance of scaling up public health preparedness for mass gatherings, targeting difference audiences including high-level officials.

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