

Current major events

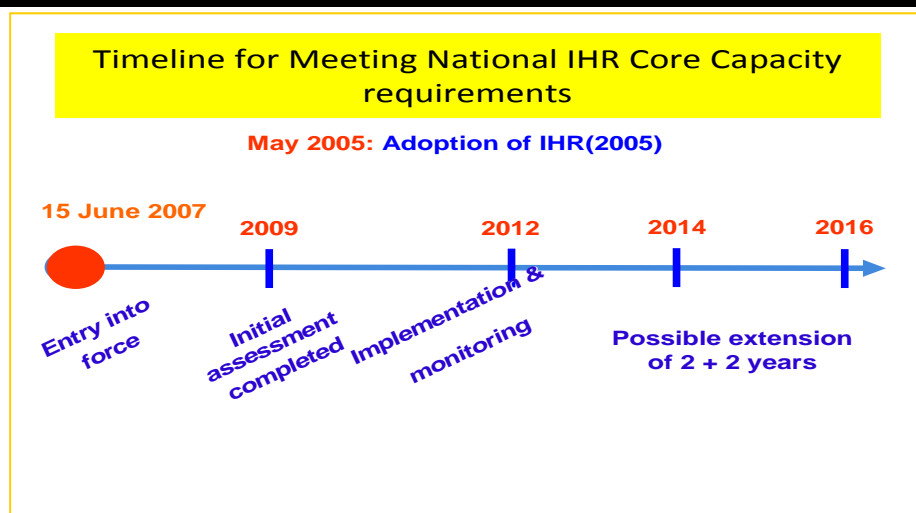
Monitoring implementation of the IHR Core Capacities in the EMR

The CSR Unit in collaboration with WHO HQ, convened an Inter-country Workshop on Monitoring the Implementation of IHR Core Capacities in the EMR from 29 March—1 April 2010 in Cairo, Egypt. A similar workshop organized by WR Iraq was also held in Amman, Jordan from 25-27 March for representatives from different sectors in Iraq. The aims of these workshops were to train IHR officials on the tools developed by WHO for monitoring the capacities required for implementation of IHR 2005.

Editorial note

To enable self-assessment of the status of implementation of the IHR Core Capacities by the State Parties, WHO has developed an IHR Monitoring Framework and Tool that includes a checklist, indicators and questionnaire to be applied by the Member States for self assessment. These assessments provides officials with evidence on existing gaps needed for implementation of the IHR Core Capacities in the countries.

The IHR 2005 is a legally-binding international agreement for protecting public health. It is an international commitment for shared responsibilities and collective security against spread of public health hazards. The Regulations was adopted on May 2005 and came into force on 15 June 2007. It covers all public health events (biological, chemical, radiological and contaminated food) that might affect human health, irrespective of the source or origin. This Regulations requires all state parties to develop, strengthen and maintain the capacity to *detect, assess, notify and report* events in accordance with the Regulations as well as the capacity to *respond* promptly and effectively to public health risks and public health emergencies of international concern as set out in the Regulations, within five years (by 2012) from its entry into force.



NFP designation status in WHO Regions

- AFRO : All 46 Countries (100%)
- AMRO: All 35 Countries (100%)
- EMRO: 21 out of 22 Countries except Somalia (95%)
- EURO : 48 out of 53 Countries except Albania, Belarus, Kyrgyzstan, Serbia and San Marino (91%)
- SEARO: All 11 Countries (100%)
- WPRO: All 27 Countries (100%)

Based on the timetable for implantation of IHR (2005) all State Parties were required to complete the assessment of their core capacities by 2009, where the monitoring process starts and to continue upto 2016. The core capacities cover these areas: Legislation, Policy & Financing, Coordination & NFP Communications, Surveillance, Response, Preparedness, Risk Communication, Human Resource Capacity, Laboratory, Points of Entry and four potential hazards (Infectious, Zoonotic Events, Food safety, Chemical Events and Radiation Emergencies).

In EMR, only about 12 countries have completed the in-depth assessments of their core capacities through self assessments or with the support from WHO. The results of these assessments will form the bases for monitoring of the implementation of IHR by State parties and the Member States who have not completed this stage will have to use the results of the first monitoring as their baseline for future monitoring.

Update on outbreaks

in the Eastern Mediterranean Region

Rift Valley Fever in Saudi Arabia

Current public health events of international concern

[cumulative N° of cases (deaths), CFR %]

Avian influenza

Egypt	[109 (34), 31.1%]
Vietnam	[119 (59), 49.5 %]
Global total	[495(292), 58.9%]

Yellow Fever

Cameroon	[3(3), 100%]
CAR	[10 (0), 0%]

Dengue fever

Sudan	[1599 (12), 0.7%]
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Rift Valley Fever

Saudi Arabia	[1 (0), 0%]
South Africa	[160 (13), 8.1%]

Pandemic (H1N1) 2009

AFRO	No of deaths: 168
AMRO	No of deaths: At least 8316
EMRO	No of deaths: 1019
EURO	No of deaths: At least 4835
SEARO	No of deaths: 1773
WPRO	No of deaths: 1808
GLOBAL Total	No of deaths: 17,919

CFR=Case-Fatality Rate