

Episode 2: Study on NFP experiences of implementing the IHR (Part 2 of 2)

National IHR Focal Points (NFPs) are the designated point of contact between WHO and States Parties concerning urgent communications required under the International Health Regulations (IHR). Given their critical role in the global surveillance and response system supported by the IHR, a study was done to assess the experiences and perceptions of NFPs regarding IHR implementation, in order to inform WHO's efforts to more effectively support them in fulfilling their functions.

The second part of this two-part series focuses on the **insights of the principal investigators from conducting the study and in relation to the findings of the recent IHR Review Committee on COVID-19.**

The experts shared their thoughts on the following:

- The study was conducted just before the start of the COVID-19 pandemic. Did any of the barriers identified by their analysis play a role in the global response to the pandemic?
- On intersectorality: Should members of the NFP extend beyond the Ministry of Health?
- What additional support from Governments and WHO do NFPs need to fulfill their functions under the IHR?
- Were there any differences in the responses of those coming from federated states, small island nations, and lower middle-income countries during the interviews?
- The recent IHR Review Committee on COVID-19 found that the overall responsibility of implementing the IHR is with the government, including the requirements under articles 4 to 12 of the IHR. What are your thoughts on this finding?
- There seems to be a disconnect, looking at article 4 of the IHR, between the authority of NFPs and the accountability of responsible or competent authorities. How do you think this should be resolved?
- The Review Committee also found that there has been too much emphasis on the NFP as if the NFP should resolve all IHR-related issues. Instead, it is the competent/responsible authority in each country that is responsible for IHR implementation. In this context, the committee suggested that WHO should develop an accountability framework for these responsible authorities and should report the level of countries' compliance to the governing bodies as an incentive for governments to fulfill their IHR obligations. Could you share your thoughts on these recommendations?
- Do you have further plans now that the study has been conducted and the findings have been published?

Link to published study: <https://pubmed.ncbi.nlm.nih.gov/34248226/>

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Innovation adviser at Bruyere, specialist in general internal medicine and senior scientist at The Ottawa Hospital and Professor of Medicine at the University of Ottawa. He holds the Faculty of Medicine Clinical Research Chair in Digital Health Innovation. He is also the Chief Executive Officer of CANImmunize, a digital immunization solution company. Dr. Wilson has published extensively in the areas of digital health, immunization, pandemic preparedness, blood safety and health policy. He has examined the role of federalism on public health policy domestically and internationally. His work on the IHR has included analyses of the use of Annex 2, examining the role of NFP's and coordinating a conference with the WHO on public health emergency response in federal states.

**Sam F. Halabi**

Senior Scholar and Director of the Center for Transformational Health Law at the O'Neill Institute for National and Global Health Law at Georgetown University and an affiliate of its Center for Global Health Science and Security. Professor Halabi has published extensively in the areas of data sharing during public health emergencies, access and benefit sharing in the pathogen context, immunization, pandemic preparedness, and health policy. He has published four books and over 80 manuscripts on infectious disease outbreak preparedness and response with specializations in intellectual property, financing for public health, and regulation of corporate entities.

