

## Episode 1: Study on NFP experiences of implementing the IHR (Part 1 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.

**Study methodology:** A two component study consisting of interviews and surveys. 60-minute qualitative interviews were conducted with 25 NFPs from all WHO regions. 105 NFPs completed the online survey that was informed by the results of the qualitative interviews.

### Main findings of the study:

The study showed that majority of NFPs are aware of their duties and responsibilities under the IHR. However, NFPs experienced challenges in four critical areas:

1. NFPs experienced challenges with intersectoral collaboration within their countries, including limited access to, or a lack of cooperation from key ministries outside of health systems.
2. For some NFPs, there was uncertainty around IHR implementation and some discrepancy between their familiarity with and their ability to execute their duties.
3. There was a lack of awareness of existing training tools available for NFPs, which also lacked relevance for specific situations and contexts beyond infectious disease outbreaks.
4. Limitations due to inadequate resources, in particular, human resources, support and equipment.

Many NFP representatives also expressed concern about how WHO uses the information they receive from NFPs.

### Key recommendations:

In line with the major observations listed above, associated key recommendations include:

1. Identification of decision-makers in all sectors responsible for IHR implementation and provision of intersectoral training
2. Facilitate peer-to-peer communications for sharing materials and lessons learned
3. Increasing awareness of existing training tools for NFPs and developing updated, relevant and accessible training tools beyond infectious disease outbreaks
4. Developing mandatory training modules and offering retraining opportunities and rapid learning tools available in local languages
5. Providing assistance in upgrading equipment and support, especially in rural and remote areas.

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

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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.

