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HEALTH SECURITY

The WHO Western Pacific Region experiences frequent public health emergencies caused by endemic and emerging infectious diseases, antimicrobial resistance, climate change and extreme weather events, earthquakes, food safety incidents and technological hazards. Small island developing states in the Pacific are particularly vulnerable due to their small populations, geographic isolation, limited resources and fragile ecosystems.

Since 2005, Member States, WHO and partners have worked together to strengthen health security through updates of the *Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies*. Developed with the WHO South-East Asia Region, the Strategy has supported countries in the Western Pacific to strengthen core public health capacities and systems that enabled effective responses to the COVID-19 pandemic. Nevertheless, the widespread health, economic and social impacts of the pandemic highlighted gaps in prevention, preparedness, readiness and response to public health emergencies in the Region. The draft *Asia Pacific Health Security Action Framework* was developed in consultation with Member States, partners and experts to address these needs, adapt to increasingly complex emergencies and global dynamics, and advance health security throughout the Asia Pacific region.

The Regional Committee for the Western Pacific is requested to consider for endorsement the draft *Asia Pacific Health Security Action Framework*.

1. CURRENT SITUATION

Countries and areas in the Western Pacific Region face an increasing number and range of public health emergencies caused by multiple hazards including endemic and emerging infectious diseases, antimicrobial resistance (AMR), climate change and extreme weather events, earthquakes, food safety incidents and technological hazards. In many cases, the risk posed by these threats is heightened by modern dynamics, such as increased international travel and trade, population growth, urbanization, health and socioeconomic inequalities, environmental degradation and climate change. The impact of public health emergencies and the importance of health emergency preparedness and response have been well recognized in regional strategic plans including the 2005, 2010 and 2016 iterations of the *Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies* (APSED), *Universal Health Coverage: Moving Towards Better Health* (2016) and *For the Future: Towards the Healthiest and Safest Region* (2020), as well as in global approaches such as the *2030 Agenda for Sustainable Development* and WHO's *Thirteenth General Programme of Work* (2019–2025) with its Triple Billion targets, which include one billion more people better protected from health emergencies.

Public health emergencies impact the health of the 1.9 billion people in the Western Pacific Region directly through injury, disease and death, and indirectly by disrupting routine health-care delivery and, in extreme cases, by overwhelming health-care systems. Recently, major typhoons and cyclones – in the Philippines in 2022 and in New Zealand and Vanuatu in 2023 – have caused significant morbidity and mortality and severely damaged local infrastructure, including health-care facilities, and disrupted delivery and access to health care. Public health emergencies can also lead to a wide range of negative social and economic impacts, including school closings, social isolation, domestic violence, food insecurity, unemployment and loss of income. For example, outbreaks of avian influenza in poultry and associated human infections in the Region often result in mass poultry culling, with significant losses to household incomes and local industry.

Emergencies also exact an economic toll through response costs, business closures and lost productivity due to illness. During the COVID-19 pandemic, border restrictions caused massive disruptions to international supply chains and travel, greatly impacting Pacific island countries and areas and tourism-based economies. In many cases, these negative health, social and economic impacts disproportionately hit communities with vulnerabilities, at-risk populations and limited resources, further widening health, economic and social inequalities.

The strong response of countries and areas in the Western Pacific Region to the COVID-19 pandemic – relative to other WHO regions – demonstrated the value of long-term investments in developing core public health security capacities and building systems through the step-by-step approach recommended by APSED. Even with the significant progress made in the Region, the pandemic's impact on societies and economies highlighted the increasingly complex nature of public health threats and need for more comprehensive, integrated and forward-looking approaches to health security that go beyond the health sector.

Upon the recommendation of the APSED Technical Advisory Group, a draft *Asia Pacific Health Security Action Framework* has been developed in consultation with Member States, partners and experts. The new Action Framework builds on the achievements of APSED and incorporates the experiences and lessons from nearly 20 years of regional preparedness and response activities. It also takes into consideration ongoing global developments in health security, including processes to amend the International Health Regulations (2005) and to develop and negotiate at the global level a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response.

2. ISSUES

2.1 Growing threats to public health in the Region

Despite significant progress over nearly two decades, public health threats, including infectious diseases, food safety incidents, and natural and technological hazards, are expected to grow in complexity and impact in the Western Pacific Region. Emerging pathogens and AMR pose increasing challenges and underline the need for greater vigilance and preparedness. In addition, modern trends including globalization, urbanization, population growth and climate change are creating demographic, ecological and environmental conditions that increase both the complexity and impact of public health emergencies. As a result, countries and health systems now must prepare for situations in which multiple emergencies occur simultaneously or in quick succession. These compound emergencies pose significant challenges to individuals, communities and governments, and require coordinated, collaborative multisectoral responses that take a One Health approach.

2.2 Impacts beyond health of public health emergencies

The impact of major public health emergencies reaches far beyond health, affecting many aspects of social and economic activity and having far-reaching consequences. The impact of emergencies and the public health and social measures enacted in response can have profound effects on education, social dynamics, employment, business, public security and overall well-being. Emergencies can also widen existing health and social inequities by disproportionately affecting groups with vulnerabilities. Good health is a driver of socioeconomic development. As such, prevention, preparedness and response to public health emergencies are necessary to build health system resilience and facilitate social stability, economic growth and progress. These measures also support the advancement of universal health coverage and the Sustainable Development Goals.

2.3 The need for a broader, more integrated approach to health security

Health security requires a comprehensive new approach, with regional and international experience demonstrating the need for alignment and coordination among technical areas and activities that contribute to health security. Additionally, the number and range of technical areas and issues that must be addressed are expanding as experience and understanding grows regarding complex public health emergencies. Therefore, instead of presenting health security as a collection of technical areas as in APSED, a new domain-based approach is taken in the draft *Asia Pacific Health Security Action Framework*. This approach employs an alternative framing of issues that in turn permits the conceptualization and planning for health security as interconnected areas or domains that work together to form a comprehensive health security system that considers health security in broader and more inclusive ways.

2.4 Increased engagement needed for health security

Multisectoral engagement with stakeholders – whole-of-government and whole-of-society approaches – are crucial to maintain and strengthen health security. Addressing the public health impacts of emergencies requires not only multisectoral engagement but also coordination between health and non-health sectors to support the delivery of health care and the practical implementation of public health interventions. This requires engaging all government sectors and agencies and all stakeholders in health security to strengthen the resilience of communities, societies and countries, and to mainstream health security into relevant national and local policies and practices.

2.5 Why now is the optimal time to strengthen health security

Momentum from the COVID-19 response has heightened public and political awareness of the importance of maintaining and strengthening health security capacities. The current environment provides an opportunity to strategically leverage momentum – including political commitment and domestic and international funding – into long-term investments in health security capacities and systems. This will also allow many capacities built up during the pandemic – such as genomic surveillance – to strengthen health security overall. The draft *Asia Pacific Health Security Action Framework* provides an approach to guide these investments, conceptualizing and planning the necessary elements of comprehensive health security systems.

3. ACTIONS PROPOSED

The Regional Committee for the Western Pacific is requested to consider for endorsement the draft *Asia Pacific Health Security Action Framework*.

