

WHO's Ready for the Next Flu Pandemic?

Global Governance of Influenza Pandemic Preparedness

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Abstract

- In an increasingly interconnected world, viruses can spread faster and farther than ever before. Sometimes the spread of disease reaches pandemic levels, as has occurred with influenza.
- Pandemic preparedness is the means through which nations prepare for the population-level threat of infectious disease.
 - National preparedness is not enough to counter a rapidly evolving virus like influenza; global coordination is needed.
- The World Health Organization's (WHO) role has been to lead this coordinated effort.

How has the WHO used governance to address global influenza pandemic preparedness?

- This paper first explores the regulations and recommendations the WHO has developed for global influenza pandemic preparedness, the International Health Regulations (IHR) and Pandemic Influenza Preparedness (PIP) Framework.
- Next, the 2009 H1N1 pandemic is used as a case study. Occurring chronologically in between the adoption of the IHR and PIP Framework, H1N1 revealed the shortcomings of the former and need for the latter.
- The governance challenges of influenza pandemic preparedness were discussed, including the limitations of the WHO's approach.
 - It was found that the pre-H1N1 approach was not well-suited for low-income countries, where health systems could not easily meet the IHR obligations established by the WHO.
 - The more recent PIP Framework is non-binding, which risks stakeholders not following through with commitments should another influenza pandemic occur.
- Recommendations were made to improve the strategy of the WHO, including changes to governance, scope, funding, and enforcement.
- Pandemic influenza is an ongoing challenge for global health governance and the WHO has made progress in addressing this threat.

Method

Introduction → Pandemic preparedness and its importance for influenza pandemics

Grey Literature Search → The WHO's governance approach for influenza pandemic preparedness

Literature Search → H1N1 as a case study to explore the effects of IHR and impact on the PIP Framework

Interpret Findings → Challenges and limitations of the WHO's approach, recommendations for improved governance

Conclusion → Implications of the WHO's governance actions on future influenza pandemics

Key Concepts

Pandemic Preparedness

State of being prepared for widespread disease, including surveillance and response capacities

Influenza (or Flu)

Group of rapidly-mutating viruses that present an ongoing pandemic threat

World Health Organization (WHO)

Intergovernmental organization concerned with the health of populations at the global level

Global Health Governance

Means of promoting collective action towards the common goals of global health promotion and protection

WHO's Governance Approach

Catalyst for action:

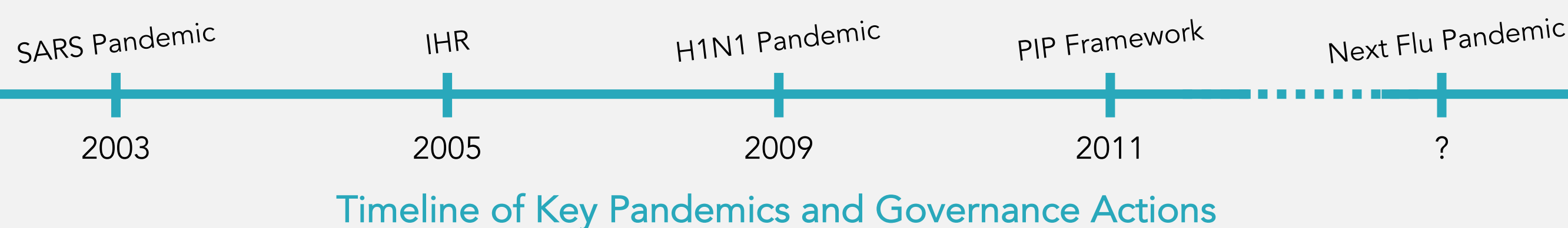
- The Severe Acute Respiratory Syndrome (SARS), pandemic, caused by a coronavirus, revealed a lack of coordinated response to pandemic viruses
- Less than half of all countries have a national influenza plan

International Health Regulations (IHR)

- Minimum capacities required for disease surveillance, detection, reporting, and response
- Permits WHO to declare international health emergencies

Pandemic Influenza Preparedness (PIP) Framework

- Multi-sectoral (includes states, civil society, industry)
- Encourages information and materials sharing, funding partnerships, capacity-building



Discussion

Governance Challenges

- Criticisms of the IHR
 - Minimum preparedness capacities not met
 - Declarations of international health emergencies have been inconsistent and subject to politics, focused on the priorities of wealthier countries
- Limitations of the PIP Framework
 - No guarantee that stakeholders will follow through with their non-binding commitments
- Unfair burden for low-income countries
 - Non-compliance has been linked to a lack of technical assistance and financial resources
 - Local disease threats more pressing than influenza

Recommendations

- Expand the scope of IHR and PIP Framework
 - Make IHR emergency declarations more flexible to include intermediate-level threats
 - Mandate PIP information sharing for seasonal influenza and non-influenza pathogens
 - Encourages partnerships and capacity-building in regions where influenza is not the highest priority
- Improve funding and accountability
 - Increased and sustained funding for IHR capacity-building
 - Make essential PIP funding legally binding, as it is for the IHR, to ensure compliance
 - Increase accountability for PIP industry partners

Case Study: 2009 H1N1 Pandemic

- IHR improved the response to H1N1
 - Mandated reporting led to the timely declaration of an international health emergency and rapid response recommendations by the WHO
- H1N1 revealed a lack of surveillance and response capacities in many countries
 - Low-income countries were unable to meet the minimum obligations and there was no system in place to assist them.
- The PIP Framework was influenced by H1N1
 - Supports capacity-building through partnership contributions in low-income countries.
 - Increases the amount of information available to researchers and vaccine manufacturers

Implications

- Influenza pandemics are an ongoing challenge for global health governance; the WHO has made some progress in this domain



- **Revised IHR:** mandated information sharing can increase pandemic preparedness
 - Highlighted room for improvement in the preparedness of resource-limited states, who will likely be impacted most by the next pandemic
- **PIP Framework:** multi-sectoral collaboration can be used to strengthen existing systems and build capacity
- Notably, the PIP Framework remains untested by a pandemic, though the WHO warns that the next influenza pandemic is not a matter of *if*, but *when*



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