IntraHealth International commends the efforts to respond to global health security threats outlined in the background document for this agenda item, including WHO’s provision of more than 2,800 health workers in 141 countries and the vaccination of frontline health workers responding to the Ebola outbreak in DRC.

However, an urgent imperative remains to increase investment and coordination in capacity building in the International Health Regulations (IHR) and protection of frontline health workers in the world’s communities most at risk of infectious disease outbreaks. As our experience across more than 100 countries demonstrates, frontline health workers are best able to gain the trust of communities when preventing, detecting, and responding to global threats.

As yet another public health tragedy continues to unfold daily in DRC, member states must firmly proclaim that ensuring access to competent and supported health workers will no longer be allowed to languish as a global health policy afterthought. The heroic sacrifices of local frontline health workforce teams must be met with targeted investments in equipment, supplies, training, and effective management and support of their efforts to ensure that every community has a workforce with sufficient IHR capacities.

And as a new report shows from the Safeguarding Health in Conflict Coalition, for which IntraHealth shares the secretariat, far greater action is also needed to monitor and account for attacks on health workers and facilities if any efforts to implement the IHR is to be sustainable. Documented attacks on health were on the rise in 2018, occurring in at least 23 countries last year. Such attacks are posing a huge barrier to the response to Ebola in DRC. Public, transparent, and searchable data on public health events and attacks on health are essential to enable collective tracking and advocacy, and we urge member states to prioritize such efforts.

CONTACT

Vince Blaser
Senior Advocacy and Policy Advisor
vblaser@intrahealth.org