

In rod c ion

At the December 2009 Meeting of States Parties of the Biological Weapons Convention (BWC), U.S. Under Secretary of State Ellen Tauscher committed the U.S. Government (USG) to engaging the global community to achieving and sustaining the capabilities to combat infec-

participants. Some of the specific challenges to successful IHR(2005) implementation include:

- Some countries struggle with gaps in resources, particularly human resources. Participants emphasized the importance of regional training centers to address workforce shortages and training gaps.
- Meeting IHR(2005) obligations at Points of Entry is a universal challenge, involving human resources and multi-sectoral engagement and communication.
- The safe and effective transportation of specimens and samples remains difficult in many parts of the world.
- There is a need for better laboratory infrastructure. Specifically, labs need broad spectrum diagnostics for rare diseases and common reagents.
- Some countries have had success in developing core capacities at the national level, but found it challenging to make substantial progress in developing capacity at the local level.
- Some countries are focused on building basic public health infrastructure to address endemic health needs, and must prioritize developing this basic infrastructure before focusing specifically on IHR(2005) compliance.

Workshop participants discussed a set of eight draft principles for capacity building and global cooperation for implementing IHR(2005). They include:

collaborate on a paper that provides a systems approach to strengthening national surveillance and detection of events of public health importance.

Conclusion

Representing the desire to foster global collaboration and find both a common political and technical vision for full implementation of the IHR(2005), the representatives at the June and August meetings, as well as a growing network of international partners are achieving important consensus, activities, and outputs. Countries recognize gaps in disease surveillance capacity and needs for intra-country and inter-sector collaboration. They also face challenges in specific technical areas and in building leadership, communication, and collaboration. The platform for discussion and planning provided in June and August generated enthusiasm and targeted areas for intervention. The contributors to this supplement are codifying the vision for global disease surveillance and IHR(2005) implementation, and collectively, planning the future.

Abbreviations

WHO: World Health Organization
IHR(2005): International Health Regulations (2005)
WHOCC: WHO Collaborating Centre
WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies

Competing interests

The authors declare that they have no competing interests.

Authors' contributions

All authors contributed equally and significantly to writing this paper.

Acknowledgements

We thank the WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies for their support and the WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies for their support. We also thank the WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies for their support. We also thank the WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies for their support.

BMC Public Health (2010) 10:1471-2458/10?ip=1

10.1186/1471-2458/10?ip=1

10.1186/1471-2458/10?ip=1

Disclaimer

The views and opinions expressed in this article are the views and opinions of the authors and do not necessarily represent those of the WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies.

Author details

¹WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies, WHO, Geneva, Switzerland
²WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies, WHO, Geneva, Switzerland
³WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies, WHO, Geneva, Switzerland
⁴WHOCC for Global Disease Surveillance and Detection of Public Health Emergencies, WHO, Geneva, Switzerland