

IHR (2005) Country Profile 2013: Bahrain

In accordance with IHR Article 54 and WHA resolution 61.2, all IHR States Parties and WHO are required to report to the WHA on a yearly basis on their implementation of the Regulations. This country profile provides an overview of the progress achieved as reported by this State Party in achieving selected elements of the core public health capacities required by the International Health Regulations (2005) in the context of the International Health Regulations (2005) Annex 1.

Useful contacts and further information

IHR Contact

National Focal Point

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IHR Extension status

Request for extension until 15 June 2014: **Yes**
Plan of action submitted to WHO: **Yes**



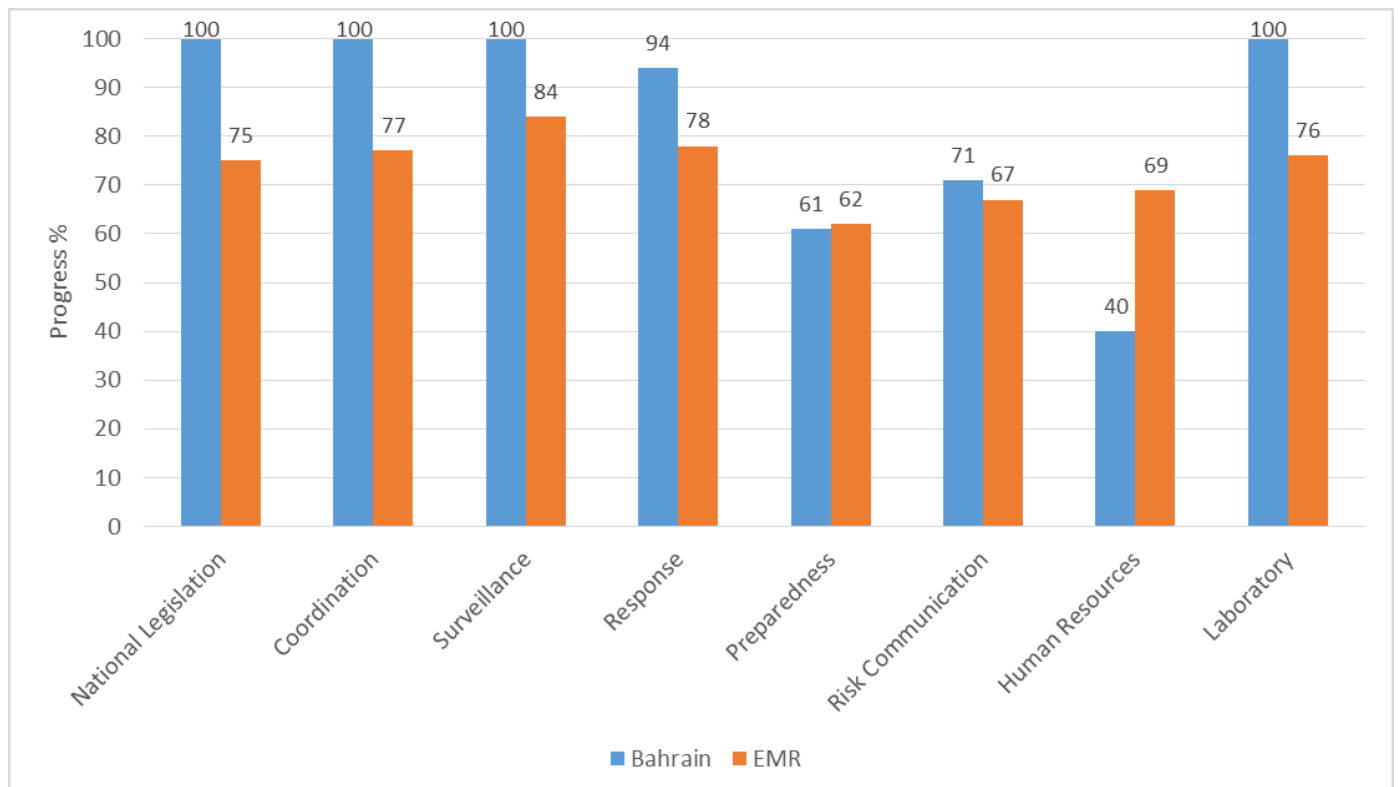
National Capacity Assessment

All IHR States Parties are required to develop or maintain certain core public health capacities for surveillance and response as specified in the IHR; to achieve this objective, they must develop and implement a plan of action designed to ensure that these capacities will be present and functioning throughout their territories by 2012*.

The International Health Regulations monitoring framework* for these core capacities involves the assessment of **eight core capacities** through a checklist of **20 indicators**:

- of the eight core capacities,
- at Points of Entry, and
- of the four IHR-related hazards: biological (including infectious, zoonotic and food safety), radio-nuclear, and chemical events.

EIGHT CORE CAPACITIES IMPLEMENTATION STATUS



*http://www.who.int/ihr/IHR_Monitoring_Framework_Checklist_and_Indicators.pdf

**A sufficient legal framework for complying with IHR obligations was required as of the date the IHR entered into legal force for all States Parties in 2007; the 2012 deadline for implementation of additional technical capacities in Annex 1 does not apply to the legal framework.

National legislation and Policy

Indicator 1: Laws, regulations, administrative requirements, policies or other government instruments in place are sufficient for implementation of obligations under the IHR.

Coordination

Indicator 1: A mechanism is established for the coordination of relevant sectors in the implementation of IHR.

Indicator 2: IHR NFP functions and operations are in place as defined by the IHR (2005).

Surveillance

Indicator 1: Indicator based (Routine) Surveillance has early warning function for early detection of Public Health events

Indicator 2: Event-based surveillance is established

Response

Indicator 1: Public health emergency response mechanisms are established.

Indicator 2: Infection prevention and control (IPC) is established at national and hospital levels.

Preparedness

Indicator 1: Multi-hazard National Public Health Emergency Preparedness and Response Plan is developed

Indicator 2: Public health risks and resources are mapped.

Risk Communication

Indicator 1: Mechanisms for effective risk communication during a public health emergency are established.

Human Resources

Indicator 1: Human resources are available to implement IHR core capacity requirements.

Laboratory

Indicator 1: Laboratory services are available and accessible to test for priority health threats.

Indicator 2: Laboratory biosafety and Biosecurity practices are in place.

Progress

93%

Progress

100%

100%

Progress

100%

100%

Progress

100%

88%

Progress

100%

40%

Progress

86%

Progress

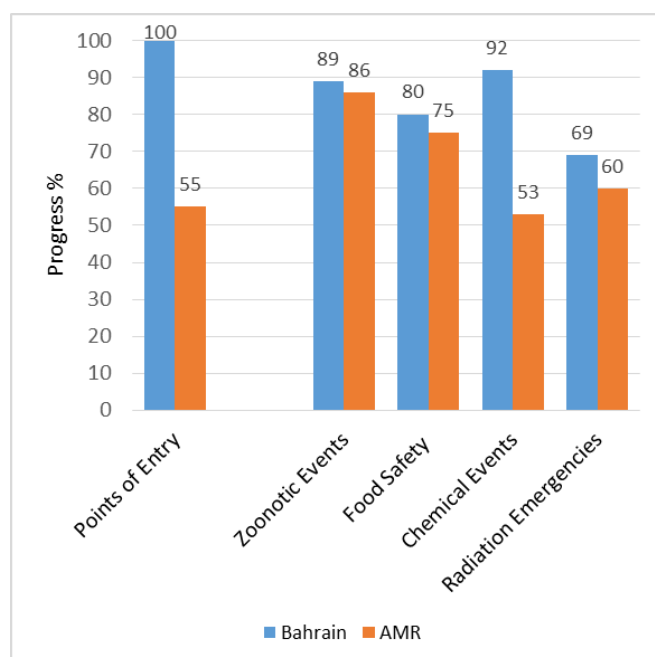
20%

Progress

92%

80%

IHR-Related Hazards and Points of Entry



Points of Entry

General obligations at PoE are fulfilled.

Effective surveillance is established at PoE.

Effective response at PoE established

Progress

100%

100%

100%

Number of Ports implementing

Ship Sanitation Control Certificates

0

Ship Sanitation Control Exemption Certificates

4

Extensions to the SSC

0

Zoonotic Events

Mechanisms for detecting and responding to zoonoses and potential zoonoses are established.

Progress

78%

Food Safety

Mechanisms are established for detecting and responding to foodborne disease and food contamination

Progress

93%

Chemical Events

Mechanisms are established for the detection, alert and response to chemical emergencies.

Progress

85%

Radiation Emergencies

Mechanisms are established for detecting and responding to radiological and nuclear emergencies.

Progress

93%



World Health Organization

IHR Monitoring, Procedures and Information
World Health Organization
20, avenue Appia

<http://www.who.int/ihr/en/ihrmhelp@workspace.who.int>