THE WORLD HEALTH REPORT 2007

ASAFER FUTURE

GLOBAL PUBLIC HEALTH SECURITY IN THE 21ST CENTURY



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in the 21st century

The world has changed dramatically since 1951, when WHO issued its first set of legally binding regulations aimed at preventing the international spread of disease. At that time, the disease situation was relatively stable. Concern focused on only six "quarantinable" diseases: cholera, plague, relapsing fever, smallpox, typhus and yellow fever. New diseases were rare, and miracle drugs had revolutionized the care of many well-known infections. People travelled internationally by ship, and news travelled by telegram.



Since then, profound changes have occurred in the way humanity inhabits the planet. The disease situation is anything but stable. Population growth, incursion into previously uninhabited areas, rapid urbanization, intensive farming practices, environmental degradation, and the misuse of antimicrobials have disrupted the equilibrium of the microbial world. New diseases are emerging at the historically unprecedented rate of one per year. Airlines now carry more than 2 billion passengers annually, vastly increasing opportunities for the rapid international spread of infectious agents and their vectors.

Dependence on chemicals has increased, as has awareness of the potential hazards for health and the environment. Industrialization of food production and processing, and globalization of marketing and distribution mean that a single tainted ingredient can lead to the recall of tons of food items from scores of countries. In a particularly ominous trend, mainstay antimicrobials are failing at a rate that outpaces the development of replacement drugs.

These threats have become a much larger menace in a world characterized by high mobility, economic interdependence and electronic interconnectedness. Traditional defences at national borders cannot protect against the invasion of a disease or vector. Real time news allows panic to spread with equal ease. Shocks to health reverberate as shocks to economies and business continuity in areas well beyond the affected site. Vulnerability is universal.

The World Health Report 2007 is dedicated to promoting global public health security – the reduced vulnerability of populations to acute threats to health. This year's World Health Day, celebrated in April, launched WHO's discussion on global public health security. Around the world, academics, students, health professionals, politicians and the business community are engaged in dialogue on how to protect the world from threats like pandemic influenza, the health consequences of conflict and natural disasters, and bioterrorism.

The World Health Report 2007 addresses these issues, among others, in the context of new tools for collective defence, including, most notably, the revised International Health Regulations (2005). These Regulations are an international legal instrument designed to achieve maximum security against the international spread of diseases. They also aim to reduce the international impact of public health emergencies.

The IHR (2005) expand the focus of collective defence from just a few "quarantinable" diseases to include any emergency with international repercussions for health, including outbreaks of emerging and epidemic-prone diseases, outbreaks of foodborne disease, natural disasters, and chemical or radionuclear events, whether accidental or caused deliberately.

In a significant departure from the past, IHR (2005) move away from a focus on passive barriers at borders, airports and seaports to a strategy of proactive risk management. This strategy aims to detect an event early and stop it at its source – before it has a chance to become an international threat.

Given today's universal vulnerability to these threats, better security calls for global solidarity. International public health security is both a collective aspiration and a mutual responsibility. As the determinants and consequences of health emergencies have become broader, so has the range of players with a stake in the security agenda. The new watchwords are diplomacy, cooperation, transparency and preparedness. Successful implementation of IHR (2005) serves the interests of politicians and business leaders as well as the health, trade and tourism sectors.

I am pleased to present the *World Health Report 2007* to our partners and look forward to the discussions, directions and actions that it will inspire.

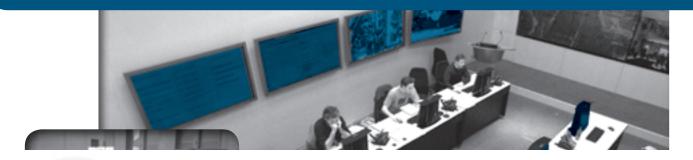
Dr Margaret Chan

Director-General World Health Organization

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OVERVIEW



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