

**58th CONFERENCE OF
DIRECTORS GENERAL OF CIVIL AVIATION
ASIA AND PACIFIC REGIONS**

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**AGENDA ITEM 5: AVIATION SECURITY AND
FACILITATION**

**PROPOSALS FOR PUBLIC HEALTH EMERGENCY
RESPONSE MECHANISMS WITHIN THE AVIATION
INDUSTRY**

(Presented by the Republic of Korea)

SUMMARY

During the COVID-19 pandemic, States globally implemented stringent entrance restrictions and prohibitions, leading to significant disruptions in air transportation. This highlighted a pervasive deficiency in emergency response mechanisms for risks encompassing public health emergencies and global disasters. It is imperative to underscore that indiscriminate entrance restrictions or prohibitions are not advisable, given the aviation sector's pivotal role in transporting crucial commodities, such as medicines, medical supplies and food, and cases where overseas travel is necessitated by employment or education, among others. Therefore, to prepare for future pandemics akin to COVID-19, there is an urgent need to devise strategies that safeguard international air transportation, ensuring prompt public health emergency response and fostering international collaboration

PROPOSALS FOR PUBLIC HEALTH EMERGENCY RESPONSE MECHANISMS WITHIN THE AVIATION INDUSTRY

1. INTRODUCTION

1.1 In the wake of the COVID-19 pandemic, and prior to the development of effective vaccines, States worldwide instituted rigorous entrance restrictions and prohibitions, leading to pronounced disruptions in air transportation. This underscores global inadequacy in the emergency response mechanisms for public health risks.

1.2 Especially, it is crucial to highlight that blanket entrance restrictions or prohibitions are ill-advised, considering the aviation sector's vital role in transporting indispensable goods, including medicines, medical supplies, and food. Thus, in preparation for potential future outbreaks of infectious diseases comparable to COVID-19, it becomes imperative to identify measures that ensure the continuity of international air transportation without hindrances.

1.3 This paper endeavors to outline measures that States should proactively consider, leveraging existing ICAO guidelines pertaining to public health risks, in preparation for potential future pandemics

2. DISCUSSION

2.1 In relation to passenger health, Article 14 of the Convention on International Civil Aviation, drafted in Chicago, stipulates: "Each contracting State agrees to take effective measures to prevent the spread by means of air navigation of cholera, typhus (epidemic), smallpox, yellow fever, plague, and such other communicable diseases as the contracting States shall from time to time decide to designate, and to that end contracting States will keep in close consultation with the agencies concerned with international regulations relating to sanitary measures applicable to aircraft. Such consultation shall be without prejudice to the application of any existing international convention on this subject to which the contracting States may be parties." As such, Article 14 of the Convention on International Civil Aviation acts as a foundational legal basis for response mechanisms addressing public health risks. Notwithstanding this, measures against such risks have not been executed under this Article in practice and specific regulations on this matter have been elaborated upon subsequently.

2.2 Furthermore, in accordance with Articles 37 and 38 of the Convention on International Civil Aviation in Chicago, ICAO has furnished its member states with Annexes and the PANS (Procedures for Air Navigation Services) which delineate the requisite Standards and Recommended Practices (SARPs) to ensure the safety of international air transportation and to enhance its efficiency and orderly development.

2.3 However, response measures addressing public health risks are not encapsulated within a singular annex; rather, they are dispersed across multiple annexes. Specifically, Annex 6 details the provision of medical supplies on-board aircraft and addresses the health and training of flight crews regarding emergency measures. Annex 9 elaborates on aircraft disinfection, quarantine procedures at airports, and matters related to vaccination certificates. Annex 14 provides guidance on the establishment and inspection of airport emergency plans. PANS-ATM (Air Traffic Management) deals with communication protocols between aircraft and air traffic control in case of infectious disease outbreaks.

2.4 The dispersion of relevant measures across various annexes hampers the swift and comprehensive identification of protocols related to public health risk responses, arousing a pressing need to contemplate the inception of a new PANS that holistically consolidates regulations pertaining to public health risks in consideration of lesson learned from COVID-19.

2.5 In light of the operational challenges faced during the onset of the COVID-19 pandemic—specifically, issues related to quarantine protocols, safety standards, and the welfare of flight crews executing mission-critical flights for the transportation of emergency aid, pharmaceuticals, and medical equipment—it is crucial to embed provisions in the forthcoming PANS that prioritize the protection of aviators engaged in these pivotal operations. Additionally, protective measures should extend to key personnel in the aviation sector, encompassing air traffic controllers, maintenance personnel, ground handling personnel and associated functions.

2.6 Since 2013, ICAO has initiated the Traveller Identification Programme (TRIP) and advocated for the implementation of Machine Readable Travel Documents (MRTDs) to enhance passenger identification processes. In addition, the Public Key Directory (PKD) was established to authenticate the validity of electronic passports. Utilizing the PKD can mitigate potential disruptions in quarantine systems that might arise from circumventions of individual countries' entrance identification procedures or from counterfeit identity documents. Furthermore, the PKD can be utilized when presenting personal health credentials, health attestations, or vaccination certificates, thus aiding member states in tracking potential outbreaks or transmission pathways of infectious diseases comparable to COVID-19.

2.7 However, a mere 92 states have currently acceded to the PKD. To bolster the efficacy of public health response mechanisms, States yet to embrace the PKD are urged to expedite its adoption.

2.8 The concept of a Public Health Corridor (PHC) has emerged as a strategic initiative to counteract the challenges posed by infectious diseases similar to COVID-19. Designed as a mechanism to ensure the continuity of air transportation with minimal restrictions, the PHC is instituted when two or more nations collaboratively negotiate protocols to relax public health measures in their intersecting airspaces. The overarching objectives of the PHC are to: (i) facilitate uninterrupted aircraft operations even amidst infectious disease threats; (ii) inhibit the transmission of infectious diseases via air travel; and (iii) prioritize the health and safety of both passengers and aviation personnel.

2.9 The PHC framework was devised primarily to curtail the propagation of COVID-19 during the period when efficacious vaccines had not been developed. Central to the PHC's safety management approach is maintaining "clean" aircraft, "clean" airport infrastructure, and the transit of "clean" passengers. Within this context, "clean" signifies an optimal reduction in COVID-19 risks within the aviation sector. In pursuit of these objectives, ICAO disseminated a range of guidelines and introduced tools such as flight crew health status cards, aircraft sanitation audits, passenger health evaluations and questionnaires to capture COVID-19 test outcomes.

2.10 In the establishment of the PHC, a multi-layered, risk-centric approach was adopted to foster mutual support in the deployment of public health mitigation measures. An application of several risk mitigation techniques combined is decidedly more synergistic and efficacious than the implementation of merely one or two selected strategies. By operationalizing these measures collaboratively, States can tailor risk mitigation frameworks to best align with their risk tolerance thresholds and health and safety management paradigms. With consensus among states, flight crew and passengers may be granted exemptions from COVID-19 testing, isolation, or other prerequisites, thereby benefiting from relaxed quarantine protocols.

2.11 In distributing guidelines for the PHC, ICAO emphatically encourages member states to operationalize the PHC through the Council Aviation Recovery Task Force (CART). Concurrently, ICAO equips member states with the i-PACK, a comprehensive suite comprising pertinent materials, training modules, and consultancy to aid the PHC's introduction. Parallel to the PHC's ideology, several "travel bubble" constructs have emerged, offering measures like reduced quarantine durations, travel precinct limitations, and permission for specific-purpose visits, including business. However, after the pandemic ends, there has been a conspicuous absence of discussions geared towards formalizing travel bubble systems or refining them using the PHC guidelines offered by ICAO.

2.12 Notably, Angola and Mozambique were the only states which fully adopted the PHC manual offered by ICAO. In the post-pandemic era, fewer countries established the PHC by directly

using the PHC manual. Nevertheless, given that public health crisis can manifest unpredictably during the course of consistent international air travel operations, the PHC, especially among neighboring countries, will be instrumental in preserving international air connectivity during the period where potent vaccines are either undeveloped or unavailable. Proactive discussion on such matters can forestall the entire cessation of international air travel. Consequently, States are poised to either forge bilateral agreements focused on the PHC or to embed relevant stipulations within their standing Bilateral Air Services Agreements.

3. ACTION BY THE CONFERENCE

3.1 The Conference is invited to:

- a) note the contents of this paper;
- b) ask ICAO to develop a new PANS that consolidates regulations on emergency response measures against public health risks, currently scattered across various annexes and PANS;
- c) recommend States to share the emergency response measures against public health risks they implemented and lessons learned during the COVID-19 pandemic with other member states and update their public health emergency response plan to prepare for future risks;
- d) encourage States who has not adopted ICAO PKD to swiftly adopt the PKD; and
- e) recommend States to consider negotiating bilateral agreements concerning Public Health Corridors, or to append provisions on the continuation of air operations during public health emergencies to their existing Bilateral Air Services Agreement.

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