Considerations on Vaccination and International Travel

COVID-19 Vaccination and International Travel: the role of Vaccination passport and immunity certificate to revive the tourism economy in the Eastern Caribbean

9 June 2021



certificate /

Determines acceptability of use of a vaccine in the context of a public health emergency-benefits outweigh the foreseeable risks and uncertainties

(compliance with GMP), , efficacy and performance

8 COVID-19 vaccine products

Advises WHO Secretariat on vaccines and immunization - overall global policies and strategies, immunization programmers' response to public health priorities, etc.

Proposes to the WHO Secretariat framework for COVID-19 vaccines focuses on

- Evidence

6 sets of interim recommendations for use of the 8 COVID-19 vaccine products

Death	97%	
Hospitalization	87%-97%	
Severe disease	92%-98%	
Symptomatic infection	85%-97%	
Infection	64%-99%	
Asymptomatic infections	65%-92%	
-		

Duration of vaccine-induced immunity

Effectiveness on SARS-CoV-2 variants

Timing of booster doses

How long before travel vaccines should be offered Vaccines' interchangeability

Specific contraindications

Not completely understood

Protection against reinfection for at least 6-8 months after infection

Evasion of immune response by variants under investigation

People who have antibodies against SARS-CoV-2

Not well understood how results of serologic assays correlate with protection against reinfection

Evidence to recommendations for COVID-19 vaccines: Evidence framework

A framework to inform the assessment of evidence and formulation of subsequent COVID-19 vaccine recommendations

10 December 2020



Well-Being
Equal Respect
Global Equity
National Equity
Reciprocity
Legitimacy



Limited access to COVID-19 vaccines worldwide – low/lower middle-income countries

Proof of vaccination as a condition for entry/exit

Hinder equitable national and global access to vaccines and unlikely to yield global health benefits

Unequal vaccine distribution and access would impede freedom of movement

Strategic Advisory Group of Experts on Immunization (SAGE)

https://www.who.int/groups/strategic-advisory-group-of-experts-on-immunization/covid-19-materials

There is not yet sufficient evidence of an vaccine on

of the

to be

followed by

individuals

Very limited vaccine supply

COVID-19 vaccination can be offered to professional groups





Home / News / Joint Statement on prioritization of COVID-19 vaccination for seafarers and aircrew

Joint Statement on prioritization of COVID-19 vaccination for seafarers and aircrew

By International Civil Aviation Organization (ICAO), International Labour Organization (ILO), International Maritime Organization (IMO), International Organization for Migration (IOM) and World Health Organization (WHO)

25 March 2021 | Statement | Reading time: 2 min (582 words)

https://www.who.int/news/item/25-03-2021joint-statement-on-prioritization-of-covid-19vaccination-for-seafarers-and-aircrew

Public Health Emergency of International Concern - COVID-19 pandemic Advice to the WHO Secretariat by the IHR Emergency Committee and Temporary Recommendations issued by the Director-General

-		
	Lead development of for	requirements of proof of
	reducing SARS-CoV-2 international travel related transmission, incl. testing and quarantine	vaccination or immunity for international travel as a condition of entry
	with relevant the development of standards for digital documentation of COVID-19 travel-related risk reduction measures	
	Update the Dec 2020 for reducing SARS-CoV-2 transmission related to international travel, incl. testing, quarantine, vaccination, immunity conferred by past infection	proof of vaccination as a condition of entry
	Continue to with ICAO, UNWTO, and IATA	vaccination for seafarers and air crews
	Continue to update the on requirements of proof of vaccination and to produce interim guidance and tools related to standardization of paper and digital documentation of COVID-19 travel-related risk reduction measures	on international travelers for the measures applied or the protection of public health (e.g. vaccination), in accordance with Article 40 of the IHR

Considerations for implementing a risk-based approach to international travel in the context of COVID-19

Interim guidance 16 December 2020



Key points

- During the COVID-19 pandemic, international travel should always be prioritized for emergencies and humanitarian actions, travel of essential personnel, repatriations, and cargo transport for essential supplies such as food, medicines, and fuel.
- As countries gradually resume international travel, introduction of risk mitigation measures aiming to reduce travelassociated exportation, importation and ouward transmission of SARS-CoV-2, should not unmeessarily interfere with international traffic and should be based on a thorough risk assessment that is conducted systematically and routinely.
- Decision makers in Member States can conduct risk assessments through a mixed-methods approach (explained in
 this document and an accompanying risk assessment tool) to calculate the additional burden presented by possible
 importation of COVID-19 cases and decide policies on that basis of whether they have the capacity to cope with this
 burden.
- International travellers should not be considered by nature as suspected COVID-19 cases or contacts. Therefore, WHO
 does not recommend travellers as a priority group for testing.
- The use of "immunity certificates" for international travel in the context of COVID-19 is not currently supported by scientific evidence and is therefore not recommended by WHO.
- The overall health and well-being of communities should be at the forefront of considerations when deciding on and
 implementing international travel-related measures.

Background

As the COVID-19 pandemic continues, Member States should take appropriate measures to reduce transmission of SARS-CoV-2, the virus that causes COVID-19, during international travel, recognizing that comprehensive public health measures adapted to the local epidemiologic context and capacities can mitigate the risk substantially but cannot achieve "zero risk". Therefore, a risk-based approach to international travel is needed.

The World Health Organization (WHO) advises that international travel should always prioritize emergencies and humanitarian actions (such as emergency medical flights and medical evacuations); travel of essential personnel (such as emergency responders, providers of public health technical support, and critical personnel in the transport and security sectors such as seafarers): repatriations, and cargo transport for essential supplies such as food, medicines, and fuel.

This interim guidance document provides national authorities with a step-by-step approach to decision-making for calibrating risk mitigation measures and establishing policies for international travel. It is divided into three main sections: risk assessment, risk mitigation and risk communication. The risk-based approach and related considerations apply to international travel via air, sea* or land between countries, territories or sub-national areas*. The document aims to support countries in the gradual resumption of international travel with the main objective of reducing travel-associated exportation, importation and onward transmission of SARS-CoV-2 whale avoiding unnecessary interference with international traffic.

The document builds on earlier WHO interim guidance documents on surveillance, public health and social measures, infection prevention and control and risk communications and community engagement, adapting their recommendations to the specific context of international travel and within a risk management framework. It is the result of extensive consultations across all relevant departments and Regional Offices of WHO, as well as with the members of the Strategic and Technical Advisory Group for

¹ For the purpose of this document, sea travel relates to international voyage via sea or an inland body of water. Nonetheless, cruise ships are out of the scope of this guidance given the many specificities of this type of conveyance.

³ To facilitate the reading of this guidance document, the formula "countries, territories or sub-national areas" will hereinafter be referred to as "countries" or "country".

https://www.who.int/publications/i/item/ WHO-2019-nCoV-Risk-based-internationaltravel-2020.1 International travellers are neither COVID-19 cases nor contacts by defaults

Risk assessment
Risk mitigation
Risk communication

Rollout of the COVID-19 vaccines

Emergence of SARS-CoV-2 variants of concern

Being updated
Publication forthcoming

Update "Considerations for implementing a risk-based approach to international travel in the context of COVID-19"

Origin

Destination

Inbound Outbound

Travel advice

Self-monitoring for international travellers

Multisectoral coordination and planning for disease prevention and control, surveillance and case management

International contact tracing

Environmental controls and public health and social measures at points of entry

Environmental controls and public health and social measures on conveyances

Exit and entry screening for signs and symptoms of COVID-

SARS-CoV-2 testing for international travellers -

Quarantine for international travellers

Border closure or suspension of travel

Update "Considerations for implementing a risk-based approach to international travel in the context of COVID-19"

of entry or	and sho exit, given the limited (although transmission and persistent inc	,	•
vaccines in readoning (ransmission and persistent in	29arties in global vacomatic	on distribution
testing and/or quarar	to the application of publication requirements to incoming		
Are	vaccine	prior to travellin	g
Have	CO	onfirmed by rRT-PCR receiv	ved at least two weeks
before travelling	and within the past 3 months		
measures and physical dis	, all incoming t stancing measures at destination	ravellers must adhere to p on	ersonal protective

International travel-related measures in the context of the COVID-19 pandemic

Americas, as of 29 May 2021

Throughout the COVID-19 pandemic, the 35 PAHO Member States (MS) have generally maintained essential international traffic

```
    selective or general entry for conveyances or individuals
    MS require travelers to prior to departure
    MS require, either on a selective or subsidiary basis, for incoming travelers
    require incoming travelers, either on a selective, subsidiary, or general basis, to present for SARS-CoV-2 virus (wide variation of intervals and laboratory methods)
    MS require incoming travelers, either on a selective, subsidiary, or general basis, to undergo
```

Up to 18 MS might require incoming travelers to have , a proof of for SARS-CoV-2 virus obtained ,

6 MS waiving other entry requirements for incoming travelers based on

10 MS waiving other entry requirements for incoming travelers based on





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Home / News / Revised scope and direction for the Smart Vaccination Certificate and WHO's role in t

Revised scope and direction for the Smart Vaccination Certificate and WHO's role in the Global Health Trust Framework

4 June 2021 | Departmental news | Reading time: 2 min (642 words)

https://www.who.int/news/item/04-06-2021-revised-scope-and-direction-for-thesmart-vaccination-certificate-and-who-srole-in-the-global-health-trust-framework "Digital Documentation of COVID-19 Certificates (DDCC)" specification to digitally document:

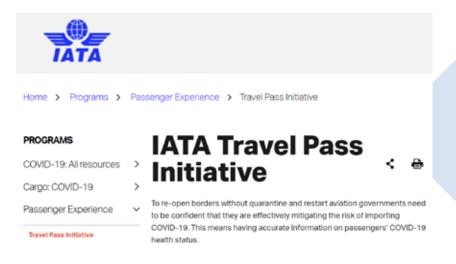
COVID-19 vaccination status

SARS-CoV-2 test results

COVID-19 recovery status

International Air Transport Association (IATA) IATA Travel Pass Initiative

https://www.iata.org/en/programs/passenger/travel-pass/



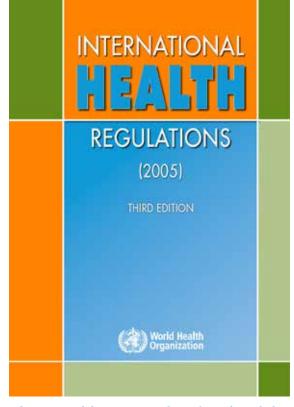
Vaccination against COVID-19 Negative test result Recovered from COVID-19

EU Digital COVID Certificate

https://ec.europa.eu/commission/presscorner/detail/en/FS_21_2793



Governments
Airlines
Laboratories
Travelers



https://www.who.int/publ ications/i/item/97892415 80496 No health documents, other than those provided for under these Regulations or in issued by WHO, shall be in international traffic

1. Vaccines and prophylaxis for travellers administered pursuant to these Regulations, or to recommendations and certificates relating thereto, shall conform to the provisions of and, when applicable, with regard to specific diseases

States Parties to waive health related exit/entry requirements based on proof of vaccination

Introduction by States Parties of proof of vaccination against COVID-19 as a requirement for exit and/or entry

Non mutually exclusive application of IHR provisions

Issuance of Temporary Recommendations (

Issuance of Standing Recommendations (
)

Amendment of the IHR pursuant to

Adoption of Resolution by the Health Assembly (precedent: Resolution WHA67.13, 2014)





Modifications of Annex 6





Accommodation of digital technology



Thank you





