



# PHLawFlu

A project which has received funding from the European Union in the framework of the Public Health Programme.

**Covers 27 European member states, plus Croatia, Turkey, Norway, Iceland and Liechtenstein**

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# PHLawFlu



## Partners:

- Centre for Research in Primary and Community Care (University of Hertfordshire) UK (lead)
- London School of Hygiene and Tropical Medicine, UK
- Technische Universität Dresden
- INSERM Toulouse
- Escola Nacional de Saúde Pública, Universidade Nova de Lisboa

Plus collaborating partners from a range of European states, and public health organisations

## A multidisciplinary team:

Specialists in public health law, public health, communicable disease and health ethics.

Supported by a project co-ordinator and web editor.

# Prior research

- many state laws based on nineteenth century science and on nineteenth century understandings of the balance between public good and private right
- belief that disease could be controlled by vaccines and antibiotics
- public health laws were considered redundant
- national disease control laws across Europe **varied widely\*** - authoritarian, moderate, preventative, laissez faire models

\*Coker, R., Mounier-Jack, & **Martin, R.** (2007). Public health law and tuberculosis control in Europe. *Public Health*. 121(4), 266-273

# PHLawFlu Background

- WHO noted that control of SARS relied on *traditional control measures enshrined in legislation*
- **Revised IHR (2005)** require some national law reform
- many European *pandemic preparedness plans* anticipate a need to reform public health laws
- an opportunity exists for greater *coherence* across Europe

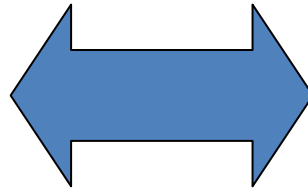
PHLawFlu objective: To strengthen member states' legal frameworks in support of  
**pandemic influenza preparedness**

# PHLawFlu: Two main components

**1.**

Develop a critical portrait of national public health laws relevant to disease preparedness and control across **32 European states**

Achieved via **workshops** across Europe, using **disease scenarios** with targeted legal questions



**2.**

Develop a network of expertise in public health law  
EPHLN  
<http://www.ehln.org>

Facilitate exchange of data and expertise

Recruit **rapporteurs** for workshops in component 1

**EPHLN has 240+ members from 45 countries.**

# European Public Health Law Network

Component 2: Develop a European network of expertise  
in public health law

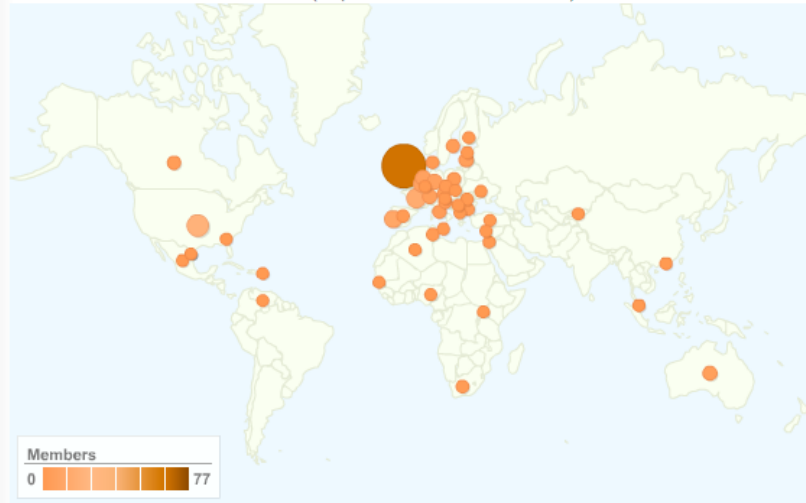
<http://www.ephln.org>

- identify public health law expertise across Europe
- facilitate exchange of data and expertise
- develop a repository of literature on public health law in Europe
- recruit **rapporteurs** for workshops



- 240 members from 45 countries
- visits from 139 countries
- page 1 on Google for public health law keyword search and linkbacks from many authoritative public health websites, eg CDC
- tracking shows that site was used heavily during initial weeks of A/H1N1 outbreak for pandemic planning, legislative and human rights information
- growing number of followers on Twitter (IFRC, IDRL DFID, Amnesty)
- links to 500+ public health law articles and repository of legislation
- French language microsite

Where do our members come from? (map takes a few seconds to load)



## Europe, smoking and the law



Since EPHLN's launch in 2007, count Europe (and indeed the wider world) legislation restricting or banning the sale of cigarettes and other tobacco products

The legislation rarely passes without concerns over loss of income due to tobacco smoking on their premises. However, impact of such bans is believed to be evidence is already emerging of reduced admissions, sick leave, and improved

Here we present some of the evidence. Controversy reported in the mass media reviewed literature expanding the scope of legislation.

- ★ Use the map on your left to see about smoking bans in different countries
- ★ [Click here to visit EPHLN's Law article links](#)
- ★ Is your country missing? Want with us? [Click here.](#)

Email not displaying correctly? View it in your browser.

## Public Health Law News

from the European Public Health Law Network

### June Newsletter

Dear Members, welcome to EPHLN's June newsletter.

To see previous newsletters [please click here.](#)

This month's **front-page feature** is a snapshot of tobacco related legislation across Europe. Help us add more markers to the map by sending us information on smoking bans, and evidence in support of them, from your country!

For those of you who have not yet discovered the benefits of our [public health law Twitter](#) service, [click here](#) to be persuaded!

**WHO announces 'flu pandemic' during our second flu workshop in Toulouse!**

On the 11th June 2009, as a number of public health lawyers debated legal pandemic preparedness in our Toulouse workshop, the World Health Organisation classified the ongoing A/H1N1 outbreak as a pandemic. This news clearly adds weight to the importance of the PHLawFlu project, and, the value of our workshops for participants. On that note, we're still looking for participants for our final workshop in Lisbon on the 2nd and 3rd November 2009. We urgently need to make contact with people with public health law expertise in Norway, Denmark and Spain. Please [contact us](#) if you know anyone who may be able to participate, or, forward this newsletter!

## EUROPEAN PUBLIC HEALTH LAW NETWORK

This website arises from the PHLawFlu project which has received funding from the European Union, in the framework of the Public Health Programme.

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### Law and Pandemic Preparedness conference

**FREE CONFERENCE - BRUSSELS, SEPTEMBER 2010:**  
**Pandemic Influenza Preparedness in Europe: Are National Public Health Laws 'Fit for Purpose'?**

Hosted by the PHLawFlu team, using evidence gathered from the PHLawFlu project.

[CLICK HERE FOR MORE DETAILS](#)

REGISTER YOUR INTEREST NOW!

SHARE

### News and Twitter posts

Wondering what Twitter is? Find out more here

**Lawpublichealth**  
130 Followers

Effects of smoking ban in Bahrain - Gulf Daily News <http://bit.ly/iPePST>  
6 days ago

JAMA reviews Wendy Parmet's Populations, Public Health and the Law <http://bit.ly/37nWmT>  
6 days ago

New NEJM article on poverty and access to flu vaccines - link placed in EPHLN pubs page <http://bit.ly/SiSjRL>  
6 days ago

Strict penalties for non vaccination

twitter

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### HIV and Law

The days of the US HIV travel ban could be numbered.

The CDC has invited the public to comment on the proposed removal of the HIV travel ban.

The ban, enacted in 1993 during the Clinton administration, prevented those with HIV/AIDS from entering the United States.

However, the reversal of the ban comes at a time when legislation that criminalises the transmission of HIV is proliferating across the world.

We've started to put together a set of resources exploring the complex and controversial issue of the criminalisation of HIV.

Images courtesy: rooseuran(airport) and Freizelt(ribbon)

# PHLAWFLU GLOSSARY (ALSO AVAILABLE ONLINE AT HTTP://EPHLNGLOSSARY.BLOGSPOT.COM)

## A

- **Adverse effects:** harmful and undesired effects resulting from a drug, vaccine or medical treatment.
- **Affected:** persons, baggage, cargo, containers, conveyances, goods, postal parcels or human remains that are infected or contaminated, or carry sources of infection or contamination, so as to constitute a public health risk.
- **Affected area:** a geographical location specifically for which health measures have been recommended by WHO under IHR 2005.
- **Airport authorities:** see: 'border guard'.
- **Antiviral (or AV):** A drug that is used to prevent or cure a disease caused by a virus.
- **Assistance:** any measures designed by a country to help its citizens in an affected country or to help others countries' nationals within its territory, in order to control or limit the spread of disease. For example provision of food, supplies, antivirals, vaccines and medications; assistance with repatriation, etc.
- **Authorise:** to allow or empower designated persons/authorities to implement specific disease control measures which would otherwise contravene laws.
- **Avian influenza (also known as 'bird flu'):** An infection caused by an avian influenza virus, which primarily affects birds. There may be bird-to-bird transmission and occasional bird-to-human transmission. See also: 'human influenza'; 'pandemic influenza'; 'seasonal influenza'; 'influenza'

World Health Organization, *International health regulations*, 2005, (<http://www.who.int/csr/ihr/en/index.html>, retrieved 13 December 2007).

World Health Organization, *International health regulations*, 2005, (<http://www.who.int/csr/ihr/en/index.html>, retrieved 13 December 2007).

<http://www.pandemicflu.gov/glossary/index.html>, (retrieved 1st May, 2008).

# Component 1: critical profile of national public health laws across 32 states

achieved via workshops across  
Europe, using disease scenario with  
targeted legal questions

workshops attended by  
rapporteurs recruited from the  
network of expertise

# Methodology

- we began by developing a disease scenario, based on WHO pandemic phases, to serve as a working tool for the workshops
  - consultation with bodies such as WHO, ECDC
- factual inputs reflect interventions proposed in national pandemic preparedness plans that raise issues where law might be relevant

# Disease scenario

- IV- NARRATIVE PART A - (PRE-PANDEMIC PERIOD: WHO PHASES 4 AND 5)
- THE EMERGENCE OF HXNY IN EUROPE AND THE DEVELOPMENT OF FIRST CLUSTERS OF HUMAN CASES

## Background to today's events

- During the months of ***November and December 2008***, the national authorities of ASIA1 have been investigating reports of unusually elevated rates of human sickness and death caused by an influenza-like illness in two distant villages located in the southern part of a province (both villages have a high density of poultry). An investigating team visited the two villages and collected samples of specimens both from poultry showing signs of sickness and from villagers who reported symptoms of influenza, and sent them to the national laboratory. The investigation revealed that, in the days preceding illness, all cases had been exposed to poultry. Subsequently, the national laboratory confirmed that most samples tested positive for avian HXNY. Hence, the team concluded that the villagers had acquired the infection through exposure with infected poultry and that it was very unlikely that they had acquired the virus through human-to-human transmission. It was announced that all poultry in the two villages under consideration were to be culled and that surveillance and health education measures would be intensified in the area.
- At the ***end of January 2009***, the national authorities of ASIA1, through its national IHR focal point, confirmed to the World Health Organization (WHO) and to the Food and Agriculture Organization of the United Nations (FAO) that mass culling had successfully been carried out in the two villages and that no new animal or human case of avian influenza (AI) had emerged in the past two weeks. However, ***three weeks ago...***

# Questionnaire

- 114 open-ended and closed-ended questions, framed around the scenario, addressing national laws underpinning pandemic preparedness plans
  - consulted on questions; questionnaire piloted
- questionnaires completed before workshop by invited respondents from project states
- where possible, answers checked against available national legislation published in English or French

# Focus of questions on legal underpinning of preparedness plans

- disease surveillance
- border control
- social distancing measures
- provision of healthcare
- emergency powers
- closure of facilities and restriction measures

# Workshops

- 4 workshops with 8 project states to be represented at each workshop – 3 completed
- discussion aims to build on evidence from questionnaires
- Chatham House rules
- workshops audio-recorded and transcripts sent back to rapporteurs for verification

# Workshop themes

- the movements of information, goods, services and people across borders in a time of pandemic
- national capacity for surveillance, case detection, case management and community control
- the deployment of strategies of prevention, containment, mitigation and recovery across states
- the identification of commonalities and disconnects across states

# What we are looking for

- coherence between national plans and national laws authorising interventions
- reliance on emergency powers in a pandemic
- disconnects across states, particularly neighbouring states, in the interventions they propose
- non-compliance of laws with the IHR (2005)

# Some preliminary results?

- states are at different stages of development of communicable disease laws
- many states propose measures in plans that have no legal authorisation
- some states will rely on emergency powers laws in a pandemic
- there is no common approach across states for:
  - the control of movements of people, goods and information
  - obligations to notify incidence of disease
  - accessibility to health services in a pandemic
  - clarity as to competences and responsibilities

# Some other research findings so far...

- an imbalance of public health law expertise across Europe and a general lack of expertise in public health law across states
  - in Eastern and Southern Europe it is primarily communicable disease specialists who have taken responsibility for pandemic preparedness
    - ‘Public health lawyers have not yet been invented in our country’ (an EPHLN member)
- pandemic preparedness planning across European states envisages a wide range of non-medical interventions, many of which require legal underpinning
- for effective disease prevention and control across Europe, significant investment is needed in the development of national communicable disease legal frameworks

# Limitations of project

- unable to secure rapporteurs from some states
  - no representation from Denmark, Greece, Slovakia\*, Romania, Luxembourg, Liechtenstein. Spain
- some states represented by lawyers and some by public health doctors
- level of understanding of national laws varied
- a lack of expertise on public health law across states
- the progress of H1N1

\*we received a completed questionnaire from Slovakia but the rapporteur did not attend the workshop

# Some preliminary recommendations?

- further work needs to be done on making clear national pandemic responsibilities and competences
- the laws of some states still reflect nineteenth century science and jurisprudence so laws need updating
- laws to be used in a pandemic should be drafted now and not in a time of crisis

# Implications for the EU?

- workshop discussion suggests that states would welcome greater EU involvement in the management of pandemic disease, in the form of recommendations and guidelines
- concern that with disparate laws, states will respond differently resulting in movement of populations
- states would welcome support for the development of coherent national public health law expertise