

Infectious Diseases as Security Issues

- Endemic Diseases → Pandemic Diseases
 (HIV/AIDS, SARS, Influenza...)
- Pandemic may čause social, economic, and political disorder

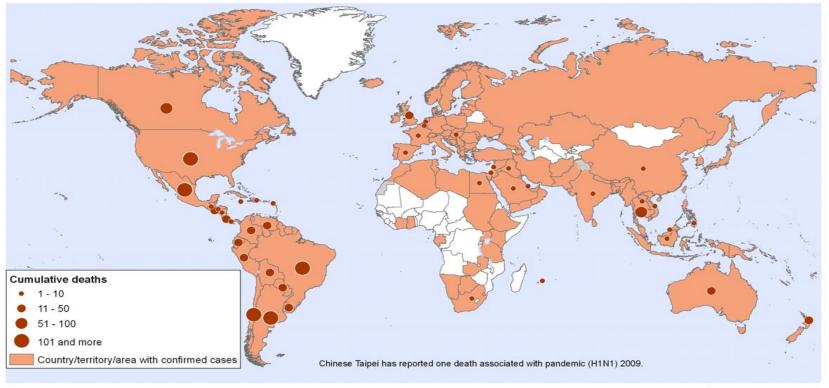
Pandemic Flu (H1N1) (1)

- Emergence of H1N1 in Mexico on Late February or early March 2009
- Confirmed as emerging flu by Canadian Health Authority and announced by Mexican Gov. on 23 April
- WHO declared phase 4 (human to human infection) on 27 April
- WHO declared phase 6 (Pandemic) on 12 June

Pandemic Flu (H1N1) (2)

Pandemic (H1N1) 2009

Countries, territories and areas with lab confirmed cases and number of deaths as reported to WHO



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization Map Production: Public Health Information and Geographic Information Systems (GIS) World Health Organization



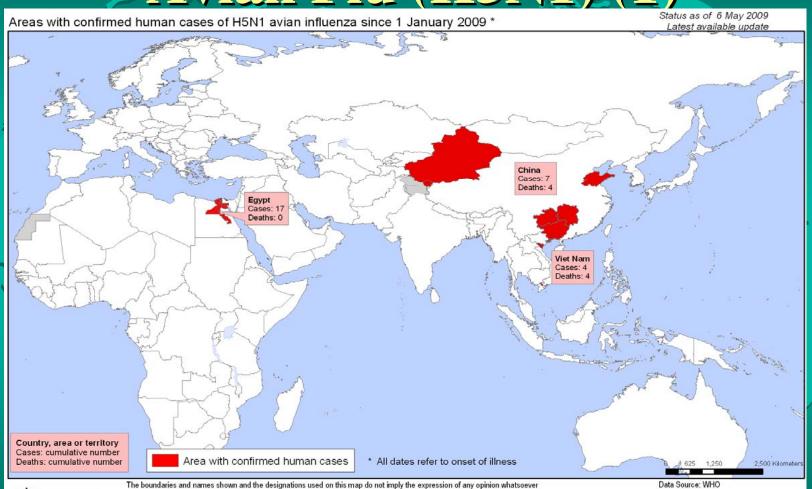
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Map produced: 19 August 2009 13:38 GMT

Lessons from H1N1 case

- Time lag between emergence and confirmation
 - → Due to inadequacy of state capacity for surveillance and confirmation in developing countries
 - → Hard to prevent disease from intrusion
- Hard to grasp exact situations in developing countries

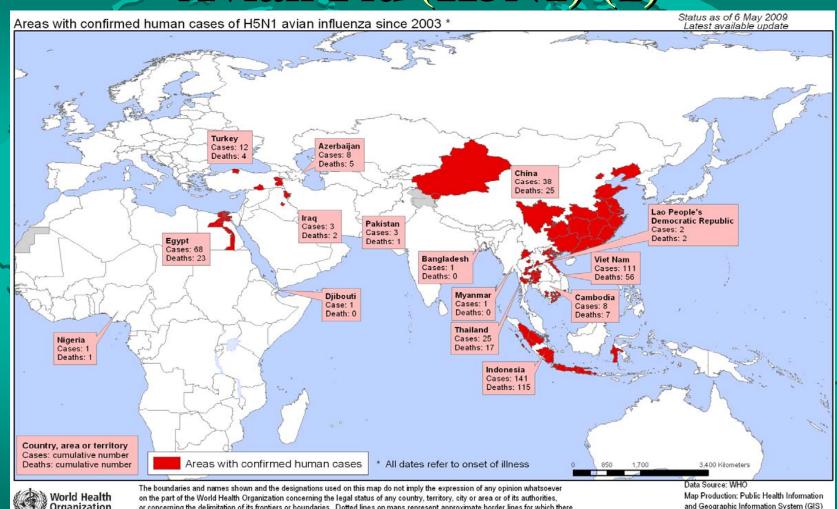
Avian Flu (H5N1) (1)



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Data Source: WHO
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Avian Flu (H5N1) (2)





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Factors affecting State Surveillance Capacity in Southeast Asia

- Size (population, country)
- Lack of cooperation among surveillance sgencies (police, military, health...)
- Decentralization
- Accessibility to primary health sector
- High human mobility in the region

Human Mobility

Table 28 ASEAN Statistics

Tourist arrivals in ASEAN

as of 15 July 2009

in thousand arrivals

Country	2005			2006			2007			2008 ^{1/}		
	Intra-ASEAN	Extra-ASEAN	Total	Intra-ASEAN	Extra-ASEAN	Total	Intra-ASEAN	Extra-ASEAN	Total	Intra-ASEAN	Extra-ASEAN	Total
Brunei Darussalam	76.2	51.0	127.1	68.7	89.4	158.1	84.6	93.9	178.5	98.0	127.7	225.8
Cambodia	219.6	1,202.0	1,421.6	328.5	1,371.6	1,700.0	410.1	1,605.0	2,015.1	552.5	1,573.0	2,125.5
Indonesia	2,038.3	2,963.8	5,002.1	2,307.1	2,564.2	4,871.4	1,523.4	3,982.3	5,505.8	2,774.7	3,459.8	6,234.5
Lao PDR	794.0	301.3	1,095.3	891.8	323.3	1,215.1	1,272.7	351.2	1,623.9	1,285.5	445.8	1,731.3
Malaysia	12,984.6	3,446.4	16,431.1	13,856.6	4,615.1	18,471.7	15,620.3	4,615.7	20,236.0	16,637.0	5,414.9	22,051.8
Myanmar	51.7	608.5	660.2	56.8	596.1	652.9	53.0	679.1	732.1	462.5	198.3	660.8
The Philippines	179.4	2,443.7	2,623.1	202.9	2,485.1	2,688.0	235.6	2,856.4	3,092.0	254.1	2,885.3	3,139.4
Singapore	3,341.4	5,601.0	8,942.4	3,555.9	6,195.7	9,751.7	3,724.7	6,562.9	10,287.6	3,571.4	6,545.1	10,116.5
Thailand	3,099.6	8,417.4	11,516.9	3,556.4	10,265.7	13,822.1	3,755.6	10,708.7	14,464.2	4,337.2	10,594.6	14,931.9
Viet Nam	469.5	2,998.2	3,467.8	571.9	3,011.6	3,583.5	661.2	3,488.3	4,149.5	515.6	3,738.2	4,253.7
ASEAN	23,254.3	28,033.3	51,287.6	25,396.6	31,517.9	56,914.5	27,341.3	34,943.4	62,284.8	30,488.5	34,656.3	65,471.2

Source ASEAN Tourism Statistics Database (compiled from data submissions, publicatins/reports, and/or websites of national tourism organizations/agencies, immigration authorities, and/or national statistical offices)

Symbols used

- not available as of publication time

n.a. not applicable/not available/not compiled

Data in *italics* are the latest updated/revised figures

from previous posting.

Note

Details may not add up to totals due to rounding off errors.

1/ Preliminary as of July 2009

Case of Thailand

Village Health Volunteer System

Implemented by Thaksin Gov.

Almost 700,000 volunteers posted to each village, correcting information, reporting it doctors and government officials, and distributing knowledge among people

High accessibility to primary health sector

Health Centers existed in each tambon (adminstrative village)

From last November, charge for primary medical services is free

Factors affecting Mitigation Measures in Southeast Asia (1)

- Limit of medical and epidemical measures
 - (1) Lack of adequate number of medical staffs and hospitals
 - (2) Uneven distribution of medical staffs and hospitals
 - (3) Lack of correct medical and epidemical knowledge both in medical staffs and citizens
 - (4) Price of medicines and vaccines
 - (5) Lack of adequate number of medicines and vaccines

Factors affecting Mitigation Measures in Southeast Asia (2)

- Lack of appropriate social mitigation
 measures
 - → Due to lack of adequate on-site research and data

Conclusion (1)

- Developing countries would be most affected by infectious diseases, especially by emerging ones like current pandemic flu (H1N1).
 - → Because of lack of effective state surveillance capacity and mitigation measures (both medical and social)

Conclusion (2)

- To make surveillance effective
 - (1) Cooperation with citizen
 - (2) Improving accessibility to primary health sector
 - (3) Collaboration with other surveillance agencies, and between central and local governments

Conclusion (3)

- To improve mitigation measures
 - (1) Training medical and public health staffs
 - (2) Distributing and storing medicines and vaccines as many as possible
 - (3) Making appropriate social mitigation measures based on on-site research data

