

IANPHI

# ANNUAL MEETING

NOVEMBER 30 - DECEMBER 2, 2022 | HYBRID

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HOSTED BY



## STOCKHOLM STATEMENT

**The Role of National Public Health Institutes  
in Supporting Preparedness and Response to  
Emergencies Affecting Population Health**

DECEMBER 2, 2022

Between November 30 and December 2, 2022, National Public Health Institutes (NPHIs) from around the world met in Stockholm, Sweden to address and find solutions to the biggest challenges to the public health security of the world's population.

## **National Public Health Institutes bring critical support at country level in the response to crises affecting health, and the challenges are many.**

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Humanity now faces multiple emergencies with global reach and global public health effects, including COVID-19, armed conflict and climate change. All of these crises affect the most basic conditions for human and animal survival, with its effects being especially felt by the most vulnerable countries.

COVID-19 has had devastating impacts on morbidity and mortality, population health and healthcare systems. Armed conflicts and climate change damage economies worldwide, disrupt critical energy supplies, displace millions of people, and cause global food shortages.

National public health institutes (NPHIs) play a vital role in preventing and alleviating the effects from these emergencies. IANPHI members contributed science-based evidence and independent expert advice for strategic decisions by governments around the world. IANPHI supports members in developing responses to displaced populations. IANPHI's Committee on Climate Change and Public Health supports members in developing strategies and indicator sets to provide needed evidence to policy makers.

Meanwhile, NPHIs noted the need for more effective responses to longstanding global public health challenges that call for long-term investments in health promotion and disease prevention. These include endemic infectious diseases, mental health, child and maternal health, nutrition, harmful substance use, the burden of avoidable chronic diseases, disabilities and antimicrobial

resistance. The failure to address these adds to a growing burden of premature and avoidable mortality and long-term health conditions and the growing burden of non-communicable diseases (NCDs).

NPHIs also observed that in many countries, progress on the [Sustainable Development Goals](#) (SDG) is stalling and sometimes even regressing. The positive trends that were once anticipated have not occurred.

The discussions highlighted the uneven distribution of the effects of numerous emergencies on the health of populations, especially the most vulnerable, leading to diminishing health equity, most evident recently during the COVID-19 pandemic. NPHIs committed to work together to address long standing inequities and social determinants of health that contribute to disproportionate health outcomes on many populations, to reduce stigma and discrimination. Equity within and between countries must always be at the core of our work and we need to reinforce trust between citizens and public health authorities.

Even our successes are partial. The COVID-19 pandemic led to the rapid development of effective vaccines diagnostics, and drugs but fell short of securing equitable distribution and access, particularly in low-income countries, highlighting longstanding global inequities within and among countries.

## **Historically, NPHIs across the world have been at the forefront of the response to global threats to health – the present COVID-19 pandemic is just the latest example.**

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NPHIs in many countries are playing a vital role in the responses of governments and populations. Depending on their role and mandate, their scientific independence, partnerships among stakeholders and rapid application of knowledge and technology enable the real-time monitoring and rapid decision-making necessary during a crisis. Many NPHIs have also played an important role in communicating health messages to the public, and implemented targeted interventions for groups disproportionately affected by crises in order to alleviate the challenges to health equity.

The meeting concluded that there is an urgent need to apply the lessons learned from COVID-19 to address other health threats, such as the impact of climate change. Now is the time for NPHIs to step up their role in the handling of crises that affect the health of our populations with prioritization of health equity.

## Therefore, we, the International Association of National Public Health Institutes (IANPHI), gathered in the city of Stockholm for the 2022 IANPHI Annual Meeting, urge our member organizations to:

- Support countries to reaffirm their commitment to the achievement of the Sustainable Development Goals;
- Prioritize health equity and commit, through an appropriate investment in prevention and health promotion, towards healthier, and resilient populations;
- Support countries to strengthen their forecasting, preparedness, early threat detection and rapid response capabilities using the One Health approach, and support rapid decision-making to deal more effectively with crises including the ongoing pandemic;
- Support countries in establishing resilient health systems that can effectively mitigate and address the health impacts of climate change;
- Strengthen the role, mandate, governance, human resources, delivery and infrastructure of National Public Health Institutes that yield science-based evidence and are placed at the center of crisis response systems in the countries;
- Strengthen advocacy for the health and well-being of the population, be at the center of climate change adaptation;
- Adopt the use of digital systems, open standards, data sharing and data science methods to strengthen preparedness for health emergencies, promote health and prevent disease in today's digital age.

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**Adopted on December 2, 2022 in Stockholm**  
**by the IANPHI Executive Board on behalf of the IANPHI Membership**

**Prof. Duncan Selbie**, President, IANPHI, former Chief Executive, Public Health England and Chief Adviser, Saudi Public Health Authority, Saudi Arabia

**Dr. Meerjady Sabrina Flora**, Vice President, IANPHI, former Director, Institute of Epidemiology Disease Control and Research, Bangladesh

**Prof. André van der Zande**, immediate past President, IANPHI, former Director-General, National Institute for Public Health and the Environment, The Netherlands

**Dr. Ebba Abate**, Executive Board Member, IANPHI, immediate past Director General, Ethiopian Public Health Institute, Ethiopia

**Dr. Abdullah Algwizani**, Chief Executive, Public Health Authority, Saudi Arabia

**Prof. Geneviève Chêne**, Executive Board Member, IANPHI, immediate past Chief Executive, Santé Publique France, France

**Prof. Aamer Ikram**, Executive Board Member, IANPHI, Executive Director, National Institute of Health, Pakistan

**Dr. George Fu Gao**, Executive Board Member, IANPHI, immediate past Director-General, Chinese Center for Disease Control and Prevention, China

**Dr. Martha Lucia Ospina**, Executive Board Member, IANPHI, Director, National Institute of Health, Colombia

**Dr. Sabin Nsanzimana**, Executive Board Member, IANPHI, immediate past Director, Rwanda Biomedical Center, Minister of Health, Rwanda

**Dr. Juan Angel Rivera Dommarco**, Executive Board Member, IANPHI, immediate past Director-General, National Institute of Public Health, Mexico

**Dr. Theresa Tam**, Executive Board Member, IANPHI, Chief Public Health Officer of Canada, Public Health Agency, Canada

**Dr. Markku Tervahauta**, Executive Board Member, IANPHI, Director-General, National Finnish Institute for Health and Welfare, Finland

**Prof. Lothar H. Wieler**, Executive Board Member, IANPHI, President, Robert Koch Institute, Germany