BACKGROUND

History records the occurrence of a number of pandemics and public health emergencies in the last centuries. The 1918 pandemic (Spanish Flu) is considered to be yet the most severe when 30% of the world’s population became ill and between 50 and 100 million died. One important factor why the Spanish Flu spread so quickly and so extensively was through modern transportation, which at the beginning of the 20th century offered a global coverage. The virus was spread around the world by infected crews and passengers of ships and trains and severe epidemics occurred in shipyards and railway personnel.

Concerns about the emergence of a new pandemic are salient, particularly in light of recent outbreaks such as SARS (Severe Acute Respiratory Syndrome) in 2002-2003 and the Swine Flu in 2009. The disease quickly spread because of the convenience and advancement of global air travel. The next influenza pandemic could be equally severe and widespread illness or absenteeism in freight transportation sectors can cause cascading disruptions of social and economic systems.

Air transport increased the risk of the wide spread of diseases and causing pandemics. The technology advancement has led to more efficient and faster transportation. This situation has put long-distance travel superior to incubation time of many flu variants. Since the incubation time for the average influenza virus is between 1 and 4 days, there is ample time for someone being infected to travel to the other side of the world before noticing symptoms. At this point, a modern transport system would ensure that an epidemic becomes a pandemic.

In this notion, once an outbreak becomes apparent, a global passenger transportation system, such as air travel, can quickly be shut down in whole or in part, either voluntarily (more likely if the outbreak is judged to be serious) or by the unwillingness of passengers to be exposed to risks. The former was what happened during H1N1 in 2009 when some measures to restrict the incoming and outgoing people mobility, including closing the border and health screening at the airport, were imposed by some countries. The latter was apparent during the SARS outbreak in 2003 when a sudden decrease of travelling in Asia and Pacific and the number of flights, especially those were to and from Hong Kong, declined rapidly and created significant impact on global airline industries.

At present, mitigating the impact on the air transport passenger faces some challenges, such as:

1. There has been a discourse on protecting public health and the necessity of limiting people movement. Although WHO discourages travel restriction measures taken during pandemics, some countries are still in favour of imposing it as part of their public health policy.

2. As lessons learned from H1N1, many countries and private sectors have developed their national preparedness plans and business continuity planning. However, little recognition has been made in most of those plans in terms of the preparedness for air transport industries in any crisis.
Although current preparedness plans are made to anticipate possible public health crises in the future, the plans are only based on one future direction – instead of a range of future possibilities, e.g. possibility of change to governance structures, non-influenza types of pandemics, etc. This condition, inevitably, makes the plan less robust towards possible future pandemics.

**ASEF-ASAP SCENARIOS**

In 2010, through a series of workshops, ASEF Public Health Network convened a group of people from different background and expertise, to undertake scenario-building exercise to develop long-term scenarios (with 30-year time span) for possible future pandemics.

As a result, a set of scenarios for pandemic preparedness, namely ASEF-ASAP (Accurate Scenarios Active Preparedness), were developed. The three scenarios are:

**Grey Paradise**
A future characterised by economic control by authorities, redistributed resources, politically global

**Mosalnc.**
A future characterised by economic self-interest, resource abuse, and weak political structures

**Glocal Blocs**
A future characterised by regional/collective economic interest, resources used for own development, regional political blocs

Each scenario entails different consequences that will determine how present strategies at different level for pandemics or public health emergencies should be strengthen in order to be better prepared for such consequences.

The upcoming highly interactive, participatory and professionally facilitated workshop will map the current challenges in the preparedness plan of the passenger air transport sector and frame these challenges in order to develop recommendation for improving the current preparedness strategies.

**OBJECTIVES FOR THE WORKSHOP**

- Exchange between major hubs, airlines and related governmental institutions on preparedness for pandemics and public health emergencies
- Assessment of level of preparedness as well as preparedness plans in view of possible futures by using the ASEF-ASAP scenarios
- Discussion of potential follow-ups

**DATES AND VENUE**

15-16 December 2011 in Budapest, Hungary
PARTICIPANTS

The participants will come from Asia and Europe, and comprise of representatives from major airline companies, major airport hubs, government institutions, and international agencies (e.g. WHO, IATA, ICAO, etc.).