Joint Action Group to review the impact of the COVID-19 pandemic on the world's transport workers and the global supply chain (JAG-TSC)

Informal report

First and second meetings

Introduction

The Joint Action Group to review the impact of the COVID-19 pandemic on the world's transport workers and the global supply chain (JAG-TSC) was established at a meeting of the Director-Generals of the International Labour Organization (ILO) and the World Health Organization (WHO) with the heads of international transport organizations and federations on 6 December 2021. The JAG-TSC aims to discuss serious and urgent challenges faced by transport workers resulting from the COVID-19 pandemic, with a view to minimize adverse impacts on transport workers, their families, global trade and supply chains, while at the same time ensuring that public health needs are fully safeguarded, and local communities are protected.

The terms of reference for the JAG-TSC are attached at Annex I.

The JAG-TSC was held at the ILO in Geneva on 28 March 2022 from 3:00 to 6:00 PM with a hybrid format. A second meeting was held in Geneva on 27 June 2022 from 2:00 to 4:00 PM with a hybrid format. Another meeting of the JAG-TSC was envisaged on 31 August 2022. A final meeting at Principals' level was foreseen during which the results of JAG-TSC would be reviewed and discussed.

The JAG-TSC brought together representatives of the International Civil Aviation Organization (ICAO), International Labour Organization (ILO), International Maritime Organization (IMO) and World Health Organization (WHO), as well as representatives of the International Air Transport Association (IATA), the International Chamber of Shipping (ICS), the International Road Transport Union (IRU) and the International Transport Workers' Federation (ITF). The International Organization of Employers (IOE) was also represented.

A list of participants for the two meetings is attached at Annex II.

Opening and points for discussion

The meetings were chaired by Alette van Leur, Director, Sectoral Policies Department, ILO. The agendas for the meetings are found at Annex III. She noted that discussions for the first three meetings would be structured around the points for discussion provided at Annex IV. Copies of any presentations made by the organizations are available to participants on a dedicated webpage. A list of statements, resolutions and other documents referred to, with links to where they may be found on the internet, is available at Annex V.

1. What are the challenges transport sectors have faced during the pandemic with respect to the adverse impact of measures on transport workers, their families, global trade and supply chains?

Closed borders and uncoordinated measures

An ICS representative stated that Governments had failed to live up to their obligations under international Conventions, specifically the Maritime Labour Convention, 2006, as amended (MLC, 2006) and the International Health Regulations (2005) (IHR). The dysfunction, division and

competition among countries had led to the lack of respect of seafarers as key workers and force majeure as a reason to block crew changes. The lack of coordination had also increased vaccine inequity and contributed to the emergence of new variants. Moreover, there had been a lack of prompt, consistent and collaborative action by the ILO, IMO and WHO. The consultation and coordination mechanisms across agencies to resolve the issues on an international basis were insufficient.

The ITF representative also attributed the crew change crisis to the lack of coordination and communication among governments that had decided unilaterally to withdraw from their obligations under the MLC, 2006. That resulted in unacceptable contract extensions, unemployment of off-duty seafarers and had negative repercussions on their mental health. Some home States of seafarers refused to accept returning national seafarers.

Several other participants identified government restrictions and border closures as key issues. An IRU representative said that the restrictions led to the unnecessary extension of driving times and time away from families. An IATA representative stated that the uncoordinated and irreflective way borders had been closed in the civil aviation sector had made it difficult for aircrew to track the different national measures needed to keep networks operational. The ITF representative explained that strict travel requirements contributed to the unruly and unacceptable behaviour of passengers towards cabin crew and ground staff. An ILO representative further highlighted the issues of disruptions, cancellations and restrictions, workplace violence and restrictions against workers - flying and ground crew, workplace safety, stress, and discrimination against workers because they were seen as carriers of the virus.

Discrimination amongst modes of transport

An IRU representative said that in some countries unfair discrimination practices had been prevalent in key passenger corridors with the aviation sector permitted to service routes that were prohibited to the coaching industry. An ICS representative and an IRU representative added that the WHO was perceived to have prioritized aviation over shipping despite that latter's crucial role in the supply chain. In response, a representative from IATA expressed concern at the comments and stressed that the sector should focus on the similarities of the challenges experienced during the pandemic.

Lack of access to facilities, medical care, and impact on health

An ICS representative stated that many countries lacked necessary materials, including tests, personal protective equipment (PPE) and medication, as well as appropriate infrastructure. In several countries, for example Fiji and Kiribati, it was not possible to bulk order COVID-19 tests. A WHO representative responded that the WHO, bringing together its own laboratory and logistic teams, had explored with the ILO and the IMO how UN agencies might procure testing kits in bulk quantities for the ICS. However, it was recognized that none of the international organizations could procure tests on the behalf of a third party and make financial transactions with pharmaceutical companies.

An ICS representative and an ILO representative emphasized that the lack of recognition of seafarers as key workers by many countries had resulted in major issues in terms of facilitation of travel, recognition of documentation and speedy repatriation of deceased seafarers. Representatives of the ICS, ILO, ITF and IMO also raised the issue of port States denying seafarers access to medical care. An IMO representative and an ILO representative mentioned that the current crew change crisis' threat to the health and well-being of seafarers had a corollary impact on maritime safety and the protection of the marine environment.

The ITF representative noted that truck drivers lacked access to washrooms, toilets, showers and cooking facilities. Moreover, the pandemic had been used to justify the reduction of drivers' pay, the non-payment of sick pay and exemptions to driving and rest times.

Losses and bankruptcies

An IRU representative stressed that the industry had lost over 1 trillion U.S. dollars in 2020 and 500 billion in 2021, resulting in several bankruptcies. The industry was not expected to recover from the consequences of the pandemic until 2024. The representative from the ITF stated that in the aviation sector and the viability of 25 million jobs had been put at risk.

Stringent quarantine and testing requirements

An IRU representative explained that government-imposed restrictions at national borders had led to conditions (long periods of queuing, inadequate provision of PPE) that increased drivers' risk of infection. Evidence showed that drivers had not been a relevant risk factor in spreading the virus as they typically worked in isolation and neither loaded nor unloaded trucks. Commercial drivers needed exceptions to systematic testing as the measure had proved ineffective in containing the pandemic. An ILO representative also noted of the long queues and the difficulty truck drivers faced accessing vaccines and reaching facilities. The IATA representative described the long periods aircrew and office staff had spent in quarantine despite a lack of evidence from testing that there had been a significant number of positive cases.

Lack of digitalization and interoperability of transport documents

At the May meeting, the representative of the IRU echoed the ICS call for stronger guidance to be produced by the WHO in order to better drive the COVID-19 and any future crisis situation. He recalled that during the first JAG-TSC meeting, the industry had explained their main challenges and there was need to agree on concrete points. The most important one remained the interoperability amongst digital tools, in particular while accelerating digital vaccination passes and how to ensure their interoperability with other digital documents ensuing from United Nations transport conventions. For example, these included the E-CMR (electronic consignment note) and the E-TIR (electronic customs declaration TIR carnet). In terms of IHR implementation, he deplored that governments had used IHR regulations to issue mandatory vaccination requirements for transport workers.

2. What actions have been taken to address these challenges and which policies, measures and practices have worked, and which have not worked? How can these actions be further promoted and implemented?

General measures

The ITF representative commended the excellent social dialogue in air transport, road transport and shipping at the international level.

An ILO representative explained that his organization had produced several publications, including a series of briefs on the pandemic's impact on maritime and transport sectors. He referred to other actions taken by constituents and the ILO, as well as resolutions, statements and other documents relevant to the transport sectors.

WHO actions and guidance: Pandemic preparedness

The Preparedness and Response Working Group (WGPR), established by the World Health Assembly (WHA) in 2021, was constituted with the aim to consider findings and recommendations from

different advisory groups and committees and to submit a final report with proposed actions to improve public health preparedness and response, for consideration of the WHA in May 2022. An informal member States process for the potential review of the IHR was also ongoing. Lastly, the Intergovernmental Negotiating Body (INB) was established by the WHA in December 2021 with the mandate to draft and negotiate a WHO Convention, agreement or other international instrument on pandemic prevention, preparedness and response. The final outcome of the INB would be presented to the WHA in May 2024.

At the May meeting, on behalf of the Border Risk Dissemination Management secretariat, a representative of the WHO provided an update on the Seventy-fifth WHA (Geneva, 22-28 May 2022) and its key intergovernmental processes for health emergency preparedness and response. The WHA is the main decision-making body of the WHO and comprised of 194 Member States, who meet yearly to agree on the Organization's priorities and policies. It had just re-elected Dr Tedros Adhanom Ghebreyesus for a second term. Health emergencies featured prominently in the WHA's agenda, including several proposals to strengthen WHO and the global architecture of preparedness for and response (PPR) to health emergencies. A Working Group on Preparedness and Response (WGPR) had even been established by the Seventy-fourth WHA in May 2021 and met for the first time during the 2022 WHA. Under its new name and mandate (Working Group on IHR amendments), the WGPR would focus exclusively on the consideration of proposed International Health Regulations (IHR) targeted amendments with a three-year timeline (2024). In addition, the WHA had considered a report prioritizing the assessment of the benefits of developing a WHO convention, agreement, or instrument on PPR. She also mentioned that WHO members had already established in December 2021 (through a special WHA session and with a four-year timeline) the Intergovernmental Negotiating Body (INB) with a mandate to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response.

A WHO representative also called on those present to continue to participate in the JAG after the COVID-19 pandemic. It provided a mechanism through which they could invest in preparedness and readiness for future health emergencies.

At the May meeting, the representative of ICS expressed concern that the IHR amendments process only involved governments without involving key stakeholders as part of the dialogue. She expressed her reservations as to how the JAG-TSC's outcomes would be taken back and used for these processes.

At the May meeting, the representatives from the ILO and ICS asked the WHO to indicate the most appropriate windows of opportunity for JAG-TSC participants to influence the outcome of new instruments and working groups currently under their purview.

*WHO actions and guidance**:** accelerating the interoperability of digital documents*

A WHO representative acknowledged that the lack of interoperability of digital documents between countries and regions had posed particular challenges to international travel during the COVID-19 pandemic. To address the issue, the WHO had:

1. published guidance documents on Digital Documentation of COVID-19 Certificates;
2. supported the creation of open-source software tools for countries to adapt and use;
3. updated the International Certificate for Vaccination and Prophylaxis (ICVP) and worked on its digitalization.

a. Revision of the WHO's yellow booklet

At the May meeting, on behalf of the IHR Secretariat, a representative of WHO explained the different opportunities and challenges with regards to progress in updating and digitalizing the International Certificate of Vaccination or Prophylaxis (ICVP) - or "Yellow Booklet". The booklet was composed of two sections and could be used to record vaccination or prophylaxis of international travellers for vaccines and medicines approved by WHO (Part 1) or other vaccinations (Part 2). One of the main challenges remained the inconsistent recording of COVID-19 vaccination in the "Yellow Booklet" - some countries used Part 1, others Part 2 and many other countries had developed their own certificate; triggering a parallel stream of work. Also, the risk of fraud was persistent within the fluid pandemic situation. Once the revised paper-based "Yellow Booklet" process be finalized, WHO would be working towards its digitalization, yet progress was slow. She warned that updating the IHR and digitizing the International Certificate of Vaccination or Prophylaxis ("yellow card") would take some time. Current WHO Temporary Recommendations in relation to international traffic established that countries should lift international traffic bans and continue to adjust travel measures based on risk assessments. They also had been recommended to refrain from requiring proof of vaccination against COVID-19 for international travel as the only pathway or condition permitting international travel.

b. Digital documentation of COVID-19 certificates

At the May meeting, on behalf of the Public Digital Health Technology secretariat, a representative of WHO provided an overviewing the digital documentation of COVID-19 certificates (DDCC). WHO had observed the development of varying public health policies across countries based on their risk tolerance. Unfortunately, many existing digital standards did not have the capacity to interoperate, therefore possibly calling in the future for a need to develop a federated model of Interoperable Digital Health Trust Networks. This in view that a new data architecture would be needed for cases beyond COVID-19. It was not viable at this point of the pandemic to establish a new standard or central solution where member States would have to invest heavily in digital technologies for limited use. The digitization of existing standards was a member-driven process and therefore would take time.

Sector-specific measures: Transport workers, travel and transport

WHO recommendations specific to transport workers

A representative from the World Health Organization (WHO) described three key Temporary Recommendations in relation to international traffic:

1. lift or ease international traffic bans as they did not provide added value and continued to contribute to the economic and social stress experienced by States Parties;
2. not require proof of vaccination against COVID-19 for international travel given limited global access and inequitable distribution of COVID-19 vaccines;
3. recognize all vaccines that had received WHO Emergency Use Listing and all heterologous vaccine combinations as per WHO Strategic Advisory Group of Experts on Immunization (SAGE) recommendations

SAGE had also included transportation workers, seafarers and aircrew as high priority use groups on the SAGE roadmap for prioritizing the use of COVID-19 vaccines.

WHO recommendations specific to travel and transport

During the pandemic, the WHO produced a large set of policy and technical guidance documents on international travel and transport. WHO conducted multiple systematic reviews of evidence on the effectiveness of travel measures, including border closures. Also, the WHO had promoted a consistent message with regards to the prioritization of travel for essential purposes. The WHO had worked with

the ILO, the IMO and other agencies to issue numerous joint interagency statements calling on governments to prioritize travel for transportation workers.

Sector-specific measures: civil aviation

The IATA representative explained that the ICAO Council's Aviation Recovery Task Force (CART) had swiftly prepared a set of measures to manage risks, including protocols dealing with crew. ICAO had also managed border measures and the risk of transmission of the virus both for passengers and for crew. However, further strategies that addressed border measures and the management of de-escalation from the health emergency were needed. The ITF representative stated that his organization had called on governments to provide financial support for airlines. The Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA) had also worked to manage essential flights. An ILO representative mentioned that the Office had also been involved in CAPSCA. Additionally, a new agreement had been formed between the ILO and ICAO to work on areas of mutual interest.

ICAO's recommendations specific to transport workers

An ICAO representative said that in March 2020, the Council's Aviation Recovery Task Force (CART) issued several recommendations encouraging states to facilitate flight crews' access to vaccinations, medical and training facilities as well as to temporarily lift restrictions to air cargo operations, among others.

The ICAO had also issued joint statements with other United Nations agencies such as IATA and Airports Council International (ACI). During the early stages of the pandemic, the agency had focused its efforts on extensive outreach through regular calls to stakeholders and through ICAO's Regional Office network.

Other ICAO guidance and collaborative arrangements

Another milestone included ICAO's High-Level Conference for COVID-19, which adopted a ministerial declaration that included strong political commitments such as the establishment of bilateral or multilateral public health corridors (PHCs); air transportation of vaccines, essential medical supplies and personnel; the provision of economic and financial support to the sector, ensuring operational readiness for aviation personnel, and digital applications. The Conference had a dedicated facilitation stream that elaborated 79 operational recommendations, most of them intended for States. These included enhancing national coordination and international cooperation, enhancing digital data sharing for seamless/contactless processes, future approaches management of sustainable health related measures to improve passenger experience and the implementation of monitoring.

An ICAO representative discussed recommendations that highlighted the usefulness of PHCs, including cargo PHCs, the request for digital health proofs issuance aligned with WHO recommendations, the recommendation for interoperability with ICAO systems, the need for a clear regulatory framework, the reinforcement of efforts to deal with unruly and disruptive passengers, the development of a strategic framework for implementation of mitigation measures to deal with public health emergencies at borders, and the recognition of the need to respect and maintain existing agreed bilateral/regional air transport agreements in future crises, even where any mutually agreed interim measures would be introduced.

The ICAO had also developed specifications for a QR code, the ICAO Visible Digital Seal for Non-Constrained Environments (VDS-NC), that could be used at any border for international air and other modes of transport. The guidance and technical reports had been made available to any state willing to implement them. In order to verify the secure QR code, ICAO had issued an ICAO Health Master

List where the official signatures of States could be found for those issuing such QR codes for vaccination, recovery and testing.

The ICAO had also serviced CAPSCA, which was to hold its first symposium on 29 and 30 March 2022.

Sector-specific measures: maritime shipping and fishing

The ITF representative, noted the publication of a due diligence tool, led by the UN Global Compact with the assistance of ILO, IMO, ICS, ITF and others, that influenced actions of users of shipping services

An ILO representative stated that the MLC, 2006 had been the key reference for protecting rights of seafarers during the pandemic. The Officers of the Special Tripartite Committee of the MLC, 2006 had been regularly consulted and had issued several statements concerning the COVID-19 pandemic and seafarers. The Special Tripartite Committee had itself adopted two resolutions specifically concerned with the pandemic: one on the implementation and practical application of the MLC, 2006 during the pandemic and the second on COVID-19 vaccination for seafarers. Following request from shipowner and seafarer organizations, the Office had intervened with governments concerning the application of the MLC, 2006 during the pandemic. It had provided guidance to governments through an Information Note on maritime labour issues and coronavirus. This Note had been updated twice, with the most recent version reflecting the General Observation on matters arising from the application of the Maritime Labour Convention, 2006, as amended (MLC, 2006) during the COVID-19 pandemic. More recently, the Office published Extracts from the General report of the 2022 Report of the Committee of Experts on the Application of Conventions and Recommendations (92nd session, November-December 2021) relating to COVID-19 and maritime labour issues. It had also contributed to the development of WHO guidance on dealing with the pandemic on board ships and fishing vessels.

He further noted that the UN Secretary General Executive Committee had established an interagency task force on the impact of COVID-19 on seafarers. There had also been a high level of coordination between the ICS, ITF, the ILO, the IMO and other UN agencies and others through the Maritime Coordinated Strategy Group, which had regularly exchanged information, which had identified countries and areas with specific issues and pursued a coordinated approach to addressing these issues, and had taken other actions.

He also noted the work of the Crisis Management Team Workstream for Travel and Trade, which had brought together several UN agencies to provide input to the UN Crisis Management Team on COVID-19 on issues faced by cross-border workers.

At the May meeting, a representative from the ILO presented an update on the outcome of the Fourth session, Part 2 (May 2022) of the Special Tripartite Committee of the MLC, 2006 (STC). that session had considered 12 and adopted 8 sets of amendments to the Convention, including several related to the experiences of the pandemic. The amendments concerning repatriation aimed to ensure prompt repatriation of seafarers and improve cooperation among flag, port and labour supplying States. Amendments to provide seafarers with social connectivity while on board would improve mental and physical health. Amendments concerning medical care on board ship and ashore aimed to ensure prompt disembarkation of seafarers in need of immediate medical care, and provided a list of conditions that constituted immediate medical care. They also addressed the matter of facilitation of the bodies or ashes of deceased seafarers. The death of seafarers would be adequately investigated and reported by flag States, and this information would be published by the ILO in a global register. The proposed amendments would be considered by the 110th session of the International Labour Conference (27 May to 11 June 2022), and were scheduled to take effect in two years' time.

At the May meeting, the representative of the ILO also noted that the Ad Ho UN agency task force on the impact of COVID-19 on seafarers had met on 11 April 2022. Within their mandate, they have been asked to take into account the work of the JAG-TSC to ensure a wider spread within the UN system. Their next meeting was scheduled for 2 September 2022.

An IMO representative explained that their organisation had established the Seafarer Crisis Action Team (SCAT) in April 2020 to follow up on individual cases related to the crew change crisis, develop policies aimed at providing solutions (for example medical care and the vaccination of seafarers), engage multi- or bilaterally to address country-specific matters and reach out to media. The IMO had published a substantial number of circulars, all available on the IMO COVID-19 website, along with other information.

Representatives from the IMO and the ILO noted that several Resolutions had been adopted by the UN agencies, and several joint agency statements had been issues, calling for actions to address COVID-related challenges. They also referred to the UN General Assembly Resolution on International cooperation to address challenges faced by seafarers as a result of the COVID-19 pandemic to support global supply chains, which had called for the designation of seafarers as key workers. Despite this, however, as of 28 March 2022, only 67 countries had done so.

At the May meeting, a representative of the IMO provided an update on recent development. She reported that the seafarer crisis group had continued its work. The group was not only related to the pandemic related but the invasion on Ukraine had generated a wide range of issues to deal with. The discussion of pandemic matters had therefore been postponed. A new campaign had been launched to combat the stagnation of the strategies to achieve the designation of seafarers as key workers. The IMO secretariat had regularly attended the Coordinated Strategy Group and noted there had been a rise in the number of abandonment cases.

Another representative of the IMO added that the numbers of abandonments had been skyrocketing during the pandemic. This worsened the situation of distress during the pandemic. The Coordinated Strategy Group meetings had decreased in frequency and dealt with the access to vaccines and testing of seafarers. The IMO did not have a mandate to provide or supply testing materials to seafarers through ports or welfare agencies, and some initiatives had been unsuccessful because of IMO's procurement restrictions. Also, he highlighted the lack of good data with regards to the percentages of seafarers vaccinated. The representative of the WHO confirmed that her agency encouraged member States to prioritize transport workers for vaccination but did not keep track of the levels of vaccination for different transport occupations. Yet, the Emergency Committee meetings provided a solid platform to raise these concerns.

Sector-specific measures: road transport

An IRU representative stated that guidance had been developed at the international level (Recommendations for truck drivers during COVID-19 booklet). His organization had also provided over 1,000 updates and "flash infos" to update their members on sudden changes in regulation and restrictions. However, the effectiveness of these actions had been minimal.

The ITF representative highlighted his organization's joint work with the IRU to call for the designation of truck drivers as key workers and for changes in testing and vaccination regimes.

The ILO representative noted that ILO officials were collaborating with other UN agencies, for example the WHO on the Ground Crossings at International Borders Guideline Development External Review Group as well as the UNECE's informal multidisciplinary advisory group meeting on transport policy

responses to the COVID-19 crisis. Work had also been done to draw attention to the crisis through press items.

3. What are the gaps in the existing international guidance and operational protocols to facilitate the safe movement and protect the rights of cross-border transport workers?

Policy coherence and implementation gaps

An ICS representative noted that gaps included: lack of a proper pre-pandemic plan; need for agencies to take a more proactive approach; lack of necessary materials, tests, PPE, vaccinations; lack of infrastructure to honour requirements; and lack of consultation mechanisms among agencies. There was also a lack of understanding of the differences between cargo ships and passenger ships with respect to equipment. She underscored the need to ensure the facilitation of travel across countries and the recognition of Small Islands Developing States (SIDS). There needed to be fewer bureaucratic measures, and the use of shared information platforms across borders also needed to be more frequent.

Representatives from the ILO and the IMO emphasized the need for increased coordination at the national level and a whole-of-government approach. Relatedly, the IMO representative said that a multi-disciplinary and multi-agency approach was also required.

A WHO representative concurred that the health sector was not always involved in the decision-making process on travel measures; instead, such measures were often decided at the highest levels of government. Ensuring participation of the health sector was crucial to promote an evidence- and risk-based approach to travel measures and to ensure that they were justified on public health grounds. It should be examined at the national implementation phase as it varied from one country to another. The IHR mandate was to prevent and protect against the international spread of disease in ways that were commensurate with and restricted to public health risks, avoiding unnecessary interference with international traffic and trade. Provisions addressed containing infection and contamination at their sources and preventing the spread of diseases through international travel including onboard conveyances, for instance on aircraft and ships. Under the MLC, 2006 there were several provisions regarding the occupational health of seafarers and workers. At a national level, the two legal instruments needed to be used to complement each other in an emergency context.

The ITF representative also agreed with the ICS representative's views on governments' justifications regarding the implementation of the MLC, 2006 and its alleged conflicts with the IHR. Addressing the lack of communication between different government agencies, departments and ministries would also be crucial. The inability of national health, immigration, maritime, transport and labour authorities to agree on the implementation of international instruments resulted in their heterogenous application and a disparity of national measures.

There was consensus amongst the meeting participants that there was a fundamental issue around the implementation and practical application of existing tools and instruments.

In view of the lack of communication between agencies and other implementation challenges faced at the national level, the Director of the ILO Sectoral Policies Department suggested that perhaps government group participation would be desirable at some point in future meetings to discuss the concerns raised by the international transport organizations.

The ITF representative inquired whether there would be an opportunity for the ILO or their social partners in shipping to be present at the upcoming WHO meeting to highlight the issues relating to the practical application of the MLC, 2006. A practical step for the present group would be to carry out

a mapping of IHR and MLC, 2006 obligations to clarify misunderstandings and to strengthen the IHR through amendments. A WHO representative said that non-state actors in official relations with UN agencies were invited to the sessions and could take the floor.

A WHO representative raised the issue of how certain speakers present at the meeting interpreted the IHR. She suggested providing a background document on the obligations of Member States regarding the IHR and what could not be done to clarify the obstacles the IHR was facing. The IHR was a legally binding document for timely detection and information sharing at the international level.

She discussed three ongoing working groups. The working group on pandemic preparedness and response would present its findings to the assembly in May. She also encouraged all present to take part in the INB. Concerning the IHR review committee findings, she noted that no amendments to the IHR were recommended. It was not the IHR but rather their implementation that was the problem. Finally, it was important to note that COVID-19 national policy coherence and implementation had at times been limited by decision-making based on domestic or international politics rather than science, evidence, and recommendations.

Gaps between the IHR, 2005 and the MLC, 2006 as amended

An ICS representative underlined the need to evaluate the perceived dichotomy between IHR requirements and MLC, 2006 obligations. Governments had stated that the IHR outweighed the MLC, 2006, and they could therefore not honour the requirements of the latter. The problem was due in part to a lack of coordination between government departments. Governments joined the MLC, 2006 through the departments of labour and transport while the department of health was responsible for implementing the IHR. Better understanding and collaboration among departments was needed to resolve the issue. During the IHR review process it would be necessary to consider those matters as well as to examine the relation of the IHR to other legislation. Additionally, UN Agencies needed to educate Member States, across government departments, of their responsibilities under the Conventions they had ratified.

At the May meeting, a representative from ICS provided a comprehensive comparative review between the IHR and the Maritime Labour Convention, 2006 as amended (MLC, 2006). In sum, major differences between the applicability of both instruments included their origins and applicability. For example, while governments could only opt-out of the IHR through the WHA and had been conceived to provide a response to governments concerns, the MLC had been conceived by shipowners and seafarers who then sought government support. In addition, countries needed to opt-in (ratify) the MLC, 2006. In essence, the latter provided a framework of equity for social partners to complain against governments by giving them the capacity to bring governments and other stakeholders to stand into account. It appeared that the IHR did not include similar provisions. In relation to the violation of certain MLC, 2006 provisions during the COVID-19 pandemic, a number of governments had claimed that, under the circumstances, the IHR would take precedent over the MLC, 2006. Yet this did not seem to be the case, as an instrument that is legally ratified by a government is more binding, in terms of international law, than one where countries have the option to opt-out. In order to contextualize these differences between both regulatory standards, she provided and overview of their purpose, historical context, applicability and implementation challenges.

She emphasized that the IHR aimed to avoid unnecessary interference with international trade and travel while managing global health security. In the case of the COVID-19 pandemic, she admitted that the industry bodies of the tourism industry had perhaps made a stronger case than for those in need to travel because of business reasons. The IHR main rationales were based in five principles: that health threat had no borders, that travel and trade needed to be made safer, that daily threats are kept under control and that sectors could all benefit from this global regulations. While COVID-19 was the catalyst for the JAG-TSC discussions, the issues related to the IHR remained constant throughout

the years, while they might vary in nature (SARS, COVID, now Monkey pox). The IHR included national contact points, and for the "next situation" it needed to be recognized in the context of maritime transport. While four Implementation Principles Embodying IHR (2005) had been adopted in 2005, in the context of the current pandemic they had put seafarers at a disadvantage, as governments had not given enough focus to the respect of dignity, human rights and fundamental freedoms. The lack of access to medical care and equipment and other support needed had challenged the industry's ability to trade and operate safely.

In terms of the MLC, 2006 she mentioned that its comprehensive labour provisions were considered the seafarers' bill of rights and helped to create fair competition for shipowners by making sure there was an equitable jurisdiction over ships with different flags to reach a minimum labour standard. While reviewing the historical background of the MLC, 2006, she mentioned that the instrument was a "one stop shop" as it brought together almost all maritime instruments adopted at the ILO from 1920 to 1996. While the other three pillars of maritime regulation were under the guardianship of the International Maritime Organization (IMO), the fourth one, the MLC, 2006, had been developed under the purview of the ILO. Therefore, any complaint on the violation of its provisions had access to the ILO's Committee of Experts ensuring a fair competition and decent workplaces. She emphasized there was a need to strengthen the collaboration between the IMO, ILO and WHO, in particular in terms of harmonizing all the instruments' language.

Member State and social partner implementation and follow-up

At the May meeting, the Chairperson reaffirmed the need to harmonize the language between all United Nations instruments. Yet, she stressed that the collaboration between UN agencies had been massive during the COVID-19 pandemic, and in many different sectors. The pandemic had taken the world by storm and many lessons could be learned. While the United Nations agencies had collaborated in unprecedented ways, actions were also left for member States and social partners to follow up. They could help in building pressure, but it should be acknowledged that United Nations agencies could not force member States to fully implement their regulations and instruments. Greater collaboration and alignment could help for more targeted actions.

At the May meeting, the representative of the IRU said the ever-changing rules issued by governments had created chaos, and while the IRU had issued over a thousand notices to its members attempting to clarify government rules, he urged for the IHR provisions to promote transparency in the communication of requirements and restrictions, in particular those affecting transport workers. These provisions should also promote the prioritization of transport workers in accessing vaccination and testing during the pandemic and any future crisis. The expectations of the transport industry on pandemic instruments related to prevention should be expressed during the third JAG-TSC meeting. This was necessary as at the national level, the IRU had observed a trend of "blaming and shaming" between domestic agencies instead of focusing in finding solutions to the crisis. He suggested that one of those solutions could be to advocate for the establishment of a government crisis response manager, that could be approachable and communicate with the industry players to coordinate domestic and international traffic. He wished for the ILO and WHO to pass on the message to their member States, that during the pandemic, the transport industry had observed that governments seldom had a clear answer or any crisis response management capacity. In terms of collateral damage, the pandemic had worsened the industry's image, as drivers had been poorly treated in many instances. This in turn had exacerbated driver shortages in some countries, and the industry was struggling to combat a 2.5 million driver shortage.

At the May meeting, a representative of the WHO confirmed that the IHRS indeed had a double mandate. It included the prevention of the spread of diseases - *while* avoiding unnecessary interference in travel and trade. She explained that the most complex word within the mandate was

"unnecessary" – as it was opened to an array of interpretations. The WHO had observed during the pandemic varying risk tolerance amongst member States. While some countries had opted for a low risk tolerance, others had had an appetite for higher risks of tolerance and enacted the necessary legal frameworks to support that tolerance. This allowed for enough flexibility ranging from zero tolerance for COVID and justifying this rationale with public health regulation. In each case, the WHO had been notified of these varying levels of risk tolerance, yet while it had facilitated discussions on prioritization, it had been ultimately the national sovereignty of each country that had prevailed.

4. What concrete recommendations can be made for action by the industry and by UN agencies to promote COVID-19 vaccination of transport workers as per the recommendations of the WHO Strategic Advisory Group of Experts (SAGE) on Immunization and to provide transport workers in need of urgent medical attention with immediate access to medical care?

Improving coordination

The IATA representative concurred with other representatives that there was need for better coordination and to build trust and good relationships between public health, transport, public and private sectors. An ICS representative stated that governments should simplify procedures and increase the use of shared information platforms across borders.

An IRU representative proposed that governments should make use of international Conventions, including the Convention on the Contract for the International Carriage of Goods by Road (CMR Convention) and the Customs Convention on the International Transport of Goods under Cover of TIR Carnets (TIR Convention). Furthermore, the JAG should play an active role to promote further coordination at borders.

At the May meeting, a representative of the IMO stated that the ILO, WHO and IMO could increase their efforts and perhaps make a commitment in some form to attend each other's key meetings more often. This would allow for a more effective way to convey their constituencies' concerns and feed them into different mechanisms and meetings, in particular those related to the IHR amendments. There was a need for these secretariats to pay greater attention to improving alignment and coordination.

Rights of seafarers and truck drivers

Representatives from the ICS, the ITF and the ILO highlighted that port States should ensure immediate medical care and necessary assistance. They also emphasized that Seafarers should be able to access vaccines, tests and other medical equipment. An ICS representative spoke of the need for port States to ensure the speedy repatriation of deceased seafarers and, in collaboration with WHO, to guarantee Free Pratique for seafarers. Furthermore, States needed to be educated on their responsibilities under ratified Conventions.

Representatives of the IMO and the ITF reaffirmed that seafarers and port workers must be designated as key workers and treated accordingly. Similarly, an IRU representative insisted that the delivery of goods and transport of people constitute an essential service, therefore, truckers too should be recognized as key workers.

Stronger guidance to be issued by WHO

Vaccination-specific measures

Representatives from the IATA, the ICS and the ITF recommended that the WHO, in collaboration with Member States, should introduce a global (digital or paper) yellow card vaccination certification scheme or COVID-pass. An IRU representative specified that the certificate should cover all certified

vaccines and that these should be mutually recognized. The ITF representative emphasized that existing barriers in vaccine production should be dropped, and vaccine types should be standardized. Additionally, new vaccination hubs for cross-border transport workers should be created, and existing ones supported.

In terms of the unequal access to COVID-19 vaccines, at the May meeting, a representative of the WHO agreed that this had been a priority of the WHO secretariat. This had ultimately led to the COVAX Facility and calling on countries to do their part in terms of vaccine equity.

Collection of vaccination data and rates per occupation

At the May meeting, the representative from the ITF clarified that according to their data currently (May 2022) 16 per cent of seafarers had not been vaccinated. This as in the Philippines, one of the main labour-supplying states to the industry, only 51 per cent of the overall population had received one dose, and only 34 of the population had been double-vaccinated. He expressed concern with regards to the ongoing restrictions in China that had exacerbated challenges with regards to vaccine access. He would share these statistics to the JAG-STC. The representative of the ICS shared the efforts to collect data may be hindered by the fact that no record would be made on the profession of the persons vaccinated.

Readiness and preparedness

An ICS representative recommended that the JAG members participate in the WHA reviewing the IHR. Given the lack of proper preparedness materials and plans, it was essential to develop emergency responses that were sufficiently flexible to reflect the realities of the next health emergency. While borders were already heavily regulated environments, governments should pay particular attention to implementing smart restrictions and regulations when responding to pandemics or outbreaks.

Sectoral guidance

At the May meeting, the representative of IRU expressed dissatisfaction with regards to the processes and timelines relevant to his sector as presented by the WHO. He said that JAG-TSC should provide a platform to challenge and change the current state of affairs and WHO's mechanisms instead of exchanging information on why things had not worked. The IRU had observed that a public health approach had led to perpetual changes in government restrictions and rules because they did not take since their inception a sectoral perspective into consideration. He specifically wished to challenge this mechanism by requesting an IHR amendment whereas transport workers would be given specific sectoral consideration when issuing public health restrictions and rules. More specific sectoral guidance from WHO was needed

At the May meeting, a representative from the WHO said that the agency had been under extreme pressure during the pandemic, and in terms of general guidance, they had been able, in some cases, to deliver and publish in matter of days. She recognized that the processes for the issuance sectoral or more specialized guidance could be faster, and that could improve their dissemination and communication efforts.

In addition, two representatives of the WHO clarified that the WHO had in fact issued sectoral guidance during the COVID-19 pandemic yet acknowledged that not as swiftly as general public health guidance. In addition, this particular WHA's session had focused on equity, inclusivity and coherence, and that included listening to inter-governmental organizations and private sector voice their concerns and bring back these suggestions. While sometimes the processes to issue guidance were slow and faced dilemmas, the WHO strived for building guidance based on scientific evidence. In the meantime, the agency had made use of the precautionary principle until progressively an

evidence-based approach could be built. But this requires time and the dilemma remained on how to balance these timelines with these concerns.

At the May meeting, a representative from the ITF recognized the challenges faced by the United Nations agencies and the industry. He supported the objective of having a sectoral approach that recognized the cross-border nature of transport workers. He reiterated the ITF's support in working closely with IRU and ICS colleagues that could help in delivering some practical outcomes in the future for these cross-border transport workers

UN Resident Coordinator System

An ILO representative, supported by an ICS representative proposed making use of the UN resident coordinator system to provide a coordinated UN system approach at the national level.

An ICS representative reiterated the need to engage a broader government group when countries ratified conventions. Regarding the MLC, 2006, perhaps an item could be added to the ILO Labour Standards Department ratification request checklist to ensure confirmation from the department of health that a country had the ability to meet the Conventions requirements of the should a crisis occur. UN coordinators would be useful when a problem might arise. However, there was need for a better education process.

A WHO representative reiterated that one of the central challenges was country implementation. There was a gap between policy and operational level and country level. For example, the UN resident coordinator was the main driving force in the successful Kiribati repatriation in 2020. It was important to carry out mapping on representation at the UN level and to determine what interagency mechanism could facilitate the process.

At the May meeting, following further discussion, the representatives of the ILO and WHO expressed that the communications and procedures with respect to engaging the United Nations Resident Coordinators to address issues of transport workers in the pandemic and other crises could be strengthened, and that efforts were underway to explore how to each this. The representative of the IRU added that the resident coordinators system could represent an opportunity to ensure that a crisis response manager at the national level and with a low accessibility threshold could be established.

Streaming and simplification of international groups

At the May meeting, a representative of the ICS asked whether there would be scope to bring all the layers of seafarer task forces and ad hoc group into the same discussion. The representative of the ILO said that there were currently efforts to stream and simplify these processes, but also noted that the work of the present Joint Action Group, including its outcomes, would be

Recurrency of the health emergencies

At the May meeting, the representative of the ICS stressed that the work of the JAG-STC should focus generally on international health emergencies and not solely on COVID. In her 20-year career in the maritime sector, she had experienced a number of emergencies including Ebola, SARS, COVID, Monkey pox, to name a few. This was a recurrent problem.

Appetite to engage with governments

The IRU, IMO and WHO concurred it would be beneficial to invite governments and other sectoral organizations representing other transport modes. Some of the ways suggested to involve government included webinars, bring the work of the JAG-STC to the attention to other committees

(e.g., Maritime Safety Committee), the collection of best practices, the organization of a high-level meeting (e.g., as the one organized by the United Kingdom on June 2020), or placing an agenda item during the General Assembly. The Chairperson encouraged JAG-TSC participants to continue to elaborate suggestions on how to best involve governments and send them to the ILO Secretariat.

Annex I

Terms of reference of the JAG-TSC

The JAG-TSC will focus on:

- promoting the application by national authorities of operational protocols to facilitate the safe movement and protect the rights of cross-border transport workers during the COVID-19 pandemic, in line with States' obligations under the International Health Regulations (IHR 2005);
- supporting countries in implementing the temporary recommendations issued by the WHO Director General as per advice of the IHR Emergency Committee regarding the COVID-19 pandemic on a risk-based approach in relation to international travel measures;
- promoting COVID-19 vaccination of transport workers as per the recommendations of the WHO Strategic Advisory Group of Experts (SAGE) on Immunization ;
- advocating for Member States to provide seafarers in need of urgent medical attention with immediate access to medical care and medical evacuation when the required care cannot be provided on board.

In doing so, the JAG-TSC will:

- identify key challenges faced by transport workers during the COVID-19 pandemic with respect to access to vaccination and other medical countermeasures, and access to medical care, with a focus on cross-border workers in the shipping, civil aviation and road transport sectors;
- map and raise awareness of existing international guidance and operational protocols;
- identify and prioritize countries for specific, coordinated action by the UN system, in coordination with UN Regional and Country Offices as required;
- recommend actions to be taken at the international level, and identify gaps in the existing international guidance and operational protocols.

Annex II

List of participants for the first meeting

INTERNATIONAL CIVIL AVIATION ORGANIZATION (ICAO)

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INTERNATIONAL LABOUR ORGANIZATION (ILO)

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Ms Christine Bader bader@ilo.org	Specialist, Transport and Maritime Sectors, Sectoral Policies Department, (SECTOR)
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Ms Beatriz Vacotto vacotto@ilo.org	Coordinator, Maritime Unit, International Labour Standards Department (NORMES)
Mr Michael Watt watt@ilo.org	Technical Officer, Bureau for Workers' Activities (ACTRAV)

INTERNATIONAL MARITIME ORGANIZATION (IMO)

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Ms Heike Deggim hdeggim@imo.org	Director, Maritime Safety Division

WORLD HEALTH ORGANIZATION (WHO)

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Ms Sara Barragán Montes barraganmontess@who.int	Technical Officer, Border Health and Mass Gatherings Unit
Ms Anne Dlugosz dlugosza@who.int	Consultant, Border Health and Mass Gatherings (BHMG)

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Ms Natalie Shaw natalie.shaw@ics-shipping.org	Director Employment Affairs

INTERNATIONAL ORGANIZATION OF EMPLOYERS (IOE)

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Mr Jens Hügel Jens.Huegel@iru.org	Senior Adviser, Goods Transport & Sustainable Development

INTERNATIONAL TRANSPORT WORKERS' FEDERATION (ITF)

Mr Ruwan Subasinghe	Legal Director Subasinghe_ruwan@itf.org.uk

List of participants for the second meeting

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Ms Christine Bader bader@ilo.org	Specialist, Transport and Maritime Sectors, Sectoral Policies Department, (SECTOR)
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WORLD HEALTH ORGANIZATION (WHO)

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Ms Sara Barragán Montes barraganmontess@who.int	Technical Officer, Border Health and Mass Gatherings Unit
Ms Anne Dlugosz	Consultant, Border Health and Mass Gatherings (BHMG)

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Ms Natschja Ratanaprayul Nash-Mendez	Technical Officer, Department of Digital Health and Innovation (DHI)
Ms Magdalena Rabini	Technical officer, International Health Regulations Secretariat (IHR)
Mr Carl Leitner	Technical Officer, Digital Health and Innovation

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Annex III

Joint Action Group to review the impact of the COVID-19 pandemic on the world's transport workers and the global supply chain (JAG-TSC)
First meeting, 28 March 2022
(Geneva, hybrid – 3:00-6:00 PM)

Agenda

1. Opening (10 min.)

2. General statements on points for discussion (annexed) by:

- International Chamber of Shipping (10 min.)
- International Road Transport Union (10 min.) International Transport Workers' Federation (10 min.)

3. General statements on points for discussion (annexed) by:

- World Health Organization (10 min.)
- International Maritime Organization (10 min.)
- International Civil Aviation Organization (10 min.)
- International Air Transport Association (10 min.)
- International Labour Organization (10 min.)

4. Discussion/exchange of views (60 min.)

5. Setting the dates and agenda for the next meetings (10 min.) *Proposed date for second meeting: [Friday, 27 May 2022]*

Proposed date for third meeting: [Friday, 27 July 2022]

6. AOB and closing (5 min.)

Joint Action Group to review the impact of the COVID-19 pandemic on the world's transport workers and the global supply chain (JAG-TSC)
Second meeting, 28 May 2022
(Geneva, hybrid – 2:00-4:00 PM)

Agenda

1. **Opening (10 min.)**

2. **Latest developments (60 min.) (WHO, ILO, IMO, ICAO, IATA, ICS, IRU, ITF)**

3. **Identification of draft elements of recommendations for action by the industry and by UN agencies (30 min.)**

4. **Discussion on how to engage with governments (10 min.)**

5. **Setting the date and agenda for the next meeting (5 min.) – 31 August 2022 (tbc)**

6. **AOB and closing (5 min.)**

Annex IV

Points for discussion

1. What are the challenges transport sectors have faced during the pandemic with respect to adverse impact of measures on transport workers, their families, global trade and supply chains?
2. What actions have been taken to address these challenges and which policies, measures and practices have worked and which have not worked? How can these actions be further promoted and implemented?
3. What are the gaps in the existing international guidance and operational protocols to facilitate the safe movement and protect the rights of cross-border transport workers?
4. What concrete recommendations can be made for action by the industry and by UN agencies to promote COVID-19 vaccination of transport workers as per the recommendations of the WHO Strategic Advisory Group of Experts (SAGE) on Immunization and to provide transport workers in need of urgent medical attention with immediate access to medical care?

Annex V

List of key resolutions, guidelines, statements and other documents referred to with respect to the COVID-19 and transport workers – and/or related links -relevant to the work of the JAG-TSC

ICAO

- Council Aviation Recovery Task Force (CART) recommendations
- High-level Conference on COVID-19 (HLCC 2021) Ministerial Declaration
- ICAO Visible Digital Seal for Non-Constrained Environments (VDS-NC) – Guidance and Technical Report
- The ICAO Master List and ICAO Health Master List

ILO

- Information note on maritime labour issues and coronavirus (COVID-19) - 3 February 2021, Revised version 3.0
- General observation on matters arising from the application of the Maritime Labour Convention, 2006, as amended (MLC, 2006) during the COVID-19 pandemic
- Extracts from the General report of the 2022 Report of the Committee of Experts on the Application of Conventions and Recommendations (92nd session, Nov-Dec 2021
- Statement of the Officers of the Special Tripartite Committee: the continuing negative impact of the pandemic on seafarers' rights – 11 February 2022
- Fourth Meeting of the Special Tripartite Committee of the Maritime Labour Convention, 2006 (MLC, 2006) Part I (Online, 19–23 April 2021) ○ Resolution concerning the implementation and practical application of the MLC, 2006 during the COVID-19 pandemic
  - ○ Resolution concerning COVID-19 vaccination for seafarers
- ILO sectoral briefs concerning civil aviation, road transport and shipping:
  - ○ COVID-19 and maritime shipping & fishing ○ COVID-19 and road transport ○ COVID-19 and civil aviation
- Resolution concerning maritime labour issues and the COVID-19 pandemic (adopted on 8 December 2020 by the ILO Governing Body)

IMO

- Coronavirus disease (COVID-19) Pandemic (main IMO COVID website) ○ Advice via Circular Letter for IMO Member States, seafarers and shipping ○ Frequently asked questions about how COVID-19 is impacting seafarers ○ Industry recommended framework of protocols for ensuring safe ship crew changes and travel during the coronavirus (COVID-19) pandemic

WHO

- WHO advice for international traffic in relation to the SARS-CoV-2 Omicron variant (B.1.1.529)
- Interim position paper: considerations regarding proof of COVID-19 vaccination for international travellers
- Technical considerations for implementing a risk-based approach to international travel in the context of COVID-19: Interim guidance, 2 July 2021
- Interim recommendations for heterologous COVID-19 vaccine schedules - Interim guidance-16 December 2021- COVID-19: Vaccines
- Emergency use listing (EUL)/Covid-19 Vaccines
- WHO handbook for guideline development, 2nd ed

- Policy and technical considerations for implementing a risk-based approach to international travel in the context of COVID-19 - 2 July 2021 COVID-19 - Travel Advice
- An implementation guide for the management of COVID-19 on board cargo ships and fishing vessels - 23 December 2021
- International travel-related control measures to contain the COVID-19 pandemic: a rapid review
- Border closure and travel restrictions to control the spread of COVID-19: an update to a Cochrane review
- Evidence review – Public health measures in the aviation sector in the context of COVID-19: quarantine and isolation - 21 May 2021
- Evidence to recommendations: methods used for assessing health equity and human rights considerations in COVID-19 and aviation: interim guidance, 23 December 2020
- Evidence to recommendations: COVID-19 mitigation in the aviation sector

Joint UN agency

- A Joint Statement on medical certificates of seafarers, ship sanitation certificates and medical care of seafarers in the context of the COVID-19 pandemic– 22 April 2020
- Joint Statement on prioritization of COVID-19 vaccination for seafarers and aircrew – 25 March 2021
- Joint IMO/ILO statement on upholding medical assistance obligations to seafarers and accelerating seafarer vaccination programmes
- UNWTO and WHO: Travel measures should be based on risk assessment – 24 February 2022
- Joint statement urging continued collaboration to address the crew change crisis, safeguard seafarer health and safety, and avoid supply chain disruptions during the ongoing COVID-19 pandemic – 28 February 2022
- Digital documentation of COVID-19 certificates: vaccination status: technical specifications and implementation guidance, 27 August 2021

United Nations General Assembly

- Resolution adopted by the General Assembly on 1 December on International cooperation to address challenges faced by seafarers as a result of the COVID-19 pandemic to support global supply chains

International Air Transport Association

- COVID-19 Info Hub

International Chamber of Shipping

- COVID-19

International Road Transport Union

- Coronavirus (COVID-19) information hub

International Transport Workers' Federation

- Covid-19