



Report of the Regional Committee of the Americas to the Executive Board

59th Directing Council of the Pan American Health Organization (PAHO), 73rd session of the WHO Regional Committee for the Americas (virtual session, 20 to 24 September 2021)

Summary report by the President (Dr Christopher Tufton, Minister of Health and Wellness, Jamaica)¹

INTRODUCTION

Owing to the ongoing COVID-19 pandemic, the Regional Committee held a virtual session and considered an agenda limited to items about which decisions were required to ensure the ability of PAHO/AMRO to properly discharge its functions and items relating to the response to and recovery from the pandemic.

PART 1: TOPICS FOR GLOBAL DISCUSSION

Sustainable financing²

There was broad consensus on the need to improve the predictability and sustainability of WHO's financing, but it was pointed out that other issues need to be considered in tandem with the question of sustainable financing, including issues relating to governance, prioritization, and efficiency, transparency, and accountability in the use of resources. Prioritization was considered especially important. Various delegates noted that the Region of the Americas has valuable experience with bottom-up prioritization, which should be shared with the Working Group and with the WHO Secretariat.

Some support was expressed for an increase in assessed contributions, but several Member States expressed reluctance, noting that the heavy economic toll of the pandemic would make it difficult to meet an increased financial obligation to the Organization. It was emphasized that any increase in assessed contributions would need to go hand in hand with ongoing reform of WHO and be accompanied by greater transparency and accountability on the part of both the WHO Secretariat and Member States, especially with regard to the cost of any proposed new initiatives. Some Member States were in favour of exploring the option of a replenishment model; others did not consider such a

¹ The full report of the session (document CD59/FR) and all documents, resolutions and decisions of the session mentioned in this report are available at:

https://www.paho.org/en/governing-bodies/directing-council/59th-directing-council

² Document CD59/INF/3.

model appropriate for WHO and favoured strengthening existing financing structures before contemplating the creation of new ones.

Update on the work of the Working Group on Preparedness and Response to Health Emergencies³

Member States underscored the need to ensure that discussions on WHO strengthening do not lead to further fragmentation of the global health architecture and emphasized that the outcome of the Working Group's work should be to strengthen WHO as the leading global health authority and coordinator of global health emergency preparedness and response efforts. It was pointed out that the creation of new bodies, such as a global health threat council, could lead to overlapping mandates and responsibilities and thereby weaken, not strengthen, global health governance.

Some Member States supported the negotiation of a new convention or other instrument on pandemic preparedness and response, while others were of the view that the focus should be on strengthening and ensuring compliance with the International Health Regulations (2005) and addressing gaps revealed by the pandemic. It was stressed that negotiating a new convention would take considerable time and could not therefore be viewed as a short-term solution to the problems highlighted by the pandemic. It would be necessary to carefully weigh the potential advantages and added value of a new convention, as well as consider whether a new instrument would avoid the problems caused by non-compliance with the International Health Regulations during the pandemic and promote greater equity, with regard to preparedness for, response to and recovery from future health emergencies. In any case, Member States emphasized that action to strengthen the Regulations should not be postponed, and several called for greater international cooperation, including financial cooperation, to enable all countries to build the core capacities needed to fully implement the Regulations.

It was considered important to agree on basic principles to guide the discussions of the Working Group and to endeavour to reach consensus on how to move forward in areas where there appeared to be a convergence of views, for example on the need to enhance Member State engagement in WHO governance and to strengthen the International Health Regulations.

PART 2: TOPICS OF REGIONAL SIGNIFICANCE

Programme Budget of the Pan American Health Organization 2022–2023⁴

The Regional Committee approved the programme budget of PAHO for 2022–2023 for a total of US\$ 688 million, an increase of \$38 million with respect to the 2020–2021 biennium, with the totality of the increase to be financed from the increase in the WHO allocation to the Region. PAHO assessed contributions will not increase. It was noted with concern that there has historically been a substantial shortfall in the receipt of the WHO allocation, and the Regional Office (the Pan American Sanitary Bureau) was

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³ Document CD59/INF/4.

⁴ Official Document 363 and resolutions CD59.R8 and CD59.R9.

encouraged to plan around potential gaps in funding. It was also noted that PAHO assessed contributions have not increased since 2012, which in real monetary terms represents a significant reduction in the Organization's budget. Moreover, major delays in the receipt of assessed contributions in recent years have jeopardized the Regional Office's ability to carry out its functions, including the provision of critical support during the COVID-19 pandemic.

Roadmap for the Digital Transformation of the Health Sector in the Region of the Americas⁵

The Regional Committee approved a roadmap aimed at advancing the digital transformation of the health sector, which builds on resolutions adopted by the United Nations General Assembly, the World Health Assembly, and the Directing Council of PAHO and is aligned with the United Nations Roadmap for Digital Cooperation. The Committee underlined the need to ensure that the benefits of digital transformation extend to vulnerable and underserved populations. It also stressed the importance of interoperability and interconnectivity of information systems and of promoting digital literacy.

Policy on the Application of Data Science in Public Health Using Artificial Intelligence and Other Emerging Technologies⁶

The Regional Committee also approved a policy for the provision of strategic and technical guidance to Member States for the development and implementation of data science policies and initiatives in the area of public health. The policy, which is related to the roadmap for digital transformation, is intended to strengthen Member States' ability to conduct analyses of data using data science tools and methods. The Committee stressed the need for standards and regulations to ensure the ethical use of and protect the confidentiality of data.

Increasing Production Capacity for Essential Medicines and Health Technologies⁷

The Regional Committee approved a policy aimed at enhancing regional capacity for the development and production of medicines and other health technologies. The policy was developed in part in response to shortages and inequities in access to medicines and technologies during the COVID-19 pandemic. It is linked to previous resolutions of PAHO, the United Nations General Assembly and WHO, including resolution WHA73.1, on strengthening local production of medicines and other health technologies to improve access. The Committee agreed on the need to build capacity for the production of medicines and health technologies in the Americas in order to reduce reliance on imported products and technologies, ensure equitable access to vaccines and medicines and avoid a recurrence of the stockouts, disruptions in supply chains and other problems that have occurred during the pandemic.

⁵ Document CD59/6 and resolution CD59.R1.

⁶ <u>Document CD59/7</u> and <u>resolution CD59/R2</u>.

⁷ Document CD59/8 and resolution CD59.R3.

One Health: A Comprehensive Approach for Addressing Health Threats at the Human-Animal-Environment Interface⁸

The Regional Committee approved a policy aimed at fostering coordination and collaboration among the governance frameworks of human, animal, plant and environmental health programmes in order to better prevent and prepare for current and future health challenges at the human-animal-environment interface, including diseases of zoonotic origin, such as COVID-19, foodborne illnesses and antimicrobial resistance. The policy builds on existing mandates and plans and on the experience of PAHO and other relevant organizations, including WHO, in working with stakeholders beyond the health sector. The Committee stressed the importance of multisectoral and multidisciplinary approaches and of coordination and alignment of efforts by multilateral organizations in the human health, animal health and environmental health sectors.

Reinvigorating Immunization as a Public Good for Universal Health⁹

The Regional Committee approved a policy providing a strategic framework to guide countries of the Region in strengthening their national immunization programmes and revitalizing immunization as a public good. The policy aims to address the decline in vaccination coverage rates, which has been exacerbated by the COVID-19 pandemic, and to support Member States' efforts to achieve the Sustainable Development Goals. The Committee underscored the need to combat vaccine misinformation and hesitancy. The need to boost regional vaccine production capacity to ensure equal access to vaccines was also emphasized.

Strategy for Building Resilient Health Systems and Post-COVID-19 Pandemic Recovery to Sustain and Protect Public Health Gains¹⁰

The Regional Committee approved a strategy aimed at addressing deficiencies in health systems, enabling countries to build sustainable and resilient health systems, and recovering public health gains lost during the pandemic. The strategy builds on a policy on resilient health systems approved in 2016. The Committee emphasized the need for sustained investment in public health, particularly in primary care, preventive care, and the health workforce. Investment in information and communications technologies was deemed crucial, as well. It was also considered essential to ensure that health systems are responsive to the needs of vulnerable and marginalized populations at greatest risk of negative health outcomes.

COVID-19 pandemic in the Region of the Americas¹²

The Regional Committee reviewed a report on the status of the pandemic and of COVID-19 vaccination efforts in the Americas. The Committee noted with concern that while countries of the Region have made significant progress in vaccinating their

⁸ Document CD59/9 and resolution CD59.R4.

⁹ Document CD59/10 and resolution CD59.R13.

¹⁰ Document CD59/11 and resolution C59.R12.

¹¹ Document CD55/9 and resolution CD55.R8.

¹² Document CD59/INF/1.

populations, access to COVID-19 vaccines remains uneven and inequitable. The importance of building regional capacity for vaccine production was again underscored. The Committee agreed on the need to maintain non-pharmaceutical public health measures such as mask-wearing while continuing vaccination efforts.

Report on Strategic Issues between PAHO and WHO¹³

The Committee examined a report on issues of strategic importance to the relationship between PAHO and WHO, including the work of the various review committees and panels on strengthening WHO preparedness for and response to health emergencies and on the functioning of the International Health Regulations (2005), the WHO transformation agenda, the Thirteenth General Programme of Work, the WHO programme budget and the WHO portion of the PAHO programme budget, sustainable financing of WHO and the implementation of the Framework of Engagement with Non-State Actors. The report also addressed issues related to the COVID-19 response and the COVID-19 Vaccine Global Access (COVAX) Facility.

The Committee noted the importance of close coordination between PAHO and WHO, in particular in the response to the COVID-19 pandemic. Member States regretted that the Regional Committee had not been provided with an update, and PAHO Member States had not been given the opportunity to provide input, on the mid-term revision of the WHO programme budget 2022-2023. It was considered important, as part of the regional contribution to WHO governance review processes, to share information on the practical application and the value of the Hanlon prioritization method as adapted by PAHO.¹⁴

International Health Regulations (2005)¹⁵

The Regional Committee reviewed a report on the implementation of the International Health Regulations in the Americas, which complemented the information provided in the report on the Regulations presented to the World Health Assembly in May 2021 (document A74/17). Member States highlighted the need to harness the political will and resolve demonstrated in the fight against COVID-19 to strengthen cooperation among countries and with PAHO and WHO in order to achieve full implementation of and compliance with the Regulations. Concern was expressed about the application of restrictive measures during the pandemic, such as travel prohibitions, border closures and requirement of proof of vaccination as a condition of entry. It was pointed out that such measures run counter to the letter and spirit of the Regulations.

¹³ Document CD59/INF/2.

¹⁴ Document CD55/7.

¹⁵ Document CD59/INF/5.