

**PROVISIONAL SUMMARY RECORD OF THE SECOND MEETING**

**WHO headquarters, Geneva  
Monday, 18 January 2021, scheduled at 14:00**

**Chair: Dr H. VARDHAN (India)**

**CONTENTS**

	<b>Page</b>
<b>Pillar 2: One billion more people better protected from health emergencies</b>	
<b>Public health emergencies: preparedness and response</b>	
<b>Covid-19 response.....</b>	<b>2</b>

## SECOND MEETING

Monday, 18 January 2021, at 14:20

Chair: Dr H. VARDHAN (India)

### **PILLAR 2: ONE BILLION MORE PEOPLE BETTER PROTECTED FROM HEALTH EMERGENCIES**

**PUBLIC HEALTH EMERGENCIES: PREPAREDNESS AND RESPONSE:** Item 14 of the agenda

**COVID-19 response:** Item 14.1 of the agenda (document EB148/16)

The EXECUTIVE DIRECTOR (WHO Health Emergencies Programme) provided an overview of the epidemiological situation of coronavirus disease (COVID-19) across the globe. In response to the emergence of new variants of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the Secretariat had been working with Member States and other partners to enhance its risk monitoring framework for virus mutations, variants of interest and variants of concern. It was critical to leverage existing sequencing capacities across reference laboratory networks, the WHO Global Influenza Surveillance and Response System and other networks, including those for poliomyelitis, and academic and private-sector sequencing platforms. Members of the WHO SARS-CoV-2 virus evolution working group had agreed that it was necessary to establish standardized nomenclature for the different variants based on their genetic sequence. The Secretariat had been taking a proactive approach to detecting mutations by drawing up guidance on how to improve SARS-CoV-2 sequencing, reaching out to laboratories with surplus capacity to support lower-capacity countries, and closely linking surveillance, epidemiological and laboratory surveillance systems. He acknowledged that more than 70 donors had provided US\$ 1.5 billion in funding to WHO's COVID-19 preparedness and response activities in 2020, out of the US\$ 1.7 billion requested. WHO's projected utilization was US\$ 1.3 billion, and approximately 90% of funds had been allocated to support operations, the purchase and distribution of essential equipment and other capacity-strengthening activities at the country and regional levels. He thanked all donors who had regularly contributed to the WHO Contingency Fund for Emergencies, which had played a key role in the early response to COVID-19.

WHO's COVID-19 strategic preparedness and response plan for 2021 contained cross-cutting pillars focusing on coordination and planning, operational support, and accelerated research and innovation, and emphasis would be placed on supporting Member States' vaccination efforts. To turn technical knowledge into coordinated action, the Secretariat had published hundreds of guidance documents and leveraged evidence and expertise through expert networks, WHO collaborating centres, strategic advisory groups, online consultations and meetings, the WHO research and development blueprint and multi-country studies. The Secretariat had been working to ensure that guidance materials were high-quality, predictable, adapted to different contexts and constantly re-evaluated. The Secretariat had been pooling information on country experiences, using key performance indicators to drive the WHO Strategic Preparedness and Response Plan monitoring and evaluation framework, and had been monitoring the COVID-19 "infodemic". More than 30 intra-action reviews on response efforts had been completed and another 25 were ongoing, and there had been great support for simulation exercises at the country level to learn lessons. WHO's regional and country offices had provided tailored operational and technical support to Member States. Regional consultations led by the regional directors and regional emergency directors and engagement with country offices and Member States had proved essential in collecting feedback.

Member States and the Secretariat needed to redouble their efforts to suppress transmission, protect the vulnerable and save lives in a comprehensive, coordinated and equitable manner. Health systems and workers in many countries remained under extreme pressure, surveillance systems were struggling to cope with high infection rates, and nearly all countries had insufficient resources for case and cluster investigation, contact tracing and quarantining. Misinformation and disinformation continued to undermine evidence-based response efforts, and empowering communities had been essential. While science had delivered solutions, the demand for and utilization of such solutions were often suboptimal, as was the case for rapid diagnostic testing. Equitable access to COVID-19 diagnostic tools, therapeutics and vaccines was also under threat, and operational and scientific solutions needed to be applied more comprehensively and evenly. Focus should be placed on ensuring that exposure to SARS-CoV-2 did not lead to infection; vaccination was essential in that regard. The COVID-19 Strategic Preparedness and Response Plan, Access to COVID-19 Tools (ACT) Accelerator and strategies for health systems strengthening should be brought together into a single programme under the Thirteenth General Programme of Work, 2019–2023, that was integrated across the rest of the United Nations system.

The SENIOR ADVISER TO THE DIRECTOR-GENERAL (Organizational Change) said that the Secretariat's work to accelerate access to COVID-19 vaccines cut across various divisions and groups of the Organization. The world was in the early stages of vaccine roll-out, and 95% of vaccines had been administered in 10 countries. Vaccines had been administered in 40 high-income countries, eight upper-middle-income countries, one lower-middle-income country and one low-income country, and most vaccines had been administered in the northern hemisphere. Forty-four countries were relying on the Pfizer-BioNTech vaccine, which, being an mRNA vaccine, was a difficult product to incorporate into vaccination programmes in many countries.

Two COVID-19 vaccines had either been included in WHO's list of vaccines approved for emergency use or had been granted emergency use authorization by a WHO-recognized authority. As a result, countries depended highly on those two mRNA products, pending the regulatory review of other vaccines. The COVAX Facility was in a strong position to begin distributing vaccines, and the aim was to start delivering vaccines in February 2021. Through the COVAX Facility, access had been secured to 2 billion doses, with options on more than 1 billion additional doses, covering six vaccines and five manufacturers. The Secretariat had supported the development of a mechanism for sharing doses with the COVAX Facility, and discussions with potential donors were under way.

Regarding country readiness, he said that 88 of the 92 countries eligible for the Gavi COVAX Advance Market Commitment had submitted vaccine request forms. Through the 100/100 initiative, more than 120 countries, including over two thirds of the Gavi COVAX Advance Market Commitment eligible countries, had completed their readiness assessments. Over 50 of those countries had detailed national vaccine deployment plans in place. Important work had been done to establish regulatory pathways for the rapid import of vaccines and emergency use authorizations. The indemnification of vaccine manufacturers in countries participating in the COVAX Facility posed significant challenges. Gavi had established model indemnification language for all vaccines and had shared it with the 92 Gavi COVAX Advance Market Commitment eligible countries to facilitate the establishment of the necessary indemnification agreements. The Secretariat was in the process of developing a no-fault compensation mechanism to facilitate compensation for serious adverse events associated with vaccines distributed to Gavi COVAX Advance Market Commitment eligible countries by the COVAX Facility, and would roll out the mechanism in the coming weeks. He expressed concern that, despite the progress made in country readiness, key legal frameworks would take time to develop and could be a barrier to access.

A total of 2 billion doses of COVID-19 vaccine would be ready for delivery through the COVAX Facility in 2021. The Oxford-AstraZeneca and Serum Institute of India's AstraZeneca vaccines were of particular importance since they represented a combined contracted volume of more than 130 million doses to be delivered in the first quarter of 2021; a regulatory review of those vaccines was under way. Important steps were being taken to ensure that the COVAX Facility's vaccine delivery timeline was

achieved and that the limited resources available went as far as possible. He said that mRNA vaccines were important but extremely expensive and often difficult to work with, and that many countries preferred to have alternatives. The Secretariat had been expediting the receipt of data and regulatory review of priority contracted products and had been processing the full dossiers received thus far for other vaccine products. The Secretariat, which had been holding discussions with Pfizer, believed that it would soon have access to its Pfizer-BioNTech vaccine, which would expand the COVAX Facility's vaccine portfolio. Opportunities regarding other advanced vaccine candidates were also being explored. The Secretariat had set up a mechanism for dose-sharing, and a plan was being implemented through the COVAX Facility for participating countries to also use donated doses of the Pfizer-BioNTech vaccine if such donations became available. The Secretariat hoped to translate the commitment and interest in dose-sharing into actual agreements, particularly with countries that had significant bilateral agreements for key products.

Regarding the ACT-Accelerator, he said that the Secretariat was in the process of developing a refreshed strategy to adapt to new circumstances such as unmet demand for vaccines, the implications of viral mutations for all COVID-19 tools and the increasing number of bilateral agreements for vaccines. Member States would be briefed on the refreshed strategy and budget before they were presented to the ACT-Accelerator Facilitation Council on 9 February 2021. He urged Member States with bilateral agreements to be transparent, share doses and give priority to the COVAX Facility. He called on manufacturers to rapidly provide full regulatory data to WHO, prioritize COVAX Facility supply contracts, and facilitate donations and dose-sharing. Member States administering vaccines were urged to use only products that met rigorous international standards for safety, efficacy and quality. He called on donors to help to close the funding gaps of US\$ 4.6 billion for vaccine procurement, US\$ 1.8 billion for vaccine delivery, and US\$ 1 billion for vaccine research and development.

The representative of INDIA said that, although WHO's work to build capacities and provide technical guidance on COVID-19 was commendable, there was scope for improvement in other areas, including risk assessments, deployment of international support missions, supply chain management and negotiations with manufacturers and suppliers of COVID-19 products. That work would be critical for ensuring the timely availability of affordable COVID-19 diagnostic tools, therapeutics and vaccines. In the light of the emergence of new SARS-CoV-2 variants, WHO should create a collaborative network of laboratories with the necessary genetic sequencing capacities and support lower-resource countries in the early identification of mutations. It should ensure that large amounts of data could be analysed and that information could be shared with Member States in near-real time. He hoped that WHO would take further measures to develop a robust mechanism for technical support and guidance during future pandemics.

The representative of ARGENTINA urged the international community to avoid a shortage of critical COVID-19 supplies, therapeutics and vaccines. She supported calls for a waiver of intellectual property rights on COVID-19 global public goods.

The representative of BANGLADESH said that WHO should continue to advocate for equitable access to COVID-19 medicines and vaccines, and that COVID-19 vaccines must be considered as global public goods. WHO, Gavi, the Vaccine Alliance, the Coalition for Epidemic Preparedness Innovations and UNICEF should take urgent action to ensure that COVID-19 vaccines and vaccination training were provided to Gavi COVAX Advance Market Commitment eligible countries as soon as possible. He called on WHO to assess the pandemic's impacts on mental health and support Member States in mitigating those impacts. Stronger international collaboration, including in providing technological support, was needed to support low- and middle-income countries.

The representative of the UNITED STATES OF AMERICA said that it was essential that the ongoing investigation on the origins of SARS-CoV-2 in China was credible and conducted objectively

and transparently. The expert mission conducting the study must have access to information on: all studies conducted in China on the presence of SARS-CoV-2-related genetic sequences in animals; animal testing results from in and around Wuhan, Hubei Province of China; environmental samples from markets; all studies conducted in China on human data, including, but not limited to, comparison with the earliest genetic sequence from humans; human SARS-CoV-2 serology data from 2019; epidemiological spread; and comparative analyses of animal, environmental and human genetic data. The team would also need access to caregivers, former patients and laboratory workers to conduct interviews, and access to medical data and samples.

In the light of the emergence of new variants of the virus, it was important to continue sharing genetic sequence data, samples and other pertinent information related to SARS-CoV-2 in an open, timely and detailed manner. He expressed concern that some Member States had imposed COVID-19-related restrictions on imports of food and agricultural products. Strong WHO leadership was needed to minimize disruptions to the global food supply chain.

The representative of AUSTRIA, speaking on behalf of the European Union and its Member States, said that the candidate countries North Macedonia, Montenegro and Albania, as well as the Republic of Moldova, aligned themselves with her statement. She welcomed the progress made in implementing resolution WHA73.1 (2020), noting that proactive follow-up would be key to guiding the Secretariat's and Member States' responses to the pandemic. She hoped that the ACT-Accelerator and COVAX, its vaccines pillar, would be used to their full potential to ensure that all countries requiring COVID-19 vaccines would have access. She called on all Member States and other stakeholders to support the ACT-Accelerator by addressing the funding gap and disparities in vaccination, particularly through vaccine donations. The European Union would continue to support the promotion of resilient health systems and universal health coverage, the One Health approach and the Global Action Plan for Healthy Lives and Well-being for All in order to achieve the Sustainable Development Goals and strengthen cooperation among health actors.

The international expert mission studying the origins of SARS-CoV-2 in China was critical and required transparency, access to relevant locations and data, and full cooperation. She asked to receive regular updates on the mission's progress. Given the danger posed by emerging mutations of the virus, it was important to share genetic sequence data; she welcomed WHO's efforts to expand scientific collaboration. The international community needed to continue engaging in multilateral cooperation, maintaining trust and solidarity, learning from mistakes and making bold moves to better prepare for, and respond to, future pandemics.

The representative of INDONESIA appreciated WHO's work in issuing technical guidance and promoting access to COVID-19 vaccines, therapeutics and diagnostic tools during the pandemic. She supported the ACT-Accelerator but expressed concern about the limited supply of COVID-19 vaccine and shortcomings in country readiness, particularly in least developed countries. Gaining the public's trust in the safety and efficacy of vaccines had also been a challenge. The Secretariat, Member States and other stakeholders should: ensure equitable access to vaccines through the COVAX Facility; promote technology transfer to increase global production capacities; encourage vaccine manufacturers to rapidly provide vaccine safety and efficacy data to WHO; and treat COVID-19 vaccines as global public goods.

The representative of AUSTRALIA said that it was essential that no population or potential partners were excluded from the COVID-19 response. Countries' health systems must continue to be strengthened, and the WHO Health Emergencies Programme must be fully implemented. She welcomed WHO's work to support emergency preparedness in the Pacific region and the fundamental role it played in providing authoritative, evidence-based and timely information. Clear and credible information continued to be essential to response efforts. She expected that the international expert mission studying the origins of SARS-CoV-2 in China would have access to relevant data and locations and that the

Secretariat would provide regular updates on the mission's progress. It was crucial that Member States were ready to receive COVID-19 vaccines when they were available. WHO's work to support the development and finalization of national vaccination plans was essential to ensure an equitable global roll-out of COVID-19 vaccines.

The representative of BOTSWANA, speaking on behalf of the Member States of the African Region, expressed appreciation for the technical and operational support provided by the Secretariat to countries in the Region. He looked forward to receiving updates on the progress of the ACT-Accelerator and was confident that the Secretariat would work with other United Nations agencies and philanthropic organizations to ensure equitable access to critical COVID-19 medical supplies, particularly among low- and middle-income countries. He welcomed WHO's aim to deliver 2 billion doses of vaccine globally, 245 million courses of treatment and 500 million diagnostic tests to low- and middle-income countries by the end of 2021. He noted with concern, however, that the African Region would be the last region in which vaccines would be widely available, and called for global solidarity to prioritize investment in affordable and safe COVID-19 vaccines and their equitable allocation. WHO must continue to ensure that public health researchers and scientists from the African Region were represented in WHO research and development forums. He appreciated the Secretariat's support in assessing Member States' readiness to roll out COVID-19 vaccines, diagnostic tools and therapeutics effectively and efficiently. The Region stood ready to work with the Secretariat to ensure readiness for vaccine deployment.

The representative of COLOMBIA expressed his hope that the Secretariat would continue to support Member States in implementing their national COVID-19 response plans. WHO must strengthen its emergency preparedness, taking into account the lessons learned from the current pandemic. He urged the Secretariat to continue to guide Member States in developing COVID-19 vaccination plans, ensure that COVID-19 products were allocated equitably, monitor the impact of COVID-19 on essential health services and support Member States in providing such services.

The representative of CHINA said that his Government had taken an open, transparent and responsible approach to responding to COVID-19, sharing information on SARS-CoV-2 in a timely manner. His Government had shared its experience in prevention and treatment, and had provided assistance within its capacities. He called for strengthened international cooperation to overcome the pandemic and ensure the health of all. The investigation on the origins of SARS-CoV-2 in China was scientific, and its work should be determined by the experts conducting the study. Member States must trust the work of the expert mission and refrain from exerting any form of political pressure. His Government would continue to support the Global Outbreak Alert and Response Network by providing human resources, funding, technology and supplies, including vaccines.

The representative of KENYA expressed appreciation for WHO's technical and operational support to COVID-19 response efforts, including in building laboratory capacities, infection prevention and control, and case and data management. He acknowledged the Organization's coordinating role in strengthening the global COVID-19 supply chain to ensure that low- and middle-income countries could access the equipment they needed. Outlining some of the measures taken in Kenya to respond to the pandemic, he called on the global community to work together to bring the epidemiological situation under control.

The representative of TONGA welcomed the report and the Director-General's strong stance on the equitable distribution of COVID-19 vaccines. She acknowledged the tremendous support provided to Tonga by partners, in particular the joint incident management team supporting COVID-19 preparedness and response efforts in the Pacific. Outlining some of the actions taken by her Government to prepare for and prevent COVID-19, she said that strong global leadership was needed to ensure that all people would be vaccinated against COVID-19.

The representative of SINGAPORE, stressing the importance of global cooperation to overcome the pandemic, expressed support for WHO's coordinating and leadership role in international response efforts. WHO's regular press conferences and Member State briefings were highly useful, providing transparency and inspiring confidence in WHO's work. In the light of the emergence of new SARS-CoV-2 variants, WHO's continued leadership and technical guidance, including with respect to vaccination, would be essential. Noting that it would be a challenge to verify the vaccination status of travellers, he said that an international authentication mechanism could facilitate the resumption of international travel and trade. His Government stood ready to work with partners to enhance collective resilience against future outbreaks.

The representative of the UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND said that his Government was strongly committed to openness and sharing its experiences. It was essential for Member States to quickly identify significant changes in SARS-CoV-2 to respond in a timely manner. Variants of SARS-CoV-2 presented a global challenge and must be systematically addressed through global processes and structures. His Government, which had strong genomics capabilities, was committed to supporting WHO to provide international leadership in genomics and ensure systematic global surveillance. He appreciated the Organization's coordinating efforts with respect to COVID-19 therapeutics, including through the Solidarity trial. It was important to continue to conduct clinical trials on therapeutics to inform evidence-based global practice. His Government would continue to engage in partnerships to ensure equitable access to safe and effective therapeutics worldwide and to share research findings as quickly as possible. A strong scientific response, international cooperation and transparency were essential to overcome the pandemic.

The representative of SUDAN said that the international community must provide holistic and timely support to developing countries in COVID-19 response efforts and health systems strengthening. Highlighting the need for global solidarity, she called on the international community to adopt a flexible funding strategy to overcome obstacles related to COVID-19 and maintain essential health services. She urged the Secretariat and Member States to ensure that vaccines were equitably distributed worldwide, noting the importance of a multisectoral approach in that regard. Member States already administering COVID-19 vaccines should share information faster both regionally and globally.

The representative of the RUSSIAN FEDERATION commended WHO on its response to the COVID-19 pandemic. Since the emergence of COVID-19, his Government had taken a proactive approach to controlling the disease, adhering to WHO's recommendations and the International Health Regulations (2005). He outlined some of the support that his country had been providing to others, including in the provision of equipment and genome sequencing. Recalling that the Russian Federation had been the first to register a COVID-19 vaccine, he said that his Government was looking forward to a fruitful dialogue with the Secretariat on the vaccine's inclusion in WHO's list of vaccines approved for emergency use. He expressed support for WHO's coordinating role in the global response to COVID-19.

The representative of OMAN, speaking on behalf of the Member States of the Eastern Mediterranean Region, expressed appreciation for WHO's leadership, coordination and active engagement with Member States, and its strategic, technical and operational support to COVID-19 response efforts. He acknowledged WHO's efforts in leading global research and promoting evidence-based information about COVID-19 to limit the spread of false information. He welcomed the Organization's work to advocate for and facilitate equitable and timely access to high-quality, safe, efficacious and affordable COVID-19 diagnostic tools, therapeutics and vaccines, taking into account existing mechanisms and tools. He called on the Secretariat to support Member States in: improving COVID-19 surveillance and reporting to global platforms, including with regard to emerging variants; strengthening supply chains to ensure the acquisition, equitable allocation and transport of critical items;

ensuring that COVID-19 vaccines were equitably distributed and reached the most vulnerable groups and populations; and implementing and regularly updating national multisectoral COVID-19 action plans based on specific contexts and needs. The Secretariat should also support efforts to: provide timely, culture- and evidence-based information to communities, including on risks and protective measures, with a view to involving communities in preparedness and response and addressing misinformation and stigmatization; develop and maintain national capacities for detection, contact tracing and quarantining; and maintain essential health services, including access to essential medicines and vaccines.

The representative of GUYANA said that additional efforts and commitments were required to ensure the roll-out of safe and effective vaccines. He commended the work being done under COVAX, the vaccines pillar of the ACT-Accelerator. He was pleased about the progress made in acquiring vaccine doses and welcomed the Secretariat's plan to begin deliveries in February 2021. Member States in the Region of the Americas had put in place the administrative and legal measures necessary for the vaccine roll-out. It was hoped that the Secretariat would support Member States in developing a regional risk communication programme to enhance vaccine uptake and push back against anti-vaccine groups. Noting with concern the emergence and spread of new variants of SARS-CoV-2, he urged WHO to help poor countries to gain access to laboratories with genetic sequencing capacities. Doing so would help Member States to gain important insights into COVID-19 and enable the Organization to better understand how the virus was mutating and spreading.

The representative of the REPUBLIC OF KOREA expressed hope that vaccine deliveries through the COVAX Facility would be accelerated. Delivering vaccines through the COVAX Facility would help to reverse the worrisome trend of vaccine nationalism. Countries with overwhelmed health systems should be supported in their vaccination efforts, and countries with lower capacities should be supported in establishing and implementing national vaccination delivery plans. WHO must continue to collaborate with non-State actors and other stakeholders to ensure that such support was provided. Noting the importance of the equitable and prompt supply of COVID-19 diagnostic tools and therapeutics, he said that Member States must redouble their efforts to close the ACT-Accelerator funding gap. WHO should continue to share timely information and develop guidance regarding emerging strains of SARS-CoV-2. He hoped that the reviews and recommendations of the Independent Panel for Pandemic Preparedness and Response, the Review Committee on the Functioning of the International Health Regulations (2005) during the COVID-19 Response, and the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme would be finalized prior to the Seventy-fourth World Health Assembly.

The representative of ROMANIA underscored the need for solidarity and experience-sharing to build the resilience of Member States' social, economic and health systems. Outlining some of the steps taken by his Government to strengthen Romania's health system and control COVID-19, he said that it was essential to maintain the momentum of COVID-19 response efforts, continue implementing public health measures and organize vaccination campaigns while ensuring respect for human rights.

The representative of NEW ZEALAND,<sup>1</sup> expressing appreciation for WHO's support in the Pacific region, said that the Secretariat and Member States played an important role in sharing information and expertise in the response to COVID-19. The international expert mission studying the origins of SARS-CoV-2 in China was critical and must have every opportunity to learn about the virus. She hoped that the mission would be successful and that its findings would be released as early as possible. It was essential to meet the COVAX Facility's funding targets to ensure that vaccines reached

---

<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.



20% of developing countries' populations by the end of 2021. She looked forward to seeing continued international cooperation and support.

The representative of the PHILIPPINES<sup>1</sup> welcomed Member States' solidarity and work in promoting equitable access to COVID-19 vaccines, diagnostic tools and therapeutics. Risk communication and efforts to foster community engagement should be supported to ensure that medical professionals were fully equipped to administer vaccines, advocate for vaccination and counter vaccine-related misinformation and disinformation. She appreciated WHO's various platforms for guiding country responses and technical and operational guidance on maintaining essential health services during the pandemic.

The representative of CANADA<sup>1</sup> urged the international community to continue to cooperate in the manufacture and fair and equitable distribution of COVID-19 vaccines. Member States should adopt vaccine allocation frameworks that prioritized frontline workers and vulnerable groups. It was important to use lessons learned from the pandemic to strengthen pandemic preparedness and response; he looked forward to discussing that work in the run-up to the Seventy-fourth World Health Assembly. The international expert mission studying the origins of SARS-CoV-2 in China was an important example of global scientific collaboration for improving global health security. Knowledge gained from the pandemic should be used to promote the One Health approach in health emergency preparedness and response. The Secretariat should continue to regularly and meaningfully engage with Member States on the future directions of the Organization.

The representative of NORWAY<sup>1</sup> commended WHO for its leadership in the COVID-19 response; all Member States would benefit from a strong, independent and responsive WHO in times of crisis. She welcomed the Organization's efforts to coordinate and support global scientific studies. The pandemic had underscored the importance of WHO's normative role; the provision of evidence-based guidance to all countries was critical to managing the pandemic. Multistakeholder collaboration and broad support for global access to vaccines, diagnostic tools and therapeutics through the ACT-Accelerator were essential to overcome the pandemic.

The representative of TURKEY<sup>1</sup> said that a major shortcoming of the COVID-19 response had been the lack of a global crisis management mechanism for medical supplies, including personal protective equipment. Such a mechanism should be developed to prevent medical supply shortages in the future. Global access to effective COVID-19 vaccines would be essential to end the pandemic, and she hoped that more COVID-19 vaccines would be included on WHO's list of vaccines approved for emergency use. She encouraged WHO to build the capacities of its country office in Istanbul, which would bring benefits to several countries.

The representative of BRAZIL<sup>1</sup> outlined some of the measures taken by her Government in response to the COVID-19 pandemic. The Executive Board, at its current session, should call on Member States, the Secretariat, other international entities and pharmaceutical companies to deliver on their pledges and commitments to ensure fair and equitable distribution of COVID-19 vaccines worldwide as a matter of urgency.

The representative of DENMARK<sup>1</sup> said that the COVID-19 pandemic had revealed the need to provide clear, transparent and evidence-based information to the public. There was a growing need to

---

<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

counter false and misleading information. He commended WHO's work in that area and welcomed the goals set out in the draft proposed programme budget 2022–2023.

The representative of PORTUGAL<sup>1</sup> underlined the importance of enhancing essential health services and capacities in efforts to strengthen emergency preparedness, response and recovery. Resilient health systems must be built taking into account equity, gender balance, mental health outcomes and rights. He urged Member States to continue to support sustainable development, in line with the Sustainable Development Goals and with the guidance of WHO, to ensure that no one, including migrants and people living in conflict zones or refugee settings, was left behind. Transparency, communication and the International Health Regulations (2005) should serve as the basis for responding to health emergencies. He looked forward to receiving regular, participative and in-depth updates regarding the universal health and preparedness review. Member States must redouble their efforts to respond to COVID-19, promoting solidarity and multilateral action.

The representative of URUGUAY<sup>1</sup> outlined some of the steps taken in her country to respond to the pandemic, noting that efforts were based on leadership, innovation and effective management. She said that solidarity was essential to ensure equitable health care for all, and encouraged WHO to continue to play its fundamental role in the global response to COVID-19.

The representative of JAPAN<sup>1</sup> said that the international expert mission studying the origins of SARS-CoV-2 in China must have access to all the studies and information necessary to conduct a scientific, objective and transparent investigation. Expressing appreciation for the weekly Member State briefings and the guidance provided by the Secretariat, he requested the Secretariat to continue to provide consistent science- and evidence-based information. It was necessary to review and clarify the role of WHO in public health emergencies and strengthen the Organization's transparency and accountability. WHO should maintain its central role in coordinating efforts, norm-setting and providing technical support during health crises. The Organization should enhance its strategic collaboration with other United Nations agencies, philanthropic organizations, civil society and the private sector. He called on WHO to continue to promote health systems strengthening, the provision of essential health services and preventive public health measures during the COVID-19 pandemic.

The representative of PAKISTAN<sup>1</sup> welcomed WHO's proactive role in supporting Member States during the pandemic. He drew attention to some of the measures taken by his Government to respond to COVID-19, and expressed appreciation for the COVAX Facility. He welcomed the progress made by the Independent Panel for Pandemic Preparedness and Response, noting that its tasks were of critical importance. He suggested that the Panel's work should be continued beyond the Seventy-fourth World Health Assembly.

The representative of MYANMAR<sup>1</sup> thanked the Director-General for his leadership in responding to COVID-19 and expressed gratitude for WHO's technical support provided through the Global Outbreak Alert and Response Network. Developing countries faced immense challenges in accessing COVID-19 vaccines. It was imperative to ensure fair and equitable access to affordable vaccines for all; the COVAX Facility would play a key role in that regard. Substantial supplies of vaccine must be secured for developing countries through the COVAX Facility.

The representative of THAILAND<sup>1</sup> said that strong political commitment, leadership, international cooperation and good governance were needed to improve health emergency preparedness and response. To turn commitments into action, resources and technical support needed to be mobilized.

---

<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

Timely information-sharing among the international community was essential to counter public health threats; he urged Member States to enhance their collaboration in generating evidence and detecting misinformation. It was important to ensure the equitable procurement, supply and allocation of adequate personal protective equipment. To overcome the pandemic, a global, multilateral response and constructive multisectoral engagement were needed.

The representative of BELARUS<sup>1</sup> welcomed the WHO-led COVID-19 Partners Platform. He highlighted the importance of WHO's technical guidance in strengthening national health systems. He expressed appreciation for the prompt technical support provided to his Government by the Regional Office for Europe and WHO country office in Belarus. He expected that WHO would strengthen its research on emerging SAR-CoV-2 variants and provide objective data on the effectiveness and safety of COVID-19 vaccines. He supported WHO's efforts in the area of emergency response.

The representative of PERU<sup>1</sup> said that it was Member States' responsibility to strengthen pandemic preparedness and response, the implementation of the International Health Regulations (2005) and the Organization as a whole through WHO's governing bodies and with the support of the Secretariat. Stronger multilateralism was needed to improve health systems and global health governance. It was essential to meet the ambitious targets of the COVAX Facility to ensure that all participating countries, including self-funding countries, had timely access to COVID-19 vaccines. COVID-19 vaccines and therapeutics must be recognized as global public goods. With many countries experiencing a second wave of the pandemic, support from WHO and PAHO was fundamental to address health challenges and maintain essential health services.

The representative of MALAYSIA<sup>1</sup> outlined the measures taken by her Government in response to the COVID-19 pandemic. She emphasized the need for global solidarity and a unified response to the pandemic.

The representative of SPAIN<sup>1</sup> expressed appreciation for WHO's support, guidance and leadership during the COVID-19 pandemic, underscoring the importance of international consensus, cooperation and solidarity. Mechanisms for information-sharing and initiatives such as the COVAX Facility, the review of the functioning of the International Health Regulations (2005) during the COVID-19 response, and the expert mission studying the origins of SARS-CoV-2 in China had provided important opportunities for the Secretariat and Member States to collaborate and build capacities. To emerge stronger from the pandemic, it was important to draw on lessons learned and improve preparedness.

The representative of ECUADOR<sup>1</sup> said that it was critical for countries to work together in developing COVID-19 tools and to strengthen initiatives to ensure equitable access to vaccines. He called on the Secretariat and Member States to continue their response efforts.

**The meeting rose at 17:10.**

= = =

---

<sup>1</sup> Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.