



Strengthening the evidence-base for public health and social measures

The Executive Board, having considered the report by the Director-General,¹

Decided to recommend to the Seventy-eighth World Health Assembly the adoption of the following resolution:

The Seventy-eighth World Health Assembly,

Having considered the report by the Director-General;

Noting that public health and social measures refer to non-pharmaceutical measures implemented by individuals, communities, governments and institutions to reduce the risk and scale of epidemic- and pandemic-prone infectious disease transmission;

Acknowledging the relevance of public health and social measures to the International Health Regulations (2005), the amendments to which were adopted through resolution WHA77.17 (2024);

Recalling the temporary recommendations of the International Health Regulations (2005) Emergency Committee regarding the coronavirus (COVID-19) pandemic, issued by the Director-General to States Parties on, inter alia, the continued use of evidence-informed and risk-based public health and social measures; and recalling the temporary recommendations of the International Health Regulations (2005) Emergency Committee regarding the upsurge of mpox 2024 to States Parties on addressing research gaps and generating evidence, including in respect of the effectiveness of public health interventions;

Recalling also resolution WHA58.5 (2005) on strengthening pandemic-influenza preparedness and response, which urges Member States to make effective use of appropriate and effective public health and social measures to protect the general public from the influenza virus;

¹ Document EB156/18.

Acknowledging the importance of public health and social measures in preventing and controlling infectious diseases, especially those with epidemic- and pandemic potential; and acknowledging that public health and social measures are the first, and sometimes the only, interventions available, and that appropriate public health and social measures are essential throughout an epidemic or pandemic;

Noting that it can be difficult to anticipate who may be most at risk of experiencing adverse health and socioeconomic consequences during future epidemics and pandemics, as well as possible adverse effects of public health and social measures; and that building a stronger and robust evidence base for public health and social measures can help improve our understanding and better inform approaches to minimize such adverse consequences;

Recognizing that, despite the critical role of public health and social measures in preventing and controlling epidemics and pandemics, advanced research and detailed data on the effectiveness and impact of public health and social measures are limited;

Acknowledging the importance of expanding the evidence base to inform the implementation of public health and social measures that are targeted, effective, appropriate, equitable, adapted to local contexts, proportionate to the type, scale and severity of the specific risks and hazards, and that aim to maximize public health benefits, while minimizing their adverse consequences;

Acknowledging also the importance of increasing understanding of the drivers and barriers, including behavioural factors, that prevent or enable national implementation and community and individual adherence to public health and social measures, by means that include social participation, effective risk communication, community engagement and infodemic management;

Recognizing the inherent challenges in conducting research on public health and social measures due to their complex, multisectoral nature, and that national research, ethical and legal frameworks do not necessarily provide for research on public health and social measures;

Recalling resolution WHA58.34 (2005), on the Ministerial Summit on Health Research, in which the Health Assembly acknowledged that high-quality, ethical research and the generation and application of knowledge are critical for achieving internationally agreed health-related development goals, and resolution WHA63.21 (2010), which outlined WHO's role and responsibilities in health research;

Recalling also resolution WHA74.7 (2021) on strengthening WHO preparedness for and response to health emergencies, which, inter alia, requested the Director-General, in consultation with Member States, to develop a global framework to generate, monitor, compare and evaluate research and policies on public health and social interventions and assess their broader impact in order to harness global knowledge and expertise and to translate evidence into effective health emergency and preparedness policies;

Recognizing that research on public health and social measures should be well designed, methodologically rigorous and well implemented, in accordance with applicable ethical guidelines and taking into account social and cultural sensitivities, and that this research could benefit from appropriate robust digital health ecosystems that are in accordance with applicable legal frameworks and facilitate seamless data exchange, data compatibility, integration, and application across healthcare systems;

Noting also that research and evaluations of public health and social measures are likely to be the most informative and supportive of fair and effective implementation when carried out in various settings, in countries at all levels of income categories, and when they include research participants from the populations that the intervention is targeted towards, including those that are underrepresented and from various cultural backgrounds;

Underlining the importance of equity and transparency in research on public health and social measures, including sharing of information, in line with national laws and protocols, on the results of research on public health and social measures, including both positive and negative findings,

1. URGES Member States,² as appropriate and in accordance with national laws, priorities and contexts:

- (1) to support, as appropriate, the development and strengthening of both national capabilities for research on public health and social measures and quality-control frameworks for research on such measures;
- (2) to build capacity for research on public health and social measures to inform cross-sectoral decision-making and implementation by, inter alia, integrating research on such measures, as appropriate, as a component of the curricula of public health emergency training programmes;
- (3) to encourage an agile response to opportunities for gathering evidence on the effectiveness, impact and consequences of public health and social measures, by means that include systematic monitoring and evaluation of policies on public health and social measures during health emergencies;
- (4) to consider integrating models of behavioural and social change and decision-making into research on public health and social measures, including through social participation, while taking a whole-of-government and whole-of-society approach to research on public health and social measures;
- (5) to share data generated from research on public health and social measures, as well as monitoring and evaluation of such measures applied during public health emergencies, systematically and transparently, as appropriate and in line with applicable legal frameworks and policies on data protection and supported by robust digital health ecosystems that facilitate seamless data exchange, where relevant;
- (6) to encourage funding agencies for research to consider supporting well-designed research on public health and social measures that is robust and conducted in various settings; that takes into account equity principles; that seeks to include research participants from the populations the intervention is likely to affect most; and that monitors adverse consequences, in order to produce actionable evidence to inform public health policy, practice and decision-making;

² And, where applicable, regional economic integration organizations.

- (7) to support national and regional ethics committees and regulatory authorities in enabling efficient governance processes that focus on the fundamental scientific and ethical principles underpinning population-based intervention research, including research and trials on interventions in respect of public health and social measures;
- (8) to support the highest level of protection for human research subjects, including personal data protection and efforts to minimize risks to participants;
- (9) to review and, if necessary, consider revising legislation to support and enable research on timely and agile public health and social measures;
- (10) to consider how proportionate, relevant and context-specific research on public health and social measures can be integrated into pandemic prevention, preparedness and response plans;
- (11) to work with WHO and relevant stakeholders, including regional partners, to strengthen the evidence base for public health and social measures, as appropriate;

2. REQUESTS the Director-General:

- (1) to support Member States, upon request, in addressing methodological, legal and ethical considerations in order to strengthen and improve research on public health and social measures;
- (2) as needed, to collate, review and update existing guidance on best practice for research on public health and social measures, including recommendations on key data that would facilitate the interpretation of such guidance in different settings as well as for monitoring adverse consequences;
- (3) to support Member States, as appropriate, in developing study protocols that are ready for use in different settings and make available ethical guidelines for research on public health and social measures – including trials, monitoring and programme evaluation – that Member States can adapt according to their own settings;
- (4) to present a substantive report outlining progress in the implementation of this resolution for consideration by the Seventy-ninth World Health Assembly in 2026, through the Executive Board at its 158th session.

Eighteenth meeting, 10 February 2025
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