Influenza preparedness

The Seventy-third World Health Assembly, having adopted the written silence procedure through decision WHA73(7) (2020),1 decided:

(1) to note the release of WHO’s Global Influenza Strategy 2019–2030, and its linkages to the implementation of the International Health Regulations (2005) and the Pandemic Influenza Preparedness Framework for the sharing of influenza viruses and access to vaccines and other benefits;

(2) to request the Director-General:

(a) to support Member States, upon their request, to develop or update national influenza preparedness plans, and to consider implementing an annual influenza vaccination programme for target populations, taking into account, as relevant and appropriate to national circumstances, the goals and strategic objectives of WHO’s Global Influenza Strategy 2019–2030;

(b) to promote timely access to, and distribution of, quality, safe, effective and affordable seasonal influenza vaccines, diagnostics, and treatments;

(c) to continue to engage Member States and all relevant stakeholders to promote and uphold the Pandemic Influenza Preparedness Framework for the sharing of influenza viruses and access to vaccines and other benefits, and to encourage international collaboration for the rapid, systematic, and timely sharing of influenza viruses with human pandemic potential, and equitable and timely access to quality, safe, effective and affordable pandemic influenza vaccines, diagnostics and therapeutics, and other benefits, on an equal footing;

(d) to prioritize and contribute to international efforts to sustain and enhance influenza surveillance through WHO’s Global Influenza Surveillance and Response System (GISRS), by continuing to work with Member States, GISRS laboratories, and other relevant stakeholders, to:

   (i) gather and share information, voluntarily provided, about influenza virus-sharing and its associated benefits; and

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1 See also document A73/4.
(ii) encourage countries to voluntarily share information and best practices on mitigating hinderances to the rapid, systematic, and timely international sharing of seasonal and pandemic influenza biological materials and to its associated benefits;

(e) to promote synergies, as relevant and appropriate, between and among, efforts to implement: national plans for influenza preparedness and response; the International Health Regulations (2005); and immunization programmes;

(f) to consult Member States and relevant stakeholders, including manufacturers, in a manner consistent with WHO’s Framework of Engagement with Non-State Actors, to identify gaps in, and priorities for, affordable, scalable, and sustainable global influenza vaccine production capacity, supply chains, and distribution networks;

(g) to report on implementation of this decision to the Seventy-fifth World Health Assembly, through the Executive Board at its 150th session.

C.L.31.2020, 3 August 2020