

## **Progress report of the Intergovernmental Negotiating Body to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response (INB) to the Seventy-sixth World Health Assembly**

1. By decision SSA2(5), the World Health Assembly, at its Second special session, decided to establish an intergovernmental negotiating body (INB) open to all Member States and Associate Members<sup>1</sup> to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response, with a view to adoption under Article 19, or under other provisions of the WHO Constitution as may be deemed appropriate by the INB. Further pursuant to that decision, the Health Assembly mandated the INB to submit its outcome for consideration by the Seventy-seventh World Health Assembly, with a progress report to the Seventy-sixth World Health Assembly. This progress report is submitted for the consideration of the INB in advance of the Seventy-sixth World Health Assembly.

2. To date, the INB has held five meetings, including two resumed sessions of its first meeting, as well as undertaking considerable intersessional and informal work. A summary of the INB's activity to date is provided below. All documentation, including reports of each meeting, is available at the WHO Governance webpage for the INB.<sup>2</sup>

3. At its first organizational meeting, held virtually on 24 February 2022, the INB elected by acclamation the Bureau, comprising the Co-Chairs, Ms Precious Matsoso of South Africa and Mr Roland Driece of the Netherlands, and the Vice-Chairs, Ambassador Tovar da Silva Nunes of Brazil, Mr Ahmed Soliman of Egypt, Dr Viroj Tangcharoensathien of Thailand and Mr Kazuho Taguchi of Japan.

4. During the first resumed session of the first meeting of the INB, held virtually on 14 and 15 March 2022, the INB considered and adopted the proposal from the Bureau regarding the process to identify the substantive elements of the instrument, a timeline and deliverables for the INB, and proposed modalities for the engagement of relevant stakeholders, with the latter being agreed as a "living document" to be updated in subsequent meetings of the INB, in order to support broad engagement. These modalities were applied in subsequent meetings and intersessional work of the INB, thereby

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<sup>1</sup> And regional economic integration organizations, as appropriate.

<sup>2</sup> See <https://apps.who.int/gb/inb/> (accessed 23 March 2023).

facilitating participation by relevant stakeholders in the INB's work. In that regard, except as otherwise agreed, INB meetings were publicly broadcast on the WHO public website.

5. During the intersessional period between the first and second resumed session of the first meeting of the INB, the WHO Secretariat, pursuant to decision SSA2(5), conducted a first round of public hearings, with input from relevant stakeholders as well as the general public, to inform the deliberations of the INB.

6. At the second resumed session of the first meeting of the INB, held from 6 to 8 June 2022 in a hybrid format, the INB considered the Bureau's draft consolidated outline of the substantive elements for the instrument, and provided suggestions and inputs for the Bureau to take into account in the development of a working draft of the instrument, to be presented, per decision SSA2(5), to the second meeting of the INB. The INB also considered a report from the Secretariat on the outcomes of the first round of public hearings.

7. The second meeting of the INB was held from 18 to 21 July 2022, in a hybrid format. At that meeting, pursuant to decision SSA2(5), the INB considered a working draft of the instrument prepared by the Bureau, with support from the Secretariat, presented on the basis of progress achieved. This draft included the concept of health systems recovery, following input from Member States. The INB agreed to a process for intersessional work, with a view to the Bureau, with support from the Secretariat, presenting a conceptual zero draft of the instrument for the consideration of the INB at its third meeting. Further pursuant to decision SSA2(5), regarding the identification of the provision of the WHO Constitution under which the instrument should be adopted, the INB agreed that the instrument should be legally binding and contain both legally binding as well as non-legally binding elements. In that regard, the INB identified that Article 19 of the WHO Constitution is the comprehensive provision under which the instrument should be adopted, without prejudice to also considering, as work progresses, the suitability of Article 21. This identification was made mindful that the decision will be made by the World Health Assembly.

8. As requested by the INB, in the intersessional period between the second and third meetings of the INB, the Bureau conducted a series of four informal, focused consultations on selected key issues, including with experts invited by the Bureau, open to all WHO Member States and relevant stakeholders, and the WHO Secretariat held a second round of public hearings, open to relevant stakeholders as well as the general public.

9. At the third meeting of the INB, held from 5 to 7 December 2022 in a hybrid format, the INB considered the reports of the four informal, focused consultations and second round of public hearings, and welcomed the conceptual zero draft of the instrument (referred to as the WHO CA+). The INB agreed that the Bureau, with support from the WHO Secretariat, would prepare the zero draft of the instrument, based on the conceptual zero draft and input received during the third meeting of the INB, with legal provisions, for consideration by the INB at its fourth meeting, and as a proposed basis for commencing negotiations at the fourth meeting, it being understood that the zero draft will be without prejudice to the position of any delegation and following the principle that "nothing is agreed until everything is agreed". Several delegations reiterated the importance of coordinating the work of the INB with that of the Working Group on Amendments to the International Health Regulations (2005) (WGIHR), including avoiding overlaps of meetings and allowing sufficient time for delegations to prepare ahead of the meetings. The Co-Chairs highlighted that an initial meeting of the two Bureaus had been held, and it was agreed to maintain active coordination and promote coherence between the two processes.

10. At the fourth meeting of the INB, held from 27 February to 3 March 2023 in a hybrid format, the INB agreed to the proposal by the Bureau regarding the modalities for consideration of the zero draft of the WHO CA+ and related work, including that the fourth and fifth meetings of the INB were considered as an integrated set, with both focusing on Member State discussions and negotiations relating to the zero draft. The INB proceeded to discuss the zero draft through the drafting group, as per modalities agreed at its third meeting.

11. As requested by the INB, in the intersessional period between the fourth and fifth meetings of the INB, the Bureau organized three informal intersessional events by inviting experts from relevant agencies and organizations, with the participation of relevant stakeholders, on matters related to the zero draft WHO CA+.

12. At the fifth meeting of the INB, held from 3 to 6 April 2023 in a hybrid format, the INB further considered the zero draft WHO CA+ and agreed on a process forward.

13. In the period leading up to the Seventy-seventh World Health Assembly in May 2024, the INB will, pursuant to its agreed timeline and deliverables, hold four additional sessions (including two “two-week marathon” sessions) in first quarter of 2024, as well as two additional sessions of the drafting group in 2023. The INB may, if it finds appropriate, supplement its working sessions, in order to meet the ambitious deadline established by the Health Assembly for the INB’s work.

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