Future work of the Member State mechanism

Report by the Secretariat

1. At the Steering Committee meeting held on 5–6 July 2022, Steering Committee members participated in a preliminary brainstorming session on the future work of the Member State mechanism.

2. Steering Committee members discussed the need to take a broader look at the longer-term plan for the mechanism and adopt a more strategic approach to thinking about how to add value to the future activities of the mechanism. In that regard, members emphasized the importance of taking into account the context upon which the mechanism was founded and the progress made to date; it was noted that the development of a comprehensive narrative on the achievements of the mechanism would be an apt way of marking the 10-year anniversary of the mechanism’s establishment. The WHO Evaluation Office’s review of the mechanism, which was conducted at the request of the Health Assembly, could also offer a useful overview in that respect.¹

3. Given the mechanism’s unique governance structure, Steering Committee members stressed the importance of demonstrating the value of the mechanism’s work and of setting out the strategic vision for its future. They discussed how to address any potential waning of Member State participation in the mechanism, and considered whether the current governance structure remained fit for purpose or whether adjustments might be considered, as appropriate, to better enable efficiencies and facilitate the critically important technical work of combating substandard and falsified medical products. Steering Committee members proposed that such questions should be considered by all Member States at the next plenary meeting.

4. During the brainstorming session, Steering Committee members were invited to consider a series of questions concerning the future work of the Member State mechanism, to which they provided a number of responses as outlined in the Annex to the present document.

ACTION BY THE MEMBER STATE MECHANISM

5. The mechanism is invited to note the report and provide guidance on the following questions.

   • What is the mechanism’s view of the ideas expressed by the Steering Committee as outlined in the Annex? What additional ideas should be taken into account in this regard?

¹ See document A70/23 Add.1, Annex. The review was carried out pursuant to resolution WHA65.19 (2012) and decision WHA68(12) (2015).
What adjustments to the mechanism’s governance, if any, may better enable efficiencies and facilitate the critically important technical work of combating substandard and falsified medical products?
ANNEX

STEERING COMMITTEE RESPONSES TO QUESTIONS CONCERNING
THE FUTURE WORK OF THE MEMBER STATE MECHANISM

1. What else could the Steering Committee do to effectively plan the future work of the mechanism on an ongoing basis outside the formal two-year cycle?

   • The ideas put forward by Steering Committee members in response to that question included:

   – consider an external evaluation of the mechanism;

   – consider forecasting targets beyond two-year terms and establishing concrete milestones (for example, a certain number of countries using Epione by a set date); and

   – consider the need for longer-term strategic planning and investigate the possibility of horizon scanning and scenario modelling for 5 or 10 years into the future.

2. What could Steering Committee members do to effectively highlight the issues and challenges related to substandard and falsified medical products that should be considered by the Steering Committee and addressed by the mechanism, especially those of regional significance?

   • The ideas put forward by Steering Committee members in response to that question included:

   – have the Steering Committee Chair speak about the mechanism at the regional committees and suggest greater involvement in each of the regions, with support from the Secretariat and the Steering Committee Vice-Chairs; and

   – include an item on the agenda of regional committees such that the Steering Committee Vice-Chairs could present and provide updates on the mechanism’s work, which could establish a positive feedback loop and create an appetite for engagement.

   In that regard, the Secretariat explained that the topic could be discussed either formally or informally at regional committee meetings. To be formally considered by the regional committees, the Health Assembly could request that the issues and challenges related to substandard and falsified medical products be discussed at the global level for the topic to subsequently be taken up at the regional level. Failing which, the matter could be discussed at side events during the regional committees according to the wishes of the respective regional offices or in other informal settings regionally available.

   It was further noted that challenges in each region may be different and may require different approaches.
3. How are Steering Committee members currently engaging with their regions in respect of intersessional work and related activities? What else could be done to further or more effectively engage regions? What does optimal engagement look like?

- One Steering Committee member questioned whether the work of the mechanism might be perceived as more of a global rather than a regional issue.

- Another Steering Committee member suggested that more training should be made available and that the Steering Committee Vice-Chairs should speak with regional counterparts to seek the best ways of promoting engagement at the regional level.

4. There is 10 years’ worth of data from the Member State mechanism (for example, reporting to the WHO Global Surveillance and Monitoring System). Are these data being used effectively? Could they be used differently? What other analyses would you like to see? Could data be used to generate insights to inform the work of the working groups? Could you use such data to promote engagement with Member States in your regions?

- In order to address such questions, one Steering Committee member suggested that further information on what analysis had already been done would be needed.

- It was further suggested that there should be some variations in the summaries presented, including rates by reporter types, in order to identify general and subregional trends.

- Another Steering Committee member noted that the reports of the mechanism submitted for the consideration of the Health Assembly included only the reports of plenary meetings. In that context, it was proposed that the mechanism’s report should be drafted in a more meaningful and comprehensive manner and should draw attention to the data collected.

- A further Steering Committee member indicated that the sharing of any regional data from the mechanism with Member States would be a welcome step, including being given the opportunity to explore data from the Global Surveillance and Monitoring System further.

- There was general agreement on the part of the Steering Committee concerning the value of dynamic data exploration as a topic for future discussions.

5. Could Steering Committee members suggest relevant topics for invited speakers for upcoming Steering Committee meetings? What steps should be taken to ensure that this is valuable to the work of the Steering Committee?

- The ideas put forward by Steering Committee members in response to those questions included to:
  - invite national focal points to speak about best practices or challenges;
  - invite other partners that did not normally participate in the mechanism, including some visionaries, so as to hear their versions of what the world might look like in the future and promote more forward-looking thinking across the mechanism;
– invite other alliances involved in combating substandard and falsified medical products, either those with current links to the mechanism or those working in parallel, as a useful way of assessing progress made to date; and

– invite researchers to share their work in the field.