

152nd SESSION of the WHO EXECUTIVE BOARD

(Geneva, 30 January- 7th February 2023)

9:30 AM (CET)



**Ministry of Health & Family Welfare
Government of India**

Agenda 12.2: WHO's work in health emergencies

(Word count: 343)

Thank you Chair,

India proposes that WHO should facilitate in linking and aligning the NAPHS with existing national health strategies and priorities, national all-hazards risk management frameworks, disease and hazard-specific programs, antimicrobial resistance, pandemic preparedness and align with whole of Government, whole of Society and one health approach to planning.

Chair,

WHO should simplify and streamline the NAPHS process through the integration and alignment of existing health security tools and processes and consolidate them into a single NAPHS online platform.

WHO should integrate NAPHS with existing global processes and initiatives (e.g. UHPR, HEPR, the pandemic treaty, IHR amendments, etc.) so as to have a harmonized global health emergency architecture, an agenda which India's G20

presidency has also proposed in its health working group. India also offers its support to WHO in terms of creation of such an online platform.

WHO should facilitate coordination and collaborative efforts whereby countries can request resources to fill their technical and resource gaps. The process of facilitation should be transparent, after country consultation & with monitorable outputs.

Chair,

India supports the conceptual **framework of data-driven** Dynamic Preparedness Metric (DPM) tool that could measure country capacities more comprehensively based on the three dimensions of Hazard, Vulnerability and Preparedness. India proposes that this tool may be further deliberated among Member States prior to its adoption.

Chair,

Expanding capacities of Member States in the priority areas identified in the 'One Health Joint Action Plan' needs to focus on the **pathways and action tracks**. To begin with, the human, animal and environmental sectors need to collaborate and coordinate to look at the Member States NAPHS and IHR core capacities already established and their expansion to accommodate priority elements of animal health and environmental health.

A case in point would be expansion of multi-sectoral & interdisciplinary surveillance cutting across human, animal and environmental interface. And similarly, Antimicrobial Resistance where animal, human and environmental health sectors

are already collaborating to preserve antimicrobial efficacy and ensure sustainable and equitable access to antimicrobials for responsible and prudent use in human, animal, and plant health.

Thank you!