
Bureau's summary report of the sixth meeting of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies (10–12 January 2022)

1. The sixth meeting of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies (WGPR) was held virtually from 10 to 12 January 2022, with the following agenda:
 - (i) Discuss and finalize the interim report to be submitted to the 150th session of the WHO Executive Board;
 - (ii) Receive a briefing on the survey on implementation of COVID-19 recommendations that was developed by the WGPR Bureau to solicit inputs from Member States and relevant stakeholders; and
 - (iii) Discuss next steps for the WGPR's deliberations.
2. Throughout the sixth meeting of the WGPR, Member States reiterated their support for the WGPR to continue its task to consider all of the recommendations from the review panels and expert bodies and to consider different actions and tools for potential implementation in order to submit a report with proposed actions for the WHO Secretariat, Member States and non-State actors, as appropriate, for consideration by the Seventy-fifth World Health Assembly.
3. In presentations on the survey on implementation of COVID-19 recommendations, it was noted that the Bureau developed the survey based on guidance from WGPR members. The survey was launched on 6 December 2021, to Member States, non-State actors and other relevant stakeholders to systemically collect inputs on the 131 recommendations issued by the independent review panels/committees: Independent Oversight and Advisory Committee of the WHO Health Emergencies Programme, Independent Panel on Pandemic Preparedness and Response, Review Committee on the functioning of the International Health Regulations (2005) during the COVID-19 response, and the Global Preparedness Monitoring Board recommendations from 2019 and 2020.
4. The co-chairs noted that the goal of the survey was to solicit inputs from Member States and stakeholders on some basic prioritization among the recommendations; and to provide initial input on feasibility and potential methods of implementation. They highlighted the role of the survey as a means to accelerate and focus discussions of the WGPR between February and May 2022. They further stressed that the survey is a means to promote inclusivity and to ensure all countries are able to provide input to the WGPR's deliberations. In this regard, Member States expressed support of the process and noted that additional time to submit responses would be helpful. However, some Member States raised

concerns that the survey should not be a decision-making tool and underlined that the WGPR should continue to be open to discuss other proposals, initiatives or recommendations not covered in the survey.

5. On the issue of the level of detail of survey results to be shared, Member States were of mixed views. The WGPR agreed that the results of the survey would be shared in an aggregated, transparent manner while respecting confidentiality, where requested by either Member States or stakeholders.

6. During deliberations on its interim report, a number of potential priority areas for focus were highlighted, including a range of issues on which there were divergent views among Member States:

(a) On **equity**, there remained high interest among Member States to discuss equity in prevention, preparedness and response to health emergencies, especially with respect to capacity building, equitable and timely access to and distribution of medical countermeasures and related issues. To this end, a number of issues were raised by Member States for potential further discussion, including: information, data and sample sharing; transparency of pricing of medical products; sharing of technology and know-how; licencing of intellectual property as well as promoting local and regional manufacturing capacity, regulatory collaboration, research and development and capacity-building.

(b) On **building and strengthening global system and tools**, Member States raised issues for potential discussion that included: surveillance and early warning systems; sharing of pathogens and the benefits derived thereof, including a proposal for WHO framework for sharing of pathogens of pandemic potential and benefits based on fair and equitable terms; research and development; global supply and logistic system; and global health emergency workforce.

(c) On **strengthening the International Health Regulations (IHR) (2005)**, there was strong support for the IHR (2005) as a key component of the global health architecture. Member States continued to highlight their support for strengthening the IHR (2005) including through improving implementation, compliance, and through potential targeted amendments. On the issue of potential amendments to the IHR (2005), Member States expressed strong consensus that the entire instrument should not be reopened for negotiation. Member States saw this as an important area of work for the WGPR between February and May 2022, including, to the extent possible, prioritizing and clearly identifying amendments as well as identifying other possible actions for other key areas including pandemic prevention, preparedness and response and health systems strengthening. Issues that could be discussed include, among others:

- Building and strengthening Member States core capacities, including funding and financing for the implementation of, and compliance with, the IHR (2005) at national and subnational levels;
- Strengthening transparency and mutual accountability as well as strengthening the technical capacity of WHO to support Member States' implementation of the IHR (2005) core capacities;
- Enabling the transparent and timely sharing of information on outbreaks, including issues of incentivizing the timely sharing of information; the impact and role of travel and trade measures; preventing misinformation, disinformation and stigmatization and responding with science and evidence based global coordination; and consulting with the State Party where the emergency occurred;

- Strengthening WHO’s ability to provide technical assistance, including for rapid access to outbreak sites, with due regard to, and respect for, the sovereignty of States; and
- Clear guidance for action, including potential incentives, in the event of WHO declaring a public health emergency of international concern, with the potential to establish an intermediate alert.

(d) On the **One Health approach**, Member States agreed on this as a prioritized interest, but one where further elaboration and collaboration was needed, as the One Health concept reaches beyond pandemic preparedness and response and the purview of the working group as well as the mandate of WHO. For the WGPR, discussions could include: strengthening existing platforms or creating new ones, as well as strengthening surveillance, furthering multisectoral partnerships (human, animal and environmental health sectors) and promoting specific countermeasures in line with the One Health approach.

(e) On **leadership and governance**, Member States expressed an interest in strengthening WHO governance and oversight by Member States of WHO’s work in health emergencies. There is general consensus around the need to increase Member States’ role in WHO governance, for which appropriate processes need to be identified.

(f) On **finance**, Member States recognized the need for adequate and sustainable financing for pandemic preparedness and response at the national and global level, including for adequate and sustainable funding for WHO. Member States noted the continued need for coherence with the Working Group on Sustainable Financing, especially to avoid potential overlap with its work. The WGPR could provide a forum to discuss pandemic prevention, preparedness and response financing within WHO and in the larger context of discussions around existing and new financial instruments for pandemic prevention, preparedness and response, including processes that are mainly led by finance ministries and international financial institutions.

7. As a way forward, it was proposed that the WGPR would continue discussions on issues and/or recommendations, taking into account the results of the survey, and prioritizing those recommendations which are not being addressed through other processes and making sure to avoid overlap, in order to propose actions for the WHO Secretariat, Member States and non-State actors, as appropriate, on a range of issues including but not limited to:

(a) **Leadership and governance**, with a view to strengthen WHO’s capacities in health emergencies and Member States’ oversight of WHO’s work in pandemic prevention preparedness and response to health emergencies, including surveillance and early warning systems, as well as other technical and operational functions;

(b) **IHR Strengthening**, with a focus on implementation, resources, core capacities, transparency and compliance, including through the potential targeted amendments to IHR (2005) as well as the further assessment of the role of potential mechanisms such as the Universal Health and Preparedness Review, currently in pilot stage;

(c) **Equity in pandemic prevention, preparedness and response**, with particular attention to timely sharing of data and equitable access to medical countermeasures and incentivizing innovation and technology transfer to scale up local and regional production of medical countermeasures, as well as addressing access barriers;

(d) **Strengthened health systems**, including primary health care, improved access to quality health services and their delivery through advancing universal health coverage, social protection, and effective and available training of health personnel that can be immediately deployable and tasked to initiate early response to health emergencies;

(e) **Financing**, in coherence with the Working Group on Sustainable Financing, with a view to ensure that WHO has an adequate level of resources to fund its activities on health emergencies preparedness and response and the capacity to leverage extra resources to respond to any acute health emergency, recognizing and ensuring the central role of WHO in overall global pandemic preparedness and response.

8. Member States also highlighted the need for the WGPR and the intergovernmental negotiating body (INB) to strengthen pandemic prevention, preparedness and response processes to be coherent and complementary, especially as the WGPR moves to identify, propose and prioritize the recommendations for necessary action and the recommended mechanism for their implementation.

9. As noted in its interim report to the Executive Board at its 150th session (document EB150/16), to facilitate these discussions, the proposed Schedule of Meetings of the WGPR include:

- February/early March 2022:

(i) The Bureau will provide a summary of the sixth meeting of the WGPR for the consideration of Member States, noting that since the Special Session of the World Health Assembly in 2021, there have been further discussions and developments on important topics raised by Member States.

(ii) The WGPR will meet to discuss survey results with dedicated time reserved to discuss the recommendations of the panels and committees which are not being addressed through other processes, including with regard to strengthening of the IHR (2005), including through implementation, compliance and potential targeted amendments without reopening the entire instrument for negotiations.

- **March 2022:** The WGPR will meet to continue discussions on the survey results and other topics as needed as well as on possible actions to be proposed to the Seventy-fifth World Health Assembly.
- **Late April/early May 2022:** The WGPR meets to continue discussion on possible actions to be proposed to the Seventy-fifth World Health Assembly and to finalize the report.
- **Additional intersessional meetings** as determined by the WGPR, consistent with the recommendations of the Executive Board, including through dedicated meetings, “deep dives” and continuing dialogue with non-State actors and independent scientific panels and committees to focus on specific issues to help formulate action-oriented recommendations, taking into account the limited capacity of small delegations.

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