INTRODUCTION

Each year, senior health officials from Member States of the World Health Organization (WHO) travel to Geneva, Switzerland to participate in the World Health Assembly (WHA). It is at WHA that Member States review WHO’s work, set new goals, and assign new tasks. Some of the main functions of WHA are to determine the policies of WHO, appoint the Director-General, supervise financial policies, and review and approve the proposed program budget.

In addition to Member States, other stakeholders, including non-state actors (NSAs) in official relations with WHO, like Global Health Council, are able to follow and participate in the proceedings, technical briefings, and official side events.

This year, as the COVID-19 pandemic continues to threaten global health and well-being, the 74th session stressed the need to end the current pandemic and how best to prevent and prepare for the next one. The agenda focused on the health-related Sustainable Development Goals (SDGs) and WHO’s Triple Billion targets of one billion more people benefiting from universal health coverage, one billion more better protected from health emergencies, and one billion more enjoying better health and well-being.

It was wonderful—the amount of info re what was coming up, what was being changed, the daily recaps and analysis of key highlights as well as the social media toolkit, and tweets from GHC and [the GHC Director for Advocacy and Engagement] were the perfect way to be informed about the issues, what to pay attention to, what we should focus on as delegates to really make our advocacy known, etc. This was my 3rd time as GHC delegate, and I have to say this year was the best.

QUOTE FROM MEMBER
PILLAR 1:

One billion more people benefitting from universal health coverage

(Agenda items 13-16)

Under Pillar One of the agenda, the Assembly approved the extension of the Global Coordination Mechanism (GCM) for non-communicable diseases (NCDs) by developing a workplan for the five functions for which the GCM is responsible. The plan will include a clear vision, results framework, performance and outcome indicators, and clarity on how the mechanism will carry out its functions in a way that is integrated with WHO’s ongoing work on NCDs.

The Assembly also approved an historic resolution on oral health. The resolution urges Member States to address key risk factors of oral diseases shared with other NCDs such as high intake of free sugars, tobacco use, and harmful use of alcohol, and to enhance the capacities of oral health professionals. Delegates asked WHO to develop a draft global strategy for tackling oral diseases for consideration by governing bodies in 2022.

With more than 420 million people living with diabetes around the world, the Assembly also agreed to a resolution urging Member States to raise the priority given to the prevention, diagnosis, and control of diabetes, as well as prevention and management of risk factors such as obesity. WHO was asked to make recommendations for strengthening diabetes monitoring and surveillance and on the prevention and management of obesity for consideration at the World Health Assembly in 2022.

### RESOLUTIONS

- **WHA74.4** Reducing the burden of non-communicable diseases through strengthening prevention and control of diabetes
- **WHA74.5** Oral health
- **WHA74.6** Strengthening local production of medicines and other health technologies to improve access
- **WHA74.14** Protecting, safeguarding, and investing in the health and care workforce
- **WHA74.15** Strengthening nursing and midwifery: investments in education, jobs, leadership, and service delivery

### REPORTS

- Integrated people-centered eye care, including preventable vision impairment and blindness
- Immunization Agenda 2030
- Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases: Mid-point evaluation
- Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases: Final evaluation
- Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases: Options paper
- Implementation of the 2030 Agenda for Sustainable Development
- Health Workforce: Working for health: five-year action plan for health employment and inclusive economic growth (2017-21)
- Committing to implementation of the Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-20)

### DECISIONS

- Follow-up of the political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases
- The role of the global coordination mechanism on the prevention and control of non-communicable diseases in WHO’s work on multi-stakeholder engagement for the prevention and control of non-communicable diseases
- Integrated people-centered eye care, including preventable vision impairment and blindness
- Global action on patient safety
With COVID-19 at the forefront of so many international discussions over the last year, there was great anticipation surrounding the release of “the 3 reports” from the Independent Panel for Pandemic Preparedness and Response, the Independent Oversight and Advisory Committee, and the International Health Regulations Review Committee, which reviewed WHO’s role in health emergencies, the WHO Health Emergencies Program, and the functioning of the International Health Regulations during COVID-19, respectively. Discussions on these topics under Pillar 2 took place over several days, dominating discussion throughout the week.

Member States agreed to meet again in November 2021, at a special session, to consider developing a WHO convention, agreement, or other international instrument to strengthen preparedness and response to future health emergencies. Member States also agreed on a resolution reaffirming WHO’s role as the directing and coordinating authority in health during emergencies and beyond, and to aid governments towards achieving resilient health systems and universal health coverage. Member States have been called upon to provide WHO with sustainable financing, while continuing their response to the pandemic and strengthening preparedness capacities. WHO also urged Member States to continue to strengthen their health workforce, research activities, and surveillance systems, while adopting a One Health Approach. Most importantly, Member States were asked to continue to work in a spirit of global cooperation, sharing reliable information, countering infodemics and stigmatization, and ensuring response efforts do not exacerbate other health challenges.

Countries have also shown that they are increasingly aware of the challenges surrounding mental health during a public health emergency. Delegates endorsed the Comprehensive Mental Health Action Plan 2013-2030, including the plan’s updated implementation options and indicators. For the first time, the plan includes an indicator on preparedness for providing mental health and psychosocial support during emergencies.

PILLAR 2:
One billion more people better protected from health emergencies
(Agenda items 17-21)

RESOLUTIONS

WHA74.7  Strengthening WHO preparedness for and the response to health emergencies

REPORTS

Independent Panel for Pandemic Preparedness and Response
WHO’s work in health emergencies: Strengthening preparedness for health emergencies: implementation of the International Health Regulations (2005)
Update on implementation of resolution WHA73.1(2020) on the COVID-19 response
Independent Oversight and Advisory Committee for the WHO Health Emergencies Program
Implementation of the International Health Regulations (2005)
Poliomyelitis eradication
Poliomyelitis post-certification

DECISIONS

Mental health preparedness for and response to the COVID-19 pandemic
Implementation of the International Health Regulations
Special session of the World Health Assembly to consider developing a WHO convention, agreement or other international instrument on pandemic preparedness and response
PILLAR 3:
One billion more people enjoying better health and well-being

(Agenda items 22-25)

The delivery of quality, people-centered health services, addressing the social determinants of health across the life course and creating an environment for healthy settings is a key goal of Pillar 3. With this in mind, the World Health Assembly adopted resolutions pertaining to the social determinants of health and ending violence against children. Achieving health equity requires the engagement and collaboration of all sectors of government, all segments of society, and all members of the international community. The Assembly reaffirmed that it is a national, regional, and global goal to address current challenges to address health inequities and better serve the health needs of every individual.
PILLAR 4: More effective and efficient WHO providing better support to countries

The proposed program budget for 2023 has four key areas of focus that reaffirm WHO’s commitment to accomplishing its mission: rethinking preparedness, readiness, and blistering response capabilities to health emergencies; building resilience by strengthening primary health care-oriented health systems, essential public functions and the health security nexus; getting back on track and accelerate progress towards the triple billion targets and those of the SDGs; and advancing WHO’s leadership in science and data.
OUR PRIORITIES

Key Post WHA Advocacy Calls to Action for Members States and Other Stakeholders

With WHA74 behind us, we must now look forward, even beyond the WHA special session on a pandemic treaty in November, and identify other fora (such as the UNGA, G20, O29 etc.) where global health advocates can reiterate our calls for more impactful, inclusive, and equitable public health strategies and policies. Below are ten calls to action GHC encourages its members to incorporate in their ongoing advocacy efforts to continue the political momentum WHA74 has created in defeating this pandemic and achieving our global health goals.

- Engage civil society meaningfully in governance processes and public health responses. Engaging affected communities in ongoing policy discussions is key to reaching underserved populations.
- Promote more streamlined, inclusive, and substantive engagement of NSAs in WHO processes. The grouping of agenda items in the WHA74 did not allow for NSAs to provide in-depth inputs on key health topics.
- Ensure sustainable financing for WHO, which includes more predictable and less earmarked funding of WHO activities.
- Empower and reform WHO to give it more authority, and be stronger and more responsive to global health emergencies.
- Increase financing for manufacturing, technology transfer, and distribution of vaccines and other COVID-19 tools to reach the last mile through the Access to COVID-19 Tools Accelerator (ACT-A) or bilateral investments. Current financing is not enough to reach the least resourced settings and most underserved populations to end this global health emergency.
- Implement a One Health approach that works across health and other sectors for a more holistic pandemic response.
- Ensure global health solidarity as the driving force to give it more authority, and be stronger and more responsive to global health emergencies. Let us apply these lessons learned to our future.
- Advocate for country-level policy changes in global health security to increase funding, and strengthen surveillance systems, reporting, and the health workforce.
- Ensure the world continues to respond to COVID-19 that we do not forget to prioritize other ongoing health problems, such as NCDs, malaria, HIV/AIDS, TB, cancer, eye health etc.
- Ensure that the pandemic treaty negotiations are transparent, that data is shared across all sectors, and that the process does not slow down ongoing pandemic responses.

Post-WHA Survey Recommendations

GHC conducted a post-WHA74 survey for the GHC delegation to give feedback about what went well and how we can improve and better meet the needs of our members pre- and post-WHA. We are grateful to all the delegates that provided their feedback and recommendations.

GLOBAL HEALTH COUNCIL IS COMMITTED TO MAKING THE FOLLOWING IMPROVEMENTS:

- Publishing and sharing robust daily email summaries highlighting the day’s proceedings with the delegation.
- Hosting pre-WHA discussions or webinars to help delegates prepare adequately for WHA, outlining expectations and providing an opportunity to ask questions.
- Hosting post-WHA survey and webinar to bring the community together and provide opportunities to recap the proceedings while setting a continuing agenda based on WHA outcomes.
- Providing GHC staff to serve as points of contact designated to offer member support when required.
- Honoring the process of creating statements and ensuring that GHC staff is tracking input to increase collaboration amongst the delegates.
- Using WHA as a networking opportunity to facilitate conversations among delegates with other NSAs and policy experts.

In addition to the preparatory work and the joint statement, the daily summary was terrific. I forwarded this to our leadership team and program directors every day and they found it very helpful. Having GHC policy experts monitoring the WHA and participating in the discussions was very useful. I appreciated that I could text [the GHC Director for Advocacy and Engagement] with questions and she responded quickly with the information I needed.

QUOTE FROM MEMBER
STATEMENTS

- Agenda Items 13.1, 13.5, and 13.8
  Global action on patient safety; antimicrobial resistance; Immunization Agenda 2030

- Agenda Items 13.2, 13.3, and 13.9
  Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases; expanding access to effective treatments for cancer and rare orphan diseases; integrated people-centered eye care

- Agenda Items 14, 15 and 16
  Health in the 2030 Agenda for Sustainable Development; health workforce; committing to implementation of the Global Strategy for Women’s, Children’s, and Adolescents’ Health (2016-2030)

- Agenda Items 17 and 18
  Public health emergencies: preparedness and response; mental health preparedness for and response to the COVID-19 pandemic

- Agenda Items 18, 20, and 21
  The public health implications of the Nagoya Protocol; enhancement of laboratory biosafety; poliomyelitis

- Agenda Items 22.1 and 23
  Social determinants of health; WHO global plan of action to strengthen the role of the health system within a national multisectoral response to address interpersonal violence, in particular against women and girls, and against children

- Agenda Items 26.2 and 26.3
  WHO transformation; WHO reform

- Agenda Item 34.1
  Progress reports

I think you did a great job. WHA is complex and the time zone difference, virtual setting and ever-changing rules made it very challenging to manage. The GHC really excelled - you added a lot of value to our organization and we appreciate all your hard work.

QUOTE FROM MEMBER

OUR STAFF

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FOR MORE INFORMATION, VISIT OUR WEBSITE: WWW.GLOBALHEALTH.ORG

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