KEY RECOMMENDATIONS:

LEADERSHIP AND GOVERNANCE
- WGPR should continue its work to obtain consensus on the tools to be used to implement the recommendations from the independent review panels/committees to strengthen WHO leadership and governance, including the initiation of a new instrument rooted in the WHO constitution, to drive coordination on global health security and governance.
- WGPR should continue to transparently engage non-state actors in ongoing deliberations regarding WHO strengthening.

Systems and Capacities at WHO
- WGPR should endorse and support elements of the Director-General's transformation agenda to benefit the organization's preparedness and response capacities.
- WGPR should acknowledge IHR system gaps, highlight the links between IHR reform efforts and broader efforts, and advocate for sustainable funding mechanisms for health security capacity building, especially at the country level.

Financing
- WGPR should align closely with the Working Group on Sustainable Financing to ensure that evolving emergency preparedness requirements are represented in ongoing discussions on WHO's long-term financing challenges.
- WGPR should collaborate with and support the Sustainable Financing Working Group in its goal of evaluating the feasibility of increasing assessed contributions, and flexible, un-earmarked funds.
INTRODUCTION

The WHO has played an indispensable role during the COVID-19 pandemic from establishing the global COVID-19 Supply Chain Bridge Facility to organizing the world’s first simultaneous global study of therapeutics and serology. While its response to COVID-19 has not been perfect, WHO has made great strides since the West African Ebola outbreak of 2013, becoming more nimble, coherent, and scientifically relevant. WHO’s response to this pandemic has proven that there is no alternative organization that is as inclusive, transparent, and willing to act equitably on behalf of all Member States.

Recognizing its value, all independent reviews of the current pandemic have called for strengthening WHO and better preparing the organization for future health threats. In its preliminary mapping of COVID-19-related recommendations from 11 sources, the WHO Working Group for Pandemic Preparedness and Response (WGPR) identified over 120 recommendations directed to the WHO secretariat and 56 directed to WHO governing bodies. While it is not feasible or advisable for the WGPR to focus on all of them, it is vital that the group holistically consider the recommendations to strengthen WHO’s pandemic preparedness and response capabilities and consider the merits of drafting a convention or other international instrument, rooted in the WHO constitution, to drive coordination on global health security and governance.

Alongside these deliberations, the WGPR should explore additional concrete solutions, utilizing a gender and intersectional lens. These solutions must be grounded in equity and human rights and should focus on improving leadership and governance, systems and tools, and financing.
LEADERSHIP & GOVERNANCE

The COVID-19 pandemic has revealed fundamental weaknesses in international norms and forums for cooperation. Some of these weaknesses – such as inequity in vaccine access – can be best solved by international agreements, not just relegated to voluntary efforts. It is important, therefore, that Member States explore the merits of an international instrument under Article 19 of the WHO constitution, with the purpose of clarifying responsibilities between states parties and international actors and providing a platform to commit to principles and practices that enhance pandemic preparedness and response. The WGPR should consider how a new instrument could codify a One Health approach, which includes a critical focus on pandemic prevention, to global health security and deliver a binding mechanism for equitable access to medical countermeasures. Further aspects for the instrument to address relate to equity, access, and benefit-sharing; long-term strengthening of health systems; and sustainable financing for WHO. A perishable window of opportunity exists to harness the political will to strengthen international norms for global health cooperation, and the WGPR is uniquely positioned to work with Member States to obtain consensus on pursuing such an agreement and to facilitate negotiation of treaty contents, should consensus be achieved.

Irrespective of the path forward on an international instrument, it is the responsibility of the WGPR to explore a full range of solutions to strengthen governance and leadership, including within the Executive Board and World Health Assembly. These solutions may include the establishment of a new Standing Committee on Emergencies, as recommended by the Independent Panel for Pandemic Preparedness and Response (IPPPR).
Such a standing body would need to have clear and achievable objectives to strengthen the governance capacity of the Executive Board by helping to align the organization’s performance in preparedness and response to emergencies with the expectations of Member States, and to provide more regular Member State input and oversight on key decisions when future health emergencies arise. Such a standing committee could also help guide and harmonize engagement on emergencies at different levels of the organization, including country offices, regional offices, and the WHO Health Emergencies Programme staff based in headquarters.

The COVID-19 pandemic has shown the value of robust engagement with civil society, non-state actors and private sector stakeholders, especially at the country level. In the context of future pandemics, more seamless and enabled cooperation with these sectors will complement and strengthen the leadership of Member States and the coordination of the secretariat. The near-final WHO-CSO Engagement Strategy, written in line with FENSA and following the recommendations of the WHO-Civil Society Task Team, will provide a useful roadmap for the WGPR to harness the assets and networks of civil society. Similarly, the WGPR should align with the guidance laid out in the forthcoming Private Sector Engagement Strategy. While safeguarding against conflict of interest remains paramount, in the context of this pandemic WHO has shown an appropriate level of deftness in tapping and leveraging innovative solutions, which should further be enabled. Each of these constituencies has unique characteristics that can extend the effectiveness and innovativeness of WHO. Functional partnerships with both sectors are critical enablers for robust preparedness and response to health threats.
SYSTEMS & CAPACITIES AT WHO

Implementing elements of the Director-General’s transformation agenda will bring important benefits for the organization’s preparedness and response capacities. Specifically, WHO must have the necessary resources, policies, and structures in place to attract, retain, and develop high-quality personnel to deliver on its mandate, including its expanding mandate on health emergencies. The WGPR should endorse and support staffing initiatives previously identified through the Director-General-led transformation agenda, such as reducing the average recruitment time, harnessing new digital tools to facilitate agile ways of working, enhancing career pathways, improving contracting modalities, closing the gender pay gap, and providing safe workplaces.

Since its establishment under the transformation agenda in 2019, the Science Division has generated and curated the data necessary to ensure the world can benefit from the best scientific evidence. The Science Division has been indispensable in contributing to a global understanding of COVID-19, and its treatment and prevention, including supporting the development of target product profiles to inform developers. These capacities are vital to assuring WHO’s eminence in the global health ecosystem and serve to reinforce connections between WHO’s global, regional, and country offices. In its deliberations, the WGPR should consider how to further capacitate the Science Division to affirm WHO’s role in setting norms and standards through science- and evidence-based practices. Though WHO is regarded as the world’s leading body for normative and technical guidance, there is a growing need to ensure that countries are supported to act upon the latest guidance.
In its independent review, the IHR Review Committee identified the need to strengthen countries’ compliance with the IHR, and for WHO to continue to provide guidance and technical support to countries to facilitate their integration of IHR core capacities. Enhancing the personnel capacities and scientific capabilities described above will provide a strong foundation from which to promote country-level accountability, whether through the newly proposed Universal Health and Preparedness Review or by improving performance on Joint External Evaluations. With WHO’s support, countries will be better equipped to regularly monitor and measure progress and identify persistent and new gaps, which in turn helps relevant actors prioritize funding needs. Improving structures that encourage greater accountability and compliance across the international community will depend on a strong WHO that has the resources, guidelines, and coordinating capacity within individual countries. This includes working to ensure funding availability to rectify noted system gaps, emphasizing the links between IHR reform efforts and broader efforts, to create sustainable funding mechanisms for health security capacity building. Specifically, efforts to strengthen the International Health Regulations (IHR 2005) with targeted amendments, improved implementation, and robust tools are welcomed. Recognizing the broad uptake of the IHR among 196 countries, targeted amendments are needed to improve compliance with the IHR, including those related to a Public Health Emergency of International Concern (PHEIC) mechanism and global coordination. WHO’s work at the national level should support efforts to improve interpretation of the IHR, thereby strengthening coordination and capacity.

It is paramount that WHO systematically pursue strategies to protect the workforce and local communities from sexual exploitation, abuse, and harassment. The WGPR should urgently and unequivocally endorse the full adoption and rapid operationalization of the three pillars outlined in the WHO Management Response Plan, and the WGPR should encourage ongoing accountability to Member States as well as external stakeholders.
In order to set realistic goals to strengthen WHO’s preparedness and response capacities, costing and financing options must be carefully considered. As diverse actors across the ecosystem deliberate new mechanisms to fund pandemic preparedness and response, the WGPR should align closely with the Working Group on Sustainable Financing to ensure that evolving emergency preparedness requirements are represented in ongoing discussions on WHO’s long-term financing challenges. Reasonable efforts should be made by the WGPR to collaborate with and support the Sustainable Financing Working Group in its goal of evaluating the feasibility of increasing assessed contributions, and flexible, un-earmarked funds. At the same time, the WGPR should strive to ensure that newly-envisioned measures for a stronger WHO do not come at the expense or neglect of existing programs.
CONCLUSION

Without bold action today to strengthen WHO in its work in health emergencies and pandemic preparedness, a leadership vacuum may emerge, leaving other actors to design global health security solutions that may be less inclusive, transparent, and equitable than WHO. Discussions of this nature are already happening outside WHO’s governance sphere. There is a limited window of opportunity to strengthen WHO, and the WGPR is best positioned to effect lasting change in how the organization equips itself to handle complex global health emergencies in the 21st century. Non-state actors are a critical partner to WHO and the WGPR and should be meaningfully engaged in deliberations. The undersigned non-state actors in official relations with WHO stand ready to continue to support the Bureau as it deliberates, adopts, and implements recommendations for strengthening WHO.