

**Statement to the resumed 73<sup>rd</sup> World Health Assembly by the Chair of the Review Committee on the Functioning of the International Health Regulations (2005) during the COVID-19 Response, Professor Lothar H. Wieler, President of the Robert Koch Institute, Germany**

Statement delivered during the first session of Committee A of the resumed 73<sup>rd</sup> World Health Assembly, on 9 November 2020

Honorable Minister, Excellencies, Director-General, Chair of the Committee A, Ladies and Gentlemen

1. Thank you for the opportunity to provide you with an update on the work of the Review Committee on the functioning of the International Health Regulations (2005) during COVID-19.
2. This Committee was convened by the Director-General on 8 September 2020, following up on the request of Member States in the World Health Assembly Resolution WHA73.1, and in line with Article 50 of the International Health Regulations (2005). The Committee is composed of 21 members selected and nominated by the Director-General from the IHR Roster of Experts, comprising a wide range of expertise and with adequate gender and geographical representation. I have the privilege and honour to be elected Chair of this Committee, and grateful to be supported by the elected Vice-Chair Professor Lucille Blumberg from South Africa and the elected Rapporteur Professor Preben Aavitsland from Norway.
3. The mandate we were given is to review the functioning of the International Health Regulations (2005) during the COVID-19 response, to review the status of implementation of the relevant recommendations of previous IHR Review Committees, and ultimately to make technical recommendations to the Director-General regarding the functioning of the Regulations and possible needs for amendments.
4. We convened for 9 closed meetings so far, and we also convened 3 open meetings, when we provided updates on our work and listened to the submissions and questions raised by Member States, international agencies and non-governmental organizations in official relation to WHO. These open meetings were attended by more than 100 designated representatives. I also reported on our initial work and progress to the Executive Board on 6 October.
5. We currently work mainly through three sub-groups: preparedness, alert, and response. The sub-groups meet weekly for deliberations and interviews, and they report back to the weekly plenary meeting. Let me take the opportunity to thank the Committee members who act as sub-group leads, Dr Okwo-Bele, Dr Salter and Professor LeDuc.

6. Key questions we are addressing include:

On preparedness:

- a) Do the current tools for IHR core capacities assessment and monitoring – such as SPAR, the State Party Self-Assessment Annual Reporting Tool, and Joint External Evaluations – cover all the necessary capacities, including those required at subnational levels?
- b) How can the current tools for preparedness assessment and monitoring better help countries to implement a more effective response? How can universal peer reviews be used to help improve IHR implementation?

On alert:

- c) How was information shared during the early days of the outbreak under the IHR? Does WHO need a stronger and clearer mandate to react if information is not provided by States Parties; if yes, how should this be implemented?
- d) Is the determination of a Public Health Emergency of International Concern and the consequences of declaring it clearly understood? What would be the advantages/disadvantages of an intermediate level of alert?

On response:

- e) How did WHO and States Parties implement their obligations with regard to additional health measures in relation to international traffic?
- f) How are the current mechanisms of collaboration and coordination for global outbreak response functioning and how can they be improved, especially with regard to timely and transparent data sharing?

7. Preliminary findings include:

- a) Preparedness assessment and monitoring as well as core capacities need to be further examined in light of the observed performance in the response of many Member States. A universal peer-review mechanism such as that used in human rights reviews may be useful.
- b) Both official information as well as information through media, social media and rumors are useful surveillance information. IHR provisions for notification and verification of information for events need to be further examined to understand the reluctance of some countries for early reporting and the need for incentives or other approaches to ensure better compliance.
- c) WHO-provided Rapid Risk Assessments for events that may pose a risk of international spread are of utmost importance.
- d) The meaning and consequences of Public Health Emergencies of International Concern have to be fully understood by Member States and inter- as well as supranational

institutions. The relevance of an intermediate level of alert to prevent a PHEIC from occurring, and options for its implementation, need to be also clearly examined.

- e) Implementation of travel restrictions at the national level was widespread. The role of WHO in relation to travel recommendations as well as incentives for States Parties to comply with their obligations related to travel measures need to be further examined.
  - f) Strong support for the current mechanisms for global outbreak alert and response as well as adequate national legislation are key to strengthen the response to global public health risks. The authority of National IHR Focal Points is critical to ensure rapid communication and coordination.
  - g) What also became very clear during our work so far, and looking beyond just the IHR, both strong public health as well as health care systems are needed for effective response.
8. Beside the work in the sub-groups we have started to organize our work around issues that are not addressed in the sub-groups or are relevant for more than one sub-group. These include:
- a) The overarching question of whether the IHR are fit for purpose. Are there challenges in their design or in their implementation that raised concerns during the COVID-19 response?
  - b) Issues of financing at the national and international level, especially for preparedness, as well as the functions and effectiveness of IHR governance bodies and mechanisms.
  - c) Conducting an article-by-article analysis to ensure a systematic review and identify whether any amendments may be required.
  - d) And examining the progress made on implementing the recommendations of previous Review Committees to refine our own recommendations.
9. In our work, we have considered closely the submissions of Member States and other representatives, and will continue to do so.
10. So far, we have interviewed the Chairs of former Review Committees and Chairs of former or current Emergency Committees, WHO staff from Headquarters, some regional and country offices, some National IHR Focal Points, and a number of experts in the field. Many more interviews are planned. We have also requested our Secretariat to commission a number of analysis and literature reviews.
11. We are also discussing on a regular basis with the Chair of the Independent Oversight Advisory Committee and the Co-Chairs of the Independent Panel for Pandemic Preparedness to exchange findings and align our respective scopes of work and mandates.
12. Our next open meeting is planned for 8 December and we plan to have an interim report ready for the Executive Board session in January. The deadline for our final report is the 74<sup>th</sup> WHA in May 2021. However, as we all know this is an unusual process, since the review process is happening while the event under review is still unfolding, and we may not have a definite set of recommendations until the pandemic ends.

13. Let me remind us, that we are a technical expert group. We make recommendations to the Director-General, and if we see that amendments may be required for the IHR to function more effectively, we will make such recommendations to the Director-General. But whether these amendments are made or not to the IHR is a prerogative that sits entirely with Member States.
14. Lastly, let me emphasize one thing: we very much welcome the interactions with Member States during our open meetings and encourage all of you to share with us your ideas, suggestions and proposals at any time. The IHR are your instrument, our instrument, of international public health law. It is incumbent on us to make it work for all of us to better prepare and protect humanity against public health risks, through an effective, coordinated, multisectoral and evidence-based public health response, while being mindful of the potential consequences that such response may have on other sectors.
15. Thank you again for the opportunity to speak to you today and let me also thank the Director-General for the excellent support provided by the WHO Secretariat to this Review Committee.
16. And one last word of inspiration for us all, on a grey and misty day like today: “Believe that further a shore/ Is reachable from here”.