WHA TODAY
A CIVIL SOCIETY PERSPECTIVE ON THE 70TH WORLD HEALTH ASSEMBLY

WHAT'S ON THE AGENDA - AND WHAT'S BEHIND IT

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WHA TODAY is an informal update produced by a team of civil society organizations watching and critically commenting the World Health Assembly (WHA70), with a focus on civil society analysis and input to the WHA. Sources are indicated and links provided as a convenience; the editors bear no responsibility for the accuracy of the external sites.

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In this section of WHA Today, we provide documents, analysis, background information and civil society input on selected agenda items, in particular on those for which non-State actors in official relations with WHO are allowed to submit statements. Routine items such as the Opening of the World Health Assembly and its Committees are not covered. For civil society analysis and input on the election of the WHO Director-General, please refer to the section “World Health Assembly: Analysis, reports, stories” of today’s and tomorrow’s issue.

4. PREPAREDNESS, SURVEILLANCE AND RESPONSE

12.1 HEALTH EMERGENCIES

SCHEDULED
- Monday, 22 May 2017
  First meeting of Committee A

WHA DOCUMENTS
- A70/8
  Second Report of the Independent Oversight and Advisory Committee for the WHE.
- A70/9
  The Secretariat report on WHO’s response in severe large-scale emergencies in 2016.
- A70/10
  Research and development for potentially epidemic diseases.
- A70/11
  Health workforce coordination in emergencies with health consequences.

IN FOCUS
In the wake of the West African Ebola outbreak of 2014, a special session of the WHO Executive Board was held in January 2015 to discuss the WHO’s response to this health emergency and how it can be improved for future outbreaks.

As it emerged, the reform of WHO’s emergency preparedness comprised three main components: the contingency fund, provisions for a more systematic approach to deploying an emergency workforce, and a new health emergencies program (WHE) within WHO.

The aim is to enable WHO to respond more effectively to outbreaks and emergencies, whilst maintaining its role of providing technical and normative support for Member States. An Independent Oversight and Advisory Committee (IOAC) was formed and they presented their first report to the Executive Board in January 2017. They noted improvements in emergency response at country level. Of concern however were administrative systems and business processes which were not effectively supporting operations as well as a funding shortage with less than a third of the target funds having been raised for the contingency fund.

The Update prepared for the 2016 funding dialogue provides a very useful summary of the elements of the Program and how it works.

Clause 5 of A69(9) requests the Director-General to report to the Seventieth World Health Assembly on progress made and experience gained in establishing and operationalizing the Health Emergencies Programme. Agenda item 12.1 is comprised of 4 subtopics which correspond with the documents submitted by the Secretariat – see above.

- Read more: PHM Commentary

SELECTED WHO WEBSITES
- WHO in emergencies
- WHO Reform: Emergency Capacities

SELECTED CIVIL SOCIETY ANALYSIS AND STATEMENTS
“The need for emergency preparedness, response and recovery is huge. The humanitarian crises described in A70/9 are dreadful. The Health Emergencies reform was well conceived and appears to be have been implemented well. However, the IOAC has pointed to key vulnerabilities:
• the abysmal shortfall in funding for all three channels: core, appeals and for the Contingency Fund;
• hundreds of unfilled positions;
• need for greater flexibility and responsiveness in a range of administrative functions.

PHM appreciates the progress with respect to R&D for potentially epidemic diseases. It will be critical to ensure continuing attention to the needs of LMICs especially as regards affordable prices for all health products, benefit sharing and technological development.

PHM urges professional and civil society organisations to voice their support for full funding of the contingency fund and for full (untied) funding the core and operational costs of the Health Emergencies Programme.”

• People’s Health Movement
  Quoted from: PHM Commentary

“The WMA welcomes the WHO report of activities in response to major emergencies worldwide. As health professionals, we are alarmed not only by the number and severity of emergencies, but also by the fact that increasingly healthcare workers and facilities are becoming target of attacks in conflict situations, in flagrant violation of international humanitarian and human rights law. We urge those involved in ongoing conflicts to protect civilians as well as healthcare capacities and to respect the ethical obligation of health personnel to treat all patients, irrespective of who they are. We call for the full implementation of the Ethical Principles of Health Care in Times of Armed Conflict and other Emergencies endorsed by civilian and military health-care organizations in 2015. We urge Governments to fulfill their obligations under international human rights and humanitarian law.”

• World Medical Association
  Quoted from: WMA statement on 12.1.2

“MSF supports WHO having a leading role in efforts to improve R&D for potentially epidemic diseases, including through implementation of the Blueprint. As a medical humanitarian organization, we hope the Blueprint can help deliver the tools needed to respond to future epidemics.

We welcome WHO’s commitment to policy coherence across R&D work. As such we ask WHO to provide greater transparency on how plans to develop new medical tools for MERS and Zika will ensure these are affordable and accessible, and how intellectual property and data will be shared and managed in line with GSPOA and CEWG and building on lessons from the Pandemic Influenza Preparedness Framework.

Efforts to establish a ‘Global Coordination Mechanism’ and formulate principles and practices collaboratively with other entities, including MSF, are welcome. We stress that such efforts must ultimately derive from a transparent and inclusive intergovernmental process, and align with the principles committed to at WHO, including those introduced under the CEWG. Governance of such a GCM must be led by WHO and Member States, not non-State actors, foundations or think-tanks.”

Médecins Sans Frontières International
Quoted from: MSF statement on 12.1.3

• WHA Documentation: Statements by non-State actors in official relations with WHO
12.4 IMPLEMENTATION OF THE INTERNATIONAL HEALTH REGULATIONS (2005)

SCHEDULED FOR
- Monday, 22 May 2017
  First meeting of Committee A

WHAr DOCUMENTS
- A70/15
  Annual report on the implementation of the International Health Regulations (2005)
- A70/16
  Implementation of the International Health Regulations (2005): Global implementation plan

IN FOCUS
International Health Regulations (IHRs) outline the obligations of nations during epidemics of infectious diseases. These were revised and adopted in 2005 following the SARS epidemic with new obligations for states to put in place the core capacity needed for their implementation.

The annual report on the implementation of the IHRs (A70/15) reviews the ‘public health emergencies of international concern’ in the past year, the work of emergency committees, the Review Committee on the role of the IHRs in the Ebola outbreak and progress in the implementation of the IHRs. The Review Committee recommended the development of a 5 year Global Strategic Plan to improve Public Health Preparedness and Response. The guiding principles are outlined in this document.

The draft global implementation plan for the WHA’s consideration. The draft global implementation plan (A70/16) identifies six areas of action with a useful summary of the proposed plan in the annex.
- Read more: PHM Commentary

SELECTED WHO WEBSITE
- International Health Regulations (IHR)

SELECTED CIVIL SOCIETY ANALYSIS AND STATEMENTS
“We welcome WHO’s efforts to implement IHR 2005. The draft implementation plan is sensible and practical. The extended time frame for implementation and the emphasis on the need to mobilise financial support for vulnerable countries are appreciated.

However, we are concerned that the initial idea of IHRs has become increasingly interpreted as a matter of global health security. This interpretation is particularly focused on the protection of wealthy countries from outbreaks spreading from LMICs. Such an interpretation, however, results in an additional and unfair burden on LMICs, who face different opportunity costs due to their already fragile health systems.

We would like to remind the WHO and Member States that IHRs should be based on principles of solidarity. Instead of a narrow focus on surveillance, the implementation of IHRs should be accompanied by measures to strengthen the capacity of health systems in LMICs. Fragile health system should not be further undermined through onerous conditions placed on them as a requirement for the implementation of IHRs. IHRs need to be viewed as global public goods and their implementation needs to include support to LMICs, including financial support and technology transfer, directed at building capacity of health systems. The proposed ‘conceptual framework’ on the links between IHR capacity building and health system strengthening will be very useful.

The rapid sharing of information, as envisaged in the global implementation plan needs to be accompanied by benefit sharing mechanisms. Finally, it is a matter of concern that WHO’s Health Emergencies Program continuous to be seriously underfunded, and the major donors of the WHO need to address this urgently.”

- Medicus Mundi International Network
- People’s Health Movement
  Quoted from: MMI statement

- WHA Documentation: Statements by non-State actors in official relations with WHO
In this section, we provide an overview of meetings taking place during the 70th World Health Assembly at the Palais des Nations and in town: Technical Briefings organized by the WHO Secretariat and open to WHA delegates (source: WHA Journal); meetings at the Palais des Nations organized by WHO Member States and open to WHA delegates (source: WHA Journal), side events at the Palais des Nations organized by non-State Actors in official relations with WHO (source: WHO Secretariat); other meetings taking place in the WHA week organized by various actors.

For events at the Palais des Nations, WHA registration (badge) is required. Send your announcements and abstracts to: info@g2h2.org

MONDAY 22 MAY 2017

08:00-10:00 hrs
Hotel Intercontinental
GETTING DOWN TO BUSINESS ON GLOBAL HEALTH SECURITY
Organizers: GHSA Private Sector Roundtable, Harvard Global Health Institute
Announcement: website

12:45–14:15 hrs
Palais des Nations, Room IX
WHA MEETING: GEARING UP TOWARDS SUSTAINABLE HEALTH DEVELOPMENT BY 2030: ARE WE WALKING THE TALK?
Organizers: Delegations of Bangladesh, the Islamic Republic of Iran, Thailand and the Bolivarian Republic of Venezuela.
Announcement (no details): WHA Journal

12:45–14:15 hrs
Palais des Nations, Room XXIII
WHA MEETING: REFORMING THE WORK OF WHO IN THE AFRICAN REGION – THE TRANSFORMATION AGENDA
Organizers: Delegation of Botswana
Announcement (no details): WHA Journal

12:45–14:15 hrs
Palais des Nations, Room XXIV
WHA MEETING: ATTACKS ON HEALTHCARE. WHERE DO WE STAND ONE YEAR AFTER THE ADOPTION OF UNITED NATIONS SECURITY COUNCIL RESOLUTION 2286?
Organizers: Delegations of Brazil, Canada, Costa Rica, Finland, Italy, the Netherlands, New Zealand, Norway, Slovakia, Spain, Switzerland, Uruguay, the International Committee of the Red Cross and Red Crescent Societies, Médecins Sans Frontières International (MSF) and the World Medical Association.
Announcement (no details): WHA Journal

16:00-18:00 hrs
Club Suisse de la Presse
ENABLING GLOBAL HEALTH SECURITY THROUGH HEALTH SYSTEMS STRENGTHENING. PERSPECTIVES FROM WOMEN LEADERS
Organizers: RM, MSH, USP, GHC
Announcement: website
16:00-16:45 hrs
Live broadcast
**WORLD HEALTH + SocialGood**
Organizers: WHO, UN Foundation, +SocialGood
Announcement: website

17:45-18:45 hrs
Palais des Nations, Room IX
**WHA side event: Responding to the Challenge of Antimicrobial Resistance (AMR) – Perspectives of Civil Society, Intergovernmental Organizations and Developing Countries**
Organizers: MSF, DNDi, HAI, MMI
With the support of the South Centre and ReAct
WHO overview of official WHA side events organized by non-state actors: website

"The WHO has led the way for increased global awareness and collaboration to address the crisis on antimicrobial resistance (AMR). The United Nations Political Declaration on AMR, which was approved in September 2016, highlights the need for increased cooperation among multiple stakeholders, including civil society, for effective global action. It is for this reason that Médecins Sans Frontières (MSF); Drugs for Neglected Diseases initiative (DNDi); Health Action International (HAI); Medicus Mundi International Network (MMI) together with the South Centre would like to hold a side event during the World Health Assembly where civil society, intergovernmental organizations and developing countries can share experiences and explore issues around access, R&D and stewardship to ensure a strong public interest perspective and to reaffirm the important role that non-state actors play in ensuring that AMR issues are adequately addressed." (Source: organizers)

18:00-19:30 hrs
Hotel Intercontinental
**Success Factors for NCDs: Pathways to Accelerate Progress**
High-level event followed by a reception
Organizer: NCD Alliance
Announcement: website

19:00-20:00 hrs
Palais des Nations, Room IX
**WHA side event: Investing in Innovative Health R&D tools to address antimicrobial resistance and achieve Sustainable Development Goals**
Organizers: MMV, Cohred, GHC
WHO overview of official WHA side events organized by non-state actors: website
Specific announcement: not available

17:45–19:15 hrs
Palais des Nations, Room VIII
**WHA meeting: Launch of the report and recommendations of the Working Group for the Health and Human Rights of Women, Children and Adolescents**
Organizers: Delegations of Australia, Canada, Chile, Fiji, Finland, France, the Netherlands, Pakistan, Sweden and Uruguay, WHO, UNHRC
Announcement: Download

17:45–19:15 hrs
Palais des Nations, Room XXIII
**WHA meeting: The International Health Regulations (IHR) and the impact of the Global Health Security Agenda: achieving results and sustaining progress**
Organizers: Delegations of Canada, Finland, Indonesia, Italy, Japan, Kenya, the Netherlands, Republic of Korea, Saudi Arabia and the United States of America.
Announcement (no details): WHA Journal

17:45–19:15 hrs
Palais des Nations, Room XXIV
**WHA meeting: Development of new technologies to prevent future health crises: the role of the Coalition for Epidemic Preparedness Innovations (CEPI).**
Organizers: Delegations of Germany, Japan, Norway, Rwanda and the United States of America.
Announcement (no details): WHA Journal

- WHA meetings and side events:
  Overview in: G2H2 Agenda
08:00-9:30 hrs  
Hotel Intercontinental
**ACCESS TO DIABETES MEDICINES AND CARE IN UNDERSERVED POPULATIONS: PATIENT, HEALTH WORKER, GOVERNMENT AND MULTILATERAL PERSPECTIVES ON POLICY**
Organizers: International Diabetes Federation  
Announcement: [website](#)

08:00 hrs  
Restaurant Vieux Bois
**BETTER MEDICINES FOR CHILDREN**
Organizers: NCDChild, American Academy of Pediatrics, International Pediatric Association  
Announcement: not available

12:00–14:00 hrs  
Ecumenical Centre
**NGO F4H ANNUAL ASSEMBLY**
Organizers: NGO Forum for Health  
Details: not available

12:00–13:00 hrs  
Ecumenical Centre
**BIOOTHERAPEUTICS & THE NEXT 70 YEARS: DELIVERING ON THEIR POTENTIAL FOR PATIENTS GLOBALLY**
Organizers: IFPMA and IAPO  
Registration form: not available

12:00–14:00 hrs  
Press Club
**PRIORITIES FOR THE NEXT WHO DIRECTOR-GENERAL**
Organizers: GHC, MSH and partners  
Announcement: [website](#)

12:15–13:45 hrs  
Palais des Nations, Room XII
**WHA meeting: THE ROLE OF REGULATORS IN GLOBAL HEALTH EMERGENCIES**
Organizers: Delegations of Australia, Brazil, Canada, China, Ireland, Japan, Mexico, the Netherlands, Singapore and the United States of America  
Announcement (no details): [WHA Journal](#)

12:15–13:45 hrs  
Palais des Nations, Room XXIV
**WHA meeting: STRONGER NATIONAL HEALTH SYSTEMS UNDERPINNING STRONGER HEALTH SECURITY**
Organizers: Delegations of Australia, Indonesia, Mexico, Republic of Korea, the Philippines, Turkey and the United Republic of Tanzania  
Announcement (no details): [WHA Journal](#)

13:30-15:00 hrs  
Maison de la Paix
**TRANSPARENCY FOR INNOVATION AND ACCESS TO MEDICINES: WHAT ARE THE BENEFITS & RISKS, OBSTACLES & SOLUTIONS?**
Organisers: Global Health Centre, together with FIND  
Announcement: [website](#)

15.00-17.00 hrs  
Maison de la Paix
**AGAINST ALL ODDS: STRENGTHENING HEALTH SYSTEMS TO BETTER SERVE VULNERABLE WOMEN AND CHILDREN: PERSPECTIVES FROM WOMEN LEADERS**
Organizer: MSH, GHC, USP  
Announcement: not available

16:00-18:00 hrs  
Club Suisse de la Presse
**AGAINST ALL ODDS: STRENGTHENING HEALTH SYSTEMS TO BETTER SERVE VULNERABLE WOMEN AND CHILDREN: PERSPECTIVES FROM WOMEN LEADERS**
Organizer: MSH, GHC, USP  
Announcement: not available

16:00-18:00 hrs  
UN Library Events Room (B-135)
**HOW TO ENSURE AGEING WITH DIGNITY (ROUNDTABLE)**
Organizer: CSEND  
Announcement: not available
17:00-18:30 hrs
Hotel Intercontinental
*WITH A RAPIDLY AGEING GLOBAL POPULATION, HOW CAN WE TACKLE SEVERE HEARING LOSS TO HELP KEEP GLOBAL HEALTHCARE SYSTEMS SUSTAINABLE?*
Followed by cocktail reception
Organizer: Hearing, Comprehensive Hearing Implants, MED-EL
Announcement: not available

18:00-20:30
Hotel Intercontinental
**PARTNERS FOR BETTER HEALTH**
Organizer: GE Foundation and Partners
Announcement: not available

- WHA meetings and side events:
  Overview in: G2H2 Agenda
**70TH WORLD HEALTH ASSEMBLY: ANALYSIS, REPORTS, STORIES**

In this section, we publish reports and stories related to the World Health Assembly and we feature analysis of the WHO, the World Health Assembly and global health policy and governance issues contributed or proposed by civil society colleagues. Send your input (abstract and link) to: info@g2h2.org.

The WHO we want and the leadership WHO needs

“Member States of the World Health Organization (WHO) are about to elect a new Director General (DG) to lead the organisation in a world characterized by mounting challenges with profound health implications – political uncertainty, growing nationalism and shrinking democratic space, climate change from widespread pollution, wealth concentration and rising inequalities within and between countries, incoercible migration flows, structural violence, among others. The WHO Executive Board who met from 23 January to 1 February shortlisted three candidates, one of whom will be elected DG for the next five years, through a secret ballot at the upcoming World Health Assembly in May.

As civil society organizations (CSOs), we have no direct role in deciding who will lead the WHO into this uncertain future. Yet, we are fully aware that actions of the new DG will have an impact on everyone. This scenario makes the question as to what criteria will determine the result of the vote a compelling one. Will WHO Member States make their choice based on the public institutional needs of the organization and the merits of the candidate? Or will the great game of geopolitics and other policy interests and motives play a determining role?

WHO is at a crossroads: at stake are its credibility, legitimacy, and capacity to play the directing role in matters of international health. We call on governments to select the future DG based on objective consideration of the candidate’s vision of the common good and the public interest. We ask member states to scrutinize each candidate’s individual capacity to tackle the requirements of the organization. This means carefully screening the future Director General through the lens of public health, orientation towards global health equity, and ability to reclaim the role of the WHO as the principal authority to direct and coordinate global health.
The WHO we want

- Has a strong and credible leadership in global health, takes a human rights-based approach, and promotes comprehensive primary care;
- Is a leading voice for Health for All among international and multilateral actors and takes a bold pro-public health stand vis-à-vis potentially harmful actions pursued by other entities, such as in the field of Access to Essential Medicines and Intellectual Property Rights;
- Is well governed across the three levels of the organization, with clear and coherent processes of transversal interaction across relevant departments on specific topics, and with rigorous procedural transparency;
- Sets priorities and decides on strategy implementation from a global public health perspective, rather than being guided by individual donor interests and priorities;
- Reinvigorates Member States’ protagonism and commitment to public health, including by providing sufficient non-earmarked contributions and adequately protecting the organization from the influence of private interests;
- Has the capacity to play its fundamental norm setting role by harnessing solid scientific and biomedical research and providing sound guidance to Member States in detecting potential health risks, using contextually effective tools and strategies;
- Affirms the relevance of its status as the world’s highest health authority and policy setting body, using this unique prerogative through its resolutions and binding instruments to fulfil Article 19 of its Constitution. WHO must be prepared to support governments to implement key WHO decisions and priorities as binding legislation, and, where necessary, to stipulate that certain standards must prevail over trade rules or other commercial/financial interests;
- Recognizes and embraces public-interest civil society organizations, recognizing the value of their role in fulfilling Article 1 of its Constitution (the “attainment by all peoples of the highest possible level of health”) in their interaction with Member States at various levels.”

The civil society message “The WHO we want and the leadership WHO needs” was drafted as a follow-up to the civil society strategy meeting “WHO Governance: Many open questions” on 21 January 2017. The message and a list of 39 endorsing organizations were published on 6 March 2017.

- The WHO we want and the leadership WHO needs: www.g2h2.org/posts/nextDG

PHM: WHO Tracker

“The People’s Health Movement is delighted to advise the launch of PHM’s new tool for following debate in WHO governing bodies: the WHO Tracker.

This WHO Tracker has been developed as part of WHO Watch. WHO Watch is sponsored by a group of international NGOs and social movements including the People's Health Movement (PHM). PHM follows closely the work of WHO, through the World Health Assembly, the Executive Board and the regional committees.

PHM prepares commentaries on agenda items at WHO governing body meetings, including brief background and critical commentary. In association with Medicus Mundi International, PHM members also read statements to governing body meetings.

The WHO Tracker has been developed as a tool for following particular issues across time and across the governing body meetings. The Tracker comprises separate pages for each meeting, in each case structured around the official agenda. Under each agenda item are links to key documents, debate and policy decisions. Not all meetings and not all items have been fully linked at this time. This work is ongoing.”

- PHM: WHO Tracker
  http://www.who-track.phmovement.org
WHA70 in the Media

“Longest, biggest World Health Assembly ever set to open with election, budget topping agenda”

“The 70th World Health Assembly opening in a few days is the WHA of superlatives, according to a World Health Organization’s official. It is the longest assembly ever, with nine days of meeting, the largest number of delegates, of agenda items, and of documents. It is also when the new WHO new director general will be elected, and when the WHO next budget is expected to be approved. Timothy Armstrong, director of the WHO Department of Governing Bodies, gave an introduction to the WHA during a press briefing today, which ended up being largely focused on the election process and why Taiwan has not been invited this year, a first since 2009.”

- IP Watch, 12 May 2017: Source

Healthier, fairer, safer: the global health journey 2007–2017

“This independent report, commissioned by WHO and written by Sir Liam Donaldson, reflects on the trends, achievements and challenges in global health over the past decade during which Dr Margaret Chan has been Director-General of WHO. It discusses the role of WHO in dealing with such issues as the rise of noncommunicable diseases, leaps in life expectancy, and emerging threats like climate change and antimicrobial resistance.”

- WHO report, 2017: Source

Key WHO resources

“The World Health Assembly is the decision-making body of WHO. It is attended by all WHO Member States and focuses on a health agenda prepared by the Executive Board. The main functions of the World Health Assembly are to determine the policies of WHO, appoint the Director-General, supervise financial policies, and review and approve the proposed programme budget. The World Health Assembly is held annually in Geneva, Switzerland.” (WHO)

- WHA Overview and reports http://www.who.int/mediacentre/events/2017/wha70/en/
- Live Webcast and recordings http://www.who.int/mediacentre/events/2017/wha70/webstreaming/en/
- Documentation including agenda and daily WHA Journal http://apps.who.int/gb/e/e_wha70.html

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