

Ebola: Ending the current outbreak, strengthening global preparedness and ensuring WHO capacity to prepare for and respond to future large-scale outbreaks and emergencies with health consequences

Draft resolution proposed by Algeria, Australia, Bangladesh, Benin, Brazil, Canada, Chile, China, Cuba, Egypt, Georgia, Guinea, India, Indonesia, Israel, Jamaica, Japan, Liberia, Mauritius, Mexico, Monaco, Morocco, Nigeria, Norway, Panama, Peru, Senegal, Sierra Leone, South Africa, Switzerland, Thailand, Togo, United States of America, Uruguay, Zambia, Zimbabwe, and European Union Member States

The Executive Board,

Having considered the reports on WHO's response to the Ebola virus disease outbreak,¹

(PP1) Deeply concerned by the 21 831 cases and 8 690 deaths reported to date and the continuing infections and deaths in affected countries, as well as the potential risk of spread to neighbouring countries and beyond;

(PP2) Emphasizing the need for Member States² and other relevant actors to extend urgently all possible means of support to the affected and highly at-risk countries to end the Ebola outbreak, and stressing the importance of evidence-based responses and community engagement to prevent fear, stigma and discrimination;

(PP3) Reaffirming the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being and reiterating its determination to take further action on social determinants of health;

(PP4) Recognizing that the current outbreak demonstrates once again the urgency for all countries of having strong resilient and integrated health systems capable of fully implementing the International Health Regulations, and having the capacity for health-related emergency preparedness and progress towards universal health coverage that promotes universal, equitable access to health services and ensures affordable, quality service delivery;

¹ Documents EBSS/3/2, EBSS/3/3, EBSS/3/INF./1–5.

² And, where appropriate, regional economic integration organizations.

(PP5) Recalling resolution WHA64.10 on Strengthening National Health Emergency and Disaster Management Capacities and the Resilience of Health Systems, which reaffirms, inter alia, that countries should ensure the protection of health, safety and welfare of their people and should ensure the resilience and self-resilience of the health system, which is critical for minimizing health hazards and vulnerabilities;

(PP6) Committed to an effective and coordinated response both for the current Ebola crisis and to make the corrective changes needed to prevent, detect and contain future outbreaks, and reaffirming the central and specialized role played by WHO in emergency preparedness and response, including in health emergency situations as described in WHA resolutions 54.14, 58.1, 59.22, 64.10, 65.20 and 65.23;

(PP7) Recalling WHA Resolution 65.20, which affirms WHO's role as the health cluster lead in responding to the growing demands of health in humanitarian emergencies, and recognizes the specific requirements for effective health-related emergency operations;

(PP8) Recalling that the WHO Emergency Response Framework has so far been the basis for WHO's role, responsibilities and work in all emergencies with public health consequences;

(PP9) Reaffirming WHO's responsibilities under the International Health Regulations;

(PP10) Noting that an effective response during an outbreak requires all levels of the organization to continually adapt and adjust resource allocation, methods of work and information practices, with a clear focus on results;

(PP11) Emphasizing in this respect that the response at all levels of WHO must be guided by an all-hazards health emergency approach, emphasizing adaptability, flexibility, accountability, principles of neutrality, humanity, impartiality, and independence, and predictability, timeliness, and country ownership, and building on effective collaboration within its mandate with other relevant actors;

(PP12) Reaffirming the Global Strategy and Plan of Action on Public Health Innovation and Intellectual Property;

(PP13) Acknowledging that there is a linkage between addressing Ebola, including the control and elimination of neglected tropical diseases, and the global strategy and plan of action on public health, innovation and intellectual property and a pooled fund of global health research and development (WHA66.22);

(PP14) Commending all Member States,¹ organizations, including nongovernmental organizations, other entities and individuals that have provided assistance in cash and in kind, including the large number of medical professionals in response to the Ebola outbreak;

(PP15) Recognizing the urgent need for an improved and more effective and coordinated response capacity for the international community and especially for WHO and Member States¹ in responding to health-related emergencies;

¹ And, where appropriate, regional economic integration organizations.

(PP16) Committing to further mobilize resources to strengthen national, regional and global preparedness and preventive tasks against the threat posed by infectious diseases to global health and strong sustainable and balanced growth for all;

(PP17) Emphasizing also the fundamentally civilian character of humanitarian assistance, and reaffirming, in situations in which military capacity and assets are used as a last resort to support the implementation of humanitarian assistance, the need for the use to be undertaken with the consent of affected States and in conformity with relevant provisions of international law (UNGA resolutions A/RES/60/124 and A/RES/69/135);

Current context and challenges; stopping the epidemic; and global preparedness

(OP1) Expresses its unwavering commitment to contain the Ebola outbreak and to remain engaged on promoting urgent actions to accelerate prevention, detection, control and treatment until we reach zero cases of EVD, and contribute to build resilient health systems in the affected countries and other highly at-risk countries, and to provide support for people who have survived Ebola, and their families, and for children orphaned by the disease, including psycho social support;

Leadership and Coordination

(OP2) Recalls and reaffirms the constitutional mandate given to WHO to act, inter alia, as the directing and coordinating authority on international health work, and to furnish, in emergencies,¹ necessary aid upon the request or acceptance of governments, and recognizes the need to accelerate ongoing reform of the Organization;

(OP3) Reaffirms WHO's role as the lead agency of the global health cluster, including its role to ensure the timely declaration of appropriate response levels to humanitarian emergencies with health consequences and calls on Member States¹ and relevant actors in humanitarian situations with health consequences to support WHO in fulfilling its role as lead agency of the Global Health Cluster within its mandate;

(OP4) Reaffirms also that, in connection with the declaration on 8 August 2014, by the WHO Director-General that the 2014 EVD outbreak in some West African countries is a Public Health Emergency of International Concern, all WHO authorities with respect to the administration, deployment and other human resource matters concerning preparedness, surveillance and response rest with the Director-General, and shall be exercised in a manner consistent with the principles and objectives of the Emergency Response Framework, while minimizing the negative impact on regular and routine work of WHO;

(OP5) Invites the Director-General to consider assigning, immediately following the Special Session, for the duration of the outbreak, a Special Representative with the appropriate grade and authority to be responsible for all aspects of coordination at all three levels of the Organization and response for the current EVD outbreak;

(OP6) Reaffirms the authority of the Director-General to reallocate existing resources, as appropriate and needed, subject to existing authorities, procedures and agreements, without

¹ See also resolutions WHA34.26, WHA46.6, WHA48.2, WHA58.1, WHA59.22, WHA64.10 and 65.20.

compromising the Organization's programme priorities, as needed to enable an efficient and accelerated response to end the current EVD epidemic;

(OP7) Affirms the essential role of the WHO Country Representatives in any outbreak and response situation and expects all levels of the Organization to cooperate with and support the Director-General in her duty to take all necessary measures so that each country office, in particular for affected and highly at-risk countries and areas, has the right skill set and expertise to match the public health challenges they face;

(OP8) Affirms also the critical role of the WHO regional offices in any outbreak and response situation, under the authority of the Director-General, and requests the Director-General and Regional Directors to take all measures for the highest level of coordination and collaboration among all levels of the Organization to jointly meet the public health challenges they face, including measures to strengthen the routine and immediate sharing of information on infectious disease outbreaks or emergencies with health consequences;

(OP9) Requests the Director-General to further improve communication, coordination, and information sharing between WHO and UNMEER, to enable Member States¹ and other partners to more effectively engage in the response, and requests a report outlining the specific role of WHO within UNMEER by March 2015;

(OP10) Calls upon the Director-General to improve the transparency and reliability of health-related needs-assessment processes, (based on UNGA resolution A/RES/60/124);

Health Systems

(OP11) Calls on Member States¹ to further strengthen coordination on personnel, logistics, supplies, equipment and related infrastructure, with a view to accelerating the effective EVD response and converting it to longer-term health system strengthening, particularly in the most affected countries, building on the results of the WHO conference held in Geneva on 10–11 December 2014 on “Building resilient health systems in Ebola-affected countries” and the implementation of the International Health Regulations (IHR), and in this context requests the Director-General to give technical advice to the most affected countries for developing their country plans, to be discussed in an upcoming conference;

(OP12) Encourages Member States¹ to consider promoting health system strengthening and IHR core capacities for inclusion in the implementation of the health goal of the post-2015 development agenda;

(OP13) Calls on Member States¹ to strengthen capacities to recruit, develop, train, and retain the health workforce in developing countries, particularly in the most affected and highly at-risk countries;

(OP14) Calls on Member States¹ to strengthen support for health care workers to enable local and regional surge capacity, as the most important basis for emergency and outbreak response, which includes ensuring the availability of adequate isolation, care and treatment facilities and essential

¹ And, where appropriate, regional economic integration organizations.

supplies; strengthening national and regional capacities for surveillance, including providing support for developing countries to build capacity;

(OP15) Urges Member States¹ to establish, promote and foster regional and sub-regional collaboration, as well as inter-regional cooperation within WHO, including sharing of experience and expertise for capacity development to strengthen the role of local health systems and workforce in the response to emergencies and other crises (fn to WHA 64.10);

(OP16) Reaffirms that integrated health care, based on access to health and universal health coverage, is the best approach for strengthening health systems, and calls on Member States¹ to accelerate implementation efforts footnote to [WHA 67.24 and 63.16];

(OP17) Takes note of the current challenges facing the operational response to the Ebola outbreak as described in EB136/26, endorses the steps outlined to meet these challenges described in the EBSS3/INF/Doc.5, and requests the Director-General to ensure that the required human and other resources are deployed to this end as a matter of priority and urgency;

Medical Assistance

(OP18) Recognizes the importance of providing for, as much as possible, the safety and protection of health care workers, taking into account the Global Health and Foreign Policy resolution A/RES/69/132 adopted on December 5, 2014;

(OP19) Calls upon health service providers to ensure that health workers are provided with adequate training and protective gear necessary to minimize their risk of infection from disease;

(OP20) Calls upon Member States¹ affected by outbreaks and health emergencies to provide adequate security to protect all health workers from violence;

(OP21) Reaffirms the value of foreign medical teams to the outbreak and response, and requests the Director General to ensure WHO is able, building on the newly established Foreign Medical Teams unit at WHO, to coordinate offers of and requests for the deployment of equipped and experienced foreign medical teams to fill urgent needs and to systematize the formation, training, and support for these foreign medical teams in a timely manner;

(OP22) Reaffirms also the value to ensure the effective deployment of all possible health services, reserve medical teams and the vital consumables to control diseases, by a process of consultation, coordination and integration based on the request or acceptance of the host countries, recognizing that foreign medical teams are intended to support temporarily the national health system, with a view to its sustainable strengthening;

(OP23) Requests the Director-General, in consultation with Member States,¹ to further develop mechanisms for the use of existing emergency stand-by capacities, including, where appropriate, regional humanitarian capacities, through formal agreements, and to report on the issue to the World Health Assembly at its Sixty-ninth session (based on para 13 of UNGA Resolution 60/124);

¹ And, where appropriate, regional economic integration organizations.

Information

(OP24) Calls on Member States,¹ consistent with the IHR, to strengthen disease surveillance capacity, data and information flows between local and national levels and with WHO country, regional and global levels to enable a full and effective response to the current Ebola epidemic, and to ensure early reporting and detection for any future outbreak;

(OP25) Requests the Director General to take all necessary steps to strengthen surveillance, effective and timely data and information dissemination, and health information capability, required to control the epidemic, and to apply lessons-learned to future WHO work in this regard;

(OP26) Requests the Director General to develop, integrate, and support common tools and coordination mechanisms, such as web portals, as appropriate, to track activities across all aspects of the WHO's work to end the current Ebola outbreak, and in order to identify gaps and formulate concrete needs to prevent and respond more effectively to future outbreaks;

(OP27) Requests the Director General to ensure, in the context of the present emergency, that relevant information, especially concerning details of assistance pledged and delivered to the response effort is shared actively, and in a timely and transparent manner with Member States¹ and other partners, with a view to facilitating effective resource use and response, and requests relevant Member States¹ to assist the Director General by providing all such information to UN-OCHA through their financial tracking service in a timely and transparent manner;

Preparedness

(OP28) Recognizes the urgency, in the context of the current outbreak, of addressing the immediate needs in preparedness and response capacity, in particular in highly at-risk states, as identified by WHO, and calls on all Member States¹ and the international community to enhance this effort, giving appropriate priority to the disease surveillance, preparedness, and emergency work of WHO;

(OP29) Recognizes also the importance of addressing longer-term systemic gaps in capacity to prevent, detect, protect against, control and provide a public health response to the international spread of disease and calls on Member States¹ to fulfil their commitment to full implementation of the IHR and in particular, to accelerate action by and support for West and Central African States and other at-risk States and furthermore commends in this regard North–South, South–South, triangular and bilateral cooperation and exchange of best practices;

(OP30) Urges Member States,¹ supported by WHO, to work across sectors and stakeholders, including education, transport and regulatory systems, to ensure that preparedness and long-term sustainable capacity to prevent, detect, protect against, control, and provide a public health response to the international spread of disease is embedded in communities and can facilitate community mobilization in case of an emergency with health consequences;

(OP31) Recognizes also that global preparedness needs continuous commitment to research and development, reliance on a multisectoral approach, strengthening health systems, economic development in developing countries and improved health status;

¹ And, where applicable, regional economic integration organizations.

(OP32) Recognizes the importance of timely sharing of information on diagnostic, preventive and therapeutic products registered at the national or regional level, among Member States¹, under the auspices of WHO, and the routine evaluation of the effectiveness of such products for the purpose of their timely use in response to an epidemic and Requests the Director-General to provide, to the 138th session of the Executive Board, options for strengthening such information sharing, and for enhancing WHO capacity to facilitate access to these products, including the establishment of a global database, starting with haemorrhagic fevers;

Therapeutic Drugs and Vaccines

(OP33) Recognizes the good progress made to date, under the leadership of the WHO in the process of developing Ebola vaccines and requests the Director General to ensure the sustainability of the working groups on therapeutic drugs and vaccine clinical trial designs while they are needed, to ensure continued progress in the development of quality, safe, effective and affordable vaccines and treatments, while emphasizing the importance of completing the WHO work on emergency regulatory mechanisms and procedures ensuring patient safety, committing results of this work to the most affected countries in West Africa as a first priority, with an accompanying distribution and financing plan, to be communicated to Member States¹ as soon as it is ready;

(OP34) Requests the Director-General to evaluate the current status of the epidemic and to disseminate information as to the most critical research studies to complete; and requests the Director-General in consultation with technical experts and Member States¹ regulatory agencies to develop guidance on the value and limitations of the data obtained from the clinical trials, giving the particular attention to ethics, quality, efficacy and safety;

Ensuring WHO's capacity to prepare for and respond to future large-scale and sustained outbreaks and emergencies

(OP35) quater Affirms that a primary goal in reforming WHO's capacity to respond to future large scale and sustained outbreaks and emergencies is to enable the organization to support/build Member States¹ capacity to prevent, detect, prepare for and respond to such outbreaks and emergencies;

WHO Structure and Human Resources

(OP36) Reaffirms that all relevant WHO authorities with respect to the administration, deployment and other human resource matters concerning preparedness, surveillance and response rest with the Director-General for outbreaks and emergencies with health consequences, and shall be exercised in a manner consistent with the principles and objectives of the WHO and the Emergency Response Framework;

(OP37) Requests the Director-General to strengthen the emergency operational capabilities of the Organization to enable it to fulfil its constitutional mandate and respond to emergencies with health consequences on the basis of an all-hazards approach;

(OP38) Underlines that it is essential in respect of health emergency response that the Organization be capable of delivering on the complex and varying scale of health emergency response, emphasizing

¹ And, where applicable, regional economic integration organizations.

in particular systems for human resources, resource mobilization and financing, planning and information management, and ensuring unambiguous leadership and a coherent approach towards outbreak and health emergency operations for all levels of the Organization;

(OP39) Recognizes that among others, the short-comings in WHO's human resources systems and processes slowed down the Ebola response, and requests the Director General based on lessons learned and taking into account the current reform efforts, to accelerate WHO's efforts on human resources reform, particularly by implementing at all three levels of the organization robust recruitment, performance management, including performance review and mobility policies by the end of 2015 to rapidly match staff skills to urgent needs and to report to the Sixty-eighth World Health Assembly on plans for implementation and further expansion, taking into account the interim assessment requested in para 53;

(OP40) Requests the Director General to review the system for nomination, selection, training, and performance review and improvement plan of WHO Country Representatives, taking into account and without prejudice to current reform efforts, with a view to improving expertise in each of the three core areas of WHO's mandate – normative work, technical support to countries, and emergency and outbreak response – and supports the Director-General in exercising her authority to add or change staff with appropriate expertise at the country and regional level, and to report to the 138th Executive Board on implementation;

(OP41) Stresses the importance of WHO personnel understanding and respecting national and local customs and traditions in their countries of assignment and communicating clearly their purpose and objectives to local populations in order to enhance their acceptance, thereby contributing to their safety and security;

(OP42) Recalls Recommendation 12 of the 2011 IHR Review Committee contained in A/64/10, which called for the establishment of a more extensive global, public health reserve workforce, and requests the Director General to take immediately necessary steps to draw up her plan in consultation with Member States through regular informal consultations, and with the Steering Committee of the Global Outbreak Alert and Response Network, with the following three elements, each of which are composed of comprehensive emergency response teams that can be promptly and efficiently deployed, for service in countries that request or accept such assistance, for adequate periods of time, and with adequate resources, and to report to the 68th World Health Assembly for its consideration and decision;

(a) adequate numbers of dedicated and trained WHO staff with appropriate range of skills positioned at all levels of the Organization, particularly at country level, to properly implement ongoing emergency relief programmes, including surveillance, and to provide adequate internal surge capacity to respond to acute emergencies with health consequences, efforts should be made to enhance representation from developing country practitioners, including at WHO headquarters;

(b) deepened and expanded partnerships building on existing platforms, notably the Global Outbreak Alert and Response Network, the Global Health Cluster, existing and new stand-by partners, and foreign medical teams, with the additional aim of building capacity in countries;

(c) strengthened mechanisms for working with other United Nations agencies, funds and programmes, and relevant actors, as appropriate, to assist in assuring a response commensurate to the scale of any emergency;

Research and Development

(OP43) Recognizes the urgent need to encourage and maximize efforts on scientific, epidemiological and biological research, including the sharing of samples and epidemiological data in accordance with national or regional legislation on Ebola, health technologies and promote cooperation in this field between countries, as a contribution to international efforts directed towards tackling the epidemic and for the aim of consolidating the scientific, medical and health capacities of the most affected countries, and the need for the global community to continue work on research and development, including for emerging and neglected tropical diseases;

(OP44) Recognizes WHO's leadership role in supporting a prioritized research agenda for Ebola and calls on Member States¹ and relevant actors to ensure that resources and efforts take into account and support, as appropriate, the prioritized research agenda;

(OP45) Recognizes further the need to incorporate lessons learned from the EVD outbreak into the evaluation of the global strategy and plan of action on public health, innovation and intellectual property and considers, as appropriate, the linkage to pooled funds for global health research and development to facilitate the development of quality, safe, effective, affordable health technologies related to the needs of affected countries and calls on Member States¹ for securing sustainable financing for health research and development on emerging and neglected tropical diseases, including Ebola, and enhancing access to health products and medical devices to address the health needs of developing countries (Footnote to the GSPA and Resolution 66.22);

(OP46) Calls on Member States¹ to continue to collaborate as appropriate, on models and approaches that support the delinkage of the cost of new research and development from the prices of medicines, vaccines, and other diagnostics for Ebola and other emerging and neglected tropical diseases, so as to ensure their sustained accessibility, affordability, availability, and access to treatment for all those in need;

Resources

(OP47) Requests the Director General to take all necessary steps to ensure that, in the case of outbreaks and emergencies with health consequences, funding can be speedily reallocated and disbursed to areas of most need, without compromising the Organization's programme priorities;

(OP48) Recognizes the need for adequate resources for the preparedness, surveillance and response work of the World Health Organization, agrees in principle to establish a contingency fund, taking into account recommendation 13 of the 2011 IHR Review Committee contained in A/64/10, subject to a decision to be taken by the Sixty-eighth World Health Assembly, and requests the Director-General to provide options on the size, scope, sustainability, operations and sources of financing for such a fund, and accountability mechanisms; including on possible internal sources of funding from within WHO's existing programme budget, taking into account other relevant financing mechanisms and emergency funds already in operation or being considered, at regional and global level, taking into account the interim assessment requested in para 53 and to report, through the Programme, Budget and Administration Committee, such options to the 68th World Health Assembly for its consideration and adoption;

¹ And where applicable regional economic integration organizations.

(OP49) Recognizes the valuable contribution to global capacity to prevent, detect and respond to future outbreaks being made through various initiatives at global and regional levels and other relevant actors, and calls on these efforts to be aligned with the International Health Regulations and the relevant work of WHO, to ensure coherence and effective action;

(OP50) Urges Member States¹ to consider supporting and contributing to WHO work in this area as a matter of urgency;

Communication

(OP51) Requests the Director-General to continue to develop and implement an Organization-wide communications strategy to improve routine communications, messaging about preventive measures, risk communication, and emergency communications, ensuring that the new policy entails matching the content, form and style of communication with the media, timing and frequency that will reach the intended audience and serve its intended purpose;

Evaluation and Next Steps

(OP52) Requests the Director-General to commission an interim assessment, by a panel of outside independent experts, on all aspects of WHO response, from the onset of the current EVD outbreak, including within UNMEER, in implementing the Emergency Response Framework, and in coordination, including resource mobilization, and functioning at the three levels of the Organization, to be presented to the Sixty-eighth World Health Assembly;

(OP53) Requests the Director-General to prepare options for establishing an IHR Review Committee panel of experts pursuant to past practice to conduct an assessment of the overall prevention, preparedness and response to the Ebola outbreak and the effectiveness of the IHR in facilitating that response, including what was implemented and what was not from the previous IHR review committee in 2011, and consideration given to steps that could be taken to improve the functioning, transparency, and efficiency of WHO's response under the IHR in future outbreaks, in all countries, aiming at strengthening health systems;

(OP54) Invites the Director-General to consider establishment of an ad hoc advisory group under the auspices of the Executive Board, composed of operations experts from relevant stakeholders, including affected countries, to provide advice on administrative and logistical support to the Director-General as needed in the case of future outbreaks or emergencies with health consequences;

(OP55) Requests the Director-General to engage within the United Nations system on lessons learned from this response for improving coordination and effectiveness for future outbreaks, and to update Member States¹ on a regular basis;

(OP56) Requests the Director-General to consult with Member States,¹ other relevant actors, and the UN system on elements of the decisions included in this Resolution to be prepared for the Sixty-eighth World Health Assembly with a view to ensuring a consensus on how to strengthen and improve the effectiveness of WHO in outbreaks and emergencies with health consequences and taking into account and without prejudice to the overall WHO reform;

¹ And, where applicable, regional economic integration organizations.

(OP57) Requests the Director-General to report to WHA68 on all grade 3 and IASC level 3 emergencies where WHO has taken action since WHA67 and calls for annual reports on WHO's actions in health emergency response.

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