Background

Further to resolution EBSS3.R1,1 adopted by the Executive Board when it convened in Special Session on 25 January 2015 and to the decision adopted by the Health Assembly on 26 May 2015,2 WHO is undertaking a considered and thorough review and reform of its capacities in emergency risk management and response to emergencies with health consequences. This reform is guided by the Director-General’s Advisory Group on Reform of WHO’s Work in Outbreaks and Emergencies with Health and Humanitarian Consequences and the Report of the Ebola Interim Assessment Panel, requested in EBSS3.R1 and released on 7 July 2015.3 The purpose of the Friends Group is to provide the Secretariat with a mechanism to consult informally with all interested Member States as the reform of WHO’s work in outbreaks and emergencies progresses.

Summary of discussion

The discussion was structured around four points: (1) the provision of WHO Regional- and country-level feedback on the emergency reform process; (2) an update of the work of the Director-General’s Advisory Group on Reform of WHO’s Work in Outbreaks and Emergencies with Health and Humanitarian Consequences; (3) a review and discussion of the Roadmap for Action; and (4) an update on the Contingency Fund for Emergencies.

WHO Regional- and country-level feedback on the emergency reform process

Dr Jaouad Mahjour, Director of Administration and Finance and Dr Qudsia Huda, Regional Advisor, Health Emergency Risk Management, for the WHO Eastern Mediterranean Region (EMR); Dr Socé Fall, the Director of Immunizations, Vaccines and Emergencies/Outbreak Disaster Management for the WHO African Region (AFR); and Dr Dorit Nitzan Kaluski, WHO Representative and Head of Country Office in Ukraine participated via teleconference in the discussion.

Dr Mahjour noted that the reform process is both very welcome and has been discussed extensively at Regional level, where they are aligned with the global thinking. He explained in particular that the multiple protracted emergencies and conflicts to which WHO is currently responding, but for which the Organization is under-capacitated, underscored the need for WHO to be better able to prepare for and respond to emergencies and outbreaks. Dr Majour also emphasized that a core part of WHO’s work in emergencies must be to support Member States, build capacity vis-a-vis the International Health Regulations and provide specialty expertise when requested.

Dr Fall agreed and indicated that national capacity development has to be an integral part of WHO’s work in outbreaks and emergencies. Additionally, it is critical to ensure that WHO is appropriately capacitated and staffed at country and regional levels to manage emergencies and outbreaks. He

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1 EBSS3.R1 Ebola: ending the current outbreak, strengthening global preparedness and ensuring WHO’s capacity to prepare for and respond to future large-scale outbreaks and emergencies with health consequences. Available at http://apps.who.int/gb/ebwha/pdf_files/EBSS3-REC1/EBSS3_REC1.pdf#page=12
noted that the African Regional Office had deployed more than 1,000 WHO staff from across the region to respond to the Ebola crisis and that having access to financing, like that which will now be available through the Contingency Fund, will be essential to similar efforts in the future.

Dr Kaluski outlined the situation in Ukraine, where there is both a protracted civil conflict crisis and also a polio outbreak. WHO has provided support for the response from all across the Organization. One of the limitations that WHO faces in response is the need for linking emergencies work to WHO’s work in health systems development so that countries will have rapid alert and response capacities.

Member States noted that challenges persisted in implementing Health Clusters in country settings and sought clarification on the obstacles to implementation. WHO noted that working more closely with Cluster partners and improving its capacity to fulfill its role as the Health Cluster lead is one of the key elements of the reform process. Additionally, the Health Cluster has been activated and had very positive impact, including in Mozambique to respond to flooding.

There was general agreement that the participation of Region and Country Offices contributed significantly to the Friends’ discussion and that it should be included in future meetings, as possible.

**Update of the work of the Director-General’s Advisory Group on Reform of WHO’s Work in Outbreaks and Emergencies with Health and Humanitarian Consequences**

Dr David Nabarro, the UN Secretary General’s Special Envoy for Ebola and Chair of the Advisory Group, provided the meeting with an update of the Advisory Group’s work, including preparations for the 26-27 October 2015 face-to-face meeting of the group in Geneva, and its reflections to date on the areas being addressed by the reform.

Dr Nabarro said the Advisory Group will continue focusing on WHO’s functions and commitments in outbreaks and emergencies. The Advisory Group believes that WHO’s work in outbreaks and emergencies should focus on the entire emergency management cycle (prevention, preparedness, response and recovery), the all-hazards approach, ensuring Member State compliance with the International Health Regulations (2005), strengthening its role with the humanitarian sector and building capacities at field level.

The Advisory Group also feels that an *overarching single programme* that aligns WHO’s outbreak and humanitarian capacities across the Organization is required. A key part of the programme will be the *operational platform* enabling WHO and other actors partnering with WHO in outbreaks and emergencies to operate where required and support countries in acute and protracted crises. The platform will be designed to dovetail with other operational platforms across the international system, including the World Food Programme (WFP) for logistics, the Office for the Coordination of Humanitarian Affairs (OCHA) on information and others, to provide systems and personnel support on a ready and dependable basis. For the operational platform’s actions to be predictable and accountable, clear lines of authority and decision-making will be required.

The programme will operate with significant autonomy, while still existing within the structure and legal identity of WHO and under the mandate of WHO’s Governing Bodies. The Advisory Group will also consider suggestions for some kind of oversight mechanism to monitor the actions of the overarching single programme, as well as on the overall scope of the programme’s work in outbreaks and emergencies in terms of quantity and scale of incidents to respond to.

Member States noted that WHO must be able to increase surge capacities for outbreaks and emergencies, but must also ensure that it did not duplicate services already being provided by operational partners on the ground. Dr Nabarro confirmed that the Advisory Group felt that WHO should not duplicate the actions of others, and rather believed the Organization’s actions should concentrate on coordination, alerts, and setting standards in response and recovery.
Member States advised that WHO should also aim to strengthen capacities in country, as countries should be in the lead in any response. Dr Nabarro reiterated that a major focus of the reform is to ensure that countries are better able to respond to outbreaks and emergencies.

**Review and discussion of the Roadmap for Action**

The WHO Secretariat provided an update on the progress in implementing the “Roadmap for Action: Follow up to the WHA decision on Ebola virus disease outbreak and the Special Session of the EB on Ebola.” The Roadmap will be the focus of 19-22 October internal meetings of WHO’s technical staff, and the 26-27 October face-to-face meeting of the Advisory Group.

Key milestones in implementing the Roadmap include the 5-6 November WHO Financing Dialogue and the 138th session of the Executive Board, scheduled to commence on 25 January 2016.

Member States raised numerous points including that:

- there is a need to cost the deliverables of the reform process;
- there should be a unification of WHO’s work in outbreaks and emergencies;
- the operational platform must be flexible so that it can respond to all hazards and risks;
- WHO must win the respect of NGOs and the broader humanitarian community, including establishing even closer engagement with OCHA and IASC, and linking the reform of WHO’s work in outbreaks and emergencies to the Transformative Agenda;
- the emergency reform be grounded in the wider WHO reform process;
- there is a need for a clearer reference in the Roadmap on WHO’s lead role of the Global Health Cluster;
- Member State implementation of the IHR (2015) is important for ensuring appropriate preparedness in countries for preventing and responding to outbreaks and emergencies;
- strengthening capacities of governments and WHO offices in countries is required for ensuring the necessary preparedness and response for outbreaks and emergencies;
- national medical teams should be part of the global health emergency workforce;
- caution is required on following the Ebola Interim Assessment Panel report recommendation on establishing an independent board to oversee the operational programme and platform.

The Secretariat emphasized the importance of the internal, three level meeting taking place from 19-22 October and the Advisory Group face-to-face meeting on 26 and 17 October. These meetings will focus on the programme and platform. There is also the next IHR Review Committee meeting, which is being scheduled for November. The Financing Dialogue and the Executive Board also provide milestones for the broad reform timeline.

The Secretariat also noted that the Director-General has been clear in her intent to create a unified, all-hazards capacity, merging outbreaks and emergencies, in line with the discussions of the Advisory Group. The intent is to have granular, detailed views of the programme, the platform, the global health emergency workforce and the Contingency Fund in the coming weeks.

A significant area of consideration is how much the programme will cost, and how this cost will fit with the Programme Budget 2016-2017. Financing for the programme will need to be predictable and sustainable. All three steps need to be considered: costing, budgeting and financing.

In response to questions regarding which elements of the Roadmap for Action can be implemented without Governing Bodies approval, The WHO Secretariat noted that most deliverables within the Roadmap can be implemented without going through the Executive Board or World Health Assembly. The exceptions are deliverable 1.6 of the Roadmap on the “Governance structure/oversight board for

**Update on the Contingency Fund for Emergencies**

The WHO Secretariat delivered an update on the Contingency Fund for Emergencies, noting that it had been established by decision WHA68(10) as a replenishable fund with a capitalization target of US$100 million. The fund is designed to support WHO’s initial response to outbreaks and emergencies for the first three months and is under the discretion of the Director-General.

Member States noted that monies from the fund should be used to support the global response to outbreaks and emergencies, including support to WHO’s partners identified as having comparative advantages for certain functions (e.g., global health emergency workforce partners, GOARN, the Global Health Cluster, stand by partners and emergency medical teams). There were also questions regarding whether and how the World Bank’s proposed pandemic emergency financing facility (PEF) would finance WHO’s response work and if it could be used to replenish the Contingency Fund. Participants also asked about the relationship between the Fund and the United Nations Central Emergency Response Fund (CERF), and how overlaps between the two will be avoided. Questions regarding whether the Fund could be used for medical evacuation were also raised.

The Secretariat noted that, as per decision WHA68(10), the Contingency Fund provides flexible funding at the discretion of the Director-General to finance the rapid scale up of WHO’s initial response to outbreaks and emergencies with health consequences. This flexibility provides WHO with the opportunity to support partners and medical evacuation, as deemed appropriate.

A question was asked regarding the proposal that the Contingency Fund be potentially available for all emergencies, not just those graded 2 and above as originally proposed in the report to the World Health Assembly. The Secretariat clarified that discussions on the draft resolution in the Assembly had indicated that the Contingency Fund should be immediately available for all grades of emergencies, as it would need to play a role in preventing the escalation of an event. This would be clarified in the prospectus.

Though the mechanism of the World Bank’s PEF are still being developed, it is WHO’s understanding that WHO could be allocated funding from the PEF in the event that a concerned government does not have an operable response plan and absorption capacity. Given WHO’s direct control over its Contingency Fund, it is likely that monies from the Fund will be available to WHO before pay outs from the PEF. However, if the PEF allocates funding to WHO for a given emergency, the Contingency Fund could theoretically be replenished with those PEF monies, though this would require an agreement from the PEF to allow retroactive financing. A similar mechanism is currently the practice for the Rapid Response Account, which uses CERF awards to WHO for retroactive replenishment.

Member States suggested that someone from the World Bank attend the upcoming WHO Financing Dialogue to answer questions about the PEF.

The People’s Republic of China announced its US$2 million contribution to the fund, which was warmly welcomed by the Member States present and the WHO Secretariat.

**Next steps:**

Participants suggested that it would be useful for Member States if Secretariat could do the following:

- Continue to arrange for Regional and Country Office participation in the coming meetings of the Friends.
- Circulate the PowerPoints on the Contingency Fund, and provide Member States with the URL for the frequently asked questions on the World Bank PEF;
- Propose themes for coming meetings, including the research and development blueprint; and
• Post the presentations from the meeting, as well as a note for the record, and provide Member States with the URL for the frequently asked questions on the World Bank PEF.

It was agreed that the next meeting of the Friends will take place on 27 November. Due to conflicting schedules with the co-chairs, the next meeting will now take place on December 4 and an agenda and speakers will be provided closer to the meeting.