

Report of the Review Committee on the
functioning of the International Health
Regulations (2005) and
on Pandemic Influenza A (H1N1) 2009

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Objectives of the Review

- Functions of International Health Regulations (2005)
- Role of WHO in pandemic preparedness and response
- Lessons for the future

Review Committee Process

- 25 members drawn from 24 countries
- 4 plenary sessions plus deliberative sessions
- Member State and media presence
- Report to DG and WHA

Sources of Evidence

- Testimony and written submissions
- Internal documents of WHO, including confidential agreements
- Scientific literature
- National and regional reports and reviews of the pandemic response
- Public documentation and information

Five factors framed events

- Core values of public health
- Unpredictable nature of influenza
- Threat of avian influenza A (H5N1) and how it shaped general pandemic preparedness
- WHO's dual role as a moral voice for health in the world and as a servant of its Member States
- Limitations of systems that are designed to respond to a geographically focal, short-term emergency, rather than a global, sustained, long-term event

2 Key Findings

- H1N1 (2009) influenza satisfied the definition of a pandemic based on the degree of spread.
- We found no evidence of commercial influence on WHO decision making.

3 conclusions

Conclusion 1

The IHR helped make the world better prepared to cope with public health emergencies. The core national and local capacities called for in the IHR are not yet fully operational and are not now on a path to timely implementation worldwide.

3 conclusions

Conclusion 2

WHO performed well in many ways during the pandemic, confronted systemic difficulties and demonstrated some shortcomings. The Committee found no evidence of malfeasance.

3 conclusions

Conclusion 3

The world is ill-prepared to respond to a severe influenza pandemic or to any similarly global, sustained and threatening public health emergency. Beyond implementation of core public health capacities called for in the IHR, global preparedness can be advanced through research, strengthened health-care delivery systems, economic development in low- and middle-income countries and improved health status.

Recommendations: the IHR

- Accelerate implementation of core capacities required by the IHR
- Enhance the WHO Event Information Site
- Reinforce evidence-based decisions on traffic and trade
- Ensure necessary authority and resources for all National IHR Focal Points

Recommendations: WHO pandemic preparedness

- Strengthen WHO's internal capacity for sustained response
- Improve practices for appointment of an emergency committee
- Revise pandemic preparedness guidance
- Develop and apply measures to assess severity
- Streamline management of guidance documents
- Develop and implement a strategic, organization wide communications policy
- Encourage advance agreements for vaccine distribution and delivery

Recommendations: the Global Response

- Establish a more extensive global, public health reserve workforce
- Create a contingency fund for public health emergencies
- Reach agreement on the sharing of viruses and access to vaccines and other benefits
- Pursue a comprehensive influenza research and evaluation programme

Reflections

- Decision making under uncertainty
- Technical expertise and political responsibility
- Advance preparation and capacity under emergency conditions
- Prospective choice and retrospective critique
- Communication and public understanding