

Proposed method of work

BACKGROUND

1. In December 2021, through decision SSA2(5) (2021), the World Health Assembly, at its second special session, established, in accordance with Rule 41 of its Rules of Procedure, an intergovernmental negotiating body open to all Member States and Associate Members¹ (the “INB”).
2. Structurally, the INB will operate as a subdivision of the Health Assembly.² As such, it will consider and make recommendations to the Health Assembly on matters specifically assigned to it by the Health Assembly, as indicated in decision SSA2(5).
3. Per decision SSA2(5), the INB will define and agree on its working methods and timelines, consistent with that decision and based on the principles of inclusiveness, transparency, efficiency, Member State leadership and consensus. A proposed method of work, based on the relevant provisions of decision SSA2(5) and the practices developed in connection with other WHO intergovernmental processes, is provided below for consideration.

METHOD OF WORK

Objectives

Pursuant to decision SSA2(5):

4. The INB was established to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response, with a view to adoption under Article 19, or under other provisions of the WHO Constitution as may be deemed appropriate by the INB.
5. In furtherance of the above, the INB shall determine an inclusive Member State led process, to be facilitated by the INB’s co-chairs and vice-chairs, to first identify the substantive elements of the instrument, and then to begin the development of a working draft, to be presented, on the basis of progress achieved, for the consideration of the INB at its second meeting, to be held no later than 1 August 2022, at the end of which the INB will identify the provision of the WHO Constitution under which the instrument should be adopted.

¹ And regional economic integration organizations as appropriate.

² In accordance with Rule 41 of the Rules of Procedure of the Health Assembly.

6. The process referred to in paragraph 5 above should be informed by evidence and should take into account the discussions and outcomes of the Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies, considering the need for coherence and complementarity between the process of developing the new instrument and the ongoing work under resolution WHA74.7 (2021), particularly with regard to implementation and strengthening of the International Health Regulations (2005). In addition to the provisions of decision of SSA2(5), the INB will take into account, inter alia, the discussions and outcomes of other ongoing WHO-related workstreams, as appropriate, including to avoid any duplication of efforts and to facilitate a consistent approach.

Reporting and timeline

7. Pursuant to decision SSA2(5), the INB shall submit its outcome for consideration by the Seventy-seventh World Health Assembly, with a progress report to the Seventy-sixth World Health Assembly. Furthermore, a preliminary timeline and list of deliverables are contained in the annex to this proposed method of work, which may be updated as the INB progresses its work.

Participation and conduct of business

8. The INB will be open to all WHO Member States^{1,2} and will work in an inclusive manner.

9. The INB will conduct its business (including, for the avoidance of any doubt, the activities of subgroups, if any) on the basis of consensus, and in line with the Rules of Procedure of the World Health Assembly.

Participation of relevant stakeholders

10. Pursuant to decision SSA2(5), the INB may, to the extent it so decides, in accordance with relevant Rules of Procedure and resolutions and decisions of the Health Assembly, involve the participation of the following entities, recognizing the importance of broad engagement to ensure a successful outcome: representatives of organizations of the United Nations system and other intergovernmental organizations with which WHO has established effective relations; Observers;³ Representatives of non-State actors in official relations with WHO; and other relevant stakeholders and experts and expert bodies, as decided by the INB.

11. When the INB engages with relevant stakeholders, pursuant to the above, the following shall apply:

- (a) the overriding principles are transparency and predictability;

¹ Per the text adopted by the First World Health Assembly on 21 July 1948, this term shall be read to include Associate Members with respect to the INB.

² And regional economic integration organizations, as appropriate.

³ In WHO, the term “Observer” has traditionally been used to designate a limited number of entities that have been invited to attend in an observer capacity open meetings of the Health Assembly, or any of its main committees, and of the Executive Board. Currently, the Observers are the Holy See; Palestine; Gavi, the Vaccine Alliance; the Order of Malta; the International Committee of the Red Cross; the International Federation of Red Cross and Red Crescent Societies; the Inter-Parliamentary Union; and the Global Fund to Fight AIDS, Tuberculosis and Malaria.

(b) relevant stakeholders will attend open sessions of the INB and will not take part in decision-making by the INB, in line with the Rules of Procedure of the Health Assembly; and

(c) inputs provided by relevant stakeholders will fully respect the principle of relevance and will be subject to calls to order by the co-chairs.

12. Arrangements for specific types of relevant stakeholders will be as follows.

(a) **Observers.** Observers are invited to attend open sessions of meetings of the INB, and may be given the right to speak at such open sessions, at a co-chair's request.

(b) **Entities in effective relations.** Representatives of organizations of the United Nations system and of other intergovernmental organizations with which WHO has established effective relations under Article 70 of the WHO Constitution¹ are invited to attend open sessions of meetings of the INB, and may be given the right to speak at such open sessions, at a co-chair's request, and to act as technical resources in the INB's deliberations generally.

(c) **Other relevant stakeholders.** The INB may also decide, following a proposal by the Bureau, to invite other relevant stakeholders, including non-State actors and individual experts, or representatives of expert bodies, to attend open meetings (or specific sessions) of the INB and, at the co-chairs' request, provide input on specific topics under discussion, and/or speak at such open sessions. The question of participation and the modalities thereof for relevant stakeholders invited pursuant to this paragraph are to be determined by the INB. The Bureau will identify and propose, for the INB's consideration, topics for which relevant stakeholders may be invited to provide input pursuant to this paragraph c. In so doing, the Bureau will take into account, as appropriate: the specific objectives and needs of the INB; the item(s) under discussion; the stakeholder's context of accountability; the stakeholder's work, focus, and/or expertise with respect to pandemic preparedness and response-related matters, One Health matters, cross-cutting issues among the various existing instruments in the health domain, and/or global health security matters; and promotion of the geographical representation of relevant stakeholders.

Meetings of the INB

13. Pursuant to decision SSA2(5), the INB is to:

(a) hold its first meeting no later than 1 March 2022, to elect its co-chairs and vice-chairs, and to define and agree on its method of work and timelines, consistent with the aforementioned decision and based on the principles of inclusiveness, transparency, efficiency, Member State leadership and consensus;

(b) hold its second meeting no later than 1 August 2022, to consider the working draft of the instrument, to be presented on the basis of progress achieved, and at the end of such second

¹ The United Nations, the African Development Bank and African Development Fund, the Commission of the African Union, the Food and Agriculture Organization of the United Nations, the Islamic Development Bank, the International Fund for Agricultural Development, the International Labour Organization, the League of Arab States, the International Organisation of la Francophonie, the World Organisation for Animal Health, the International Atomic Energy Agency, the Pan American Health Organization, the International Committee of Military Medicine, the South Centre, the United Nations Educational, Scientific and Cultural Organization, the United Nations Industrial Development Organization, the Universal Postal Union, the World Intellectual Property Organization, the World Meteorological Organization.

meeting, to identify the provision of the WHO Constitution under which the instrument should be adopted; and

(c) hold subsequent meetings at the request of the co-chairs, as frequently as necessary.

14. Meetings of the INB will be held either in person (at WHO headquarters in Geneva, Switzerland), in hybrid format, or virtually, as appropriate, including based on the global epidemiological situation and advice provided by the WHO HQ Access to Campus committee.

Subgroups (including drafting groups), and intersessional work

15. To advance discussions between INB sessions, the Bureau of the INB or the INB itself may request the WHO Secretariat to organize intersessional briefings and consultations with Member States¹ on matters assigned to the INB by the Health Assembly.

16. The INB may set up a limited number of subgroups, including drafting groups, to advance discussions on the objectives of the INB, as needed. In considering the establishment of possible subgroups, duplication of work will be avoided. Subgroups may meet in the intersessional period. The Bureau will coordinate meetings to ensure that meetings of different subgroups do not overlap with one another. Subgroups may meet in the intersessional period and will, where possible, only meet sequentially.

17. Subgroups will be open to participation by all Member States.^{2,3}

18. Subgroups will be chaired by one of the four vice-chairs.

19. Chairs of subgroups will report verbally on the findings or outcomes of their deliberations at the close of each subgroup session. Chairs of subgroups, will also provide a verbal summary of the proceedings of each subgroup session at the opening of the next meeting of the INB.

20. The rules governing the participation of relevant stakeholders in the INB (paragraphs 10 to 12 above) shall also apply to their participation in subgroups.

21. Participation in drafting groups will be limited to Member States.

22. Procedural reports shall be prepared at the end of each INB meeting.

Bureau of the INB

23. The INB will have a Bureau comprising six officers, one from each of the six WHO regions: two co-chairs, reflecting a balance of developed and developing countries, and four vice-chairs. The INB agrees that the co-chairs and vice-chairs bear equal responsibility in coordinating the work of the Body, especially with regards to facilitating the process mentioned in paragraph 5, above.

¹ And regional economic integration organizations, as appropriate.

² Per the text adopted by the First World Health Assembly on 21 July 1948, this term shall be read to include Associate Members with respect to the INB.

³ And regional economic integration organizations, as appropriate.

24. The Bureau will meet in person, in hybrid format or virtually, as frequently as necessary, including between meetings of the INB.
25. The Bureau, led by the co-chairs, will facilitate the work of the INB, in close dialogue with its membership. In that regard, the functions of the Bureau will be:
- (a) to propose the working methods of the INB;
 - (b) to schedule INB meetings, and draw up the provisional agenda of those meetings;
 - (c) to consider, as applicable, documents prepared in advance of INB meetings, including to facilitate the timely dispatch of working documents;
 - (d) to coordinate work among subgroups, if any;
 - (e) to make proposals to Member States on ways forward, for their consideration; and
 - (f) to facilitate preparation and submission of the final reports of the INB to the World Health Assembly, per decision SSA2(5).

Support from the WHO Secretariat

26. The WHO Secretariat will provide support to the INB by:
- (a) convening its meetings at the request of the co-chairs, as frequently as necessary;
 - (b) holding public hearings, further to decision SSA2(5), and consistent with standard WHO practice, prior to the second meeting of the INB to inform its deliberations;
 - (c) facilitating the participation, to the extent the INB so decides, in accordance with relevant Rules of Procedure and resolutions and decisions of the Health Assembly, of representatives of organizations of the United Nations system and other intergovernmental organizations with which WHO has established effective relations, Observers, representatives of non-State actors in official relations with WHO, and of other relevant stakeholders and experts as decided by the INB, recognizing the importance of broad engagement to ensure a successful outcome;
 - (d) providing the INB with the necessary services and facilities for the performance of its work, including complete, relevant and timely information and advice; and
 - (e) keeping the INB, including the Bureau, updated on other ongoing WHO workstreams, as appropriate.

ANNEX

PRELIMINARY TIMELINE AND DELIVERABLES

| Preliminary timeline | Meetings and expected deliverables |
|-----------------------------|---|
| 21–23 February 2022 | Seventh meeting of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies |
| 24 February 2022 | First meeting of the Intergovernmental Negotiating Body to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response (the “INB”) <u>Deliverables:</u> – Election of the two co-chairs and four vice-chairs – Definition of and agreement on working methods and timelines |
| 10–11 March 2022 | Sixth meeting of the Working Group on Sustainable Financing |
| 14–15 March 2022 | Resumed session of the first meeting of the INB <u>Deliverables:</u> – Determination of an inclusive Member State led process, to be facilitated by the co-chairs and vice-chairs, to first identify the substantive elements of the instrument and to then begin the development of a working draft to be presented, on the basis of progress achieved, for consideration of the INB at its second meeting |
| March to July 2022 | Intersessional work, including public hearings, relating to the work of the INB,¹ and which may also include receipt of written submissions and additional expert input |
| 18–20 May 2022 | Programme, Budget and Administration Committee of the Executive Board: thirty-sixth meeting |
| 22–28 May 2022 | Seventy-fifth World Health Assembly |
| 30 May 2022 | Executive Board: 151st session |
| *July 2022 | Second meeting of the INB^{2,3} <u>Deliverables:</u> – Consideration of the working draft document – Identification of the provision of the WHO Constitution under which the instrument should be adopted |
| 22–26 August 2022 | Regional Committee for Africa: seventy-second session |
| 5–9 September 2022 | Regional Committee for South-East Asia: seventy-fifth session |
| 12–14 September 2022 | Regional Committee for Europe: seventy-second session |
| 26–30 September 2022 | Regional Committee for the Americas: seventy-fourth session |

¹ Per decision SSA2(5), these public hearings are to occur prior to the second meeting of the INB.

² Per decision SSA2(5), the second meeting of the INB is to be held no later than 1 August 2022.

³ In order to have any outcomes of the second meeting of the INB translated into all official languages and available for consideration by the opening of the first regional committee of 2022, it is proposed that the second meeting of the INB occur during the second week of July.

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| 10–13 October | Regional Committee for the Eastern Mediterranean: sixty-ninth session |
| 24–28 October | Regional Committee for the Western Pacific: seventy-third session |
| *December 2022 | Third meeting of the INB <u>Deliverables:</u> – Consolidation of inputs provided from the regions, public hearings and other intersessional work |
| *January 2023 | Executive Board: 152nd session |
| *March 2023 | Fourth meeting of the INB <u>Deliverables:</u> – Preparation of progress report to the Seventy-sixth World Health Assembly |
| *May 2023 | Seventy-sixth World Health Assembly |
| *June 2023 | Fifth meeting of the INB <u>Deliverables:</u> – Preparation of final report to the Seventy-seventh World Health Assembly |
| *May 2024 | Seventy-seventh World Health Assembly |

*to be decided

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