

Report of the second meeting of the Working Group on Amendments to the International Health Regulations (2005)

1. The second meeting of the Working Group on Amendments to the International Health Regulations (2005) (WGIHR) was held from 20–24 February 2023 in a hybrid format under the leadership of Dr Abdullah Asiri of Saudi Arabia and Dr Ashley Bloomfield of New Zealand as Co-Chairs, with the following Vice-Chairs: Dr Sultani Matendechero of Kenya, Mr Colin McIff of the United States of America, Ambassador François Rivasseau of France and Ambassador Grata Endah Werdaningtyas of Indonesia.

2. In accordance with the Working Group's decision, following the silence procedure, on webcasting and participation of relevant stakeholders, agenda items 3, 4, part of 6 (including the first reading of the proposed amendments), 7 and 8 were considered in open/plenary sessions and were webcast. Agenda items 1, 2, 5 and part of 6 (including the drafting session) were considered in closed sessions.

3. Following the adoption of the agenda¹ and programme of work,² the Working Group turned to the organizational aspects of its work and considered the proposed modalities of engagement for relevant stakeholders. The Working Group was asked to consider a report setting forth proposed modalities of engagement for relevant stakeholders with a view to populating the various annexes of the report and approving the modalities.³ The Working Group was reminded that, ahead of the meeting, the Secretariat had invited Member States to put forward the names of additional entities to be included in Annexes D or E of document A/WGIHR/2/3. It was noted that no proposals for additional entities had been shared with the Secretariat by the deadline; however, some had been shared after the deadline. As such, the Working Group approved the list of relevant stakeholders contained, and the modalities outlined, in document A/WGIHR/2/3 to enable relevant stakeholders to attend the open sessions of the meeting. Furthermore, Member States were invited to propose and consider possible additional entities for inclusion in Annexes D and E of document A/WGIHR/2/3 under a written silence procedure carried out during the meeting. In the absence of any comments, twelve additional proposed entities were regarded as accepted. The Working Group approved the updated list of relevant stakeholders, including the modalities set out therein,⁴ while reiterating that it will remain a living document, to be updated as necessary.

¹ Document A/WGIHR/2/1.

² Document A/WGIHR/2/2.

³ Document A/WGIHR/2/3.

⁴ Document A/WGIHR/2/9.

4. The Working Group then considered the proposal by the Bureau regarding modalities for consideration of the proposed amendments to the International Health Regulations (2005) (IHR (2005)). Following a discussion, the Working Group agreed to the modalities as amended.¹

5. In addition, at the request of some Member States, the Secretariat agreed to prepare a reference document containing in one column the proposed amendments to the IHR (2005) that have been submitted in accordance with decision WHA75(9) (2022), and in another column the related technical recommendations made by the Review Committee regarding Amendments to the International Health Regulations (2005) (Review Committee).

6. The Working Group then considered the provisional WGIHR timeline 2022–2024. Following a discussion, the Working Group agreed to the provisional timeline as amended² to adjust the dates of the third meeting of the Working Group to 17–20 April 2023 and to include a sixth meeting of the Working Group on 7–8 December 2023.

7. With respect to coordination with the Intergovernmental Negotiating Body (INB), the Co-Chairs explained that ensuring the complementarity of the Working Group and the INB is a priority for both Bureaus. It was further explained that since the first meeting of the WGIHR in November 2022, the WGIHR and INB Bureaus have held two joint meetings and participated in a joint briefing session with the Review Committee and a joint briefing by the Secretariat on relevant Secretariat-led initiatives. The Co-Chairs of both Bureaus have also held regular discussions. It was reiterated that both Bureaus agree that coordination involves substantive discussions on a range of cross-cutting issues to ensure alignment and consistency and avoid unnecessary duplication and overlap. It was noted that a single team from the WHO Secretariat is supporting both Bureaus in delivering their mandates.

8. Dr Mike Ryan, Executive Director of the WHO Health Emergencies Programme, on behalf of the Director-General, addressed the Working Group and delivered supportive remarks for the work of the WGIHR and the Review Committee. Ambassador Juan José Gómez-Camacho, Vice-Chair of the Review Committee, then introduced the report of the Review Committee. Dr Clare Wenham, Rapporteur of the Review Committee, then provided an overview of the report of the Review Committee, as contained in document A/WGIHR/2/5.

9. The Working Group then proceeded with a general discussion of the proposed amendments, and Member States and relevant stakeholders were invited to share their general views in a plenary session. Following this initial general discussion, the Working Group transitioned into a drafting session and proceeded with the first reading of the proposed amendments.³ The Working Group had a general discussion on Article 2 “Purpose and scope” and Article 3 “Principles”, and it was noted that further consideration of the specific amendments proposed to Articles 2 and 3 would be taken up again later in the negotiations. The Working Group then considered the proposed amendments sequentially, including Articles 4–56 and the Annexes.

10. The Bureau presented a proposal for the grouping of the proposed amendments in relevant clusters, based on discussions during the first reading session (Annex 1). There was general support for the proposed groupings and the three groups of proposed amendments to be considered at the third

¹ Document A/WGIHR//2/8 Rev.1.

² Document A/WGIHR/2/4 Rev.1.

³ See document A/WGIHR/2/6.

meeting of the WGIHR with the understanding that the considerations of the groupings remain flexible and that Articles 2 and 3 may be considered throughout the discussions (Annex 2).

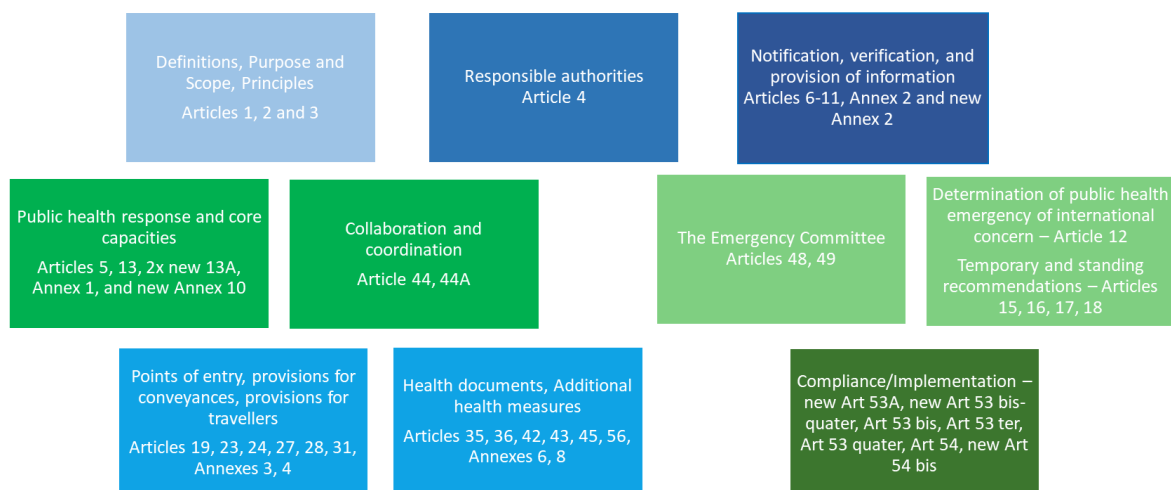
11. It was stressed that amendments should be examined holistically and with due consideration to related articles, and the final outcome of the negotiations will be presented as a package of targeted amendments, in alignment with decision WHA75(9) (2022).

12. It was agreed that the Bureau, with the support of the Secretariat, will facilitate, during the intersessional period, informal work on an inclusive basis, in the six official languages, for the purpose of advancing matters that may assist the work of the third meeting of the Working Group. Several Member States proposed to consolidate and align some proposed amendments through intersessional consultations. The details for the intersessional activities to be conducted in a hybrid mode and with simultaneous interpretation will be provided by the Bureau through the Secretariat to all members of the WGIHR, including Member States and Observers, following the agreed composition of the WGIHR for drafting sessions. The outcome of the consultations will not have the status of an agreed text.

13. The Working Group considered and approved its meeting report, and the Co-Chairs closed the session.

ANNEX 1

BUREAU'S PROPOSAL FOR THE POTENTIAL GROUPING OF PROPOSED AMENDMENTS



ANNEX 2

PROPOSED AMENDMENTS FOR CONSIDERATION AT THE THIRD MEETING OF THE WORKING GROUP, 17–20 APRIL 2023

Compliance and Implementation Committees

- New Article 53A: Establishment of an Implementation Committee
- New Chapter IV (Article 53 bis-quater): The Compliance Committee
- Article 53 bis: Terms of reference and composition
- Article 53 ter.: Conduct of business
- Article 53 quater: Reports
- Article 54: Reporting and review
- New Article 54 bis: Implementation

Public health response and core capacities

- Article 5: Surveillance (except paragraphs 4, new 4 and three new 5, to be taken together with Articles 6–11 in another grouping)
- Article 13: Public health response
- New Article 13A: WHO Led International Public Health Response
- New Article 13A: Access to Health Products, Technologies and Know-How for Public Health Response
- Annex 1 A: Core capacity requirements for surveillance and response
- Annex 1 B: Core capacity requirements for designated airports, ports and ground crossings
- New Annex 10: Obligations of duty to cooperate

Collaboration and coordination

- Article 44: Collaboration and assistance
- New Article 44A: Financial Mechanism for Equity in Health Emergency Preparedness and Response

If time permits:

Responsible authorities

- Article 4: Responsible authorities

Emergency Committee

- Article 48: Terms of reference and composition
- Article 49: Procedure

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