

## **International Dialogue on Migration (IDM)**

### **International Migration Review Forum (IMRF) on the Global Compact for Migration (GCM) Implementation in Practice: Successes, Challenges and Innovative Approaches**

#### **Day Two – Facilitating regular migration (1<sup>st</sup> March 2022)**

#### **Panel 2: Enhancing predictability and addressing inequalities for the future of human mobility in the pandemic era**

##### **Opening remarks**

- WHO is grateful for the opportunity to join this discussion on addressing inequalities affecting human mobility in the pandemic era.
- Reflecting on the past two years, we learnt that how pandemics – and our response to them – can exacerbate existing inequities, and lead to higher rates of extreme poverty. A pathogen can thrive when there are inequities in access to medical countermeasures – such as personal protective equipment, tests, vaccines and treatments – or other essential goods – such as clean water and sanitation - or simply when people cannot physically distance, as is the case for many migrants around the world living and working in crowded conditions. There have also been clear indications of variable access to vaccines for migrant populations worldwide. While we work to increase availability and accessibility to vaccines and medical supplies, we must ensure that those who remain out of reach are looked after.
- We know from history that innovation often results from crises. To accelerate development, production, and equitable access to COVID-19 tests, treatments, and vaccines, WHO has launched ACT-Accelerator with partner in April 2020, the ACT- A has become the fastest, most coordinated, and successful global effort to develop tools to fight a disease. In particular the vaccine arm of ACT-A, COVAX, has shipped over 500 million donated doses to 105 countries so far. We must make sure that the successes from our collective response to the COVID-19 pandemic inform our future actions on public health emergency preparedness and response.
- In this regard, at the Special Session of the World Health Assembly (WHA), which took place in November of last year, a decision was taken by Member States to negotiate a convention, agreement or other international instrument on pandemic preparedness and response. This new instrument will need to encompass the challenges related to population mobility during health emergencies, applying the lessons learnt from the COVID-19 pandemic. It needs to be forged from the recognition that we have no future but a common one.
- Key processes of relevance for the future of the global health emergencies are taking place in parallel:
  - The Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies (WGPR) was established with a mandate derived from resolution WHA74.7, to consider the findings and recommendations of the Independent Panel for Pandemic Preparedness and Response, the Review Committee on the

functioning of the International Health Regulations (2005) during the COVID-19 Response and the Independent Oversight and Advisory Committee for the WHO Health Emergencies Program, taking into account relevant work of WHO, of other relevant bodies, organizations, non-State actors. The group has been working relentlessly during the past year, will present its final report of proposed actions for the WHO Secretariat, Member States, and non-State actors.

- Second, negotiations among Member States are ongoing for the potential strengthening of the IHR (2005) through targeted amendments, which would be limited in scope and address specific and clearly identified issues.
  - The first meeting of the intergovernmental negotiating body (often referred to as the INB), which is negotiating this new instrument, took place last week to elect its bureau and discuss its modalities of work. The next step in the process will be to conduct public hearings before its second meeting, which must take place no later than 1 August 2022. It will be important that IOM, as well as other partners, use this opportunity to share its ideas and proposals with the INB during the public hearings. The INB is then expected to conclude its work and present it for the consideration of the World Health Assembly in May 2024.
- Another important stream of work for this area is the Member State-led discussions on the sustainable financing of WHO. Closing the existing financial gap is essential if we aim to build a strong, effective, empowered, efficient, accountable, and sustainable World Health Organization that is able to operate as the directing authority for global health, which is acknowledged by member states during the deliberations. In addition to progress against these intergovernmental processes, we must also continue taking steps now to make our tools, our systems, and our policies work for the protection and promotion of the public health of all, not just some countries or some segments of the population.
  - Let me echo just two immediate actions, according to COVID 19 emergency committee:
    - First, WHO calls on countries to lift or ease international traffic bans. While blanket travel bans may delay the importation of the virus, they will not prevent the international spread, and they place a heavy burden on lives and livelihoods – often affecting mobile populations the most.
    - Second, WHO calls on countries to ensure that proof of COVID-19 vaccination is not the only pathway to enter into or exit from a country, given the limited global access and inequitable distribution of COVID-19 vaccines.
  - Lastly, much work has also been done to promote an equitable and ethical use of digital tools during the COVID-19 pandemic. WHO has published guidance on how to develop and implement digital health certificates for COVID-19 vaccination and laboratory test results. In addition, we are also supporting countries to implement these digital health solutions, including through the creation of open-source software tools that countries can adapt and implement on their own. Finally, WHO is in the process of reviewing the paper-based yellow booklet that contains the International Certificate for Vaccination and Prophylaxis (ICVP) to include an additional section on COVID-19 laboratory results, and after that, to work towards a digital format of the booklet. We are making efforts to ensure that all these initiatives promote safe human mobility and do not exacerbate existing inequalities among the most disadvantaged.