



### 13.3 Working Group on Amendments to the International Health Regulations (2005)

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The WGIHR has not delivered on its mandate to incorporate equity into the IHR.

Despite recognizing equity and solidarity as guiding principles, the text uses non-binding terms like "encourage", "to the extent possible", and "subject to applicable law and available resources" in Articles 13 and 44, compromising operationalization of equity. Strengthening local production, facilitating R&D and technology transfer depends on "mutually agreed terms".

Lack of consensus on definitions of "relevant health products" and "pandemic emergencies" will undermine fair and equitable access to medicines, vaccines, and diagnostics.

Proposed amendments to Article 4 increase MS' administrative burden, yet processes for requesting WHO's assistance are not improved.

WGIHR's failure to establish a new fund accountable to IHR Parties encourages reliance on donor-driven funding that prioritizes surveillance over core prevention and response capacities.

We request MS to continue the process to establish legal binding solutions for equity in health emergencies.

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*WHO Watch, People's Health Movement*

*Democratising Global Health Governance Program*

<https://phmovement.org/>