

# Aide-Mémoire

## Update on International Health Regulations negotiations and consultation ahead of World Health Assembly

<b>Date due to MO:</b>	26 April 2024	<b>Action required by:</b>	N/A
<b>Security level:</b>	IN CONFIDENCE	<b>Health Report number:</b>	H2024039280
<b>To:</b>	Hon Dr Shane Reti, Minister of Health		
<b>Consulted:</b>	Health New Zealand: <input type="checkbox"/> Māori Health Authority: <input type="checkbox"/>		

### Contact for telephone discussion

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## Update on International Health Regulations negotiations and consultation ahead of World Health Assembly

**Date due:** 26 April 2024

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**To:** Hon Dr Shane Reti, Minister of Health

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**Details of meeting:** World Health Assembly 27 May – 1 June 2024, Geneva.

**Purpose of proposal:** This aide-mémoire provides an update on negotiation progress for the International Health Regulations (IHR), and how feedback from public consultation relates to the New Zealand position and negotiating mandate (appendix one). Reactive lines are provided in preparation for any interest following the public release of the updated negotiation text on the World Health Organization's (WHO) website (appendix two). An overview of next steps leading up to the World Health Assembly is also provided (appendix three).

**Comment:** **Negotiations are ongoing for IHR and pandemic treaty**

- Cabinet renewed the negotiating mandate for both the IHR and pandemic treaty on 19 February 2024 (CAB-24-MIN-0032). The high-level principles are to preserve domestic flexibility; prioritise prevention; support developing countries ability to prevent and respond to pandemic; ensure transparency and human rights; and ensure consistency with international law.
- Negotiations for proposed amendments to the IHR are progressing well. Final IHR negotiations are scheduled from 22 to 26 April 2024, in Geneva.
- Negotiations for the pandemic treaty have been extended for a two-week session and will occur following the IHR negotiations. There are significant outstanding issues on financing, governance, and access to vaccines and diagnostics. If it becomes clear that a treaty cannot be concluded in the next negotiating round, a stocktake will be taken around potential alternative outcomes and how to best ensure the success of the IHR.

- Any final agreed text of either instrument will be considered for adoption at the World Health Assembly at the end of May 2024. There is a possibility that neither IHR amendments nor pandemic treaty will be considered.

### **We have completed public consultation on the IHR**

- On 18 April 2024, WHO published the latest IHR draft text for the final round of negotiations. We expect public interest in this updated negotiation document.
- We do not see consultation as needed on this version of the text as it is only a proposal and likely to change before the World Health Assembly, and the thorough treaty examination process following any adopted approaches or resolutions.
- Summary of submissions from the public consultation we conducted on the earlier 300 IHR amendments proposed by WHO member states in 2022 (H2024035891 refers) was published on the Ministry of Health website on 4 April 2024.
- The vast majority of submissions strongly opposed the proposed amendments to the IHR. A common concern raised in the submissions was that the amendments would require New Zealand to cede parts of its sovereignty. Appendix one outlines how the themes of what we heard during public consultation relate to the New Zealand negotiating position.

### **Next steps in the lead up to World Health Assembly**

- Following the completion of negotiations for both the IHR and the pandemic treaty, we will provide further advice on potential outcomes of both instruments to be considered at the World Health Assembly 27 May – 1 June 2024.
- Any adoption at the World Health Assembly will need to be considered for ratification within New Zealand. This will involve a standard treaty examination process including public consultation as part of the National Interest Analysis.



Tagaloa Dr Junior Ulu  
Acting Deputy Director-General  
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# Appendix one

## Themes from public consultation and how they relate the New Zealand position and negotiating mandate

On 19 February 2024, Cabinet agreed on a renewed negotiating mandate (CAB-24-MIN-0032.01). The high-level themes from the public consultation are linked with decisions from Cabinet which cover the negotiation mandate (decisions 3.1 – 3.5) and additional decisions around finance and consultation.

Themes from the public consultation	Specific decisions made by Cabinet 19 February on the IHR and pandemic treaty negotiating mandate
New Zealand should not cede power to an unelected body and elected NZ authorities should retain their power	<p><b>3.1 Preserve domestic flexibility</b></p> <p>3.1.1 New Zealand should support an approach which preserves the right of States under international law to legislate, make policy and to implement measures in pursuance of their health objectives.</p> <p>3.1.2 New Zealand should seek international rules with flexible reservation provisions.</p>
Criticism of WHO around the handling of the COVID-19 pandemic with a focus on lessons learnt	<p><b>3.2 Prioritise prevention</b></p> <p>3.2.1 New Zealand should seek international rules with clear and practical prevention measures to address situations where significant risks of pandemic threats may arise, particularly in countries where humans live in close contact with wild animals.</p>
Make IHR fit for purpose for next pandemic	<p><b>3.3 Supporting developing countries' ability to prevent and respond to pandemics</b></p> <p>3.3.1 New Zealand should support international rules that enable effective capacity building and assistance to developing countries to meet their obligations.</p>
Strengthen equitable outcomes and consider needs of Pacific neighbours	<p>3.3.2 New Zealand should support proposals that assist developing countries to prevent and respond to pandemics where those proposals have a wide level of support (including from New Zealand's close partners), are practicable, effective, will provide real benefits to Pacific countries, and do not adversely affect New Zealand's broader interests set out in this paper.</p>
Individual rights and freedoms should not be diminished or taken away	<p><b>3.4 Transparency and human rights</b></p>

<p>Concern around the WHO's integrity and influence from pharmaceutical manufacturers and non-governmental organisations</p>	<p>3.4.1 New Zealand should support clear and credible transparency and accountability obligations on States and the WHO.</p> <p>3.4.2 New Zealand should support international rules that uphold respect for fundamental human rights.</p>
<p>Lack of trust and scepticism regarding science and evidence used by the WHO to provide advice and guidelines</p>	<p><b>3.5 Consistency with the mandate of the WHO and other areas of international law</b></p> <p>3.5.1 New Zealand should support international rules that are consistent with other areas of international law including trade and intellectual property law.</p> <p>3.5.2 New Zealand should support approaches which are consistent with the existing mandate of the WHO and do not undermine the mandate of other international organisations.</p>
<p>Consultation process not being based on the final version</p>	<p>4. noted that any decision to become bound by either the amended IHR or a new Pandemic Treaty would be subject to the full treaty making process including Cabinet approval, a National Interest Analysis and Parliamentary Treaty Examination Process</p> <p>7. Noted that a National Interest Analysis to consider whether New Zealand should withdraw its rejection to the Article 59 amendments would be able to be considered together with the National Interest Analysis for the additional and more substantive amendments to the IHR</p>
<p>IHR provisions should be non-binding</p>	
<p>Concern over the use of funding by WHO and financial contribution to WHO by New Zealand.</p>	<p>5. noted that if negotiations on the IHR and/or Pandemic Treaty conclude successfully there may be some financial implications associated with giving effect to any new obligations and that such costs and the agencies which will bear them, once known, will be considered by Cabinet if and when Cabinet is asked to agree in principle that New Zealand should become bound by either instrument.</p> <p>6. agree that any financial implications associated with giving effect to any new obligations will be fully costed to support Cabinet in considering whether to agree in principle that New Zealand should become bound by either instrument and that such costs will be met within existing baselines.</p>
<p>New Zealand should withdraw from WHO</p>	<p>New Zealand is not planning to withdraw from WHO</p>
<p>Opposition to replacing the commitment to human rights with principle of 'equity, inclusivity and coherence'</p>	<p>Not covered</p>

# Appendix two

## Reactive talking points on IHR consultation

s 9(2)(g)(i)

PROACTIVELY RELEASED