

# Will Ebola change the game?: 10 essential reforms before the next pandemic

**Harvard-LSHTM Independent Panel on the Global Response to Ebola**  
WHO Executive Board Information Session  
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## Harvard-LSHTM Independent Panel on the Global Response to Ebola

### Leadership

- Dr. Peter Piot, London School of Hygiene & Tropical Medicine (Chair)
- Dr Devi Sridhar, University of Edinburgh (Co-chair)
- Dr Muhammad Pate, Duke University (Co-chair)
- Dr Ashish Jha, Harvard University (Co-chair)
- Dr Suerie Moon, Harvard University (Study Director)

### Panel Members

- Dr Chelsea Clinton, Bill, Hillary & Chelsea Clinton Foundation
- Ms Sophie Delaunay, Médecins Sans Frontières
- Ms Valnora Edwin, Campaign for Good Governance
- Dr Mosoka Fallah, Action Contre La Faim International
- Prof David Fidler, Indiana University Maurer School of Law
- Ms. Laurie Garrett, Council on Foreign Relations
- Dr Eric Goosby, University of California, San Francisco
- Dr Larry Gostin, Georgetown University
- Dr David Heymann, Chatham House
- Dr Kelley Lee, Simon Fraser University
- Dr Gabriel Leung, The University of Hong Kong
- Dr Steve Morrison, Center for Strategic and International Studies
- Dr Jorge Saavedra, AIDS Healthcare Foundation
- Dr Marcel Tanner, Swiss Tropical & Public Health Institute

# WHAT WENT WRONG? SYSTEM FAILURES ACROSS 4 PHASES OF THE OUTBREAK

## **Pre- & Phase 1: Dec 2013-Mar 2014**

- Inadequate investment in national core capacities
- Inadequate monitoring of commitments to build capacities
- Inadequate incentives for outbreak-relevant R&D

## **Phase 2: Apr-July 2014**

- Little incentive for early reporting
- Insufficient technical capacity among national and int'l teams
- WHO slow to mobilise global attention or assistance

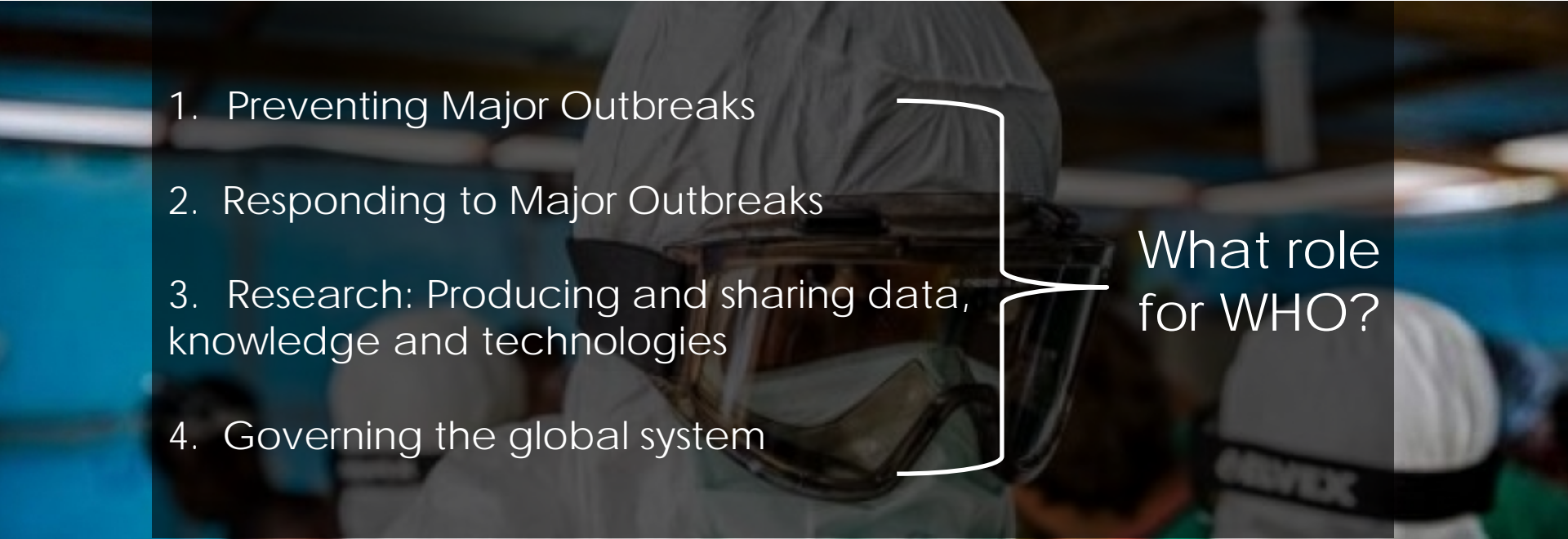
## **Phase 3: Aug-Oct 2014**

- Widespread disregard for WHO recs to limit trade & travel restrictions
- Slow global operational response
- Unclear responsibility for coordination
- Weak channels for previous lessons
- Less access to drugs & medevac for West Africans vs internationals
- Poor understanding of community engagement

## **Phase 4: Oct 2014-present**

- Weak coordination of global operational response
- Inadequate transparency on resource flows
- Weak accountability for use of funds at all levels

# 10 REFORMS ACROSS 4 AREAS:

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1. Preventing Major Outbreaks
  2. Responding to Major Outbreaks
  3. Research: Producing and sharing data, knowledge and technologies
  4. Governing the global system

What role  
for WHO?

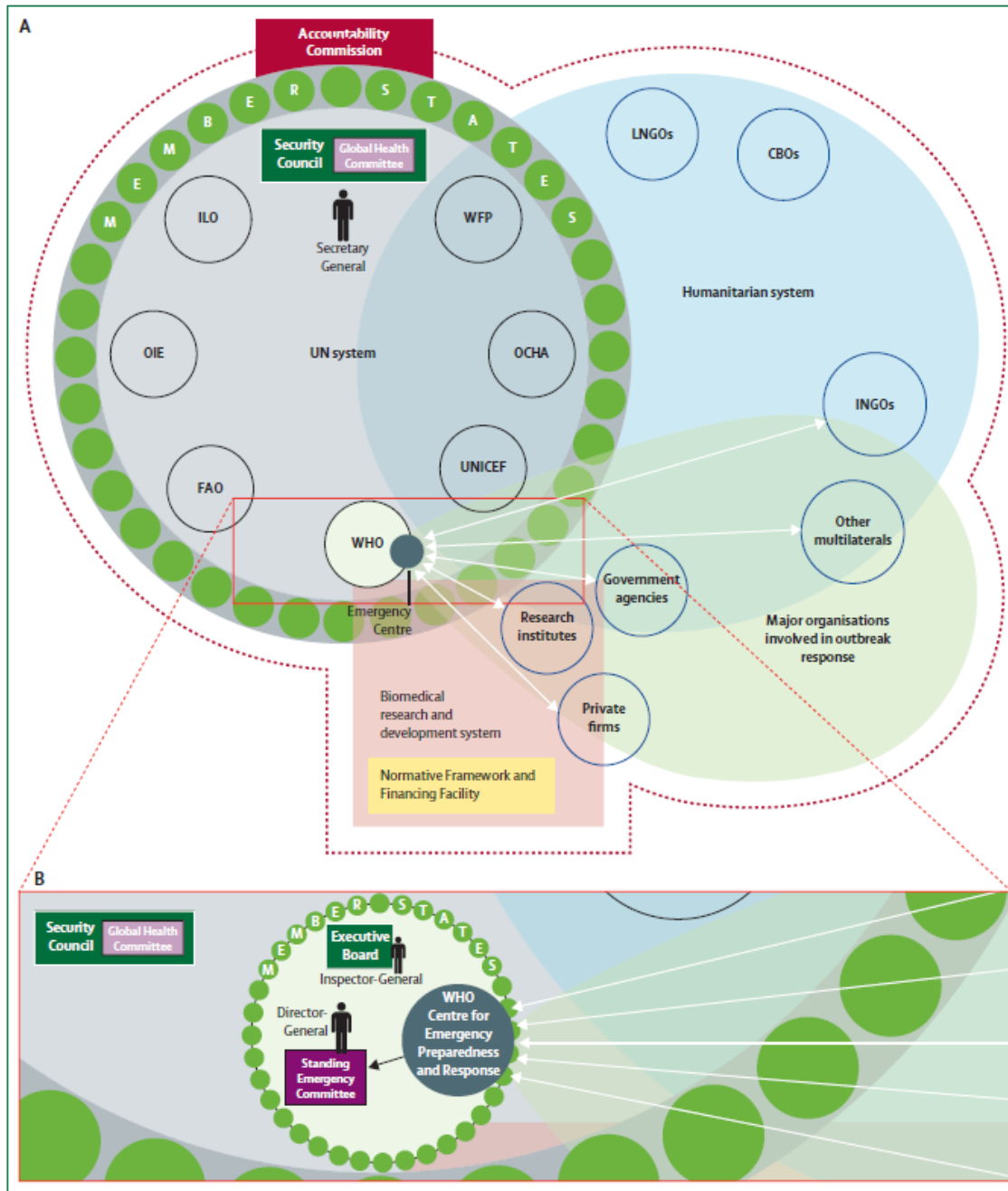
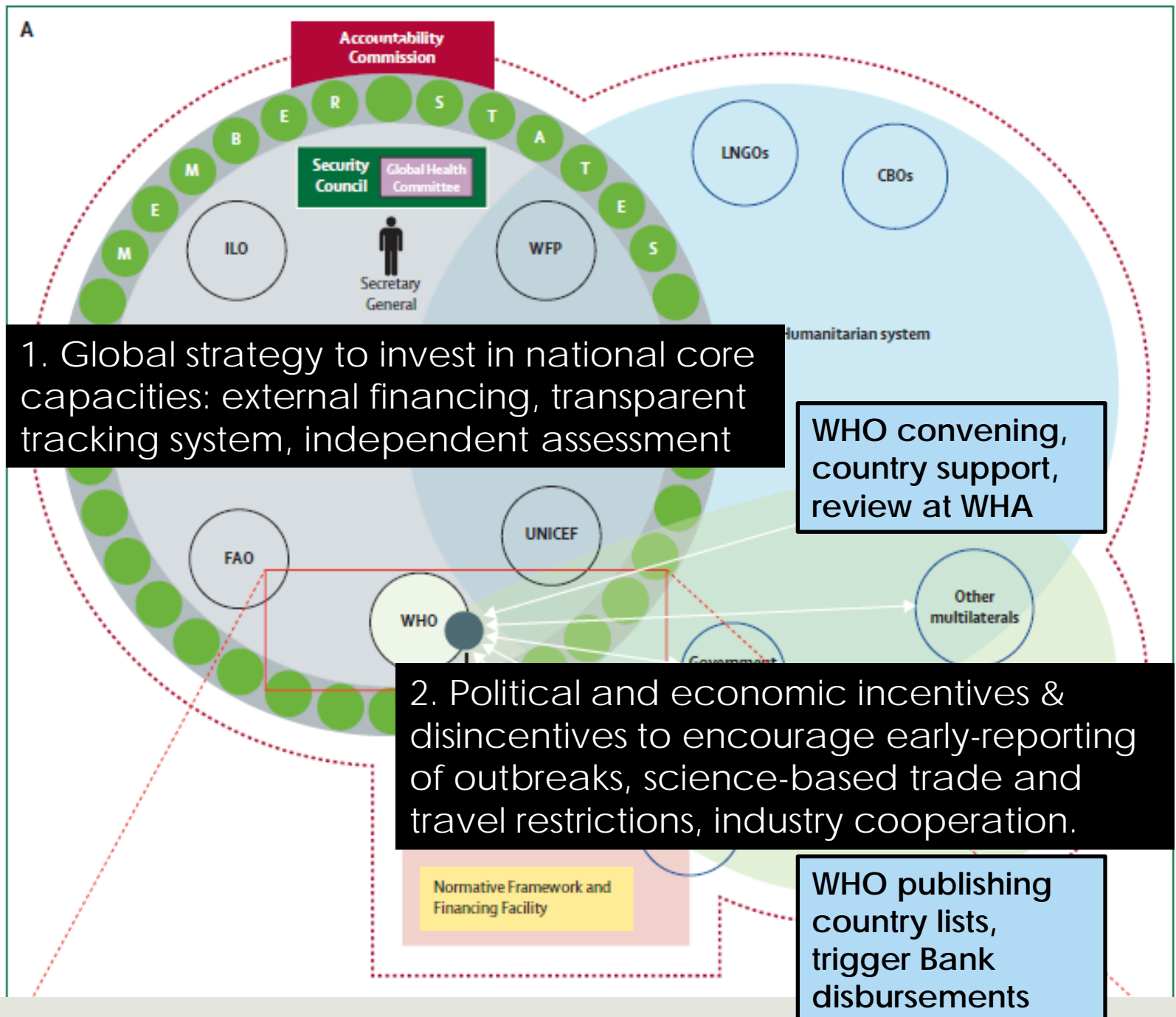


Figure 2: Framework of reform proposals





3. WHO Emergency Centre: strong technical capacity, protected budget, clear accountability to separate Board



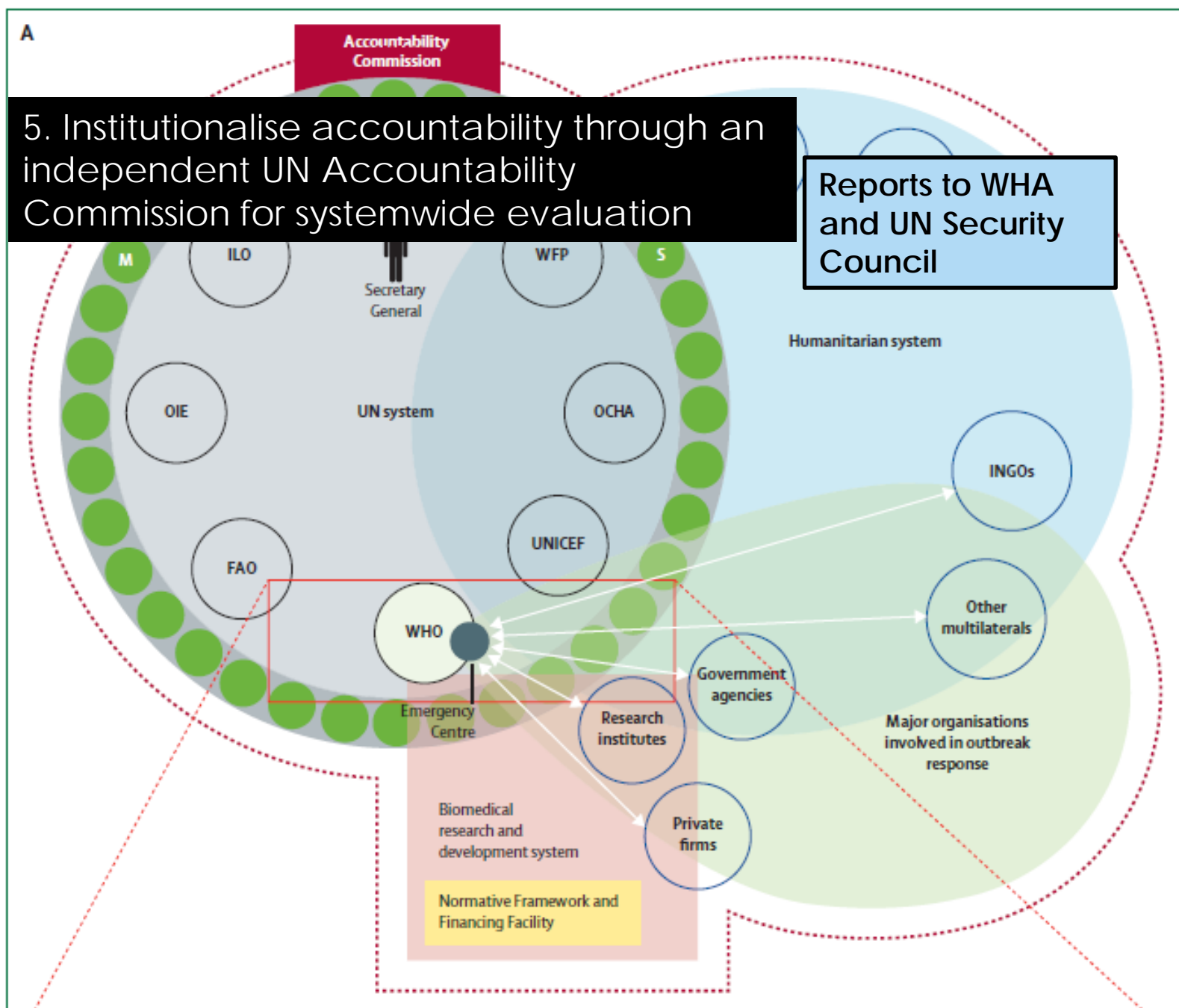
4. Transparent, politically-protected WHO Standing Emergency Committee to declare Public Health Emergencies of International Concern

WHO issues early warnings, annual reports, triggers emergency \$ and data-sharing rules

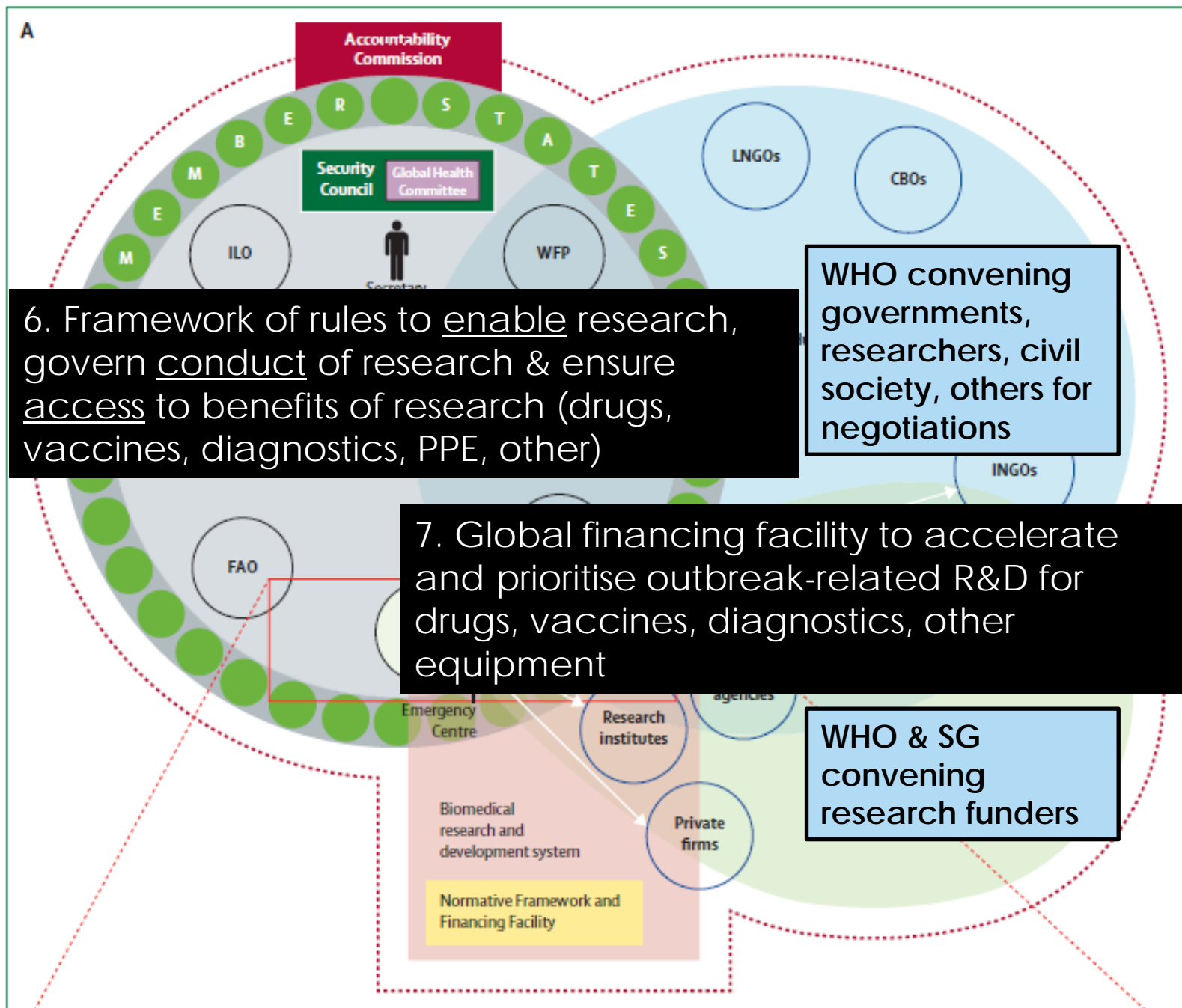
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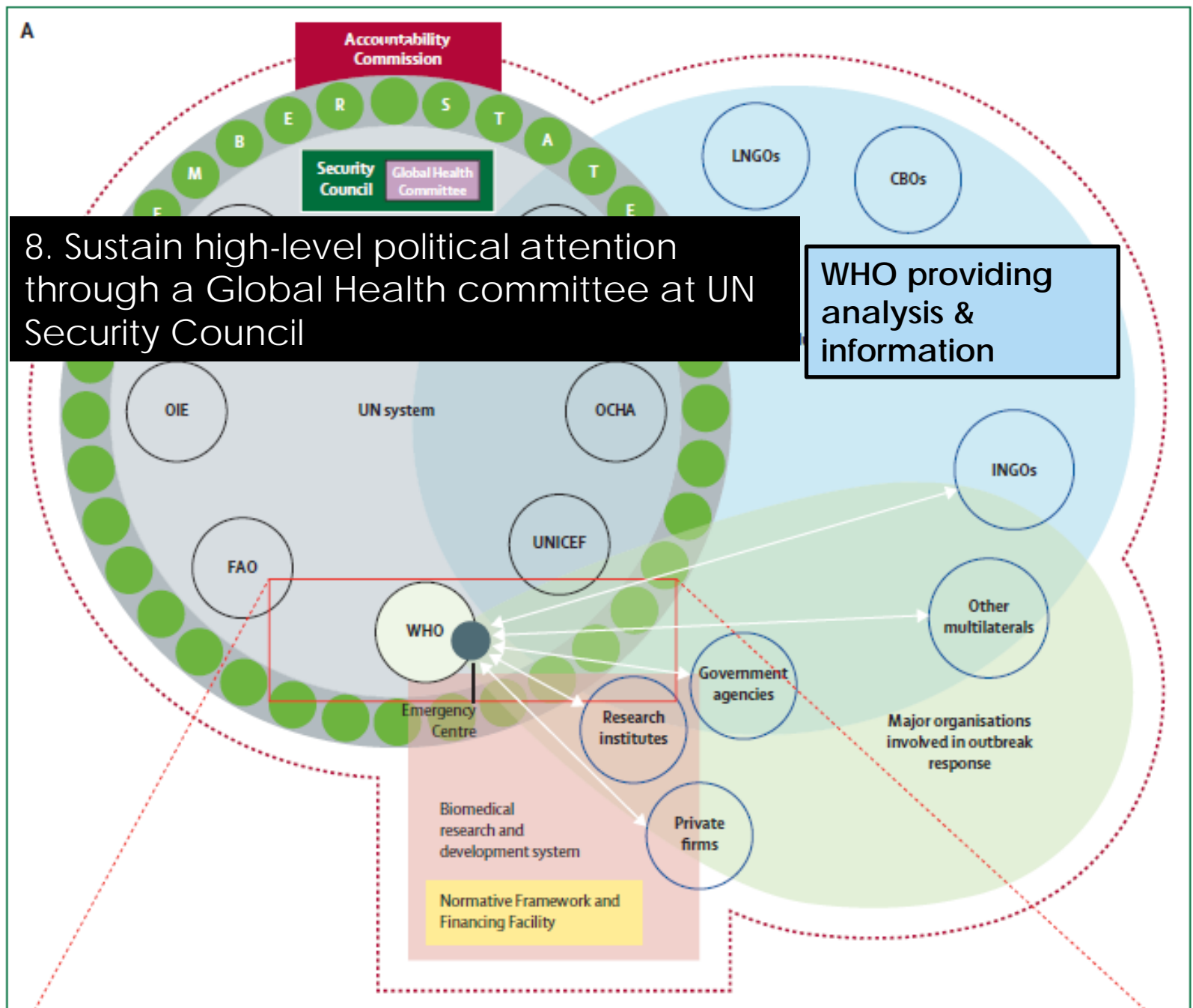
5. Institutionalise accountability through an independent UN Accountability Commission for systemwide evaluation

Reports to WHA and UN Security Council









9. A new deal for a more focused, appropriately-financed WHO: define core functions, match with untied financing

EB to review WHO core functions across health (broadly defined)



10. Good governance of WHO: freedom of information policy, Inspector General, non-state actors policy, human resource reform incl. leadership selection & accountability

EB to adopt good governance reforms

# Reflections

1. WHO role central, irreplaceable, essential
2. Many new demands on WHO requires restoring confidence
3. Feasible if significant reforms beyond resources – governance, culture and leadership

# THANK YOU

*Questions & comments welcome:*

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