Chairman Wenstrup, Ranking Member Ruiz, and Members of the Subcommittee, it is an honor to be with you to discuss the Biden-Harris Administration’s ongoing work to enhance our global health security architecture following the COVID-19 pandemic, including ongoing efforts to strengthen and improve the World Health Organization (WHO). We know there is no ocean large enough to prevent Americans from confronting an uncontrolled virus that can spread rapidly across the globe. That is why the Department of Health and Human Services (HHS), along with my colleagues across the Administration, are working tirelessly to ensure that WHO is effectively delivering on its mission, thereby keeping Americans safe from public health threats no matter where they might emerge.

The HHS Office of Global Affairs (OGA) leads U.S. engagement with WHO, working closely with the Department of State (DOS), the United States Agency for International Development (USAID), and other interagency partners. As the Assistant Secretary for Global Affairs, I have served as the alternate U.S. representative to the WHO Executive Board since 2022, a position in which I have led efforts to reform WHO in collaboration with our allies.

The world has been profoundly impacted by the COVID-19 pandemic, with approximately seven million lives lost globally, including more than one million lives lost in the United States. We know that our global response to this crisis was critical to saving American lives. The pandemic also exposed gaps in our global health security architecture that must be addressed, as it is only a matter of time before the world faces another potential pandemic.

HHS is taking significant action to implement lessons learned from COVID-19 across the global community, as part of our broader efforts to ensure that we are better prepared for the next public health emergency. Working with international partners and across sectors in these efforts is critical. To that end, HHS has spearheaded the following actions to improve our global health security:

- Expanding bilateral and regional health security partnerships to foster collaboration with countries around the world;
- Working with the private sector to support an improved medical countermeasures ecosystem, so countries can secure more equitable access to safe and effective vaccines, tests, treatments, and other supplies when they need them most; and
- Working with our partners to modernize WHO so that the global community can respond to the next public health threat in a more rapid, coordinated, transparent, and equitable way. Notably, these efforts include amending the International Health Regulations (IHR),
which are a foundational international legal instrument for addressing and preventing the global spread of disease, to make the regulations clearer, more precise, and better fit for their purpose; and working on negotiations for a Pandemic Agreement to strengthen pandemic prevention, preparedness, and response.

WHO has been on the frontlines of nearly every global health challenge over the last 75 years, combatting, containing, and eradicating some of the planet’s most deadly diseases. Currently, WHO is responding to dozens of health emergencies around the world, including in Gaza, Ukraine, Haiti, Pakistan, and Malawi. Accomplished through a long-standing partnership with the United States and other global partners, WHO’s efforts to control and eliminate malaria, implement global disease surveillance for the polio virus, support measles immunization campaigns, and strengthen the health sector’s response to HIV/AIDS and tuberculosis are among the vital functions that the organization continues to drive today. Simply put: an effective WHO is essential for protecting global health and safety—including the health and safety of the American people. If the organization did not exist, we would need to create it.

In recent years, WHO has undergone reform efforts following lessons learned from infectious disease outbreaks. In 2005, WHO Member States revised the IHR following the SARS outbreak, which rapidly spread to more than two dozen countries spanning four continents, while infecting over 8,000 people and killing close to 800 in the span of eight months. These revisions were intended to improve transparency and reinforce and expand obligations of countries to provide accurate, timely, and sufficient information related to such outbreaks. After the 2014 West Africa Ebola outbreak, WHO Member States created the WHO Health Emergencies (WHE) Program, which works with all countries and partners to ensure the world is better prepared for all-hazards health emergencies that threaten global health security.

Although these reforms introduced important mechanisms and processes needed to respond to international health emergencies, the COVID-19 pandemic revealed major gaps in the global health security architecture. For example, certain countries did not live up to their obligations under the IHR, and communication challenges opened the door for misinformation and disinformation to spread.

The United States and likeminded partners have taken key lessons back to WHO as specific priorities to improve the organization’s transparency, accountability, and effectiveness. As my testimony today details, WHO has been responsive to our reform priorities—which cover efforts to strengthen health security and pandemic preparedness as well as institution-wide reforms—as WHO builds on a strategic plan to modernize the organization.

**Strengthening Global Health Security and Pandemic Preparedness**

As part of our ongoing work to enhance health security and improve pandemic preparedness, we are focused on strengthening the effectiveness and sustainability of the WHE Program. The United States is working to advance several amendments to the IHR that are designed to make the regulations clearer, more precise, and better fit for their purpose. We are suggesting changes to make processes clearer, share information faster, and respond to serious global health threats more quickly so that health emergencies do not become even bigger global threats. Specifically, our amendments seek to clarify early-warning triggers for international response to widespread
health emergencies, enhance biosafety and biosecurity, ensure rapid information sharing, improve WHO’s ability to use publicly available information to assess global health threats, and create a mechanism to improve implementation and compliance with the IHR, among other reforms.

The United States is also advancing its longstanding objectives and priorities for the Pandemic Agreement, which is the subject of ongoing negotiations that HHS is co-leading with DOS. The United States is providing leadership in the negotiations to ensure an Agreement that protects national security and global peace and security, thus—

1. Enhance the capacity of countries around the world to prevent, prepare for, detect, and respond to pandemic emergencies and provide clear, credible, consistent information to their citizens.
2. Ensure that all countries share data and laboratory samples from emerging outbreaks with pandemic potential more quickly and transparently to facilitate response efforts, including the rapid creation of safe and effective vaccines, tests, and treatments.
3. Support more equitable access to, and delivery of, vaccines, tests, treatments and other mitigation measures in order to quickly contain outbreaks, reduce illness and death, and minimize impacts on the economic and national security of people around the world.

As always, this Administration’s north star in these negotiations is protecting and strengthening the health and wellbeing of the American people. Infectious disease outbreaks can arise from anywhere in the world. U.S. national security and prosperity depends on all countries being prepared to rapidly prevent, detect, and respond to infectious disease threats. Unfortunately, that’s not currently the case. Ultimately, we know that a successful Pandemic Agreement means shared responsibilities by all nations while protecting national sovereignty.

Beyond these ongoing negotiations, since 2015, the United States has been working in partnership with other countries to strengthen critical health security capacities. Thanks to bipartisan budgetary support from Congress, the United States is providing support to over 50 countries globally to strengthen global health security. This support strengthens our collective ability to prevent, detect, and respond to future pandemics and other health emergency threats—reducing the risks that these threats pose to the American people and the entire world.

The United States also moved to strengthen governance and oversight of the WHE Program by pursuing the establishment of the Standing Committee on Health Emergency Prevention, Preparedness, and Response (SCHEPPR), which provides us with an additional opportunity to review the work of the WHE Program and make recommendations to the WHO Executive Board. The SCHEPPR facilitates direct Member State oversight of the WHE Program, which helps ensure Member States can directly coordinate with WHO senior leadership in organizing response activities in a transparent and accountable manner. It will also provide the first direct Member State governance mechanism that oversees WHO’s work in natural and manmade hazards, including humanitarian emergencies and fragile, conflict-affected and vulnerable countries.

In addition to SCHEPPR, the United States has worked to ensure that the WHO Scientific Advisory Group on the Origins of Novel Pathogens (SAGO), a new body set up in the wake of
the COVID-19 pandemic, is an effective and trustworthy body that facilitates the investigation of future outbreaks of novel disease, while also continuing to press the People’s Republic of China for cooperation and transparency regarding the origins of COVID-19. Regrettably, the People’s Republic of China continues to block further investigation into the origins of COVID-19. Nevertheless, the United States is committed to advocating for an open, serious, and evidence-based inquiry.

Additional WHO Governance and Oversight Efforts

Reaching agreement to address governance and oversight issues is truly an interagency effort, with HHS, DOS, and USAID working together closely. Across WHO, the United States is working with other WHO Member States to push for enhanced transparency, accountability, and oversight, as well as improved engagement with non-state actors. In May 2022, the World Health Assembly approved setting up a Member States’ Governance Task Group (formally named the Agile Member States Task Group on Strengthening WHO’s Budgetary, Programmatic, and Financing Governance (AMSTG)) to help build out recommendations for such reforms.

As a leader in this Governance Task Group, the United States is actively working to strengthen and reform the WHO’s budgetary, programmatic, and financial governance. This work resulted in two main reform-oriented workstreams. First is a WHO Secretariat-developed Implementation Plan on Reform (Secretariat Implementation Plan). In consultation with the Governance Task Group, the Secretariat of WHO developed an implementation plan focused on specific reforms under the sole remit of the Secretariat, with related timelines for action. This is complemented by a Member State package of recommendations for additional improvements that require joint efforts of Member States and the Secretariat. Together, these workstreams contain a comprehensive suite of reforms for WHO’s budgetary, programmatic, and financial governance.

On behalf of the U.S. government, I had the pleasure of joining other members of the WHO Executive Board to endorse the Secretariat’s Implementation Plan in January 2023. The Secretariat Implementation Plan, which builds on many past reforms and gap analyses in audits and external evaluations, includes 96 actions that are strictly within the Secretariat’s authority to implement. The Secretariat Implementation Plan also includes timelines for completion of the remaining actions in progress over the next two years, with some actions on a longer timetable that will continue beyond 2025. The Secretariat Implementation Plan is intended to be a tool through which the United States and other Member States can monitor Secretariat “owned” governance reforms in the coming years.

Furthermore, with vocal U.S. leadership, at the 75th World Health Assembly in May 2023, Member States approved the Governance Task Group’s recommendations to foster enhanced accountability, transparency, and efficiency at WHO.

In addition, we are pushing at both the Headquarters and Regional levels to ensure that WHO leadership is fit for purpose. We actively worked to ensure that the Regional Director position in the Americas region was appropriately filled, and the United States led from the front to ensure that the Western Pacific Regional Director was held accountable for misconduct. We will continue to engage directly to ensure that the principles of good governance, accountability, transparency, and effectiveness are kept foremost in mind at all levels of WHO.
Global health security efforts continue to be a critical component of our nation’s work to protect health and well-being, both at home and abroad. Following the devastation caused by the COVID-19 pandemic, this Administration is committed to implementing lessons learned and enhancing our global health security architecture, including through ongoing efforts to strengthen and improve WHO—a key partner in this work. These efforts have focused on strengthening global health security and pandemic preparedness, as well as reforms to improve governance and oversight for WHO. At HHS, my team and I continue to work tirelessly, along with our interagency partners and likeminded allies, to see all necessary reforms adopted and implemented.

Since WHO’s founding, two of the greatest health achievements of the 20th and 21st centuries—the elimination of smallpox and significant progress in eradicating polio—have come from the partnership through the United States, WHO, and nations across the globe. The Biden-Harris Administration is committed to building on the legacy of these great achievements through our ongoing work towards a reformed WHO and enhanced global health security architecture—both of which can help us prevent the next pandemic.

Thank you for the opportunity to testify on these important issues.