

Chair's proposal on possible elements of a draft resolution:

Follow up of the report of the Consultative Expert Working Group on Research and Development: Financing and Coordination

The Sixty-sixth World Health Assembly,

PP1 Having considered the report of the Consultative Expert Working Group on Research and Development: Financing and Coordination (CEWG);¹

PP2 Recalling resolution WHA65.22 which requested the Director-General, *inter alia*, to hold an open-ended meeting of Member States² to thoroughly analyse the report and the feasibility of the recommendations proposed by the CEWG;

PP3 Further recalling resolutions WHA59.24, WHA61.21 and WHA62.16; WHA63.28;

PP4 Recognizing urgency to address the health needs of developing countries and the related inequities in the current research landscape;

PP5 Recognizing the need for enhancing investments in health R&D related to Type II and Type III diseases and the specific R&D needs of developing countries in relation to Type I diseases;

PP6 Recognizing the need for improving monitoring of R&D resource flows, coordination of R&D and priority-setting based on the public health needs of developing countries;

PP7 Recognizing the importance of securing sustainable financing mechanisms for R&D to develop and deliver medical technologies to address the health needs of developing countries;

OP1 Calls upon

OP1.1 Member States³, the private sector, academic institutions and nongovernmental organizations (NGOs) to strengthen health R&D capacities and to increase investments in health R&D related to Type II and Type III diseases and the specific R&D needs of developing countries in relation to Type I diseases; [based on WHA65.22]

OP1.2 Member States⁴, the private sector, academic institution and NGOs, to share the information with regard to health R&D with WHO in order to contribute to a Global Health R&D Observatory;

OP2 URGES Member States⁵:

OP2.1 to strengthen health R&D capacities on diseases of Type II, III and specific R&D needs of developing countries on diseases of Type I, through increased financial resources from

¹ Documents A65/24; Annex and A65/24 Corr.1.

² And, where applicable, regional economic integration organizations.

³ And, where applicable, regional economic integration organizations.

⁴ And, where applicable, regional economic integration organizations.

⁵ And, where applicable, regional economic integration organizations.

the existing government budgets and private sources through different incentive schemes, and explore potential new or innovative sources specifically for health R&D;

OP2.2 to establish or strengthen national health R&D observatories for tracking and monitoring resource flows on health R&D, including data on financial and human resources and infrastructure as well as product pipeline and contribute to the work of a global health R&D observatory;

OP2.3 to promote coordination of health R&D among public and private partners in the country, and support regional and global coordination for health R&D in order to maximize synergies and avoid duplications;

OP3 REQUESTS the Director-General:

OP3.1 to support Member States in their endeavor to establish or strengthen health R&D capacities and monitor resource flows in support of health R&D related to Type II and III diseases and the special R&D needs of developing countries in relation to Type I diseases, including data on financial and human resources, infrastructure as well as product pipeline;

OP3.2 to establish a scientifically independent Global Health R&D Observatory within WHO, building, where possible, on national observatories, to monitor resource flows in support of health R&D related to Type II and III diseases and the special R&D needs of developing countries in relation to Type I diseases from both public and private sources, including data on financial and human resources, infrastructure as well as product pipeline;

OP3.3 to develop norms and standards for classification of health research in order to systematically collect and collate data from Member States and other relevant sources;

OP3.4 to establish a systematic independent prioritization process, based on evidence generated from the observatories with the involvement of Member States;

OP3.5 to reconstitute the WHO Advisory Committee on Health Research (ACHR) as an advisory mechanism at a global level to coordinate health R&D drawing membership from existing R&D advisory committees in the different research and disease areas, ensuring appropriate input from regional ACHR, other experts and relevant non-state actors;

OP3.6 to develop strategic research roadmaps for funding, and to facilitate implementation of specific R&D projects for medical technologies [X, Y, Z, to be added following decision by WHA] for selected diseases addressing gaps already identified, and selected by the sixty-sixth WHA following informal consultations of Member States; [proposal of the EU]

OP3.7 to further develop a proposal, to be submitted to the sixty-seventh WHA, to set up a specific vehicle, with a corresponding inclusive governance structure, within one of the WHO-related entities to collect and disburse funds to be devoted to health R&D related to Type II and III diseases and the special R&D needs of developing countries in relation to Type I diseases, in line with Member States' agreed priorities; this vehicle should be able to collect assessed contributions from Member States who have voluntarily adhered to this mechanism, as well as voluntary contributions from other sources;

OP3.8 To report to the sixty-[...] World Health Assembly, through the Executive Board at its [...] session.