Global Health Emergency Corps
Establishment and Initial Progress

Establishment - Learning from COVID-19 and other Health Emergencies

“The GHEC is like an airline alliance for health emergencies. It provides a framework that allows all members to shine, while ensuring that the whole is much greater than the sum of its parts.”

- Mike Ryan, Executive Director, WHO Health Emergencies

The COVID-19 pandemic was a watershed moment in human history, and watershed moments also open opportunities for quantum leaps forward. Of numerous pandemic reviews, the Independent Panel for Pandemic Preparedness & Response (IPPPR) in their report ‘COVID-19: Make it the Last Pandemic’ put it this way:

“Current institutions, public and private, failed to protect people from a devastating pandemic. Without change, they will not prevent a future one. That is why the Panel is recommending a fundamental transformation ...”

Elements of such a transformed system have been enriched by the ideas from thoughtful individual authors and observers, such as Jeremy Farrar (‘Spike’), Debora MacKenzie (‘Stopping the Next Pandemic’), and Bill Gates (‘How to Prevent the Next Pandemic’), among others.

Taking into consideration more than 300 expert recommendations, WHO has been working with Member States and partners to translate these ideas into concrete action that strengthens the global architecture for health emergency prevention, preparedness, response, and resilience (HEPR).

This includes the introduction of a new concept – the five Cs – that encourages countries to adopt a strategic shift focusing on five core health emergency components:

Central to the emergency coordination component, is the need for coordinated leadership, deployable and interoperable rapid response capacities, and a well-practiced emergency workforce to quickly act to contain outbreaks closest to where they start, surge to areas that require additional support, and to mount a coordinated and effective response to a globally spreading pandemic.

**Expected Impact**

### Emergency Workforce
- Countries strengthen their workforces to detect and contain emerging health threats.
- Capacity strengthening is implemented based on international guidance, standards and benchmarks
- Health emergencies are managed closest to where they start

### Surge Capacities
- Countries can scale up response with their own deployable surge capacities and expertise.
- Countries can access trusted existing networks for interoperable surge capacities when required
- No country or district is overwhelmed by emerging health threats

### Connected Leaders
- Leaders have a trusted network to collaborate on regional and global responses to transnational national threats
- Coordinated global solidarity exists when needed
- The next pandemic is stopped
Initial Progress - Alignment, Adaptation and Ownership

Since the launch of the GHEC in May 2023 as a strengthened approach to collaboration for countries and health emergency networks, the initial year’s focus has been to position it for broad impact and foster ownership of the concept with countries and partners. There is growing buy-in for the GHEC vision of a health emergency workforce centered in countries, coordinated regionally and globally. Key highlights include:

Strategic alignment and collaboration at global level

- Establishment of the GHEC secretariat at WHO Headquarters and the maintenance of a global GHEC working group that includes 7 global health emergency networks and 6 WHO regional emergency leaders
- Supporting language included with broad endorsement in the draft article 7 of the Pandemic Accord
- Incorporation of GHEC into future WHO budgets through the GPW14 process
- Initiation of an interim GHEC design/steering group with country and network leaders
- Launch of a globally inclusive process to establish benchmarks for national rapid response capacities

Acceptance and adaptation at regional level

- Establishment of secretariats in each of the 6 WHO regional offices
- Adaptation of the GHEC framework into regional priorities such as the Africa CDC-WHO Joint Emergency Action Plan and AVoHC-SURGE in Africa, adaptation of the leaders’ network in the Eastern Mediterranean, the Regional Health Emergency Corps in Europe, Regional and National Surge Teams in the Americas, and in the preparation of a Regional Health Emergency Workforce Strategy 2025-2030 in Southeast Asia

Leadership and ownership at national level

- Pandemic fund applications from >40 countries underway in multi-country applications include >$100m of requests to support GHEC elements including leaders’ networks, surge capacities, and national emergency workforce components
- Strengthening interoperability of rapid response capacities at country level - in April 2024, a pioneering national level workshop in Ethiopia designed integrated responses between the national Emergency Medical Teams and Public Health Rapid Response Teams

2024 Priorities: Next Steps

- Broadening country support – interim group must design inclusive outreach to bring in others
- Ensuring financing – initial seed funding must be followed by broadened support from countries and multilateral donors
- Demonstrating impact – improved emergency response at the national level, more effective surge responses, and a functioning network of leaders must begin to be evident