

15 April at 14.30

19 pandemic, using the measures taken also to build permanent and sustainable health emergency preparedness and response capacity, and show solidarity to other countries by supporting their responses where possible;

OP3.3 Mindful of their obligation to fully implement the IHR, provide WHO in a timely manner with information related to the COVID-19 pandemic required by the IHR (2005), and share knowledge, data, and lessons learned with WHO and other Member States;

OP3.4 OP3.4 Adopt a human rights-based approach across the whole spectrum of the response to COVID-19, including during the duration of states of emergency, in particular concerning temporary containment measures such as quarantine, paying particular attention to the needs of the most vulnerable groups, people in vulnerable situations and those in need, avoiding stigmatization and discrimination;

OP3.5 Ensure that WHO guidelines for containing and mitigating the outbreak are followed, (including for continuing the provision of essential services to meet priority health needs that are not COVID-19 related,) taking into account the national context and optimal use of available resources; taking into account the national context and optimal use of available resources;

OP3.5bis Ensure that sufficient priority is given to effective hygiene behaviour change communication, linked to improving the availability hygiene related supplies, including soap, and improving sustainable access to safe water especially for vulnerable populations and for health care facilities, paying attention to meeting the needs of people with disability, the old or the infirm.

OP3.6 Ensure access to a range of mental health and psychosocial support services, based on respect for human rights and available in the community, to protect and promote the mental health of the population, and paying particular attention to the needs of people with existing mental health conditions and disabilities and health professionals and other frontline workers;

OP3.7 Ensure access, without discrimination, to reliable information from authoritative sources on the pandemic, on prevention and on access to testing and health services, including to demote misleading content and to address misinformation and disinformation, including misleading content and explore the opportunities of digital technologies in particular through the use of big data and artificial intelligence, while respecting ethical principles and ensuring data security, and the protection of fundamental rights and personal data;

OP3.8 As far as existing international treaties allow, remove the existing barriers in access quality protective equipment, medical devices and other technologies, medicines, and vaccines related to COVID-19;

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OP3.9 Invest in and support rapid research and development of diagnostics, treatments, therapeutics, medicines, and vaccines related to COVID-19 research and development of diagnostics, treatments, therapeutics, medicines, and vaccines as appropriate and to sustainably strengthen national R&D capacities for the current and future outbreaks, and collaborate in order to harmonise efforts as appropriate, with all relevant international actors in this field;

OP3.10 Ensure the rational and prudent use of antimicrobials, in line with guidelines and Access-Watch-Reserve categorisation developed by the WHO as well as those from Codex Alimentarius, and

Commented [JM71]: General comment: this is really important for people with pre-existing health conditions (often v vulnerable and hardest hit by measures such as quarantine esp as this stops them accessing care for their condition) so if this section comes under attack UK should be prepared to fight robustly

Commented [HA72]: This may address our point in PP14 but ideally we would want mental health disabilities mentioned explicitly somewhere

Commented [SA73]: Human rights team would like to keep

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Commented [JM74]: **Rationale:** So WHO has been issuing guidance from various parts of the organisation urging countries to keep prioritising provision of essential services (tailored in a way to protect healthworkers and patients from C19 exposure) but we are increasingly hearing stories of governments not taking this WHO advice. This has potentially disastrous consequences – if endemic countries abandon their basic prevention and control measures during C19 we can expect a massive wave of TB, malaria, HIV, etc. to hit these countries right after the C19 pandemic has peaked

Urgency: high

Commented [SN75R74]: I don't have an issue with this, but are we opening ourselves up to the essential services debate constantly

Commented [PD76]: New OP: Ensure that sufficient priority is given to effective hygiene behaviour change communication, linked to improving the availability hygiene related supplies, including soap, and improving sustainable access to safe water especially for vulnerable populations and for health care facilities, paying attention to meeting the needs of people with disability, the old or the infirm.

Urgency: High

Commented [HA77]: Same as above - not a red line

Commented [SA78]: DCMS - the wording looks fine to us (and broadly consistent with language used elsewhere, e.g. G20 digital ministerial statement). On the question posed about expanding the text - we'd steer against expanding and instead keep it high level to ensure we maintain consistency with approaches being discussed in other forums

Commented [SA79]: NHSX - we would agree with this from the perspective of protecting personal data - however, this would benefit again from clarity on the type of information being referred to.

Commented [SA80]: VR – text on disinformation will be controversial and difficult to agree. Should para be split? The first ...

Commented [SA81]: Could this be expanded to illustrate the type of information and/or data being referred to? Eg in the opening line, when it says that we will ensure access, without discrimination ...

Commented [SA82]: David simmons – proposal to change to consistent definition of 'supply' to "protective and other equipment, medical devices, medicines, vaccines and other health technologies"

Commented [SA83]: DAVID SIMMONS – consistent use of what comes under 'supply'

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Commented [LS84]: Need to inject urgency here given global public value of any effective vaccines, diagnostics and drugs.

Commented [SA85]: **NR** addition to qualify rational and prudent