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# Pandemic Influenza Preparedness Framework

Progress  
report

1 January–  
30 June  
2022



World Health  
Organization



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Progress report

1 January–30 June 2022



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Organization**

Pandemic Influenza Preparedness Framework: progress report, 1 January–30 June 2022

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# CONTENTS

<b>Acronyms and Abbreviations</b>	<b>iv</b>
<b>Introduction</b>	<b>1</b>
<b>PIP Framework implementation overview</b>	<b>3</b>
<b>Technical and financial implementation progress</b>	<b>6</b>
Output reading guide	7
Laboratory & surveillance	8
Burden of disease	10
Regulatory capacity building	11
Risk communications & community engagement	12
Planning for deployment	13
Influenza pandemic preparedness planning	14
PIP Framework Secretariat	15
<b>Stories from the field</b>	<b>17</b>

# ACRONYMS AND ABBREVIATIONS

<b>AGWG</b>	Advisory Group Working Group	<b>L&amp;S</b>	Laboratory and surveillance capacity building
<b>BIRD</b>	Burden of Influenza and RSV Disease	<b>NIC</b>	National Influenza Centre
<b>BM</b>	Biological Material	<b>NDVP</b>	National Deployment and Vaccination Plan
<b>BOD</b>	Burden of disease	<b>PC</b>	Partnership Contribution
<b>CC</b>	Collaborating centre	<b>PIP</b>	Pandemic Influenza Preparedness
<b>CVV</b>	Candidate Vaccine Virus	<b>PISA</b>	Pandemic Influenza Severity Assessment
<b>DEP</b>	Planning for deployment	<b>PSC</b>	Programme Support Costs
<b>ECBS</b>	Expert Committee on Biological Standardization	<b>RCCE</b>	Risk Communications and Community Engagement
<b>EPI-WIN</b>	WHO Information Network for Epidemics	<b>REG</b>	Regulatory capacity building
<b>EQAP</b>	External Quality Assessment Programme	<b>RT-PCR</b>	Reverse Transcription Polymerase Chain Reaction
<b>GISRS</b>	Global Influenza Surveillance and Response System	<b>SARI</b>	Severe Acute Respiratory Infection
<b>HLIP</b>	High-Level Implementation Plan	<b>SMTA2</b>	Standard Material Transfer Agreement 2
<b>ICFS</b>	Interim Certified Financial Statement	<b>US CDC</b>	United States Centers for Disease Control and Prevention
<b>IDP</b>	Institutional Development Plan	<b>VCM</b>	Vaccine Composition Meeting
<b>ILI</b>	Influenza-Like-Illness	<b>WER</b>	Weekly Epidemiological Record
<b>IPPP</b>	Influenza pandemic preparedness planning	<b>WHA</b>	World Health Assembly
<b>IVPP</b>	Influenza Virus with Pandemic Potential	<b>WHO</b>	World Health Organization
<b>IVTM</b>	Influenza Virus Traceability Mechanism		

# INTRODUCTION

The **Pandemic Influenza Preparedness (PIP) Framework** is an innovative public health instrument that brings together Member States, industry, other stakeholders and WHO to implement a global approach to pandemic influenza preparedness and response. The key goals include: to improve and strengthen the sharing of influenza viruses with human pandemic potential through the WHO Global Influenza Surveillance and Response System (GISRS), and to increase the access of developing countries to vaccines and other pandemic response supplies.

The Framework includes a benefit-sharing mechanism called the Partnership Contribution (PC). The PC is collected as an annual cash contribution from influenza vaccine, diagnostic, and pharmaceutical manufacturers that use GISRS. Funds are allocated for: **(a)** pandemic preparedness capacity building; **(b)** response activities during the time of an influenza pandemic; and **(c)** PIP Secretariat for the management and implementation of the Framework.

For pandemic preparedness capacity building, activities are implemented according to six outputs under one outcome in the *High Level Implementation Plan (HLIP) II 2018-2023*. A mid-term external review of HLIP II was conducted in 2021, which led to an update of the indicators and milestones monitored. Reporting against the new measures commenced in 2022.

The technical and financial investments of countries and other partners, including GISRS, play a critical role in advancing pandemic preparedness alongside PC investments. Collectively, resources are used to strengthen pandemic preparedness systems, knowledge and capacities, and support achieving the overall objectives set out in WHO's Global Influenza Strategy 2019-2030. We thank countries and partners for their important role and contribution. The progress made and successes achieved are a result of joint collaboration on common objectives. The PIP PC funding model is described in *HLIP II*, Section 6.

This reporting format addresses the recommendation from the 2016 PIP Review that WHO develop progress reports that present overall success metrics and infographics to illustrate progress in PIP Framework implementation. A progress report is published four times a biennium, and covers technical and financial implementation for HLIP II, as well as the PIP Secretariat. Milestones are reported every six months and indicators are reported yearly. All data are presented cumulatively from the beginning of each biennium, in this case, 1 January 2022.

For financial implementation, progress is reported against biennial workplan allocations. Figures presented exclude WHO programme support costs (PSC) unless otherwise stated. For the mid-year reports, income, expenditures and encumbrances are presented, and are based on WHO's financial tracking system (GSM). For annual and biennial reports, income and expenditures are presented, in line with the yearly WHO Interim Certified Financial Statement (ICFS).

Many staff across WHO Clusters and Departments in all Major Offices support the implementation of the PIP Framework. Without their work, dedication and collaboration, there would be no progress to report on. We extend our sincere thanks to these staff for their invaluable work.

For previous reports, see <https://www.who.int/initiatives/pandemic-influenza-preparedness-framework/partnership-contribution>

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