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OIA 28069

10 June 2022

Personal details removed for proactive release

Personal details removed for proactive release Tena koe

I refer to your email of 15 May 2022 in which you request the following under the Official Information Act 1982 (OIA):

Nanaia Mahuta, Minister of Foreign Affairs, met with World Health Organisation's Dr Tedros Adhanan Ghebreyesus at the end of February/early March 2022. Please supply documentation regarding the purpose of that meeting, documentation reporting the actual content of that meeting and documentation resulting from that meeting.

The information relevant to your request is attached. Some information within these documents is out of scope, and been removed accordingly. The Ministry does not hold any meeting notes from this meeting.

We have withheld some information under the following sections of the OIA:

- 6(a): to avoid prejudicing the security or defence of New Zealand or the international relations of the New Zealand Government;
- 6(b)(i): to protect the passing of information from another government on a confidential basis;
- 6(c): to prejudice the maintenance of the law, including the prevention, investigation, and detection of offences, and the right to a fair trial;
- 9(2)(g)(i): to protect the free and frank expression of opinions by departments; and
- 9(2)(j): to avoid prejudice to negotiations.

Where the information has been withheld under section 9 of the OIA, we have identified no public interest in releasing the information that would override the reasons for withholding it.

Please note that we may publish this letter (with your personal details redacted) and enclosed documents on the Ministry's website.

If you have any questions about this decision, you can contact us by email at: DM-ESD@mfat.govt.nz.

You have the right to seek an investigation and review by the Ombudsman of this decision by contacting www.ombudsman.parliament.nz or freephone 0800 802 602.

Nāku noa, nā

Julie-Anne Lee

for Secretary of Foreign Affairs and Trade

COVID-19: Global response and multilateral engagement

Objectives

- Reinforce New Zealand's commitment to the global pandemic response and highlight our contributions to date.
- Express solidarity with/advocate for the global community to make urgent efforts to
 end the crisis phase of the panemic this year; and seek insights into where we should
 target our efforts.

Talking points

- Reinforce New Zealand's commitment to supporting the global response to the COVID-19 pandemic, including efforts to achieve the WHO target of 70% global vaccination coverage by mid-2022.
- Note that New Zealand recognises that the WHO target for widespread vaccination will be key to ending the crisis phase of the pandemic as soon as possible.
- As vaccine supply improves, the key challenge will be to support countries to deliver successful immunisation programmes. Achieving equity at national, regional and global levels will require different approaches for different communities; and it will require additional resources. This is especially true for indigenous peoples, people in communities that experience poorer health outcomes, and for those facing crises on multiple fronts.
- Highlight New Zealand's direct support for vaccine rollout and COVID-19 preparedness and response in the Pacific as well as our contributions to the ACT-Accelerator. To date our support recognised under ACT-Accelerator amounts to NZ\$58 million and includes:
 - NZ\$26 million to COVAX to support vaccine access (including uptake) in developing countries
 - 9.7 million fully-funded vaccine doses donated to COVAX equivalent to approxima ely two doses for every New Zealander.
 - NZ\$15 million to the Coalition of Epidemic Preparedness Innovations (CEPI) to support global vaccine development and production scale-up
 - NZ\$10 million to UNICEF.
- [For conversations in Geneva; or "if raised" only in other contexts] New Zealand is also
 a vocal advocate in the WTO for removal of export restrictions on COVID-19 vaccines
 and related products, and we support a TRIPS waiver of intellectual property rights
 in relation to vaccines. s6(a)

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- [If raised, further contributions to the ACT-Accelerator] We are seized of the need to
 ensure the pandemic response is adequately funded. All countries must play their part.
 New Zealand was proud to kick off COVAX's fundraising for 2022 with NZ\$9 million for
 vaccine delivery and uptake. We are actively considering what further contributions
 New Zealand can make.
- [If needed, on human rights] New Zealand views equitable access to COVID-19 vaccines as inextricably linked to the right to health, the right to life, and the right to education, among other basic human rights. Access to COVID-19 vaccines has broad implications for social, cultural and economic wellbeing, especially in developing countries where health systems are fragile and communities and economies are more vulnerable to shock.
- [For WHO DG Tedros] Noting the DG's recent comment that the "acute phase" of the pandemic could be over this year if the 70 percent vaccination target is met by July, seek his views on the **urgent actions required** to bring the crisis phase of the pandemic to an end everywhere. What are the key factors tha will impact on the achievement of the WHO target of 70% vaccinations?
- [For WHO DG Tedros] We expect to be **living with COVID 19** in one way or another for the foreseeable future. How does the WHO expect the pandemic to play out globally from here? What major challenges and risks will the global community need to respond to and manage beyond this year? What will enable he WHO to declare the pandemic phase is over?

Please refer to meeting b iefs for talking points on multilateral efforts to prepare for future pandemics.

Background

The WHO s calling on the international community (including via the ACT-Accelerator funding instrument) to make extraordinary efforts to bring the crisis phase of the pandemic to an end everywhere. In particular, widespread vaccination is critical to preventing compound crises in developing countries and reducing the risk that new variants of concern prolong the global health emergency. The Director-General told media this month that his expectation was that the "acute phase" of this pandemic will end this year, conditional on the 70% vaccination target being achieved by June/July.

Vaccination has been the focus of New Zealand's global contributions to date. As part of our \$58 million contribution to the ACT Accelerator, New Zealand has contributed \$26 million to the COVAX Advance Market Commitment (AMC), and NZ\$15 million to the Coalition for Epidemic Preparedness Innovations (CEPI) to support vaccine development and scaled-up production. To date, New Zealand has donated 9.6 million vaccine doses to the COVAX Facility for distribution to developing countries, in addition to bilateral vaccine donations and roll-out support in Polynesia.

IN CONFIDENCE

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- In the WTO and APEC, New Zealand has actively advocated for trade facilitation and removal of export restrictions on vaccines and related goods. We also support the proposal in the World Trade Organisation (WTO) for a temporary waiver of intellectual property rights on COVID-19 vaccines (but not in relation to related goods), alongside efforts by the WHO and WTO to expand manufacturing through better collaboration and increased transparency between suppliers and governments.
- In 2022, improving vaccine uptake in developing countries will be vital to ensuring widest possible vaccine coverage globally. New Zealand kicked-off the COVAX 2022 pledging season with a \$9 million contribution, which is tagged to support vaccine uptake in developing countries, and we are providing similar direct support to Pacific island countries. New Zealand is engaged in the US-led COVID-19 Global Action Plan (GAP) initiative, a donor coordination effort intended to support the WHO 70% vaccination target and bring the pandemic to an end in 2022. New Zealand is playing a eadership role alongside Australia to support vaccine access in the Pacific, with our focus being in Polynesia.
- 4 Norway and South Africa, co-facilitators of the ACT-Accelerator, have written to developed countries again requesting substantial additional funding contributions this year, which would go towards urgent efforts to end the crisis phase of the pandemic. s6(b)(i)

Officials are actively considering what further contributions New Zealand can make towa ds efforts to end the current pandemic.

COVID Policy and Coordination Division / Partnerships, Multilateral and Humananitarian Division

February 2022

Meeting Brief: WHO Director-General Tedros Adhanom Ghebreyesus (Dr Tedros), Friday 25 February, 0930

Haurongo - Biography



Dr Tedros was elected Director-General of the WHO in 2017. He is the first African national to have held the position. At the WHO Executive Board meeting in January this year, he was nominated for re-election for a second (and final) five-year term. Prior to his current role, he served as Ethiopia's Minister of Health from 2005-2012, and Minister of Foreign Affairs from 2012 to 2016. He has played a pivotal role in the global response to the COVID-19 pandemic, as well as other health emergencies such as the Ebola epidemic of 2018-2020.

Ngā whakaritenga - Call logistics

He-Mihi – Greeting: TBC

Location: World Health Organisation

Attendees: Principals plus 4 on each side.

 Whakapāho – Suggested tweet: "Thank you Dr Tedros for our korero about strengthening global health cooperation to protect people and communities from future pandemics".

Ngā Whāinga - Objectives

- Seek the Director-General's views on global discussions to strengthen the international architecture for pandemic prevention, preparedness and response (PPPR).
- Hear from DG Tedros about his vision for the ongoing strengthening of the WHO and the chall nges ahead (including sustainable financing).
- Convey Aotea oa New Zealand's commitment to strengthening WHO as the United Nations' leading global health voice, as part of our active engagement in global health architecture reforms.
- Underline the importance of the SARS-CoV-2 origins work in the context of the COVID-19 pandemic, and broader pandemic prevention, preparedness, and response efforts.

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 Note the importance of the WHO's work to prioritise prevention and response to sexual exploitation, abuse and harassment (PRSEAH), as well as appropriate investigation of complaints s6(c)

Ngā Take - Issues

- Note that Aotearoa New Zealand is committed to global efforts to bring the emergency phase of the pandemic to an end, as soon as possible. Achieving the WHO's target of 70% global vaccination coverage by the mid-2022 will be critical to saving lives and ending COVID-19 as a global health emergency this year.
- Acknowledge that it is vital the world understands the origins of the virus, so that we can learn from this in order to improve the global health sys em and reduce the lisk of a future pandemic.
- Note that Aotearoa New Zealand considers the WHO-convened global study of origins of COVID-19 an important report, and a useful step in the work on the origins of COVID-19. We support proposals for further work in this area and are encouraged by work of the recently appointed independent permanent WHO International Scientific Advisory Group for Origins of Novel Pathogens (SAGO)

Pandemic Prevention, Preparedness and Response

- Note our strong commitment to ensuring the world is better prepared to respond to the next pandemic. It is essential that we put measures in place now to ensure a crisis of this magnitude does not occur again. We believe that the WHO should remain at the centre of global ef orts to improve the international systems for pandemic prevention, preparedness and response.
- Highlight our active engagement in the international health processes currently under way, including dis us ions to consider a new pandemic treaty or other instrument through the newly-established intergovernmental negotiating body (INB).
- Note that Aotearoa New Zealand is supportive, in-principle, of a new international fund for pandemic preparedness. We are closely following the G20-led process, which will consider modalities for a new financing facility.

Sustainable Financing

Acknowledge that sustainable financing for the WHO has been a long-standing issue and s9(2)(g)(i)
 WHO is a critical issue for all of us, especially in the context of COVID-19. Now more than ever, the international community needs a WHO empowered by sustainable and

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predictable funding.

 Welcome the WHO Executive Board's decision to extend the mandate of the Working Group on Sustainable Financing until the World Health Assembly this year. We look forward to constructive intersessional negotiations, s9(2)(j)

s9(2)(j)

Director-General nomination

- Congratulate DG Tedros on his nomination to serve a second term as WHO Director-General. Express gratitude for his commitment to supporting the global COVID-19 response.
- Note your appreciation for his work to advance much-needed reforms to the global health architecture and WHO strengthening Both ssues are critical to ensuring that we are better prepared for the next globa health emergency

Report into Sexual Exploitation and Abuse in the Democratic Republic of the Congo

- Acknowledge the encouraging progress made by WHO on tackling sexual exploitation, abuse and harassment (SEAH) in 2021, including the initial steps taken on the findings from the independent report into sexual exploitation and abuse in the Democratic Republic of the Congo.
- Relay our expectation to see concrete evidence of improvements in the near future. The WHO must take a transparent and survivor centred approach to its management and response to these issues We need to have effective and safe complaints mechanisms in place to ensu e that complainants are free from retaliation.

s6(a), s6(b)(i), s6(c

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Background

Report into Sexual Exploitation and Abuse in the Democratic Republic of the Congo

- 1. On 30 September 2020, media reported more than fifty serious allegations related to sexual exploitation, abuse and harassment (SEAH) in Beni in the North Kivu province of eastern Democratic Republic of Congo (DRC). More than thirty personnel working for the WHO, as well as staff from other agencies (including UNICEF and OXFAM) were accused of propositioning, coercing, and forcing local women into sex.
- 2. WHO Director-General Tedros called for a fully independent investigation and an independent commission was established to investigate the allegations related to WHO. In May 2021, claims emerged that senior WHO staff had acted to suppress repo ted cases of sexual exploitation, abuse and harassment. DG Tedros noted he was appalled by the claims of a cover up and reasserted the remit of the independent comm s ion, including to investigate claims of a cover up.
- 3. Aotearoa New Zealand has maintained a c ose interest in the WHO's response to the 2019 situation in the DRC both via Geneva and capital-based channels. In May 2021, we participated in a 2021 diplomatic demarche to DG Tedros on the issue. Furthermore, at the January 2022 WHO Executive Board of eting, Aotearoa New Zealand joined two group statements calling for continued action to strengthen WHO's PRSEAH.

s6(a), s6(b)(i), s6(c)



MFAT (United Nations, Human Rights and Commonwealth Division; New Zealand Permanent Mission to the United Nations in Geneva); Ministry of Health (Global Health).

February 2022

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From: GENEVA <GVA@mfat.govt.nz>
Sent: Sunday, 20 March 2022 11:03 pm
To: UNHC <DM-UNHC@mfat.govt.nz>

Cc: CEO <DM-CEO@mfat.govt.nz>; OCE <OCE@mfat.govt.nz>; DCE <DCE@mfat.govt.nz>; DS EMA <DM-DSEMA@mfat.govt.nz>; DS AAG <DM-DSAAG@mfat.govt.nz>; DS MLG <DM-DSMLG@mfat.govt.nz>; DS PDG

<DSPDG@mfat.govt.nz>; DS TEG <DM-DSTEG@mfat.govt.nz>; ALL POSTS (FM)
<ALLPOSTSFM@mfat.net.nz>; ...POLICY DIVISIONS <POLICYDIVS@mfat.net.nz>;

FM.Defence (Seemail) <fm.defence@nzdf.mil.nz>; s6(a)

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FM.P/S Trade (Seemail) <PSTrade@mfat.net.nz>; FM.Treasury (Seemail) <merlin@treasury.govt.nz>; s6(a)

Subject: FORMAL MESSAGE: MINISTER OF FOREIGN AFFAIRS VISITS GENEVA 25-28 FEBRUARY 2022

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RĀPOPOTO - SUMMARY

Out of scope

 In the Min ster's meetings with the Director General of the World Health Organisation, Dr Tedros Adhanom Ghebreyesus, Out of scope

underlined the value of New Zealand support – financially, but equally our advocacy efforts and ability to raise awareness of the underlying principles of international rules and multilateral engagement. Out of scope

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Out of scope

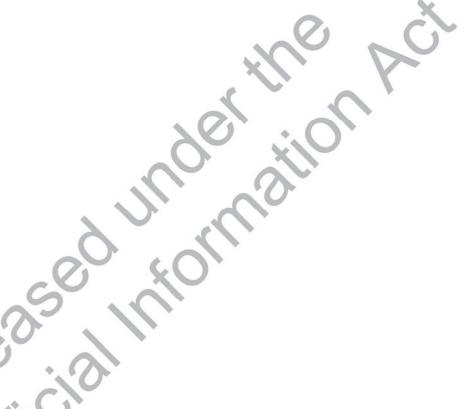
PŪRONGO - REPORT

This message reports on key themes and insights from the Ministe 's visit: Out of scope

as well as

the global health outlook from the perspective of the WHO. Out of scope

Out of scope



The global health file broader than COVID-19

- In her meeting with WHO Director-General Dr Tedros Adhanom Ghebreyesus, Minister Mahuta underscored New Zealand's support for better global health cooperation with a strengthened WHO at the centre. Dr Tedros welcomed that commitment, singling out New Zealand's support for sustainable financing talks under way in Geneva. s6(b)(i)
- Dr Tedros told the Minister his priorities for a strengthened WHO were: "more promoting health, less treating disease"; universal health coverage; pandemic preparedness and response (PPR); investing in science and innovation; and making the WHO "fit for purpose". $^{s6(b)(i)}$

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s6(b)(i)

Vaccine

equity was another important PPR tool, "especially to end the acute phase of the COVID-19 pandemic". Dr Tedros welcomed New Zealand's dose donations, and said WHO was supporting initiatives to improve vaccine-manufacturing capability in low- and middle-income countries. He added that global supply was improving, but that distribution and delivery obstacles needed urgent attention. Minister Mahuta registered New Zealand's views that further work into **understanding the origins of SARS-COV-2** would also be an important part of future PPR. s6(b)(i)

- Dr Tedros was well informed about **New Zealand's COVID-19 response, which he called "a model"** that demonstrated the importance of political leadership and securing public confidence. Acknowledging that the strategy had worked well for New Zealand's circumstances, Minister Mahuta explained the the Government determined a public health response informed by science would be New Zealand's way for ard, focused on saving lives and saving livelihoods. Dr Tedros said he "supported the strategy", including attention paid to protecting vulnerable groups, community-based initiatives to build public confidence in vaccines, and a rapid vaccine rollout to enable restrictions to be lifted with confidence that the population is protected.
- Dr Tedros took the initiative t update Minister Mahuta on the **WHO's** management response to sexual exploitation, abuse and harassment by **WHO** personnel in the Democratic Republic of Congo. He set out the WHO's response in detail, and assured the Minister of the seriousness he attached to this issue. The Minister reinforced New Zealand's expectations, signalled that this was a critically important issue for New Zealand, and that of icials would continue to seek updates on the WHO's response. s6(a), s6(b)(i), s6(c)

Out of scope

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KA MUTU - ENDS

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