

Pandemic Fund Draft Strategic Plan (2024-2029)
IOM Migration Health Feedback / Inputs

Section	Comments
Executive Summary	<ul style="list-style-type: none"> 1st paragraph: Recommend rephrasing “mass migration” to “widespread population [or human] mobility” to avoid potential stigmatization of migration / migrants. Focus Areas: One of the major under-resourced areas of pandemic prevention, preparedness and response is related to governments’ commitment to core capacities under the 2005 International Health Regulations (IHR), in particular at points of entry (PoEs). IOM would recommend to include PoEs as a specific area of focus.
1. Principles	
1.1 Introduction and background on the Pandemic Fund	<ul style="list-style-type: none"> 2nd paragraph: Recommend rephrasing “mass migration” to “widespread population [or human] mobility” to avoid potential stigmatization of migration / migrants (as above).
2. Focus areas	
2.2 Deep dive on programmatic priorities	<ul style="list-style-type: none"> Regarding the <i>disease surveillance</i> programmatic priority, it is important to note the importance of cross-border coordination and surveillance, including at points of entry, and engaging border communities, for effective pandemic prevention, preparedness and response.
2.4 Deep dive on underlying themes	<ul style="list-style-type: none"> With regard to health equity, it is important to recognize that equitable and affordable access to health and protection services for vulnerable populations, including those on the move, should be included within pandemic prevention, preparedness and response, respecting universal health coverage principles. Learning from the shared experience of COVID-19, the inclusion of migrants including displaced persons should be a part of forward-looking solutions.
3. Resource allocation	
3.3 Allocation modalities	<ul style="list-style-type: none"> Regarding the allocation modality for regional and sub-regional entities, it is important to highlight that integration of mobility information into disease surveillance and response mechanisms increases the effectiveness of a public health response. Preparedness for, response to and recovery from public health crises should be responsive to population mobility and cross-border dynamics to increase effectiveness, as mobility is a social determinant of health and can be a contributing factor to the transmission of diseases.
Appendix	

Appendix C

- To note, there are no significant global funders (e.g. USAID, Global Fund, World Bank) for strengthening IHR core capacities at points of entry; consequently, this area of work is often under-resourced with limited prioritization at country level.
- Suggested additions to potential activities:
 - Disease surveillance:
 - Strengthening of the IHR core capacities at points of entry.
 - Workforce:
 - Capacity-building of health, border and other front-line workers (e.g. immigration, customs and revenue and other law enforcement personnel) at points of entry, in border areas and along the mobility continuum on relevant topics, such as detection and response to communicable disease, including management of ill travellers, infection prevention and control, developing and implementing SOPs and contingency planning, etc., as well as on the needs and vulnerabilities of mobile populations.