The global health architecture is increasingly under strain, largely due to recent, ongoing, and potential global health crises. The Ebola crisis in particular revealed serious flaws in the capability of the system to prevent and respond to these crises. As the links between health, development, and security challenges become ever clearer, the multilateral system anchored in the United Nations must address these issues with renewed focus.

The World Health Organization (WHO) remains the right organization to coordinate international policies and action in the area of global public health. That said, the organization’s structure and operational capacity need to be tweaked, strengthened, and bolstered by existing and new partnerships, including with regional organizations, NGOs, and the private sector. These actors are geared toward finding innovative solutions, and establishing stronger relationships with them could enhance the ability of local, national, and global health systems to respond to crises. Such partnerships have worked in the past because they are often more flexible and result-oriented and attract more resources.

Institutional silos are an impediment to sound and holistic policymaking, smooth implementation, and operational capacity. These silos have effectively created an international system that is insufficiently prepared for an outbreak and reacts too slowly when an outbreak escalates to a global health security threat. Furthermore, the lack of adequate funding, including the lack of assessed contributions to the WHO, hampers the international health system, particularly the WHO’s ability to meet demands. Moreover, as the report of the High-Level Panel on the Global Response to Health Crises highlights, there is a need to improve the operational capacity of and accountability within and to the WHO.

The multilateral system can play both a normative and a more operative role in helping member states build resilient and robust national health systems, such as through investment in human capital, political commitment, community engagement, technology development, and international solidarity. At the national level, there is a need to implement comprehensive
public health policies, as many of the challenges transcend the health sector. The multilateral system should support the development of these inclusive and inter-sectoral national health policies and systems, as well as assist states in implementing the International Health Regulations. The 2030 Agenda in particular provides an opportunity for such a structured and comprehensive approach. More than half of the seventeen SDGs relate to health, either directly or indirectly, and Goal 3, in particular, is essential to sustainable development.

The paper makes a series of recommendations aimed at (1) The UN system at large and (2) member states more specifically.

**Recommendations for the UN System**

1. Follow up on the report of the UN High-Level Panel on the Global Response to Health Crises and other review process.
2. Create a high-level council on global health crises.
3. Establish synergies with other agendas and bridge silos.
4. Adopt an integrated approach to global health.
5. Increase accountability, inclusivity, and transparency.
6. Recognize the centrality of the WHO and the role of partnerships.
7. Convene a global health summit in 2018 to address the future of the global health architecture and normative frameworks, with a particular focus on accountability and finance.

**Recommendations for Member States**

1. Build the capacity of national healthcare systems.
2. Reaffirm protection, particularly of health professionals and facilities.
3. Explore the role of military forces.
4. Consider increasing assessed contributions to UN agencies dealing with health crises.
5. Adopt a consensus-driven approach to negotiations.