Global Health Council Input for the Negotiating Text of the WHO Pandemic Agreement

Global Health Council thanks the Intergovernmental Negotiating Body and Member States for their work in developing the negotiating text for a new pandemic accord, as well as for the opportunity to provide written input on the negotiating text.

Although the negotiating text includes concrete legal language and provisions promoting equity and pandemic response, significant avenues for improvement remain, including in the following areas:

- **Pandemic Prevention**: Expanding focus on how countries can better prevent pandemics, with particular attention to infection prevention and control measures and access to safe water, sanitation, and hygiene.

- **Global Health Security Architecture**: Strengthening the global health security architecture by ensuring complementarity with existing mechanisms and avoiding the creation of parallel systems. Any new mechanisms created by the pandemic agreement should not further fragment the global health architecture. There should be clear explanations as to how any newly proposed mechanism would work within the existing system.
  - This principle of complementarity is particularly relevant in future negotiations of a new peer review mechanism, which must assess the full spectrum of countries' capacities, including research and development, manufacturing, and regulatory processes. These areas are currently not well covered by existing evaluation tools. A detailed review should be conducted of existing systems to prevent duplication.

- **Medical Countermeasures Platform**: Defining clearly the potential process and timeline for the development of a medical countermeasures platform, building on the consultations for an interim mechanism that are ongoing with WHO.
  - A medical countermeasures platform must be inclusive of non-medical interventions and identify and facilitate synergies with disease-specific programs and other related areas, including HIV/AIDS, tuberculosis, malaria, cholera, non-communicable diseases, and antimicrobial resistance.

- **Pathogen Access and Benefit-Sharing**: Continuing to ensure equitable access to pandemic-related products is at the forefront of the creation of the WHO Pathogen Access and Benefit-Sharing System, while also keeping in mind varying abilities to purchase and/or access such databases.

- **Financing**: Recognizing that financing is critical to the success of the pandemic accord but the creation of a new financing mechanism for pandemics would only drive further fragmentation. The current proposal contained in the negotiating text lacks both detail and urgency for how the pandemic accord will be financed and what, if any, synergies exist with already established mechanisms, such as the World Bank Pandemic Fund.

Productive negotiations among the INB, Member States, non-State actors in official relations with WHO, and civil society organizations must continue with the aim of detailing an ambitious,
comprehensive path forward to strengthen pandemic prevention, preparedness and response capacities globally.

Meaningful civil society engagement remains critical to combat mis- and disinformation regarding the pandemic accord, and to build trust and legitimacy in the development and implementation of a successful pandemic agreement, particularly regarding civil society’s role in influencing policymakers who will ultimately be responsible for adopting the accord in their respective countries.