

February 16, 2024

To WHO Member States and relevant stakeholders,

As the Intergovernmental Negotiating Body (INB) process continues toward a May 2024 culmination, the undersigned organizations urge Member States to double down on moving toward agreement on a meaningful, ambitious, equitable, and accountable Pandemic Agreement.

A Pandemic Agreement is vital to propelling the global solidarity, political will, accountability, and sustained investment required to save lives and keep humanity safe from another deadly and costly pandemic like COVID-19, HIV or TB. It is essential that the INB deliberations are fair and transparent by meaningfully engaging and consulting civil society and communities. They must also deliver an agreement that aligns all stakeholders and creates a more equitable, transparent, and accountable global ecosystem for pandemic prevention, preparedness, and response (pandemic PPR). To this end, it is essential that the text references and reaffirms existing human rights obligations, including the right to the highest attainable standard of health and the right to enjoy the benefits of scientific progress and its applications. In addition, the final text must:

- **Establish a global system that guarantees end-to-end, timely, affordable, and equitable access to medical countermeasures and other lifesaving tools for all countries.** Real equity means ensuring countries have access to the creation and manufacture of tools so each one can secure what they need, when they need it. The agreement text covering equity must use **binding language**, especially on: establishing R&D hubs working with new technologies without intellectual property (IP) restraints; provisions to ensure access and benefit sharing; expanding distributed manufacturing capacity of countermeasures across regions, especially in low-and-middle-income countries (LMICs); removing trade-related barriers including IP; creating technology transfer hubs; ensuring affordable pricing; equitable access conditionalities for all public R&D funding; and transparency of licensing agreements.
- **Commit to securing substantial additional, long-term, and sustainable financing for pandemic PPR, based on defined proportional contributions according to capacity and underpinned by principles of shared responsibility.** Pandemic PPR financing must be rooted in principles of equity and democracy. To avoid unnecessary duplication, fragmentation, competition, or delays, the agreement should develop a plan that utilizes existing mechanisms, including but not limited to the Pandemic Fund for preparedness capacity development for LMICs and the WHO Contingency Fund for early global outbreak response. The agreement should guarantee these mechanisms are fully and sustainably financed, and should also address a key gap in the finance ecosystem by ensuring rapid country access to surge funding for pandemic response. PPR financing must also include increased domestic funding, R&D financing, and financing for social and economic protection. All funding must be additional to existing assistance for health services and come from beyond ODA where possible.
- **Strengthen accountability to drive action.** A key element will be to **establish a fully [independent monitoring committee](#)** in addition to states' self-monitoring and a peer review mechanism. A robust system of incentives and disincentives, including clearly stated sanctions for non-compliance, must also be established. The independent

committee should be in charge of assessing the timeliness, completeness, and accuracy of state self-reports, and its reports should be submitted annually to the Conference of Parties (COP) and made publicly available. The agreement's text should also include explicit reference to **continuing to strengthen and promote the use of existing global monitoring tools** such as the Joint External Evaluations under the revised IHR Monitoring and Evaluation Framework, and for **the COP to meet annually** and establish official cooperation channels with civil society.

- **Establish clear and enforceable obligations for preventing the spillover and spillback of zoonotic diseases**, address the drivers of pathogen spillover via the **One Health** approach, and provide the **support needed for countries to deliver** on these obligations. The text must specifically define prevention in line with the [One Health High-Level Expert Panel's definition](#) of "[prevention of zoonotic spillover](#)", which emphasizes the need to shift from reactive to proactive strategies addressing anthropogenic, ecological and environmental drivers of diseases. The [One Health Joint Plan of Action](#) and the [One Health Joint Plan of Action Implementation Guide](#), developed by FAO, WHO, WOAHA, and UNEP, provide a comprehensive framework for operationalizing One Health practices at national, regional, and global levels. They should be explicitly referenced in the text to serve as a guide for implementing effective One Health measures and ensuring that Member States have access to necessary expert and technical support to develop and implement robust One Health strategies. FAO, WHO, WOAHA, and UNEP should also be assigned a formal role within the instrument tasked to support Member States in the development and implementation of One Health strategies.
- **Meaningfully prioritize gender-responsive pandemic PPR to truly advance equity across this agenda.** It is critical that language on "persons in vulnerable situations," "equity," and "human rights" explicitly include gender, as these sections of text drive the equity agenda across the agreement. To ensure accountability on gender and other areas of equity, it is also critical that **Parties agree to collect, report, and analyze data disaggregated by sex, gender, ethnicity, race, and age**. Recognizing the disproportionate impact the COVID-19 pandemic had on women, girls, and gender diverse individuals, parties must commit to upholding social protections and accessibility to services for all, especially for vulnerable groups, during health emergencies and protect and maintain all essential health services as defined by [SDG indicator 3.8.1](#).

We hope that you will seize this generational opportunity to produce a strong and meaningful agreement that shifts the status quo. It is time to ensure that the lessons from COVID-19 and other pandemics including HIV and TB are translated into a transformative, enforceable, and equitable framework. We would welcome the opportunity to arrange a meeting with you or a member of your team to further explore these important considerations.

Yours sincerely,

Accountability International  
Action for Animal Health  
Action Group for Health, Human Rights and HIV/AIDS  
Advocacy Network Africa  
Africa Japan Forum

African Leaders Malaria Alliance  
Afya na Haki  
AHF Global Public Health Institute  
AIDS Healthcare Foundation  
Alight  
ALTER Israel  
Amis des Étrangers au Togo  
ANCS SÉNÉGAL  
Asia Pacific Council of AIDS Service Organisations  
Association des Volontaires pour l'Environnement Sain  
Association For Promotion Sustainable Development  
AVAC  
Blood Patients Protection Council  
Burundi Secours  
Centre for Accountability and Inclusive Development  
Centre for Health Science and Law  
Children Education Society  
Christian Spiritual Youth Ministry Tanzania  
Civil Society Protection Network  
Community and Family Aid Foundation - Ghana  
Community Initiative Action Group Kenya  
Conservation International  
Consortium for the Advancement of Right for Key Affected Population  
Cordaid  
Corporación Kimirina  
Creative Impact Initiative — Uganda  
Deutsche Stiftung Weltbevoelkerung (DSW)  
Development Alternatives Incorporated  
Dream Weaver Organization  
Eastern Africa National Networks of AIDS and Health Service Organisation  
El Observatorio de Justicia Sanitaria y Climática  
Environment Governance Institute Uganda  
Every Breath Counts Coalition  
Foundation for Environmental Watch  
Four Paws  
Frontline AIDS  
Generative Global Health Network  
Global Citizen  
Global Health Advocates  
Global Health Collaborative- MUST Uganda  
Global Health Impact  
Global Health Technologies Coalition  
Health Development Network  
Heart That Cares For A Better Health Organization  
IAVI  
India HIV/AIDS Alliance  
Innovarte Ong (NGO)  
International Treatment Preparedness Coalition — MENA  
Jeunesse du Monde en Action  
Jhpiego  
Joep Lange Institute's Center for Global Health Diplomacy

Living Goods  
Malaria Youth Corps/DRC  
Management Sciences for Health  
North Star Alliance  
ONE Health Bangladesh  
Organisation Congo Prevention Secours  
Outreach Scout Foundation  
Pandemic Action Network  
Positive Womens Network  
Preventing Pandemics at the Source Secretariat  
Project Hope  
Re:wild  
Resilience Action Network Africa  
Sightsavers  
Society for Inclusion and Development in Communities  
Spark Street Advisors  
Tanzania Better Health  
Task Force for Global Health  
The Society For Children Orphaned By AIDS Inc.  
Treatment Action Group  
Uganda Child and Aid Foundation  
Uganda National Institute of Public Health  
Uganda Peace Foundation  
UNAIDS  
United Nations World Food Programme  
University of Miami Public Health Policy Lab  
WACI Health  
Wildlife Conservation Society  
Women in Global Health  
Women4GlobalFund