An urgent letter to the Co-Chairs and Vice-Chairs of the Intergovernmental Negotiating Body, the Working Group on Amendments to the International Health Regulations (2005), and to WHO Member States

RE: Governance of the Pandemic Agreement

As the Intergovernmental Negotiating Body (INB) continues to negotiate a Pandemic Agreement, we highlight the principles of leadership and accountability, and in that spirit wish to underscore the importance of the governance arrangements around a new agreement. These must be fit-for-purpose long into the future.

We make our comments based on the current text in the <u>INB draft of 22 April 2024</u> and on text for a <u>discussion draft World Health Assembly resolution</u> dated 16 April 2024.

We applaud the proposal to establish a Conference of the Parties (COP). As with climate agreements, a COP has the potential to ensure continued public focus on pandemic preparedness and response. This is essential given the existential nature of pandemics, the whole-of-government work required to identify and manage pandemic threats, and the significant investment required to stop outbreaks before they become pandemics.

For this same reason, the COP should make regular allowance for participation of Heads of State and Government - and not only during extraordinary meetings, as is currently proposed.

Pandemic threats can arise at any time, and Governments must always be prepared for them or pay enormous human, financial and social consequences. For this reason, the COP should meet annually, and not only every five years as is currently suggested.

The suggestion that Governments report 'periodically' is also insufficient. While we recognize that regular reporting - such as every year - would require significant resources, a pathogen of pandemic potential can exploit gaps in preparedness in a matter of days. Annual reporting would help to ensure the constant attention to pandemic threats that is required. An implementation and compliance mechanism is also required.

We recommend the COP Secretariat be hosted by an independent Secretariat at WHO.

We are concerned that a Secretariat provided directly by WHO, as is proposed, rather than independently hosted as is the case with the Framework Convention on Tobacco Control, will result in a system with too little accountability. First, we would not want to see public participation limited only to stakeholders approved as observers through WHO processes. As every person on this planet could be

affected by a new pandemic threat, participation of civil society must be inclusive and robust - as it is for the climate agreements.

If the Secretariat were hosted by WHO, WHO staff, often recommended by Member States, would be involved in preparing meetings and writing reports including, potentially, implementation and compliance reports. This could result in a circular system that does not provide the frank appraisals required.

In addition, while not specifically mentioned in the April pandemic agreement text, a discussion draft World Health Assembly resolution, dated 16 April, also recommends a "Committee E" as an additional main Committee of the World Health Assembly, where all health emergency matters would be discussed independently, for example, of discussions on health systems, immunization, and other issues critical to pandemic preparedness. Member States need to consider carefully how such a Committee could effectively address a remit including ongoing WHO emergencies work, the International Health Regulations and the Pandemic Agreement. Committee E cannot govern the Agreement.

Governance of the Pandemic Agreement must be as robust for the COP's first meeting as for its 25th and even 50th. The COP itself can make decisions to adjust its ways of working. However, we recommend that the decisions Member States make now lay a robust foundation for an effective COP process for decades to come.

Signed,

Chairs, Co-Chairs, Principals and Members of The Elders, The Independent Panel for Pandemic Preparedness and Response (The Independent Panel), Pandemic Action Network, The Panel for a Global Public Health Convention (PGPHC), and Spark Street Advisors:

Dr Gro Harlem Brundtland, former Director-General of the World Health Organization and Member of The Elders

Dr Mauricio Cárdenas, former Minister of Finance of Colombia, and Member of The Independent Panel

HE Laura Chinchilla Miranda, Former President of Costa Rica, and Member of the PGPHC

The Rt Hon. Helen Clark, former Prime Minister of New Zealand, Member of The Elders, Co-Chair of The Independent Panel

Prof Patricia J. Garcia, Former Minister of Health of Peru, and Member of the PGPHC

Prof Lawrence O. Gostin, Professor and Chair in Global Health Law and Member of the PGPHC

Mr. Angel Gurría, Former Secretary-General, Organization for Economic Co-operation and Development and Member of the PGPHC

Prof Jane Halton, Chair, Coalition for Epidemic Preparedness Innovations (CEPI) and Member of the PGPHC

HE Ellen Johnson Sirleaf, former President of Liberia, Member of The Elders and Co-Chair of The Independent Panel

Dr Michel Kazatchkine, former Executive Director of The Global Fund to Fight AIDS, Tuberculosis and Malaria and Member of The Independent Panel

Dr Ricardo B. Leite, President and Founder, UNITE Global Parliamentarians Network and Member of the PGPHC

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Prof Jemilah Mahmood, Professor and Director, Sunway Centre for Planetary Health, and Member of the PGPHC

The Rt Hon. David Miliband, former Foreign Secretary of the United Kingdom, and Member of The Independent Panel

Dr Winnie Mpanju-Shumbusho, Former WHO Assistant Director General and Member of the PGPHC

Dr Anders Nordström, former Global Health Ambassador for Sweden and former Head of Secretariat of The Independent Panel

Prof Elil Renganathan, Professor of Public Health and Policy and Head of Secretariat, PGPHC

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