

**Recommendations from the coalition for Preventing Pandemics at the Source (PPATS)
on the
Zero draft of the WHO convention, agreement or other international instrument on pandemic
prevention, preparedness, and response**

Prepared April 17, 2023

On February 1st, 2023, the Intergovernmental Negotiating Body (INB) to draft and negotiate a WHO convention, agreement or other international instrument (WHO CA+) on pandemic prevention, preparedness and response released a [zero draft](#). Member states and relevant stakeholders must submit their textual proposals on this zero draft to the INB by April 14th, 2023.

We welcome important inclusions in the zero draft of the One Health approach and of provisions to prevent pandemics by addressing their root cause: spillover of pathogens from animals to humans. It is imperative that the WHO CA+ takes this comprehensive approach, recognizing the potential of primary or upstream spillover prevention to complement outbreak containment and response.

The zero draft is, however, strongly focused on post-outbreak actions (secondary prevention, preparedness, and response). Actions to reduce spillover risk (primary prevention) warrant more detailed and comprehensive provisions on the same level as those proposed for secondary prevention, preparedness, and response. The crucial role of primary prevention to achieve global health equity is also under-represented.

We support the proposal by several member states, including the [European Union](#) (EU), to revise the structure of the zero draft to mirror the pandemic prevention, preparedness and response cycle. We suggest that chapter I and II be merged into one chapter (Chapter I) entitled “General provisions” and that a new Chapter II, focused on pandemic prevention, be introduced. Indeed, we consider it preferable to have separate chapters for each of the 3 core elements of the WHO CA+: Prevention, Preparedness, and Response, as some member states have suggested.

In this advisory note, the [Preventing Pandemics at the Source](#) coalition - a group composed of leading organizations focused on public health, human rights, science, health justice, biodiversity, climate change and Indigenous rights - offers recommendations for how the WHO CA+ zero draft could better reflect primary pandemic prevention priorities, including specific, proposed language.

Recommendations:

Text that we recommend be added to the draft is shown in ***italicized, bolded blue font***, while text that we recommend be deleted is shown in ~~*italicized red font with strikethrough*~~.

Preambular paragraphs (page 5)

We suggest adding to the current text as follows:

7.bis. Noting with concern the increasing frequency of outbreaks with global and regional impacts revealing serious underinvestment in the prevention of zoonotic spillover, notably through addressing their drivers,

*11. Reflecting on the lessons learned from coronavirus disease (COVID-19) and other outbreaks with global and regional impact, including, inter alia, HIV, Ebola virus disease, Zika virus disease, Middle East respiratory syndrome and monkeypox/mpox, and with a view to **preventing future pandemics of zoonotic origin, and outbreaks**, addressing and closing gaps and improving future response,*

*24. Recognizing the importance of working synergistically with other relevant areas, under a One Health approach, as well as the importance and public health impact of growing ~~possible~~ drivers of pandemics - **including land use change, biodiversity loss, the loss, fragmentation and degradation of ecosystems, human-wildlife conflict, wildlife trade, wildlife farming, weak***

animal health systems and management, climate change, and antimicrobial resistance - which need to be addressed as a means of preventing future pandemics and protecting public health,

24.bis *Recognising the need to progressively close the biodiversity finance gap with increased investment from all sources, including international public finance, to reverse biodiversity loss and promote biodiversity conservation, to minimize risks of zoonotic spillover,*

47.bis. *Recognising that the prevention of pandemics at source is significantly less costly than responding to pandemics once they have emerged, with numerous societal co-benefits,*

Vision (page 8)

We suggest updating the current text as follows:

The WHO CA+¹ aims for a world where pandemics are **largely prevented and** effectively controlled **when outbreaks occur** to protect present and future generations from ~~pandemics and~~ their devastating consequences, and to advance the enjoyment of the highest attainable standard of health for all peoples, on the basis of equity, human rights and solidarity, with a view to achieving universal health coverage, while recognizing the sovereign rights of countries, acknowledging the differences in levels of development among countries, respecting their national context and recognizing existing relevant international instruments. The WHO CA+ aims to achieve greater equity and effectiveness for pandemic prevention, preparedness and response through the fullest national and international cooperation.

Chapter I. Introduction

We support the [European Union's suggestion](#) to merge chapter I and II into one chapter (Chapter I) entitled 'General provisions'.

Article 1 - Definitions and use of terms (page 9)

We suggest adding the following definitions:

1. **"One Health approach"** means **an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and interdependent. The approach mobilizes multiple sectors, disciplines and communities at varying levels of society to work together to foster well-being and tackle threats to health and ecosystems, while addressing the collective need for clean water, energy and air, safe and nutritious food, taking action on climate change, and contributing to sustainable development.**¹
2. **"One Health surveillance"** means **a multidisciplinary approach to the monitoring and control of diseases and health threats that affect both humans and animals, as well as the environment they inhabit. This approach recognizes the interconnections and interdependence between human, animal, and environmental health, and seeks to integrate and coordinate efforts across different sectors and disciplines to ensure the overall health and well-being of all.**
3. **"Spillover"** means **the cross-species transmission of pathogens from non-human vertebrate animals to humans.**
4. **"Prevention"** means **the systems, policies, and procedures used to determine, assess, avoid, mitigate, and reduce public health threats and risks. This definition captures interventions needed to mitigate risk and reduce the likelihood or consequences of spillover events at the human, animal, or ecosystem interfaces. Such interventions frequently reside with agriculture, food, wildlife management, or environmental sectors, highlighting the importance of a multisectoral, "One Health" approach, but**

¹ This definition was developed and adopted by the WHO-convened [One Health High-Level Expert Panel](#)

also include some health sector interventions (e.g., routine immunization against epidemic-prone diseases).²

5. *"Spillover prevention" means prevention of pathogen spillover from animals to humans; shifting the infectious disease control paradigm from reactive to proactive (Primary prevention). Prevention includes addressing the drivers of disease emergence, namely ecological, meteorological and anthropogenic factors and activities that increase spillover risk, in order to reduce the risk of human infection. It is informed by, amongst other actions, biosurveillance in natural hosts, people and the environment, understanding pathogen infection dynamics and implementing intervention activities.*³
6. *"Quadripartite organisations" means the World Health Organization (WHO), the Food and Agriculture Organization of the United Nations (FAO), the World Organization for Animal Health (WOAH) and the United Nations Environment Programme (UNEP).*⁴

Chapter II. Objective(s), guiding principles and scope

Article 3 - Objective (page 10)

We suggest updating the current text as follows:

*The objective of the WHO CA+, guided by equity, the vision, principles and rights set out herein, is to prevent pandemics, save lives, reduce disease burden and protect livelihoods, through strengthening, proactively, the world's capacities for preventing, preparing for and responding to, and recovery of health systems from, pandemics. The WHO CA+ aims to comprehensively and effectively address systemic gaps and challenges that exist in these areas, at national, regional and international levels, through substantially reducing the risk of pandemics, **addressing their drivers**, increasing pandemic **prevention**, preparedness and response capacities, progressive realization of universal health coverage and ensuring coordinated, collaborative and evidence-based pandemic response and resilient recovery of health systems at community, national, regional and global levels.*

Proposed additional Article 3.bis: Plans and measures⁵

We support the EU's recommendation to include a new article in this section focused on plans and measures. Text that we recommend be added to strengthen the EU's textual proposals is highlighted in yellow.

1. *Each Party shall develop, implement, update and periodically review national, and where possible regional, action plans aimed at **preventing pathogen spillovers and ensuring pandemic prevention, surveillance, early detection, preparedness and response, including emergency plans and measures, in accordance with the provisions of this Agreement and of the International Health Regulation (2005), in particular Annex 1 thereof. Parties shall prepare and adopt their action plans no later than [two] years after the entry into force of this Agreement, and review and update them at least every [three] years thereafter. Plans shall be prepared and updated as part of a continuous and transparent participatory process, taking into account the information gained from action on the ground, the results of research and the One health approach.***
2. *Parties shall establish or strengthen national, and where possible regional, mechanisms for institutional coordination, including the health, veterinary and environmental sectors, to prevent and fight pandemics, and shall provide adequate financial means therefor.*

² This definition of prevention is used by the World Bank hosted [Pandemic Fund](#)

³ This definition was developed and adopted by the WHO-convened [One Health High-Level Expert Panel](#)

⁴ This proposed additional definition is aligned with the [European Union's textual proposals](#)

⁵ This proposed additional article is aligned with the [European Union's textual proposal](#)

Article 4 - Guiding principles and rights

Proposed additional principle 2.bis The right to a clean, healthy, and sustainable environment (page 10)

We suggest adding an additional principle to this section right after principle number 2, in line with a resolution passed at UNGA 2022 recognizing the right to a clean, healthy, and sustainable environment as a human right:

The right to a clean, healthy, and sustainable environment - Achieving the vision and objectives of the CA+ requires we achieve a nature-positive, carbon neutral and pollution free world and the CA+ implementation and pandemic-related actions shall fully respect and contribute to the implementation of Multilateral Environmental Agreements' obligations. ⁶

Principle 4. Equity (page 11)

Spillover prevention is missing in this principle. Focusing solely on containing the spread of disease in human populations is fundamentally inequitable, accepting the illness and deaths of mostly Indigenous and vulnerable populations living in emerging infectious diseases hotspots. Spillover prevention protects everyone equally from infection in the first place. This principle must acknowledge that global health equity cannot be achieved without actions to address spillover risk and prevention. We suggest updating the current text as follows:

*Equity - The absence of unfair, avoidable or remediable differences, including in their capacities, among and within countries, including between groups of people, whether those groups are defined socially, economically, demographically, geographically or by other dimensions of inequality, is central to equity. Effective pandemic prevention, preparedness, response and recovery cannot be achieved without political will and commitments in addressing the structural challenges in inequitable access to fair, equitable and timely access to affordable, safe and efficacious pandemic-related products and services, essential health services, information and social support, as well as tackling the inequities in terms of technology, health workforce, **capacity to address the drivers of spillover**, infrastructure and financing, among other aspects.*

Principle 9. Inclusiveness (page 11)

*Inclusiveness - The active engagement with, and participation of, all relevant stakeholders and partners across all levels **and sectors**, consistent with relevant and applicable international and national guidelines, rules and regulations (including those relating to conflicts of interest), is fundamental for mobilizing resources and capacities to support pandemic prevention, preparedness, response and health systems recovery.*

Principle 14. One Health (page 12)

One Health aims to sustainably balance and optimize the health of people, animals and ecosystems. This includes actions to prevent spillover of pathogens from animals to humans. Therefore, we suggest updating the current text as follows:

*One Health - ~~Multisectoral and transdisciplinary~~ **All** actions **taken in response to the obligations in the WHO CA+** should recognize the **interconnections and dependencies** between people, animals, plants and ~~their~~ **shared** environment, for which a coherent, integrated and unifying approach should be strengthened and applied with an aim to sustainably balance and optimize the health of people, animals and ecosystems, including through, but not limited to, attention to the prevention of **outbreaks, epidemics and pandemics** due to pathogens resistant to antimicrobial agents and **to spillover of zoonotic pathogens and** diseases*

⁶ UN General Assembly Resolution 76/300 of 28 July 2022

Proposed additional principle 19. Role of the Quadripartite (page 13)

We welcome the emphasis of this draft on the importance of the One Health approach and multisectoral collaboration to effectively prevent future pandemics. As such, the participation of relevant One Health stakeholders such as FAO, UNEP and WOAHA is critical to achieve the instrument's objectives. It must be formalized in this section, alongside the central role of the WHO (Article 4, Item 17, page 12). Therefore, we suggest adding a 19th principle to this section as follows:

Role of the Quadripartite - As the formal collaboration of the leading agencies tasked with advancing the One Health approach, the Quadripartite (WHO, FAO, UNEP and WOAHA) plays a critical role in strengthening pandemic prevention, preparedness and response.

Proposal to introduce a new chapter II focused on pandemic prevention⁷

We support the EU's recommendation to include a new chapter on pandemic prevention. The [EU's textual proposals](#) for this new chapter include several provisions to prevent zoonotic spillover, which are spread across 3 proposed articles (A. Preventing pandemic situations, B. Surveillance, and C. Preventing and controlling zoonotic spill-overs through the One Health approach). Our recommendations below build on the provisions we believe are most relevant. We suggest consolidating them into the first two articles of this new chapter given that spillover prevention is the first step in preventing future pandemics.

Text that we recommend be added to strengthen the EU's textual proposals is highlighted in yellow while text that we recommend be deleted from the EU's textual proposals is *italicized red font with strikethrough*.

Article A. ~~Preventing pandemic situations~~ Preventing zoonotic spillover

1. ***The Parties recognize the need to address the drivers of disease emergence, namely ecological, meteorological and anthropogenic factors, practices, and activities that increase spillover risk, in order to reduce the risk of human infection.***
2. ***The Conference of the Parties shall, on the basis of the findings and advice of the Consultative Body ~~Panel of Experts~~ provided for in Article 21 ~~P.3 (Scientific advice)~~ as well as on the advice of relevant international organizations, in particular the Quadripartite organisations, adopt guidelines, recommendations, standards and other instruments, as necessary, to guide and support the Parties in the adoption of national measures aimed at the reduction of risks of zoonotic, including vector- borne, spillover in accordance with the One Health approach.***
3. ***The Parties shall, in accordance with their international obligations, adopt policies and measures of a legislative, regulatory, administrative and technical nature for the purpose of:***
 - a. ***Identification and mapping of geographical areas, animal ~~and plant~~ species or taxa, and activities and practices within their jurisdiction which may pose a significant risk of zoonotic spillover be 'of concern' and which require particular regulatory actions or surveillance;***
 - b. ***Monitoring environmental factors associated with the risk of pathogen spillover and zoonotic diseases of zoonotic origin, such as including vector- and water-borne pathogens and diseases, land use changes, unsustainable land uses or deforestation, water quality, predictive climatic, entomology or vegetation indices;***

⁷ The suggestions under this proposed additional chapter build on the European Union's textual proposals

- c. On the basis of their activities under sub-paragraphs a) and b), reducing as much as possible the risk of zoonotic ~~diseases~~ spillover by controlling, regulating, and adapting relevant activities and practices, such as certain unsustainable land uses, commercial wildlife trading and markets, and consumption practices, and animal farming practices;
 - d. Reducing deforestation and forest degradation, especially in tropical and sub-tropical areas;
 - e. Ensuring any exploitation and commercial trade in animal and plant species is sustainable safe and legal trade, and does not pose a risk of pathogen spillover and prohibiting and preventing the illegal ~~illicit~~ national and international trade of animal and plant species ~~that may pose a high risk of zoonotic diseases based on the result of their surveillance under subparagraph a)~~;
 - f. Establishing, strengthening, monitoring and enforcing ~~as appropriate~~ hygienic practices and strict risk management measures in markets (as well as restaurants and other businesses) selling live animals including and live wildlife;
 - g. Strengthening animal disease preventive measures, including, but not limited to, on farms, transport of animals, live animal markets, trade in wild animals and in veterinary practices both for food-producing and companion animals taking into account the relevant WOAH standards. Those measures include water and feed hygiene, infection prevention and control measures, biosecurity and animal welfare support measures.
 - h. Adapting farming practices, including within the context of large-scale animal farming, aimed at preventing the insurgence of antimicrobial resistant pathogens;
 - i. Developing, strengthening and maintaining animal welfare policies and practices to ensure the humane and adequate treatment of wildlife, farm and companion animals at all stages of their trading, rearing, transport and slaughter, as well as to improve hygiene and, where possible, reduce long distance transportation of live animals.
 - j. Monitoring the effectiveness of the adopted policies and measures for the purpose of constantly strengthening them and increasing their effectiveness.
4. Without prejudice to their existing obligations under international law the Parties shall base the policies and measures provided for under this Article on the recommendations, guidelines and standards adopted by the Panel of Expert provided for in Article 24.bis (Scientific advice), as well as by relevant international organizations and bodies, with particular regard to ~~WHO, WOAH~~ the Quadripartite organizations and the Codex Alimentarius Commission.
 5. The Parties shall fully take into account the rights, as set out in the UN Declaration on the Rights of Indigenous Peoples, needs and traditional practices of Indigenous and local communities under their jurisdiction in order to avoid any discrimination or depriving such communities of their food security, culture, or ~~livelihood and~~ traditional knowledge. The Parties shall consult and involve Indigenous and local communities to co-create solutions to address the drivers of pathogen spillover ~~in the elaboration and implementation of the measures referred to in this Article.~~
 6. Each Party shall report specifically on the national or regional measures adopted and implemented under this Article to the Conference of the Parties every [...] years after the entry into force of the Agreement for that Party as part of their reporting. The Conference of the Parties shall specify the information required from Parties, with particular regard to the challenges encountered and assistance needed. The reports shall also be examined by the Implementation and Compliance Committee for the purpose of identifying general or specific problems requiring action by the Conference of the Parties and by the Parties concerned.

7. *Each Party shall promote technical, scientific and research cooperation with other Parties in implementing the provisions of this Article, inter alia, through the development and implementation of national and where possible regional policies and measures. In promoting such cooperation, special attention should be given to the development and strengthening of national, and where possible regional, capabilities, by means of human resources development and institution building, especially in low and lower-middle income countries, as well as other middle income countries in need.*

Article B. Surveillance at the environment-animal-human interface

1. *Each Party shall develop, strengthen and maintain the capacity to carry out integrated surveillance of infectious diseases in humans, of pathogens and infectious diseases in animals ~~presenting significant risks for zoonotic, including vector-borne, spillover,~~ as well as of relevant environmental indicators, and samples taken from specific environmental settings, for the purpose of preventing and controlling the spillover of ~~potentially dangerous~~ pathogens, including antimicrobial resistant pathogens, from animals to ~~between humans and animal populations,~~ as well as between different animal species. For this purpose the Parties shall ensure the cooperation and exchange of information among national and regional authorities responsible for surveillance. Such surveillance shall encompass livestock, companion animals, ~~high-risk~~ wildlife and vectors as defined by the Conference of the Parties. Parties shall promptly communicate to the Secretariat new or updated data, analysis and information as soon as they become available. The Secretariat shall make available the information received under this paragraph⁸ to the other Parties as well as to relevant international and regional organizations, especially for the purpose of early warning and detection.*

Chapter IV. Strengthening and sustaining capacities for pandemic prevention, preparedness response and recovery of health systems

Article 12. Strengthening and sustaining a skilled and competent health and care workforce (page 20)

We suggest adding to the current text as follows:

5. The Parties shall invest in establishing, sustaining, coordinating, and mobilizing an available, skilled, and trained One Health workforce, including through training public health workers on One Health and upskilling the animal health and environmental workforce, in order to minimize spillover risk at the human-animal-environment interface.

Chapter V. Coordination, collaboration and cooperation for pandemic prevention, preparedness, response and health system recovery

Article 16. Whole-of-government and whole-of-society approaches at the national level

4. Each Party shall develop, in accordance with its national context, comprehensive national pandemic prevention, preparedness, response and recovery plans pre-, post- and inter-pandemic that, inter alia: (i) include national One Health action plans that address the drivers of spillover and antimicrobial resistance; (ii) identify and prioritize populations for access to pandemic-related products and health services; (iii) support timely and scalable mobilization of multidisciplinary surge capacity of human and financial resources, and facilitate timely allocation of resources to the frontline pandemic response; (iv) review the status of stockpiles and surge capacity of essential public health and clinical resources, and surge capacity in production of pandemic-related products; (v) facilitate rapid and equitable restoration of public health capacities following a pandemic; and (vi) promote collaboration with non- State actors, the private sector and civil society.

⁸ While we support this proposal, it should be carefully considered to avoid any overlap in mandates given WOAH' s existing surveillance and early detection systems.

Article 18. One Health (page 24)

While we strongly welcome the inclusion of explicit provisions to address the drivers of spillover, this section overlooks several of these drivers, including weak animal health systems and management. Historical data shows that domesticated animals, including farmed species normally occurring in the wild, are often a reservoir for zoonotic pathogens with pandemic potential. Investments to strengthen animal health systems and management are critical to prevent future pandemics and they must be acknowledged, especially given current concerns about avian influenza. We also recommend the creation of comprehensive One Health action plans which do not focus only on addressing antimicrobial resistance but also spillover. Therefore, we suggest updating the current text as follows:

3. The Parties will identify and integrate into relevant pandemic prevention and preparedness plans interventions that address the drivers of the emergence and re-emergence of disease at the human-animal-environment interface, including but not limited to climate change, land use change, **the loss, fragmentation, and degradation of ecosystem**, wildlife trade **and markets, wildlife farming, weak animal health systems and management, human-wildlife conflict**, desertification and antimicrobial resistance.

5. The Parties commit to strengthen synergies with other existing relevant instruments that address the drivers of **zoonotic spillover that can lead to pandemics**, such as **land use change**, climate change, biodiversity loss, **human-wildlife conflict, wildlife trade and markets, the loss, fragmentation and ecosystem** degradation **of ecosystems, weak animal health systems and management** and increased risks at the human-animal-environment interface due to human activities.

6. The Parties commit to strengthen multisectoral, coordinated, interoperable and integrated One Health surveillance systems **for humans, wildlife and domesticated animals**, and strengthen laboratory capacity to identify and assess the risks and emergence of pathogens and variants with pandemic potential, in order to minimize spill-over events, mutations and the risks associated with **neglected** zoonotic **neglected tropical** **and** vector-borne diseases, with a view to **addressing drivers and** preventing small-scale outbreaks in wildlife or domesticated animals from becoming a pandemic.

7. Each Party shall:

(b) foster actions at national and community levels that encompass whole-of-government and whole-of-society approaches to **prevent and** control zoonotic outbreaks (in wildlife and domesticated animals), including engagement of communities in **spillover prevention and** surveillance that identifies zoonotic outbreaks and antimicrobial resistance at source;

(c) develop and implement a national One Health action plan ~~on antimicrobial resistance~~ **which includes measures to:**

- I. **Address antimicrobial resistance through** strengthening antimicrobial stewardship in the human and animal sectors, optimizing antimicrobial consumption, increasing investment in, and promoting equitable and affordable access to **preventive medicine approaches for humans, wildlife and domesticated animals, including** new medicines, diagnostic tools, vaccines and other interventions, strengthening infection prevention and control in health care settings, **in wildlife management (where appropriate and necessary)**, and sanitation and biosecurity in animal husbandry, and providing technical support to developing countries;
- II. **Address the drivers of pathogen spillover that can lead to pandemics, including land use change, biodiversity loss, the loss, fragmentation and degradation of ecosystems, wildlife trade and markets, wildlife farming, weak animal health systems and management, climate change, and human-wildlife conflict.**

Chapter VII. Institutional arrangements⁹

Article 24. Secretariat

1. A Secretariat for the WHO CA+ shall be provided by the Director-General of the World Health Organization **in cooperation with the Food and Agriculture Organization of the United Nations, the World Organization for Animal Health and the United Nations Environment Programme. The Heads of the respective organizations will determine the modalities of their cooperation in discharging the Secretariat functions under the Agreement. Such modalities shall be approved by the Conference of the Parties at its first session.**

⁹ The recommendations under this chapter are aligned with the [European Union' s textual proposals](#)