

## **WHA77.1 WHO Pandemic Agreement**

The Seventy-seventh World Health Assembly,

Recalling decision SSA2(5), entitled “The World Together: Establishment of an intergovernmental negotiating body to strengthen pandemic prevention, preparedness and response”, which established the Intergovernmental Negotiating Body (INB) to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response, with a view to adoption under Article 19, or under other provisions of the WHO Constitution (the WHO Pandemic Agreement);

Recalling further the identification by the INB at its second meeting that Article 19 of the WHO Constitution is the comprehensive provision under which the instrument should be adopted, without prejudice to also considering, as work progresses, the suitability of Article 21;

Expressing appreciation for the work of the INB and its Bureau;

Acknowledging with appreciation the Report of the 9<sup>th</sup> Meeting of the INB on the outcome of its work;

Recalling the central role of the International Health Regulations (2005) and the WHO Pandemic Agreement in pandemic prevention, preparedness and response;

Considering the need for an additional Main Committee of the Health Assembly to deal predominantly with health emergency-related matters, and thereby promote coherence and complementarity in the implementation of the WHO Pandemic Agreement, the International Health Regulations (2005), and other work of WHO on health emergencies;

Emphasizing the need for expeditious entry into force and effective implementation of the WHO Pandemic Agreement,

### **PART 1. Adoption of the Agreement**

1. **ADOPTS**, under Article 19 of the WHO Constitution, the WHO Pandemic Agreement (hereinafter the Agreement) attached to this resolution;
2. **NOTES** that, in accordance with Article 33 of the Agreement, the Agreement shall be open for signature at WHO headquarters in Geneva, from [28 May] to [28 June] 2024, and thereafter at United Nations headquarters in New York, from [8 July] 2024 to [7 July] 2025;
3. **CALLS UPON** all States and regional economic integration organizations entitled to do so, to consider signing, ratifying, accepting, approving, formally confirming or acceding to the Agreement at the earliest opportunity, with a view to bringing the Agreement into force as soon as possible;

## Discussion draft of 16 April 2024

Note: Blue text is for background / explanation of structure

4. URGES all States and regional economic integration organizations, pending entry into force of the Agreement, to take all appropriate measures to further the objective of the agreement, guided by equity and the principle of solidarity with all people and countries, to prevent, prepare for and respond to pandemics;

5. FURTHER URGES all Member States, regional economic integration organizations, international organizations and other interested parties to support the preparatory activities referred to in this resolution, and to effectively encourage prompt entry into force and implementation of the Agreement;

### PART 2: Establishment of the process to take forward Article 21 of the Agreement (COP IGWG).

6. DECIDES to establish, in accordance with Rule 41 of the Rules of Procedure of the World Health Assembly, an open-ended Intergovernmental Working Group to prepare the first session of the Conference of the Parties (hereinafter COP IGWG), open to all States and regional economic integration organizations referred to in Article 33 of the Agreement, in order to consider and prepare proposals on those issues identified in the Agreement for consideration and adoption, as appropriate, by the first session of the Conference of the Parties; such issues should include:

- (1) rules of procedure for the Conference of the Parties and criteria for participation of observers at sessions of the Conference of the Parties (Article 21.5);
- (2) financial rules for the Conference of the Parties and its subsidiary bodies, and financial provisions governing the functioning of the secretariat (Article 21.6);
- (3) a draft budget for the first financial period (Article 21.6);
- (4) preparations for the convening of the first session of the Conference of the Parties, following entry into force of the Agreement;

7. RESOLVES that the first meeting of the COP IGWG shall be held no later than 1 December 2025, in order to elect two co-chairs, reflecting a balance of developed and developing countries, and to define and agree on its working methods and timelines, consistent with this resolution and based on the principles of inclusiveness, transparency, efficiency, Member State leadership and consensus;

### PART 3: Establishment of the process to take forward Article 12 of the Agreement (Expert preparatory committee and PABS IGWG)

8. DECIDES:

- (1) to establish, in accordance with Rule 41 of the Rules of Procedure of the World Health Assembly, an open-ended Intergovernmental Working Group in order to draft and negotiate an international instrument to define the modalities, terms and conditions,

## Discussion draft of 16 April 2024

Note: Blue text is for background / explanation of structure

- and operational dimensions of the WHO Pathogen Access and Benefit-Sharing System (hereinafter PABS IGWG), in accordance with Article 12 of the Agreement, with a view to adoption by the Health Assembly under Article 21 of the WHO Constitution, or under relevant provisions of the Agreement, as may be deemed appropriate;
- (2) that the PABS IGWG shall be open to all States and regional economic integration organizations referred to in Article 33 of the Agreement;
  - (3) to request the Director-General to convene, as early as possible and no later than 15 June 2024, a PABS preparatory committee, composed of independent experts, on terms of reference to be established in accordance with the Regulations for Expert Advisory Panels and Committees, to prepare proposals, in accordance with Article 12 of the Agreement, for the consideration of the PABS IGWG, and to further request that the PABS preparatory committee submit its report to the Director-General no later than 15 September 2024, with the Director-General communicating it without delay to the PABS IGWG;
  - (4) that the first meeting of the PABS IGWG shall follow the conclusion of the work of the PABS preparatory committee described in paragraph 8(3), and in any event shall be held no later than 1 October 2024, in order to elect two co-chairs, reflecting a balance of developed and developing countries, and to define and agree on its working methods and timelines, consistent with this resolution and based on the principles of inclusiveness, transparency, efficiency, Member State leadership and consensus;
  - (5) in order to provide that WHO Pathogen Access and Benefit-Sharing System is operational no later than 31 May 2026, that the PABS IGWG shall submit its outcome for consideration by the Seventy-eighth World Health Assembly, or to the Conference of the Parties, as appropriate to the legal nature of the proposed international instrument deemed appropriate by the PABS IGWG;

### PART 4: Establishment of the process to take forward Articles 4 and 5 of the Agreement (OH IGWG)

#### 9. DECIDES:

- (1) to establish, in accordance with Rule 41 of the Rules of Procedure of the World Health Assembly, an open-ended Intergovernmental Working Group in order draft and negotiate an international instrument/s to define the modalities, terms and conditions, and operational dimensions of a One Health approach (hereinafter OH IGWG), in accordance with Articles 4 and 5 of the Agreement, with a view to adoption under relevant provisions of the WHO Constitution or the Agreement;
- (2) that the OH IGWG shall be open to all States and regional economic integration organizations referred to in Article 33 of the Agreement;

## Discussion draft of 16 April 2024

Note: Blue text is for background / explanation of structure

- (3) to request the Director-General to convene, as early as possible and no later than 15 June 2024, a One Health preparatory committee, composed of independent experts, on terms of reference to be established in accordance with the Regulations for Expert Advisory Panels and Committees, to prepare proposals, in accordance with Articles 4 and 5 of the Agreement, for the consideration of the OH IGWG, and to further request that the One Health preparatory committee submit its report to the Director-General no later than 15 September 2024, with the Director-General communicating it without delay to the OH IGWG;
- (4) that the first meeting of the OH IGWG shall follow the conclusion of the work of the One Health preparatory committee described in paragraph 9(3), and in any event shall be held no later than 1 October 2024, in order to elect two co-chairs, reflecting a balance of developed and developing countries, and to define and agree on its working methods and timelines, consistent with this resolution and based on the principles of inclusiveness, transparency, efficiency, Member State leadership and consensus;
- (5) in order to provide that the instrument/s is/are operational no later than 31 May 2026, that the OH IGWG shall submit its outcome for consideration by the Seventy-eighth World Health Assembly, or to the Conference of the Parties, as appropriate to the legal nature of the proposed international instrument deemed appropriate by the OH IGWG;

### PART 5: Establishment of Committee E as an additional main committee of the Health Assembly

10. DECIDES, in accordance with Rule 33 of the Rules of Procedure of the Health Assembly, to establish Committee E as an additional main committee of the Health Assembly to deal predominantly with health emergency-related matters, and to amend Rule 30 and 33 of the Rules of Procedure of the Health Assembly as set out in Annex 2 to this resolution, with effect from the closure of the Seventy-seventh World Health Assembly;

11. INVITES the Executive Board, when it reviews the work of the Standing Committee on Health Emergency Prevention, Preparedness and Response in accordance with Executive Board decision EB150(6) (2022), to take into consideration the establishment of Committee E and the need for coherence and efficiency in the work of WHO's Governing Bodies;

### PART 6: Agree relevant understandings with respect to the Agreement

12. AGREES that the reference contained in Article 7.3 of the Agreement to “applicable international codes and standards” are understood to include the WHO Global Code of Practice on the International Recruitment of Health Personnel;

### PART 7: Mandate to D-G/Secretariat

13. REQUESTS the Director-General, with regard to Article 6.5 (Preparedness, readiness and resilience), Article 7.3 (Health and care workforce), Article 10.6 (Sustainable and geographically diversified production, and technology transfer and know-how), Article 13.1

**Discussion draft of 16 April 2024**

Note: Blue text is for background / explanation of structure

(Supply chain and logistics), Article 13.6 (vaccine and therapeutic related compensation and liability during pandemics), Article 14 (Regulatory strengthening), and Article 20.3 (Coordinating Financial Mechanism) of the Agreement, to implement with immediate effect the activities under those aforementioned Articles attributed to the WHO Secretariat, and report thereon to the Seventy-eight World Health Assembly, as well as, following the entry into force of the Agreement, all sessions of the Conference of the Parties and of Committee E of the World Health Assembly;

14. FURTHER REQUESTS the Director-General:

- (1) to provide secretariat functions under the Agreement;
- (2) to allocate the necessary resources for the above-established intergovernmental processes to carry out their mandates;
- (3) to take appropriate steps to provide support to Member States, in particular developing countries, in preparation for entry into force of the Agreement;
- (4) to convene, as frequently as necessary, meetings of the Open-ended Intergovernmental Working Groups established herein;
- (5) to keep the Health Assembly informed of progress made toward entry into force of the Agreement and of preparations under way for the first session of the Conference of the Parties;
- (6) to report to the Seventy-ninth World Health Assembly on the implementation of this resolution.

===

ANNEX 1

**WHO PANDEMIC AGREEMENT**

*[Text of the Pandemic Agreement to be inserted when finalized]*

(XX plenary meeting, XX May 2024 –

Committee A, XX report)

DRAFT

ANNEX 2

**PROPOSED AMENDMENTS TO THE RULES OF PROCEDURE OF THE WORLD HEALTH ASSEMBLY CONCERNING ESTABLISHMENT OF AN ADDITIONAL MAIN COMMITTEE**

Current version of relevant rules of procedure of the Health Assembly	Proposed amended version of relevant rules of procedure of the Health Assembly
<p style="text-align: center;">Rule 33</p> <p>The main committees of the Health Assembly shall be:</p> <p>(a) Committee A – to deal predominantly with programme and budget matters;</p> <p>(b) Committee B – to deal predominantly with administrative, financial and legal matters.</p> <p>In addition to these two main committees, the Health Assembly may establish such other main committees as it may consider necessary.</p> <p>The Health Assembly, after consideration of the recommendations of the Board and the General Committee, shall allocate items of the agenda to the two main committees in such a way as to provide an appropriate balance in the work of these committees.</p> <p>The Chairs of these main committees shall be elected by the Health Assembly.</p>	<p style="text-align: center;">Rule 33</p> <p>The main committees of the Health Assembly shall be:</p> <p>(a) Committee A – to deal predominantly with programme and budget matters;</p> <p>(b) Committee B – to deal predominantly with administrative, financial and legal matters; -</p> <p><b>(c) Committee E – to deal predominantly with health emergency-related matters.</b></p> <p>In addition to these <b>three</b> <del>two</del> main committees, the Health Assembly may establish such other main committees as it may consider necessary.</p> <p>The Health Assembly, after consideration of the recommendations of the Board and the General Committee, shall allocate items of the agenda to the <b>three</b> <del>two</del>-main committees in such a way as to provide an appropriate balance in the work of these committees.</p> <p>The Chairs of these main committees shall be elected by the Health Assembly.</p>
Rule 30	Rule 30

**Discussion draft of 16 April 2024**

Note: Blue text is for background / explanation of structure

The General Committee of the Health Assembly shall consist of the President and Vice-Presidents of the Health Assembly, the Chairs of the main committees of the Health Assembly established under Rule 33 and that number of delegates to be elected by the Health Assembly as shall provide a total of 25 members of the General Committee, provided that no delegation may have more than one representative on the Committee. The President of the Health Assembly shall convene, and preside over, meetings of the General Committee.

Each member of the General Committee may be accompanied by not more than one other member of her or his delegation.

The President or a Vice-President may designate a member of her or his delegation as her or his substitute in her or his capacity as member during a meeting or any part thereof. The Chair of a main committee shall, in the case of absence, designate a Vice-Chair of the committee as her or his substitute, provided that this Vice-Chair shall not have the right to vote if he or she is of the same delegation as another member of the General Committee. Each of the elected delegates shall be entitled to designate another member of her or his delegation to act as her or his substitute in the event of her or his absence from any meeting of the General Committee.

Meetings of the General Committee shall be held in private unless it decides otherwise.

The General Committee of the Health Assembly shall consist of the President and Vice-Presidents of the Health Assembly, the Chairs of the main committees of the Health Assembly established under Rule 33 and that number of delegates to be elected by the Health Assembly as shall provide a total of **265** members of the General Committee, provided that no delegation may have more than one representative on the Committee. The President of the Health Assembly shall convene, and preside over, meetings of the General Committee.

Each member of the General Committee may be accompanied by not more than one other member of her or his delegation.

The President or a Vice-President may designate a member of her or his delegation as her or his substitute in her or his capacity as member during a meeting or any part thereof. The Chair of a main committee shall, in the case of absence, designate a Vice-Chair of the committee as her or his substitute, provided that this Vice-Chair shall not have the right to vote if he or she is of the same delegation as another member of the General Committee. Each of the elected delegates shall be entitled to designate another member of her or his delegation to act as her or his substitute in the event of her or his absence from any meeting of the General Committee.

Meetings of the General Committee shall be held in private unless it decides otherwise.