The Global Initiative to End Wildlife Crime (EWC) welcomes the proposal of 30 October 2023 for negotiating the text of the WHO Pandemic Agreement and would like to offer the following specific suggestions to further strengthen the text. The suggested changes primarily relate to prevention.

The concept of prevention needs to be expanded from preventing a small and localised outbreak from spreading and becoming an epidemic or pandemic, to also taking measures to prevent the spillover from happening in the first place, by identifying and addressing the root causes and drivers of an outbreak, in what we call primary prevention. Only by incorporating primary prevention measures, also referred to by some as ‘prevention at source’ or ‘upstream prevention’, will the Agreement be able to effectively fulfil its mandate to prevent future pandemics. This will fill a serious gap in the current international framework.

**Gaps in the current international legal framework**

Article 2.1 states (underlining added) “The objective of the WHO Pandemic Agreement, guided by equity, the right to health and the principles and approaches set forth herein, is to prevent, prepare for and respond to pandemics, with the aim of comprehensively and effectively addressing the systemic gaps and challenges that exist in these areas, at national, regional and international levels”.

There is a clear and serious gap in the international legal framework for regulating the taking, holding, trade, marketing, use and consumption of wild animals that pose a risk to public health. The Pandemic Agreement could fill this gap by including measures to reduce the likelihood of harmful events. Such events include the spillover of pathogens from animals to humans.

The Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES) does not assess the risk that regulated trade in listed species can pose to human or animal health. It only assesses the impact of such trade on the survival of the species. Further, while CITES regulates international trade in certain species it does not regulate the taking of wild animals, the manner in which they are held before or after being transported, or how they are marketed, used or consumed. CITES only applies to listed species and it does not include species within its Appendices on the basis of risk to public or animal health. For example, the horseshoe bat, known to be a reservoir of severe emerging infectious diseases\(^1\), is not listed under CITES, and therefore its trade is not regulated under the Convention. A decision to list a species is based upon trade and biological criteria, not human and animal health criteria. CITES currently includes 40,000 species of animals and plants in its Appendices, 30,000 of which are orchids. This represents less than 0.5% of the world’s species\(^2\).

**Textual proposals**

**Bold** = Proposal for additional text

**Strikethrough** = proposed deletion of text

**Italics** = additional comments

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\(^1\) See [Bats as reservoirs of severe emerging infectious diseases](https://www.ewc.org.uk/). EWC is also finalising a scientific literature collection, identifying wild animal taxa that pose an enhanced risk to human health.

\(^2\) For more on CITES and public and animal health see [CITES, Wildlife, and Pandemics: Failure to Grasp the Nettle](https://www.ewc.org.uk/).
Preamble

[NEW] Para 14. Recognizing that the majority of emerging infectious diseases and pandemics are caused by zoonotic pathogens, and that preventing pathogen spillover at the source represents the most effective and economic way of addressing future pandemics and achieving equity.

Article 1. Use of terms

For the purposes of the WHO Pandemic Agreement:

[NEW] (o) “animal” means domesticated animals and wild animals;

[NEW] (p) “primary prevention” means taking measures to reduce the risk of pathogen spillover between animals and humans;

A definition of ‘prevention’, including primary prevention, is needed. It could be drawn from the OHHLEP White Paper. If this definition is not preferred, we propose the definition above as an alternative to ensure prevention includes primary prevention.

Article 4. Pandemic prevention and public health surveillance

4. Each Party shall develop, strengthen, implement, periodically update and review comprehensive multisectoral national pandemic prevention and public health surveillance plans that are consistent with and supportive of the effective implementation of the International Health Regulations and the implementation of the One Health approach. To this end, each Party shall, in accordance with its capabilities:

(a) develop, strengthen and maintain capacity to: ... (iii) detect and identify animals and activities involving animals that can pose a risk to public health and take measures to mitigate the risk associated with the use of such animals;

(c) ensure the implementation of effective infection and spillover prevention and control measures, applying as far as possible the applicable international laws, standards and guidelines;

(e) strengthen animal disease preventive measures, taking into account the relevant international laws and standards and monitor and mitigate environmental factors associated with the risk of zoonotic disease spillover and spill-back;

[NEW] (h) develop primary prevention strategies to prevent pathogen spillover and address drivers of outbreaks;

Article 5. One Health

3. The Parties commit to identify and address the hotspots, drivers and sources of pandemics and the emergence and re-emergence of disease at the human-animal-environment interface through the identification and

3 This would include high-risk activities, such as wildlife trade, habitat encroachment (e.g., through deforestation) or intensive animal agriculture, and the elimination or reduction of such activities and the transition of people reliant on them to alternative activities.
integration of interventions into relevant pandemic prevention, preparedness plans, and, where appropriate, according to national legislation and capacity, through the strengthening of synergies with other relevant instruments.

4. Each Party shall, in accordance with national context and to the extent necessary, protect human, animal and plant health by:

(a) implementing science-based actions, including focusing on but not limited to: identifying drivers and hotspots, improving infection and spillover prevention and control measures; antimicrobial research and development; access to and stewardship of antimicrobials; and harmonization of surveillance, in order to prevent, reduce the risk of, and prepare for, pandemics;

(b) fostering and implementing actions at national and community levels that encompass whole-of-government and whole-of-society approaches to prevent and control zoonotic outbreaks, including through the engagement of communities to identify high-risk activities and a transition to alternative behaviours and livelihoods, and in surveillance to prevent and identify zoonotic outbreaks;

5. The Parties commit to develop, within the framework of relevant institutions, international norms and guidelines to prevent pathogen spillover at the source and zoonotic outbreaks in animal populations.

Article 8. Preparedness monitoring and functional reviews

2. Each Party shall assess, no less than every five years, with technical support from the WHO Secretariat upon request, the functioning and readiness of, and gaps in, its pandemic preparedness, surveillance and multisectoral response capacity, logistics and supply chain management, and risk assessment, as well as measures to prevent and contain pathogen spread through identification and mitigation of high-risk activities involving animals, and shall support the conduct of, inter alia, appropriate simulation or tabletop exercises, and intra- and after-action.

Article 9. Research and development

2. To this end, the Parties shall promote:

(c) participation of relevant stakeholders, consistent with applicable biosafety and biosecurity obligations, laws, regulations and guidance, to accelerate innovative research and development, including community-led and cross-sector collaboration, for addressing emerging and re-emerging pathogens with pandemic potential, including on activities involving animals that pose a risk of spillover of pathogens to humans;

Article 17. Whole-of-government and whole-of-society approaches at the national level

4. Each Party shall develop, in accordance with national context, comprehensive national pandemic prevention, preparedness and response plans pre-, post- and interpandemic that, inter alia:

[NEW] (f) detect and identify animals and activities involving animals that can pose a risk to public health and the measures to be taken to mitigate the risk associated with the use of such animals;

5. Each Party, based on national capacities, shall take the necessary steps to address the social, environmental and economic determinants of health, and the vulnerability conditions that contribute to the emergence and spread of
pandemics, and shall prevent or mitigate the socioeconomic impacts of pandemics, including through measures aimed at transitioning people away from activities that increase risk of pathogen spillover.

Article 20. Financing

1. The Parties commit to sustainable financing for strengthening pandemic prevention, preparedness and response. In this regard, each Party, within the means and resources at its disposal, shall:

   (e) provide support and assistance to other Parties, upon request, to facilitate primary prevention, and the containment of spillover at the source should it occur.

Article 25. Relationship with other international agreements and instruments

2. The Parties recognize that the WHO Pandemic Agreement and other relevant international agreements and instruments, including the International Health Regulations and relevant multilateral environmental agreements, should be interpreted so as to be complementary and compatible. The provisions of the WHO Pandemic Agreement shall not affect the rights and obligations of any Party under other existing international instruments.

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The EWC would also support the inclusion of an appropriate mechanism to address the science-policy interface of implementing a One Heath approach, along the lines of the Intergovernmental Panel on Climate Change (IPCC) and the Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services (IPBES), which could also be advanced at a later date through a Protocol to the Instrument as provided for in Article 30.