

Negotiating Text of the WHO convention, agreement or other international instrument on pandemic prevention, preparedness or response

Save the Children Statement and Written Comment, November 9, 2023

Save the Children appreciates the opportunity to provide written comments on the proposal for negotiating text.

CHAPTER I: We are concerned that several definitions remain too narrow in scope while others have been shortened, with key substance removed. Our proposals are as follows:

Article 1.

“persons in vulnerable situations” means individuals, groups or communities with disproportionate increased risk of infection, severity, disease or mortality **and those known to be at disproportionate risk of marginalization, discrimination or exposure to a range of harms** in the context of a pandemic, including vulnerability ~~due to discrimination~~ on the basis of race, colour, ~~sex~~ **gender, age, disability**, language, [...];

We recommend using the definition of “Universal health coverage”, contained in the 2023 UHC political declarations (para 11).

Article 3.

We urge Member States to reinstate the full definition of the principle “Respect for human rights” from the Bureau’s text.

CHAPTER II: Articles 4 and 6 should be amended to further elevate primary health care as an effective and equitable approach to ensure the continuity of essential health services and implement public health interventions for PPPR. We would also like to see a much stronger emphasis on the need to protect those who are vulnerable or in vulnerable situations, in particular children, as well as on the meaningful participation of communities.

Article 4.

We recommend that article 4 includes a stronger focus on disease prevention and health promotion as key pillars of pandemic prevention:

4 (b) strengthen efforts to ensure **disease prevention and health promotion, such as health and hygiene education, vaccination, nutrition interventions, and** access to safe water, sanitation and hygiene including in hard-to-reach settings in the Parties’ territory;

Article 6.

This article should be grounded in an approach to public health which seeks to protect health against hazards, prevent disease and promote population health and well-being through universal access to health services that are based on population health needs, guided by community engagement and participation, and supported by multisectoral action for health and interventions targeting the wider determinants of health.

2. Each Party shall, in accordance with applicable laws, including, where appropriate, the International Health Regulations, adopt **multisectoral** policies, strategies and/or measures, as appropriate, **in collaboration with all relevant stakeholders** ~~and shall~~ **that aim at strengthening and reinforcing essential** public health functions for:



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2 (a) the continued provision **and monitoring** of, **and equitable access to**, quality routine and essential health **and social** services during pandemics;

Article 16.

We recommend strengthening sub-article 16.2 by reinstating language from the Bureau's text:

“(c) develop, as necessary, and implement policies, that respect, protect and fulfill the human rights of all people, **in particular of those who are vulnerable or in vulnerable situations, by gathering and analyzing data, including data disaggregated by gender, age, disability, geography, socioeconomic status, and other relevant population sub-categories, to show the impact of policies on different groups;**” This language is critical to address the need of persons in vulnerable situations and is only covered under this particular article.

CHAPTER III: We encourage Member States to give due consideration to the role of civil society in the governance of the Pandemic Accord and adopt a rights-based approach to participation. Civil society should have a role in the future COP and in monitoring the WHO CA+, in line with good practices across the UN system.