

Written statement from Sightsavers¹ to INB9 on the revised draft of the negotiating text of the WHO Pandemic Agreement (document [A/INB/9/3](#))

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COVID-19 showed that the right to health is pivotal to all aspects of effective PPPR and is inseparable from equity as a principle, objective and outcome of the pandemic accord. Indeed, the systemic gaps and challenges to be addressed by the accord all, ultimately, concern the right to health.

We welcome Article 3, sub-paragraph 1 which states that the Parties will be guided by full respect for the dignity, human rights and fundamental freedoms of all persons, and the enjoyment of the highest attainable standard of health of every human being. However:

- **We are very concerned that the right to health has been deleted from Article 2 as a central objective of the accord and we call for this to be reinstated.**
- So as not to diminish or impair the existing human rights law and obligations and their implementation in PPPR, **the general principle related to human rights should refer to the “full realization” of human rights – instead of “respect” – encompassing the obligation under international human rights law to respect, protect, and fulfil rights.**

We are also concerned that the human rights principle as articulated in Article 3 is not reflected in or mainstreamed through other provisions of the accord to give full meaning to the right to the highest attainable standard of health in PPPR.

For instance:

- The definition of “persons in vulnerable situations” does not incorporate a sufficiently holistic concept of vulnerability and is not aligned with the

¹ [Sightsavers](#) is an NGO in official relations with WHO, and works in over 30 countries to promote the inclusion and rights of persons with disabilities and to prevent avoidable blindness.

WHO Constitution which defines health as ‘a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity’. **Strengthening the definition of “persons in vulnerable situations” is essential to ensure the right to health and health equity for all people in the context of a pandemic.**

- **The principle of proportionality should be reinstated in Article 3 with the addition of an explicit reference international human rights law, to incorporate existing standards under human rights law for permissible limitations of or derogations from human rights in times of public health emergencies.**
- **PPPR measures at national level in Articles 6, 16 and 17 should reflect the close interdependence of the right to health with the determinants of health and realization of closely associated human rights, including non-discrimination and the rights to life, food, social security and education.**

Regarding the principle of “Inclusiveness” in Article 3, we recommend adding language adapted from Article 4.7 of the Framework Convention on Tobacco Control as follows: *“the participation of civil society is essential to pandemic prevention, preparedness, response and recovery of health systems and to the achievement of the objectives of the WHO CA+”*

For further information, contact: Dr Sarah Collinson, Health Policy Adviser – scollinson@sightsavers.org