Thank you, Mr. Chair.

We take note of the report of the Director-General concerning the public health implications of implementation of the Nagoya Protocol.

The Convention on Biological Diversity (CBD) and the Nagoya Protocol allow the States to exercise their sovereignty over their biological resources based on the principles of prior informed consent and fair and equitable benefit sharing. As we see, the Pandemic Influenza Preparedness Framework unveils the importance of the principles of CBD and Nagoya Protocol in order for addressing public health emergencies. The COVID-19 pandemic also shows that, now more than ever before, we need to ensure fair and equitable benefit sharing arising from sharing of pathogens and sequences as well as transparency and proper governance. We hope that WHO would continue to uphold the objectives and principles of the global instruments like CBD and Nagoya Protocol.

We understand that the report has given more focus on the issue of sharing of pathogen samples. It has somehow sidestepped fair and equitable benefit sharing for public health emergencies. More specifically, it does not address how benefit-sharing in the context of pathogens occurs in practice. The report also lacks reflecting on the existing challenges that need to be duly addressed.

We, therefore, feel that the report could further highlight some of the key aspects concerning pathogen sharing and benefit sharing arrangements and practices that happens under the auspices of WHO. These may include - the information on pathogen samples that are presently being shared under WHO; the frequency and modalities of sharing for each of the pathogens; how and with whom they are shared; the list of laboratories that are sharing and receiving
pathogens and their status; the possible terms and conditions that govern the sharing of pathogens; how genetic sequence data is shared, accessed and utilized and WHO’s role in this regard; what traceability mechanisms are available; the extent of intellectual property claims with respect to the samples and sequences shared and parts thereof as well as claims over the pharmaceuticals, vaccines, diagnostics and other products developed through the use of the shared samples and sequences; and what are the range of domestic measures, including national biosecurity and export control measures that affect public health surveillance, preparedness and response.

To conclude, Mr. Chair, we underscore the need for more informal consultations to move this issue forward. We believe that any consideration of the need to develop options should be led by the Member States. Again, we need further information on benefit sharing practices in the context of pathogens, and pathogen and benefit-sharing within the WHO. Hence, setting up of an intergovernmental working group could be a possible way forward in this regard.

I thank you.

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