

Textual proposals for Pandemic Accord, April 2023

This note outlines Action for Animal Health's textual proposals for a new pandemic accord. It emphasises explicit obligations related to the prevention of zoonotic disease spillover, and the integration of One Health throughout.

Rationale

Major infectious disease threats come from the way we treat wildlife and domestic animals. We must limit the circulation of zoonotic diseases in animals to protect everyone, everywhere.

Animal health services are critical to the prevention of disease, the early detection of pathogens, reporting, control, and prevention of spread ([World Bank 2022](#)). Yet many are under-resourced and cannot comply with the core competencies outlined by the World Organisation for Animal Health. Practitioners have varying levels of training and skills and are in short supply in some zoonotic disease spill-over hotspots.

Poor animal welfare in food systems facilitates transmission of disease and AMR. This includes poor animal care, poor biosecurity, unsustainable wildmeat harvesting, and agricultural encroachment on wildlife. Animal-based food systems are a bigger driver of zoonosis events than the wildlife trade ([IUCN 2022](#)).

Outbreaks of zoonotic disease and AMR infections are the impact of underinvestment in animal health systems.

1 Preamble of the Zero Draft

- 1.1 In Point 24. of the Preamble of the Zero Draft we suggest including the following underlined wording:

"24. Recognizing the importance of working synergistically with other relevant areas, under a One Health approach, as well as the importance and public health impact of growing possible drivers of pandemics – including land use change, unsustainable intensification of food systems, biodiversity loss, the loss, fragmentation and degradation of ecosystem, human-wildlife conflict, wildlife trade, weak animal health systems and management, climate change, and antimicrobial resistance – which need to be addressed as a means of preventing future pandemics and protecting public health,"

- 1.2 After Point 27. of the Preamble of the Zero Draft we suggest including two new Points 28. and 29. as follows:

"28. Acknowledging the Quadripartite One Health Joint Plan of Action, which aims to guide the four organizations in working together on One Health with the aim of supporting their members, member states and state parties in building One Health capacities, providing a framework for action and proposing a set of activities to advance and sustainably scale up One Health,"

and

"29. Recalling the World Health Assembly resolution WHA74.7, which calls on the Quadripartite to build on and strengthen the existing cooperation to develop options, for consideration by their respective governing bodies, including establishing a common strategy on One Health, including a joint workplan to improve prevention, monitoring, detection, control, and containment of zoonotic disease outbreaks,"

Existing Points 28. to 49. shall be renumbered as Points 30. to 51.

2 Chapter I. of the Zero Draft

2.1 In Article 1. Point 1. Letter (f) we suggest the following definition of the “**One Health approach**”:

*“**One Health approach**” means the effort to sustainably balance and optimize the health of people, animals, and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and interdependent. In this context, it mobilizes multiple sectors, disciplines, and communities at varying levels of society to work together to prevent pandemic threats at source, as well as prepare for, respond to and recover from pandemics.”*

2.2 In Article 1. Point 1. Letter (g) we suggest the following definition of the “**One Health surveillance**”

*“**One Health surveillance**” means the systematic and timely collection, validation, analysis, interpretation and dissemination of data – collected from and shared across human, animal and environmental sources at local, national and international level – to inform cross sectoral actions to prevent, prepare for, respond and recover from zoonotic and anti-microbial resistance related events.”*

2.3 In Article 1. Point 1. we suggest including a new definition of the “**Primary pandemic prevention**” as follows:

*“**Primary pandemic prevention**” means any actions to prevent an outbreak in humans of a pathogen that has the potential to cause an epidemic or pandemic, particularly through reducing risk of spill-over and mutations.”*

2.4 In Article 1. Point 1. we suggest including a new definition of the “**Secondary pandemic prevention**” as follows:

*“**Secondary pandemic prevention**” means any actions that aim to curb human-to-human spread of a pathogen that has caused an outbreak in humans so that neither an epidemic nor a pandemic occurs.”*

2.5 In Article 1. we suggest including a new definition of the “**Quadripartite**” as follows:

*“**Quadripartite**” means the World Health Organization, the Food and Agriculture Organization of the United Nations, the World Organisation for Animal Health and the United Nations Environment Programme.”*

3 Chapter II. of the Zero Draft

3.1 In Article 3. we suggest including the following underlined wording:

“(...) The WHO CA+ aims to comprehensively and effectively address systemic gaps and challenges that exist in these areas, at national, regional and international levels, through substantially reducing the risk of pandemics, increasing pandemic prevention, preparedness and response capacities, progressive realization of universal health coverage and ensuring coordinated, collaborative and evidence-based pandemic prevention, preparedness and response and resilient recovery of health systems at community, national, regional and global levels.”

3.2 In Article 4. Point 14. we suggest including the following underlined wording:

*“14. **One Health** – Multisectoral and transdisciplinary actions should recognize the interconnection between people, animals, plants and their shared environment, for which a*

coherent, integrated and unifying approach should be strengthened and applied with an aim to sustainably balance and optimize the health of people, animals and ecosystems, including through, but not limited to, attention to the prevention of health threats at the human-animal-environment interface including antimicrobial resistance and zoonoses.

4 Chapter IV. of the Zero Draft

4.1 In Article 12. Point 3. we suggest including the following underlined wording:

“The Parties shall establish, sustain, coordinate, and mobilize an available, skilled, and trained:

- (a) *One Health workforce, including through training health workers on the One Health approach and upskilling the animal health workforce, in order to prevent outbreaks at the human-animal environment interface;*
- (b) *global public health emergency workforce that is deployable to support Parties upon request, based on public health need, in order to contain outbreaks and prevent an escalation of small-scale spread to global proportions.”*

5 Chapter V. of the Zero Draft

5.1 In Article 18. Point 3. we suggest including the following underlined wording:

“The Parties will identify and integrate into relevant pandemic prevention and preparedness plans interventions that address the drivers of the emergence and re-emergence of disease at the human-animal-environment interface, including but not limited to climate change, land use change, unsustainable intensification of food systems, wildlife trade, desertification and antimicrobial resistance.”

5.2 In Article 18. Point 5. we suggest including the following underlined wording:

“The Parties commit to strengthen synergies with other existing relevant instruments that address the drivers of pandemics, such as climate change, biodiversity loss, unsustainable intensification of food systems, ecosystem degradation and increased risks at the human-animal-environment interface due to human activities.”

5.3 In Article 18. Point 7. we suggest including the following underlined wording:

“Each Party shall:

- (a) *conduct risk assessments based on the drivers of the emerging infectious diseases, introduce package of interventions as part of a pandemic prevention plan, implement actions to prevent pandemics from pathogens resistant to antimicrobial agents, taking into account relevant tools and guidelines, through a One Health approach, and collaborate with relevant partners, including the Quadripartite;*
- (b) *foster actions at national and community levels that encompass whole-of-government and whole-of-society approaches to control zoonotic outbreaks (in wildlife and domesticated animals), including engagement of communities in surveillance that identifies zoonotic outbreaks and antimicrobial resistance at source;*
- (c) *develop and implement a national One Health action plan on antimicrobial resistance that strengthens antimicrobial stewardship in the human and animal sectors, optimizes antimicrobial consumption, increases investment in, and promotes equitable and affordable access to, new medicines, diagnostic tools, vaccines and other interventions, strengthens infection prevention and control in health care settings and sanitation and*

biosecurity in livestock farms, provides high-quality veterinary education, and provides technical support to developing countries;

- (d) *introduce appropriate measures to improve care and welfare practices on farms to reduce the use of antimicrobials and to support ecosystem health, and to enhance the biosecurity in the production, transportation, slaughter and retailing of animals to reduce transfer of pathogens between animals and the disease transmission;*
- (e) *enhance surveillance to identify and report on pathogens resistant to antimicrobial agents in humans, livestock and aquaculture that have pandemic potential, building on the existing global reporting systems;*
- (f) *meet existing minimum standards for animal health services as set out by the Quadripartite partners, including Terrestrial Animal Health Codes and Manuals published by the World Organisation for Animal Health. These standards include, but are not limited to animal health disease diagnosis, surveillance and notification, risk analysis, quality of veterinary services, disease prevention and control, animal and veterinary public health, and animal welfare; and*
- (g) *take the One Health approach into account at national, subnational and facility levels in order to produce science-based evidence, and support, facilitate and/or oversee the correct, evidence-based and risk-informed implementation of infection prevention and control.”*

6 Chapter VII. of the Zero Draft

6.1 In Article 22. we suggest including a new Clause 3. as follows:

“3. The Governing Body shall cooperate with the Quadripartite on the proper implementation and monitoring of the compliance with the provisions of the WHO CA+ in line with the One Health approach. If necessary, the shared governance measures, procedures, and mechanisms, including the monitoring provisions, shall be established between the Governing Body and the Quadripartite for the purpose of proper implementation and monitoring of the provisions of the WHO CA+ in line with the One Health approach.”

About Action for Animal Health

Action for Animal Health is an expert group that is willing to advise member states during this process, and is listed in Annex E. Our member, World Veterinary Association, has official relations with WHO.

Action for Animal Health (A4AH) was launched in 2021 and advocates for more investment in strong and resilient animal health systems that protect people, animals, and the planet. It is a coalition of partners, including African Union Interafrican Bureau for Animal Resources, Brooke, Compassion in World Farming, Dogs Trust Worldwide, Farm Africa, GALVmed, Global Alliance for Rabies Control, International Livestock Research Institute, Ripple Effect, Soi Dog Foundation, SEBI-Livestock, Vétérinaires Sans Frontières International, and World Veterinary Association. Its partners include the NGO Network for Neglected Tropical Diseases, and the coalition for Preventing Pandemics at the Source.

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